

Cambridge Nationals

Health and Social Care

Level 1/2 Cambridge National Award in Health & Social Care **J801**Level 1/2 Cambridge National Certificate in Health & Social Care **J811**Level 1/2 Cambridge National Diploma in Health & Social Care **J821**

OCR Report to Centres

June 2013

OCR (Oxford Cambridge and RSA) is a leading UK awarding body, providing a wide range of qualifications to meet the needs of candidates of all ages and abilities. OCR qualifications include AS/A Levels, Diplomas, GCSEs, Cambridge Nationals, Cambridge Technicals, Functional Skills, Key Skills, Entry Level qualifications, NVQs and vocational qualifications in areas such as IT, business, languages, teaching/training, administration and secretarial skills.

It is also responsible for developing new specifications to meet national requirements and the needs of students and teachers. OCR is a not-for-profit organisation; any surplus made is invested back into the establishment to help towards the development of qualifications and support, which keep pace with the changing needs of today's society.

This report on the examination provides information on the performance of candidates which it is hoped will be useful to teachers in their preparation of candidates for future examinations. It is intended to be constructive and informative and to promote better understanding of the specification content, of the operation of the scheme of assessment and of the application of assessment criteria.

Reports should be read in conjunction with the published question papers and mark schemes for the examination.

OCR will not enter into any discussion or correspondence in connection with this report.

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Overview

The cohort taking the second series of the specification was wide and varied. The evidence seen for both the centre assessed units, R022-R031, and the examined unit R021, proved accessible to candidates and gave opportunities for a range of abilities to gain success. At the same time it provided differentiation across a range of abilities. It was apparent that where teachers had a clear understanding of the specification the appropriate guidance and support was given to the candidates.

All entries for R022-R031 (there were no entries this series for R030) were paper based (code 02/03). Entries were divided equally between visiting and postal moderation. There were no repository (code 01) submissions this series.

It would be helpful to the process if paper assessments are presented with a treasury tag in the top right-hand corner rather than ring binders; plastic wallets etc.

The correct pro-forma unit recording sheet (URS) must be used; there are two versions available to download from OCR Interchange; an interactive version or hard copy.

Assessors annotated the candidates' work both in the body of the work and on the URS. Best practice was seen where comments were made that explained how assessment decisions have been reached. However, please note that these comments are not intended to be seen by candidates who may wish to improve their work and re-submit it in a subsequent series. Therefore, when marking candidates' work you should limit comments written on the work to identification of Learning Outcomes. If you wish to indicate the amount of marks achieved for each particular Learning Outcome this is permitted also. Any further comments should be made on the accompanying Unit Recording Sheet.

Centre internal moderation or verification is essential to ensure consistency in assessment decisions particularly if there is more than one assessor.

For all methods of moderation a signed copy of the CCS160 Centre Authentication Form and MS1 or equivalent must be completed and sent when a sample request is generated by email. It is important that the marks for each unit are added up correctly on the URS and correspond to the mark submitted to the board (via MS1 or equivalent). All units are marked out of 60. The overall mark for the unit comes from the amalgamation of the marks given across the mark bands for each LO within the unit. The grade for the unit will range from P1, M1, D1, P2, M2, D2, D2* depending on the marks given.

It was also evident that some centres have not thoroughly understood the grading/assessment criteria and that the outcome of the unit is across 7 grade boundaries hence making it a Level1/2 qualification.

Specific detail about individual units R021 and R022-R031 (R030 omitted) have been given and centres are advised to study the report before preparing their candidates for future sessions.

The externally assessed unit R021 had questions that differentiated well. It showed that some candidates had been adequately prepared for their entry; however for some entries there were some notable gaps of knowledge and it is important that centres in their planning of delivery take into consideration the maturity of the candidates and ensure terminology and technical terms used in the specification are thoroughly explained. Understanding of terminology and technical terms would improve the quality of answers given.

Level of response questions mostly showed limited application of knowledge and understanding by candidates. Application of theory into practice was not evident in candidates' responses hence limiting access to the higher marks.

Although it is not prescribed in which order the units are assessed it is important to be aware of the links between units and the requirement for synoptic assessment.

This was the second series of this examination unit with a large increase in the number of entries. The majority of candidates answered all of the questions. A spread of marks was achieved with some candidates gaining over 50 marks.

It was evident that teachers are directing their candidates to the command verbs within the paper such as identify, describe, explain, analyse etc, resulting in higher quality answers for the levels of response questions. This enabled more candidates to gain Level 3 marks than in the January series.

A weakness seen with some responses was the inability to relate the answer to the specific question, this sometimes resulted in the candidate going off on a tangent and not answering the question. For example, confidentiality was a topic that some candidates were often knowledgeable about and they included this knowledge into responses for many of the questions. This was often not appropriate and repeating the same irrelevant information in several questions will not gain marks. Answers should always link back to the question.

Some candidates seemed to lack key knowledge, such as the values of care and legislation. This knowledge is fundamental for the unit and candidates should be familiar with, at the very least, key facts about these topics and to achieve the higher grades their importance and the impact on service users, care practitioners and providers, as detailed in LO2 and LO3 of the specification.

1 (a)

Correctly answered by most candidates with the right to confidentiality and choice being the most common responses given. Examples were not asked for and did not gain marks.

1 (b)

This question required an explanation of why it is important to maintain patients' rights. Some candidates explained the negative effects of rights not being maintained; others re-stated and described the rights given in their answer to part (a) or repeated the information from the Thorpe Hospital scenario. These responses limited the marks that could be achieved because they do not address the requirement of the question.

1 (c)

Strengths of good answers were specific examples of practical ways staff could apply the two values of care. Some answers demonstrated that candidates did not know what 'values of care' are, as they just repeated information from the Thorpe Hospital scenario. Other candidates referred incorrectly to equality and diversity as treating everyone 'the same' or gave a definition which was not asked for.

2 (a)

Many candidates gained full marks for giving specific and precise ways. However, some candidates gave vague answers such as 'lock away' or 'use passwords' which were not credited.

2 (b)

This question was not well answered. The Data Protection Act is listed in LO3 of the specification but many candidates did not demonstrate any knowledge of this piece of legislation. Weak answers were vague and referred incorrectly to ways of maintaining confidentiality, repeating the answers given for 2(a). Candidates need to have an awareness of the pieces of legislation listed in the specification. Few Level 3 responses were seen due to candidates not making reference to the key aspects of the Act and how they support rights to confidentiality which was a requirement of the question. Level 2 marks could have been achieved with examples of the main features of the Data Protection Act; Level 3 being achieved with explanation of how it supports rights to confidentiality.

3 (a)

Many candidates responded well to this question and there were some excellent answers giving a range of explained practical examples that demonstrated understanding of accident prevention and good practice. Weaker answers were vague just referring to 'helping' the service users, rather than describing practical examples of what the staff could do such as carry out risk assessments, good staff/service user ratio, supervision, use of wet floor signs, etc.

3 (b)

Many candidates gained full marks for this question demonstrating familiarity with personal hygiene measures. A few weaker responses gave three personal hygiene measures rather than identifying one and describing how it would prevent the spread of infection, and so only gained one mark.

3 (c)

The question required specific information about the impact of the Act upon staff. Candidates who were familiar with the Health and Safety at Work Act produced good answers reflecting their knowledge of the Act. Weaker responses repeated answers from 3(b), or wrote vaguely about keeping people safe.

4 (a)

Many candidates did not have the knowledge or understanding of legislation to answer this question successfully. Identifying a key fact about each piece of legislation was the requirement and those candidates who were familiar with the Acts stated were able to gain full marks.

4 (b)

This question was not well answered overall. Many responses focussed on identifying values of care and describing how they can be applied, such as how to maintain confidentiality; others wrote about legislation or the negative impact of not applying the values of care. This was not required by the question and did not gain marks. Many of these answers demonstrated that candidates were not familiar with the importance of applying the values of care such as: ensuring the standardisation of care, improving the quality of care or providing guidelines for staff, as listed in LO2 of the specification.

4 (c)

Many candidates gained 3 or 4 marks for this question. This demonstrated familiarity with the terminology used. However, other candidates referred incorrectly to equality as treating everyone 'the same' and diversity as not treating people 'differently'. Others repeated the terms in their answers and so did not describe their meaning.

5 (a)

Most candidates gained full marks for this question giving appropriate examples of choices.

5 (b)

Many candidates did not give any methods of challenging discriminatory behaviour and so were unable to gain marks. Others did gain marks by demonstrating they were familiar with the ways provided in the specification for LO1 such as reporting procedures, referring to and using equal opportunities policies etc.

5 (c)

Many candidates achieved full marks with a range of practical security measures. Others gave incorrect answers relating to data protection or fire safety which were not credited.

For the coursework assessed units the majority of the work followed the OCR model assignments and some centres made permitted adaptations. Please note that model assignments are provided by OCR for all Cambridge Nationals centre assessed units. Centres must use the model assignments provided when assessing their candidates. Modifications can be made to the model assignments. Guidance on what can be modified is given in each assignment in the Information for Teachers under Scope of permitted model assignment modification. If modifications are made to model assignments, the centre must ensure that candidates are not disadvantaged or advantaged by the changes made. Please note that the model assignments are provided for summative assessment and not for use as practice materials.

For re-submissions of coursework units centres must ensure that JQC guidelines are followed on permitted guidance tutors are allowed to give to candidates to ensure malpractice does not take place.

Across all submitted units the model assignment was not always used which disadvantaged candidates from accessing the full range of marks.

R022

LO1: In the main, this evidence was accurate and had addressed methods of different types of communication with most candidates giving examples relating to health, social care and early years settings. Factors and barriers were not always clearly defined and there was lack of evidence as to the how and why factors positively influence communication. Most candidates' evidence clearly showed knowledge and understanding of the barriers to communication and appropriate examples were given relating to health, social care and early years settings. Ways of overcoming barriers were not always appropriate.

LO2: Connections were not always made between personal qualities and effective care. When caring for an individual, evidence produced rarely showed relevant application and justification of personal qualities to be used and why.

LO3: Planning by most candidates met the grading criteria, where it did not there was a misinterpretation of what was required in the plan and they had not related the planning to the ies in the specification. This limited the mark bands the candidates could access. Both one-to-one and group activities were mostly carried out appropriately. Most candidates had witness statements for both activities. However, the witness statements did not always reflect the competency the candidate showed when carrying out the activity and did not meet the mark band criteria. Types of behaviour that fail to value people was omitted by most candidates and was implicit when included.

Across all evidence, links between units and synoptic assessment was minimal.

Overall there was a range of evidence meeting the mark band criteria to give the range from L1P to L2D.

R023

LO1: Candidates provided information on all three systems' functions with appropriate diagrams. However, most diagrams were not independently annotated or source referenced. Links between structure and function showed limited knowledge and understanding by most candidates. In the main correct terminology was used.

LO2: Candidates provided symptoms for a disorder across all three systems. However, most candidates did not make links between disorders and structure and functionality of each system.

LO3: Body measurements were taken appropriately but candidates rarely compared the data to the norms and the functioning of the body systems. SPAG was not acknowledged in the evidence.

Across all evidence links between units and synoptic assessment was minimal.

R024

LO1: Candidates clearly described health social care and early years sectors. Funding by most candidates was weak and lacked knowledge and understanding of the process involved in funding. Examples given were always appropriate. Evidence on partnership working was limited and showed a lack of understanding by candidates. SPAG not addressed.

LO2: Most candidates gave information on professionals given as an ie in the specification, some candidates used other professionals that were not appropriate. Evidence for the referral process was mainly generic and not specific to the professional. Barriers were not always specific to the services and candidates had crossed referenced evidence from other units, which was not appropriate.

LO3: Candidates' evidence showed that there was a lack of knowledge and understanding between a care pathway and a care plan. Across all evidence links between units and synoptic assessment was minimal.

R025

LO1: Although candidates addressed P.I.L.E.S. showing, in the main, the correct sequence of the normal development stages, links to affects on transition was weak. Life events were limited and factors were often discussed as barriers (barriers not asked for).

LO2: Most candidates described the ageing process appropriately, however, limited examples of the effects on development. Evidence was weak on how the person's role in life changes and lacked understanding of the assessment criteria. SPAG not addressed.

LO3: Few candidates showed understanding in their evidence of conditions which affect transition through the life stages. The evidence describing how the chosen condition might affect the health and social well being of the individual and their family was omitted by most candidates.

LO4: Plans submitted were mostly appropriate and communicated in suitable format.

Across all evidence links between units and synoptic assessment was minimal.

R026

LO1: The limited number of candidates that entered this unit approached it well showing a sound knowledge and understanding of the assessment criteria.

LO2: Evidence of personal skills and attributes was not always clearly explained with limited understanding of the health and safety issues linked to health, social care and young people's workforce.

LO3: Research was appropriate however career plans were basic. Development plans gave limited evidence to meet specification ie/grading assessment.

Across all evidence links between units and synoptic assessment was minimal.

R027

LO1: Most candidates provided evidence on different types of creative activities to meet the needs of different groups. However, a few candidates focused on one group ie young children. This restricted them accessing the grading assessment. SPAG not addressed.

LO2: Candidates' evidence of the benefits of participating in creative actives was weak and was often repetitive. Types of creative activities and P.I.L.E.S. benefits were not always given.

LO3: Plans did not always meet the ies of the specification, this limited access to the higher mark bands by most candidates. Health and safety issues were covered well in the planning. Most candidates had witness statements, but these often did not reflect the assessment criteria. Reviews were carried out by the candidates showing a limited knowledge and understanding of the command words in the assessment criteria.

Across all evidence links between units and synoptic assessment was minimal.

R028

LO1: The majority of candidates' evidence was appropriate and addressed the milestones appropriately. Comparisons were made to a child. Most candidates used their own child study, however, often they did not cover the age range from 0-5 and this limited the evidence produced for assessment.

LO2: The majority of candidates' evidence was appropriate and addressed the milestones appropriately. Comparisons were made to a child. Most candidates used their own child study, however, often they did not cover the age range from 0-5 and this limited the evidence produced for assessment. SPAG not addressed.

LO3: Risks and hazards considered appropriately and showed a clear understanding. Risk assessments were carried out appropriately. However, candidates' witness statements did not always meet command words across the mark bands showing how weak the risk assessment was carried out. Candidates produced appropriate plans but there were limited explanations of the purposes of the examples given.

Across all evidence links between units and synoptic assessment was minimal.

R029

LO1: Evidence showed knowledge and understanding of the nutritional requirements of the different life stages. The functions of the nutrients were limited. Government guidelines and dietary requirements showed limited understanding.

LO2: Factors that influence diet was often omitted. Most candidates created appropriate dietary plans to meet individual needs. The majority of the candidates' evidence showed how the plan reflected the needs of the individual and the importance of the nutrients to the individuals condition/symptoms.

LO3: Most candidates linked chosen individual from LO2 to LO3 and carried out an analysis of the meal. A few candidates who used software to analyse their meal did not always give an explanation of their findings. Candidates produced appropriate meals following hygiene and safe food preparation. Candidates' witness statements did not always meet the command words of the assessment criteria indicating how well the candidates had performed.

Across all evidence links between units and synoptic assessment was minimal.

R031

Most candidates who entered this unit had attended an external first aid course delivered by an appropriate organisation or had used the St John's Young First aider course to meet the evidence requirements.

LO1: A few candidates failed to demonstrate assessing the scene of the accident hence this limited the assessment criteria available to the candidates.

LO2 and LO3 were often linked together as part of a first aid course that had been undertaken. Witness statements did not always meet the command words of the assessment criteria.

LO3: The review of the practical activities by most candidates was weak and lacked relevance to the candidates' performance.

Across all evidence links between units and synoptic assessment was minimal.

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