

CAMBRIDGE NATIONALS

Examiners' report



HEALTH AND SOCIAL CARE

J801, J811, J821

R022 (moderated)

R023 (moderated)

R024 (moderated)

R025 (moderated)

R026 (moderated)

R027 (moderated)

R028 (moderated)

R029 (moderated)

R031 (moderated)

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Introduction

Our Lead Moderators' reports are produced to offer constructive feedback on centres' assessment of moderated work, based on what has been observed by the moderation team. These reports include a general commentary of accuracy of internal assessment judgements; identify good practice in relation to evidence collation and presentation and comments on the quality of centre assessment decisions against individual Learning Objectives. This report also highlights areas where requirements have been misinterpreted and provides guidance to centre assessors on requirements for accessing higher mark bands. Where appropriate, the report will also signpost to other sources of information that centre assessors will find helpful.

OCR completes moderation of centre-assessed work in order to quality assure the internal assessment judgements made by assessors within a centre. Where OCR cannot confirm the centre's marks, we may adjust them in order to align them to the national standard. Any adjustments to centre marks are detailed on the Moderation Adjustments report, which can be downloaded from Interchange when results are issued. Centres should also refer to their individual centre report provided after moderation has been completed. In combination, these centre-specific documents and this overall report should help to support centres' internal assessment and moderation practice for future series.

R022 General overview

Most centres complete the URS accurately, however a number of centres omit candidate numbers and make errors when adding up the marks. This interrupts the smooth running of the moderation process as moderators have to generate coursework amendment forms back to the centre and this becomes a lengthy process. If the errors are not detected then having the incorrect marks credited can disadvantage candidates and this ultimately could affect their overall grade.

When internal standardisation takes place this ensures assessment criteria have been appropriately applied and that any arithmetical errors can be addressed before final submission of marks to OCR.

Evidence was usually presented in a well-organised manner, although some centres are still submitting work in numerous plastic wallets, hole punch and treasury tag is sufficient.

Witness statements were used from the Live Assessment Material (LAM) and were mostly annotated appropriately

To aid with your future delivery and assessment, we would like to draw your attention to the various resources that are available for this qualification, including delivery guides, sample work and live online Q&A webinars. All of these resources can be accessed from the Cambridge Nationals Hub page <http://www.ocr.org.uk/qualifications/by-type/cambridge-nationals/>.

We also have a series of videos giving hints and tips for each unit https://www.youtube.com/playlist?list=PL6yDqj0yKMyhnmKt_RO-0DyVBBRqROFVG and we would also like to highlight our [guide to generating evidence](#). This guide covers areas to be aware of when preparing and conducting assessments for Cambridge Nationals.

Comments by LO

LO1 – Understand how to communicate effectively

To access the higher mark bands all types of communications listed in the specification should be addressed and appropriate examples related to health, social care and early year's settings should be given to support the assessment evidence.

Candidates included a wide range of factors from the specification and they should show how they positively influence communication. The negative influences to communication were often given e.g. lighting – individuals will feel less at ease if lighting is dim. This does not meet the assessment evidence criteria.

The same factors are then used for the barriers, which is not an issue as long as both sections have not addressed the negatives.

Generally candidate's evidence for barriers is much better. To achieve the higher mark bands the candidate needs to give detailed and effective ways to overcome the barriers and these should be related specifically to health, social care and early year's settings.

LO2 – Understand the personal qualities that contribute to effective care

Personal qualities and effective care need to be linked together to show how they are used together when caring for an individual. The examples will give justification of how the personal qualities are used and why. Some candidates were able to produce a thorough description of different personal qualities that contribute to care. A limited number of candidates gave detailed and in-depth connections between personal qualities and effective care to achieve the higher mark bands. It was the justification of how and why that was needed to be strengthened in candidate evidence.

LO3 – Be able to communicate effectively within a health, social care and early years setting

A separate plan is required for both interactions and the candidates that achieved the higher mark bands had followed the i.e. from the specification on planning. Many candidates included a transcript, which is not a requirement.

When carrying out the interactions most centres did this a role-play and used the scenarios from the live assessment material. Centres that have their candidates in placements carried them out in situ and presented the permitted changes with the chosen live assessment material at moderation.

As part of the assessment evidence the candidates have to show behaviours that fail to value. This is not appropriate when demonstrating positive communication. To overcome this the live assessment material now includes this as a task requiring a written piece of evidence. This information has also been given at training and feedback on reports to centres.

Some centres have included it in the planning section and some in LO2 under personal qualities and effective care. As long as it is clearly signposted it can be addressed anywhere in the assignment but it must be credited marks as part of LO3 part b.

The witness statement must be included and this is found in the live assessment material. There needs to be one for each interaction. Detailed notes from assessors on the witness statement will ensure that

the marks credited are supported. Some centres are still including an evaluation; again this is not an assessment requirement.

It was encouraging to see more candidates including synopticity, however there are still a number of candidates that simply list the unit numbers with no reference to how or why they have used the links. This evidence must come from the candidates and not a comment by the tutor on the URS or an annotation on the candidates work.

R023 General overview

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When internal standardisation takes place this ensures assessment criteria have been appropriately applied and that any arithmetical errors can be addressed before final submission of marks to OCR.

Evidence was usually presented in a well organised manner, although some centres are still submitting work in numerous plastic wallets; hole punch and treasury tag is sufficient.

Witness statements were not always used from the Live Assessment Material (LAM).

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Comments by LO

LO1 – Know how body systems work

Most candidates were able to demonstrate sound knowledge of how the cardiovascular, respiratory and digestive system works. Candidates provided clear information to illustrate the structure and function for each body system. More able candidates presented their work in presentations with notes, booklets and annotated their own body system diagrams.

There are still too many candidates downloading diagrams from the Internet, while this is acceptable they should be clearly referenced to the source and annotated by the candidate to avoid plagiarism

Centres should refer to the OCR [guide to generating evidence](#). This guide covers areas to be aware of when preparing and conducting assessments for Cambridge Nationals.

LO2 – Understand disorders that affect body systems

Candidates do not always achieve the higher mark bands in this LO. They need to give detailed reasons for most of the symptoms related to the disorder they have chosen for each body system. There needs to be clear links between effects of disorders and the structure of and/or functionality of the systems.

Candidates do not show thorough understanding and often evidence is taken from the Internet to support the work but again without appropriate referencing.

LO3 – Be able to interpret data obtained from measuring body rates with reference to the functioning of healthy body systems

To be credited the higher mark bands candidates were able to fully interpret the data obtained from measuring body rates and comparing against the norms. Recording of results was not always accurate and this then made it difficult for candidates access the higher marks. Candidates often omitted any reference to the results of the body rates to the functioning of healthy body systems.

Witness statements were not always included and only a reference made on the URS, which is not acceptable. A witness statement is located in all of the three live assessment materials for this unit.

When witness statements were included on the whole they were thoroughly annotate and reflected clearly the candidates' confidence when carrying out the body measurements.

Evidence of synopticity is still weak in this unit and is often reference by the assessor on the URS. Synopticity should be evidenced by candidates.

R024 General overview

Most centres complete the URS accurately, however a number of centres omit candidate numbers and make errors when adding up the marks. This interrupts the smooth running of the moderation process as moderators have to generate coursework amendment forms back to the centre and this becomes a lengthy process. If the errors are not detected then having the incorrect marks credited can disadvantage candidates and this ultimately could affect their overall grade.

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Comments by LO

LO1 – Understand the different forms of support available in health, social care and early years settings

Many candidates gave thorough descriptions of the sectors, but the emphasis should be on the types of services provided by each sector. This was often missed or the professionals in each sector were discussed. Within each sector the candidates should provide evidence of services for health, social care and early years. To achieve the higher mark band a thorough explanation of the tasks undertaken by a member of the informal sector should be included. This was often missed completely or was implicit in the evidence.

In the main partnership working was covered well and showed clear knowledge and understanding.

LO2 – Know the access routes and barriers to care pathways

Across most centres there was limited evidence of the role of the professionals in providing access to services, although the different referral processes were well done. However these tended to be generic and not specific to the different services. To achieve the higher mark bands evidence should be detailed on the professionals chosen and relevant examples of access to support services.

Barriers were done well and evidence was well presented.

LO3 – Be able to produce care pathways for individuals

There is still some confusion between the difference between a care plan and a care and support pathway. Candidates should produce both a care plan and a care pathway for a chosen individual.

A care plan should highlight the individual's needs and the services that would be involved in meeting the needs. The professionals involved will address the individual's condition.

A detailed and supportive care pathway would include the journey the individual goes through, (this can then be drilled down to provide a specific care plan) describing which professionals are involved and how they communicate. A care pathway is sometimes referred to as a care journey and leads a service user through the various practitioners and settings they will experience.

Limited evidence was given on skills, knowledge and understanding from other units. Centres need to address this for all units.

R025 General overview

Most centres complete the URS accurately, however a number of centres omit candidate numbers and make errors when adding up the marks. This interrupts the smooth running of the moderation process as moderators have to generate coursework amendment forms back to the centre and this becomes a lengthy process. If the errors are not detected then having the incorrect marks credited can disadvantage candidates and this ultimately could affect their overall grade.

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Comments by LO

LO1 – Understand the stages of development from young people to adulthood

Most candidates were able to provide a thorough explanation to show their understanding of the changes in P.I.L.E.S in the development of young people to adulthood. Best practice is to split the age range into the three life stages: children/adolescent/adulthood. Candidates using bullet points were not able to achieve marks from the higher mark bands.

Candidates work could be strengthened. Most candidates followed the correct sequence. Many candidates provided a clear explanation of the factors affecting key developmental changes. To achieve mark band 3 all factors need to be covered. Work could be strengthened by candidates justifying their thoughts on the effects of life events.

LO2 – Understand the ageing process in older adulthood

Many candidates were able to provide a thorough description of the ageing process. The effects on P.I.L.E.S. in relation to the ageing process was not always evident. This must be explicit to achieve the higher mark bands.

There was limited evidence as to how a person's role in life changes through the ageing process. To achieve higher marks there needs to be a thorough explanation and justification on their own thoughts on how the person's role in life changes.

LO3 – Know which medical conditions may affect progress through the life stages

Candidates in general provided an overview of medical conditions; to further strengthen the evidence candidates need to show how the conditions may affect progress through the life stages. They also need to include how they affect the health and social well-being not only of the individual but also of the family.

Candidates require two case studies. These should be taken from the case studies in the OCR live assessment material for this unit. Centres can use their own case studies and these should be included with the chosen assignment when evidence is submitted for moderation. To award the higher marks candidates should include a thorough discussion of how each condition (one birth defect and one non birth defect) might affect the health and well-being of the individual and their family. Effect on the family is often missing or implicit.

LO4 – Be able to create support plans

The support plan only needs to be for one individual, high mark band work was seen by candidates who had used one of the individuals from LO3. A number of candidates did not link the support plan to the life stage.

Candidates at all levels should be encouraged to draw on synoptic links from other units within the specification.

R026 General overview

Most centres complete the URS accurately, however a number of centres omit candidate numbers and make errors when adding up the marks. This interrupts the smooth running of the moderation process as moderators have to generate coursework amendment forms back to the centre and this becomes a lengthy process. If the errors are not detected then having the incorrect marks credited can disadvantage candidates and this ultimately could affect their overall grade.

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Comments by LO

LO1 – Know about careers in health, social care or the children and young people's workforce

Only one sector needs to be chosen from health, social care or the children and young people's workforce. Candidates should then give examples of employment opportunities in a wide range of different service providers within the chosen sector to achieve the higher mark band.

Roles (at least two) should have a thorough description of entry points and qualifications needed for the chosen sector.

LO2 – Understand the nature of working in health, social care or the children and young people's workforce

Candidates should show a thorough understanding of the personal, attributes and skills necessary for the careers within the sector that they have chosen previously. To reach the higher mark bands examples should be explicit to the chosen sector not given as generic information.

Health and safety issues which are likely to be encountered in the chosen sector.

Centres need to ensure candidates follow the same sector/services throughout the LOs. This was evident in the work where the centre had used the live assessment material for this unit.

LO3 – Be able to plan for careers in health, social care or the children and young people's workforce

Candidates' research usually reflected the sector previously chosen. A wide range of Internet sites were included but not always referenced.

Plans submitted were generally weak and did not show how they were linked to the individual's development. Only one plan needs to be produced. This plan should be carried through to include developmental goals, how to improve behaviours, skills and attributes.

Centres do not show a clear understanding of this unit and this is reflected in most of the work seen at moderation.

Synopticity again is an issue with this unit. Centres are advised to look at page 24 of the specification, which gives guidance on synoptic assessment for this unit. To achieve the higher mark bands candidates need to show clearly how they have used skills, knowledge and understanding from other units studied. Examples need to show links e.g. communication skills used from Unit 22 when trying to get consent from a casualty in Unit 31; they would consider tone, pace, body language etc.

R027 General overview

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Witness statements were used from the LAM and were annotated appropriately

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Comments by LO

LO1 – Understand the different types of creative activities available in health, social care and early years settings

Candidates gave a detailed description of the different types of creative activities. The creative activities should be the ones given as 'ie' in the specification. How the activities meet the needs was also explained, however they did not always address the three different groups, children and young people, adults and older adults. If all three groups are not included only the lower mark bands can be credited.

Examples were appropriate to support the evidence.

LO2 – Understand the benefits of participating in creative activities

Candidates need to show a thorough understanding of the benefits from participating in creative activities across the three groups to achieve the higher mark bands.

Clear links need to be made between the different types of creative activities and the relevant P.I.L.E.S. All P.I.L.E.S need to be addressed to show the benefits to the individual or group participating in the activity in a care setting.

Many centres combine LO1 and LO2 together, this is fine providing the assessment for each LO is done separately.

LO3 – Be able to carry out creative activities in a health, social care or early years setting

Most candidates carried out their activity in an early years setting. The activity can be for an individual or a group and must address the chosen group's needs.

A comprehensive plan needs to be produced to achieve the higher mark band. The Model Assignments include a list of what should be included in the plan.

All activities were carried out and witness statements appropriately completed supported them. A few centres omitted the witness statements and centres should be aware that it is not sufficient to just make a comment on the URS.

Candidates did include a review but this was often just a recap of what they had done during the activity and lacked suggestions for relevant improvements with justifications for the changes.

R028 General overview

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Good practice was seen by the inclusion of witness statements by some centres.

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Comments by LO

LO1 – Understand the key milestones of physical, intellectual and language development between 0–5 years

Most candidates demonstrated a clear understanding of the physical, intellectual and language developmental milestones in children between 0-5 years. Several different formats of presentation were seen and showed originality. Pre-birth is not required.

Most candidates were able to apply the milestones of development within the comparison of their chosen child. The chosen child should be taken from the Live Assessment Material or the centre can produce its own case study, submitting it with the chosen Model Assignment at moderation.

Bullet point lists do not allow for marks at the higher mark bands, as this does not show a clear understanding of the development milestones.

Comparisons must be made across the age range 0-5 years (the child can be older than 5 and comparisons to the norms made up to the age of 5). If the child chosen is under 5 then predictions only can be made up to the age of 5 and not comparisons against the developmental norms.

Comparisons are not required on a week-by-week basis (3 months, 6 months, 12 months, 1 year etc. would be acceptable). Some candidates did not get the sequence of development correct.

LO2 – Understand the key milestones of emotional and social development between 0–5 years

Most candidates demonstrated a clear understanding of the emotional and social developmental milestones in children between 0-5 years. Several different formats of presentation were seen and showed originality. Pre-birth is not required.

Most candidates were able to apply the milestones of development within the comparison of their chosen child. The chosen child should be taken from the LAM or the centre can produce its own, submitting it with the chosen LAM at moderation.

Bullet point lists do not allow for marks at the higher mark bands, as this does not show a clear understanding of the development milestones.

Comparisons must be made across the age range 0-5 years (the child can be older than 5 and comparisons to the norms made up to the age of 5) If the child chosen is under 5 then predictions only can be made up to the age of 5 and not comparisons against the developmental norms.

Comparisons are not required on a week-by-week basis (3 months, 6 months, 12 months, 1 year etc. as set out in the LAM would be acceptable) some candidates did not get the sequence of development correct.

Some candidates included synoptic assessment, however centres still need to address this. Synopticity suggestions are given in the introduction of each assessment evidence grid and in the specification as to which units would be appropriate to make links to.

LO3 – Be able to create a safe environment to protect children (in an early years setting)

Most candidates had considered types of risks and hazards and ways of protecting early year's children.

Candidates must independently carry out a risk assessment. It is not always evident that a risk assessment had been carried out although risk assessment proformas had been completed by most candidates. Best practice would be for centres to evidence that candidates had carried out the risk assessment and how competently this had been done. This could be done using a witness statement.

Centres must not provide templates for the risk assessment and centres are directed to the OCR [guide to generating evidence](#). This guide covers areas to be aware of when preparing and conducting assessments for Cambridge Nationals.

Most candidates had produced a plan for a safe environment and had covered the features given in the Model Assignment and clearly explained them in the plan. To achieve the higher mark bands the plan produced should be detailed on how to maintain and promote a safe environment, including many of the features with examples of their purpose and use clearly explained.

R029 General overview

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Comments by LO

LO1 – Know the dietary needs of individuals in each life stage

Most candidates produced evidence showing the dietary and nutritional needs of individuals at the different life stages, young people (5-16), adults and older adults. Most candidates also included the function of each nutrient.

Most candidates produced government guidelines and dietary requirements. To achieve the higher mark bands this needs to be thorough.

List like evidence of the nutrients does not show understanding.

LO2 – Be able to create dietary plans for specific dietary needs

Most candidates met factors that influence the diet. Following on from this most candidates produced a plan for an individual with a specific dietary condition. For the higher mark bands the plan should include details on how it reflects the needs of the individual they have chosen. The LAM gives a list of what should be included in the dietary plan. Good practice was seen by candidates producing a one-week plan explaining the importance, function and sources of nutrients.

Synoptic links were implicit and sometimes rather vague.

Centres need to note that vegetarianism isn't a dietary condition it is a life style choice; suitable examples are given in the specification of dietary conditions.

LO3 – Be able to produce nutritional meals for specific dietary requirements

The dietary plan created in LO2 should then be used to produce the meal in LO3 for the specific dietary needs.

Depending on the choice of dishes the meal could be one dish, starter and main or main and dessert as long as the meal meets the nutritional requirements of the individual chosen. Most candidates attempted to analyse the meal, however if using appropriate software programmes candidates should also give written evidence of the findings from the results.

A meal must be produced independently to achieve higher mark bands. A witness statement clearly annotated should support this. Most centres used the witness statement in the LAM.

Although safety and hygiene are covered in the witness statement, this should also be supported by written evidence from the candidate.

R031 General overview

Most centres complete the URS accurately, however a number of centres omit candidate numbers and make errors when adding up the marks. This interrupts the smooth running of the moderation process as moderators have to generate coursework amendment forms back to the centre and this becomes a lengthy process. If the errors are not detected then having the incorrect marks credited can disadvantage candidates and this ultimately could affect their overall grade.

When internal standardisation takes place this ensures assessment criteria have been appropriately applied and that any arithmetical errors can be addressed before final submission of marks to OCR.

Evidence was usually presented in a well organised manner, although some centres are still submitting work in numerous plastic wallets; hole punch and treasury tag is sufficient.

Witness statements were used from the LAM (Live Assessment Material) and were annotated appropriately

Centres must remember that this unit can only be evidenced in the context of adult individuals.

To aid with your future delivery and assessment, we would like to draw your attention to the various resources that are available for this qualification, including delivery guides, sample work and live online Q&A webinars. All of these resources can be accessed from the Cambridge Nationals Hub page <http://www.ocr.org.uk/qualifications/by-type/cambridge-nationals/>.

We also have a series of videos giving hints and tips for each unit https://www.youtube.com/playlist?list=PL6yDqj0yKMyhMkt_RO-0DyVBBRqROFVG and we would also like to highlight our [guide to generating evidence](#). This guide covers areas to be aware of when preparing and conducting assessments for Cambridge Nationals.

Comments by LO

LO1 – Be able to assess scenes of accidents to identify risks and continuing dangers

Most candidates demonstrated they could assess the dangers to the casualty, first aider and others, including how the area can be made safe and obtaining informed consent. Most centres provided the LAM witness statement for this. The demonstration also needs to have supporting written evidence from the candidate. This was not provided by all candidates and was often given in bullet point format, which does not warrant the higher mark bands being credited.

Many candidates did not provide a detailed description of when and how to seek additional support. Similarly, candidates did not always provide detailed information as to why information is given to emergency services.

LO2 – Understand the first aid procedures for a range of injuries

Most candidates were able to demonstrate a thorough understanding of how to identify the nature and severity of the range of first aid procedures listed in the specification and the LAM with most causes listed. A thorough description of symptoms is required for mark band 3, list like evidence is generally credited with the lower mark band.

Centres should not provide templates for the first aid procedures. It is recommended that centres consult [guide to generating evidence](#). This guide covers areas to be aware of when preparing and conducting assessments for Cambridge Nationals.

LO3 – Be able to apply basic first aid procedures

Most candidates demonstrated the first aid procedures in the correct sequence and these were supported by the witness statement included in the LAM, which is specific to the first aid procedures being demonstrated. It was evident that most centres had used a qualified first aid trainer holding a training certificate.

A first aid certificate issued by the trainer is not sufficient on its own and should be supported by comments on the witness statement from the first aid assessor.

Most candidates produced a review of the practical activities, however some candidates only produced a recap of the first aid procedures and did not review their competency, strengths and weaknesses suggest improvements to their performance. For higher mark bands the review must be comprehensive and thorough.

Supporting you

For further details of this qualification please visit the subject webpage.

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