

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

November 2013

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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

There was a small cohort taking the first November series of the specification and the work seen varied. Evidence was only seen for the centre assessed units R022, R023, R025, R027 and R029. There is no R021 examination offered in the November series. The units were accessible to all the 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 where teachers and students had a clear understanding of the specification and appropriate guidance and support had been given to the candidates.

The majority of the work had correctly used the OCR live assignments. Please note that the assignments provided by OCR for all Cambridge Nationals centre assessed units must be used. There are three assignments available for each unit. Please note that the model assignments are provided for summative assessment and not for use as practice materials.

All entries for R022, R023, R025, R027 and R029 were paper based (Code 01/ 02). Only postal and repository moderation were available for the November series. There were no E-Repository (Code 01) submissions. It is helpful to the process if paper assessments are presented with a treasury tag in the top left-hand corner rather than ring binders and plastic wallets.

The correct pro-forma Unit Recording Sheet (URS) must be used; there are two versions available to download from OCR Interchange; interactive version and hard-copy.

Assessors had annotated the candidates work both in the body of the work and on the URS. This was good practice as the moderator could see how assessment decisions had been reached. Centre internal standardisation is essential so that there is consistency in assessment decisions particularly if there is more than one assessor. This should be recorded in the appropriate space on the URS.

It is essential that centres follow the [JCQ Instructions for Conducting Coursework](#). In particular, the instructions which clarify what can be considered to be the candidates' own unaided work. Providing candidates with worksheets, writing frames and/or additional instructions, or providing formative feedback whilst the evidence is being produced constitutes help over and above that permitted, and will be reported for investigation.

Across all submitted units candidates had not always attempted all parts of the assignment 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 on 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. The evidence produced for when caring for an individual rarely showed relevant application and justification of personal qualities to be used.

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 content following ie in the specification. This limited the mark bands the candidates could access.

Most one-to-one and group activities were carried out appropriately. Candidates had witness statements for both activities, however, the witness statements did not always reflect the competency with which the candidate had carried 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 omitted.
Overall there was a range of evidence meeting the mark band criteria.

R023

LO1: candidates provided information on all three system 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. Spelling Punctuation and Grammar (SPaG) had not been taken account of when marking this LO.

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

R025

LO1: candidates addressed the P.I.L.E.S. showing in the main the correct sequence of the normal development stages. Links to effects 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, there were 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 had not been taken account of when marking this LO.

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 formats.

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

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 i.e. young children, this restricted them accessing the grading assessment. Spelling Punctuation and Grammar (SPaG) had not been taken account of when marking this LO.

LO2: candidates' evidence of the benefits of participating in creative activities 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 content that follows in 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 omitted.

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 individual's condition/symptoms.

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

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.

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