

Health & Social Care

General Certificate of Secondary Education **GCSE J406 J412**

Reports on the Units

June 2010

J406/J412/R/10

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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.

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GCSE Health and Social Care J406 J412

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Chief Examiner's Report

For the second awarding series of this new qualification entries were high for A912 and A911 with A914 entries up from January 2010. Entries were also received for A913 in June 2010.

All entries for Controlled Assessment (A911 and A913) were paper based (Code 02); however, several centres entered their candidates for the Repository (Code 01) in error and this delayed their work being called for moderation. It is important that centres use the correct entry code for controlled assessments A911 and A913; 02 for paper based entries and 01 for Repository using, when assessing candidates' work, the correct proforma (URS) downloaded from OCR Interchange..

All controlled assessments which are paper based **must** be secured with a treasury tag in the top right-hand corner. Written work submitted in any other format eg ring binders, plastic wallets etc do not assist moderators.

Assessors need to annotate in the body of a candidate's controlled assessment work to enable the moderator can see how marks have been awarded. It is essential that the teaching of specific skills is incorporated into schemes of work so that candidates are able to meet the requirements of planning and evaluation when completing the controlled assignments. Where there is more than one assessor marking at a centre, internal moderation is essential so that there is parity in assessment decisions.

A signed copy of the CCS160 centre Authentication Form must be completed and sent for each unit when a sample request is generated by email. At the centre it is important that the marks for each task are added up correctly (all marks are out of 60) and the correct mark inserted on the electronic MS1.

The externally assessed unit A912 and A914 were paper based. Candidates' responses to these papers showed that most candidates had been adequately prepared for their entry; however, for some entries there were notable gaps of knowledge and it is important that centres, in their planning of delivery, give sufficient time to cover the whole of the specification. Centres are advised to ensure that candidates learn technical spellings as part of the course to ensure that quality responses are given. When completing the external assessment, candidates need to be aware that they should clearly indicate if they have added additional information/answers on other pages. All candidates should use a ball point pen and not the 'gel type' because these leak through the paper and make it difficult for examiners to see clearly the answers given and to award marks.

Specific information about individual units is detailed below and centres are advised to study the advice carefully when preparing their candidates for future series.

The first aggregation for these qualifications will be in June 2011.

A911 Health Social Care and Early Years provision

All entries this session were paper based (Code 02). Some centres entered for repository (Code 01) in error which caused a delay getting the marks onto OCR's system as entries had to be withdrawn and then re-entered with the correct code.

All correspondence was completed by email; there is now an automated request for a sample for the moderator and clerical errors are also handled electronically reducing the flow of paper between centres and the moderator, thus producing a more efficient system.

Centres are advised to ensure that the correct URS proforma is used to attach to the candidates' controlled assessment. The sheet needs to be completed accurately with correct page references. Annotations made by assessors support the moderation process; however, if an assessment is being made about team work or independent working, the assessor needs to qualify and justify the assessment made, stating what the candidate has done to contribute to the work.

- It is recommended that the assessor highlights or ticks each section of the band which applies to the work that the candidate has produced (an example is given below), this will help when a best fit mark applies.

TASK TWO	the needs of clients and the types of services that exist to meet their needs	
<p>Identify one type of client group that uses the service</p> <p>A basic explanation of their needs is given, showing little evidence of the escalating effect an initial need can create ✓</p> <p>With guidance, and in teacher comments say what guidance had been given. investigate other services which are available locally to meet the client group's needs ✓</p> <p>A basic analysis of how the service meets the different needs of the clients ✓</p> <p>A basic explanation of why these services are available in the local area, how they communicate and work together</p> <p style="text-align: right;">0 1 2 3 ④</p>	<p>Outline one type of client group that uses the service ✓</p> <p>A reasonable explanation of their needs is given, showing some evidence of the escalating effect an initial need can create</p> <p>With some guidance, investigate other services which are available locally to meet the needs client group's needs</p> <p>A sound analysis of how services meet the different needs of clients</p> <p>A reasonable explanation of why these services are available in the local area, how they communicate and work together ✓</p> <p style="text-align: right;">⑤ 6 7 8</p>	<p>Describe in detail one type of client group that uses the service</p> <p>A comprehensive basic explanation of their needs is given, showing evidence of the escalating effect an initial need can create</p> <p>Independently investigate services which are available locally to meet the client group's needs</p> <p>A detailed analysis of how services meet the different needs of clients</p> <p>A comprehensive explanation of why these services are available in the local area, how they communicate and work together.</p> <p style="text-align: right;">9 10 11 12</p>

Different ways of approaching the tasks were seen and most centres addressed the requirements of administering a controlled assessment.

Task One

Those candidates who had been well prepared produced excellent plans and checklist. A pre-set format of a chart made by the centre was useful; however, when centres had itemised task-by-task in the chart it did not provide the opportunity for candidates to gain marks at a higher level.

It should be remembered that this task is a working document and should be used throughout the controlled assessment; it does not need to be written or completed in one sitting.

Candidates who clearly stated the service on which they would be focusing and the aims and objectives of the investigation were able to access more marks in Task 5 when reviewing their work. Within the plan, candidates need to show where they would access the primary and secondary information needed. This may not be an exhaustive list but developed as the work progresses.

There is an opportunity (but not essential) for team work to take place; this enables candidates to share the gathering of information. If this does take place, the assessor and the candidates must clearly indicate the contribution each individual has made to the work.

- Centres should note that It is insufficient evidence for an assessor to place a mark on the URS that '*in teamwork situations the candidate has made a significant contribution to the efforts of the team*' without qualifying the statement.

Task Two

Candidates would be well advised to make it clear which service and client group they are studying. Candidates did not gain marks for copying out the Internet page and including a location map from the website of the service.

- For future sessions candidates need to be shown how to reference information used that is not their own work.

Good primary research was shown when candidates interviewed a care worker from the setting and were able to describe in detail the needs of the people who use the service (pwus). Many candidates were supported with a framework chart which showed the PIES in one column and then how the service meets those needs in another column; by providing a further column they could have shown why pwus may have more than one need, or how one need can create other needs *eg a fractured leg will require an initial assessment; x-ray; temporary plaster cast whilst swelling goes down; drugs to alleviate pain; permanent cast; support to walk with crutches; removal of cast, physiotherapy to get strength back and to aid walking.*

Candidates need to investigate services which are available locally to meet the needs of the client group. . Often this was done as a town trail or through an interview with a care worker. Many candidates just listed all the other '*nurseries*' in the area; this was insufficient evidence.

- Assessors need to give evidence on the URS, or in the form of a witness statement, to show if candidates have needed guidance or were able to work independently to carry out this part of their investigation.

Candidates found it much harder to explain why there were services in an area, *eg demographic trends* and how their chosen service works with other services *eg A nursery may work with a primary school; the health visiting service; social services; the education psychology dept; education welfare dept, etc.*

Reports on the Units taken in June 2010

Candidates often did not show how the services communicate with each other; where this was done well a candidate would have described; *eg nursery...professional referral by Child Protection Officer through an initial telephone call to Duty Officer at local Social Service Dept followed by a written account of cause for concern; invitation to a multiagency meeting; written minutes of meeting.*

Task 3

Candidates were well aware of referral procedures but often could not access marks at the higher level because the examples given were not relevant to the service being studied.

Candidates were also very aware of the many barriers that prevent pwus from accessing the help needed but did not show how this would have an impact on a person's health, development or social care.

There was often a lot of generic information (copied from text books without any referencing) on how barriers could be removed. Candidates gaining the higher level of marks had focused on what the service had actually done to remove barriers and how this empowered clients.

- Centres need to guide candidates to focus on how the service has removed barriers and/or what more could be done.
- Centres need to guide candidates to show what effect removing barriers has on the pwus.

Most centres had taught one piece of legislation and then candidates wrote about this. Candidates often showed very little understanding on how that piece of legislation had an impact on the quality of service being provided *eg Care Standards Act: legally required minimum standard room size; which ensures that pwus have sufficient room to be able not only to sleep but also to sit and move easily around despite mobility difficulties.*

Human Rights Act: no one should be discriminated against on the grounds of sex, race, colour or language; which ensures that a pregnant Bangladeshi woman can be examined by a female doctor.

- The piece of legalisation identified must be relevant to the purpose of the service and show the impact that it has on the quality of service provided.

Task 4

This task was generally done well. Candidates had been well prepared and the higher level candidates had interviewed a care worker to gain primary information and supported their findings with references to secondary sources.

Some candidates started to look at the day-to-day tasks before giving a description of the role of their chosen care worker. Candidates gaining higher level marks produced a landscape chart to show in one column the day-to-day tasks, in the second column how the health, developmental and social care needs were being met, a third column to show the skills and qualities being used and why they are important, and a further column to show how the care values were being applied.

When assessing the quality of work, to award the higher band marks, assessors need to ensure that a detailed explanation shows understanding; list-like answers do not show understanding and therefore must only be awarded lower level marks.

Many candidates had undertaken quality research into possible qualification pathways; however they did not access higher level marks because they did not present reasoned judgements and accurate conclusions.

Task 5

Of the five tasks, this was often the weakest one and candidates lost marks here because they had run out of time or they had not followed the criteria or they wrote a poor evaluation.

- Candidates would be advised to practise writing an evaluation prior to commencing a controlled assessment.

Where candidates had set out clear aims and objectives in Task 1 they were able to refer to these as part of their evaluation. Some candidates reflected on their plans as the controlled assessment proceeded, making notes in a separate column on their planning sheet - this was good practice. Candidates were then able to access relevant material to form part of their evaluation and make recommendations for future investigations. By making regular notes during the controlled assessment they were able to give detail and show understating about their own performance and in turn gain higher level marks within this task.

In the controlled assessment candidates were asked to present an overall conclusion; this was often over-looked.

Where this was done well, candidates had referred to the scenario and produced a report to show how the service they had investigated provided care in the community and met the needs of the people. Some candidates produced conclusions at the end of each Task (2, 3 and 4), however, their work would have been strengthened if they had pulled these 'mini reports' into one report that could have been given to the 'relevant authorities' as per the scenario.

- Candidates need to present overall conclusions showing how the provision of care within their service meets the needs of the client group selected.

The use of references was variable in the work seen. Some bibliographies were list-like and there was very little evidence of how these sources had been used within the text. Some candidates showed how they would have extended their research if they undertook a future investigation.

- Candidates need training to reference sources of information used within the context of their controlled assessment.

QWC

Whilst specific marks are not awarded for QWC, assessors should be mindful that once the five tasks have been assessed and an overall mark decided, it is important that the mark is complementary to the description of the quality of work for a candidate at a particular level.

A912

It was pleasing to see that many centres had already directed their candidates to take note of the active verbs used within the questions; this was particularly noticeable in the questions which required candidates to either evaluate or analyse. For future examination sessions it is strongly advised that all centres familiarise their candidates in the active verbs they will come across:

Identify
Describe
Explain
Analyse
Evaluate

The term 'development' will continue to be used in the questions. Centres are advised to guide their candidates in recognising that this term refers to all four aspects; physical, intellectual, emotional and social. Unless the aspect of development is specified within the question, candidates can answer questions with respect to any aspect but are advised to attempt at least three aspects in essay-style answers.

Centres need to inform candidates that the quality of their written communication will be taken into account in questions which require extended prose; poor grammar and spelling meant that for some candidates were not able to access level 3 in some questions.

For future sessions, if there is a question specific to self concept, eg 'how would this affect Jason's self-concept?' candidates will not be able to reply that this 'will lower his self concept'; more specific answers such as a 'lowered self esteem / decrease in confidence, a sense of poor self worth' will be expected.

Question 1a

This was a well answered question. The main error seemed to be missing out the first response, **identifying** the member of the Taylor family.

The majority of candidates correctly identified the life stages. Occasionally candidates gave the response toddler instead of childhood; this does not identify the life stage.

Question 1b

This question required the candidates to demonstrate their understanding of the term 'growth'. Generally this was a well answered question. Many of the candidates showed a good understanding and were able to cite many of the following:

- Height/getting taller
- Weight/mass
- Increase in size

Unfortunately, some candidates went on to describe the aspects of development and / or progression though the life stages; they had partly confused development / life stages with growth.

Question 1c

The active verb was '**describe**'

Both ends of the spectrum were seen here; some responses were excellent whilst others were very weak. The strongest response described how centile charts are used for comparing to the 'norm', checking height is within the normal range and comparison to the average.

The weaker responses went on to talk about measuring height, with some giving detailed descriptions of how to use the different axes; they, in some instances, appeared to have misread the question.

Question 1d

Candidates were required to **identify** three social changes within the life stage of adulthood. The most common responses were:

- Limited socialisation with friends due to the demands of children
- More interaction/socialisation with work colleagues
- Greater interaction/socialisation with family

Candidates 'fell down' when they went onto identify life events, namely marriage and divorce, they then failed to identify the required social change.

Some candidates failed to take into account the aspect of development asked for within the question and went on to identify changes in physical development, namely the menopause.

Question 1e

Candidates were required to **identify** three emotional changes within the life stage of childhood. Generally a well answered question with candidates giving many emotions which could be attributed to childhood:

- Jealousy
- Frightened
- Happy

It was pleasing to note that many candidates identified that within childhood, children will be able to understand the feelings of others.

Most common errors were:

- candidates gave life events rather than the emotional change, eg starting school
- candidates identified that they would feel loved; this is not an emotional change
- candidates identifying emotional changes associated with another life stage, most notably adolescence.

Question 2a

The active verbs were '**identify**' and '**explain**'.

This was a well answered question. The majority of candidates were able to correctly identify the factors, with the most popular responses being:

- Lack of socialisation
- Giving up work
- Reduced income

Some well thought out explanations were seen with many candidates addressing varying aspects of development. The more able candidates were fluent in their writing and gave great consideration to their responses. The most common aspects of development covered were social and emotional.

The most common errors were:

- Giving the effect in the space allocated for the factor and vice versa
- Giving the effect on development without giving the cause

Question 2b

Some varied answers were seen to this question. The question asked candidates to **identify** the effect of a low self concept, some misread the question and many gave reasons for having a low self concept. The most common correct responses were:

- Having a low self esteem
- Feeling unable to socialise
- Feeling that she was a poor mother
- Having low self confidence

The most common incorrect responses were:

- Putting on weight
- Having a low income

For future sessions it would be advisable for centres to highlight the difference between effect and reason; this hopefully will lessen the number of incorrect answers should a similar question arise.

Question 2c

The active verbs were '**identify**' and '**explain**'.

A common mistake seen in this question was candidates identifying 'friends' and 'family' as the identification of support. Candidates, in the main, then went on to give the example of support within the explanation so did not lose out on these marks. The most common responses were:

- Looking after Jack
- Talking/listening to Amanda

Reports on the Units taken in June 2010

The explanations given on how this support would enable Amanda to cope were mixed; many candidates failed to develop their responses to include how this type of support would help her to cope.

Many candidates gave as an explanation 'to help her find work'; this was incorrect. The stem of the question clearly states that 'Amanda has given up work so that she can spend more time with her son'. Centres need to encourage candidates to refer back to the stem when answering questions.

Centres need to guide candidates in giving more specific answers. Many candidates identified 'to give advice', but did not qualify what advice.

Question 3a

Some varied answers were given to this question.

Many gave examples of relationships linked to the different categories rather than features. The question asked for different features so candidates lost out if they repeated a feature.

A teaching focus here for any centre is familiarising candidates with key vocabulary.

The most common features given for each category were

Family – love/trust/protection

Friendship – trust/sharing

Intimate and sexual – love/physical attraction/honesty

Working – dependency/power/respect

Question 3b

The active verb was '**analyse**'.

Centres are to be congratulated for preparing their candidates in answering this type of question – there were some very thoughtful and in-depth responses seen. The more able candidates were able to initially identify an impact and then go on to give several consequences on emotional and social development; they had clearly grasped the concept of 'analysis'. Many candidates gave examples of negative relationships before going on to analyse the impact. Whilst this is commendable it can detract from the requirement of the question and lose the candidate both time and marks. This could be a focus for centres when preparing their candidates for future examinations.

A small minority of candidates gave the impact on all aspects of development; once again, they need to ensure that they read the question carefully.

Question 3c

The active verbs were '**identify**' and '**describe**'.

Many candidates were able to correctly identify the factors:

- Being homosexual
- Going to university
- Taking A levels

Reports on the Units taken in June 2010

Many candidates were able to describe the effect on self concept, both as a positive and as a negative. Some candidates focussed in on how his parents would feel with respect to Paul being homosexual, therefore not gaining any marks.

The most common responses were:

- Being proud
- Higher self esteem
- Greater insecurity
- Being confident

Question 4a

The active verb was '**evaluate**'.

A range of responses were seen for this question. It was pleasing to see that candidates had been prepared on how to tackle this type of question; many gave positives and negatives as well as including differing aspects of development. The more able candidates wrote in a fluent style and covered all of the requirements to gain level 3.

Disappointingly, many candidates equated retirement with going into a nursing home and with bereavement. Whilst it is accepted that we are more likely to retire as we progress into later adulthood, this does not mean that we suddenly become frail and will become dependent upon others. Answers that centred on frailty and bereavement were not correct and therefore no marks could be awarded.

Some candidates only focussed on negative or positive aspects; they were restricted to gaining only 5 marks since they had failed to show both sides.

Question 4b

The active verb was '**explain**'.

Some thoughtful answers were seen to this. The majority of candidates focussed in on the effects to his physical, emotional and social development. The most common responses were:

Physical effects	Social effects	Emotional effects
Diabetes Heart disease Breathlessness	Socially isolated	Loss of confidence Lowered self esteem Being embarrassed

The focus of the question was the effects of obesity. Many candidates went off on a tangent and talked at length about how he could lose weight and the impact this weight loss would have upon his development; this was marked as incorrect.

The other most common error was candidates describing how he would learn more about obesity; this did not fulfil the requirement of the question.

A913 Promoting Health and Wellbeing

All entries this session were paper based (Code 02). Some centres entered for repository (Code 01) in error which caused a delay getting the marks onto OCR's system as entries had to be withdrawn and then re-entered with the correct code.

All correspondence was completed by email; there is now an automated request for a sample for the moderator and clerical errors are also handled electronically reducing the flow of paper between centres and the moderator, thus producing a more efficient system.

Centres are advised to ensure that the correct URS proforma is used to attach to the candidates' controlled assessment. The sheet needs to be completed accurately with correct page references. Annotations made by assessors support the moderation process; however, if an assessment is being made about team work or independent working, the assessor needs to qualify and justify the assessment made, stating what the candidate has done to contribute to the work.

- It is recommended that the assessor highlights or ticks each section of the band which applies to the work that the candidate has produced (an example is given below), this will help when a best fit mark applies.

TASK ONE Preparation		
<p>Identify the person on which the investigation will be based</p> <p>Produce a basic plan/checklist for the investigation; aims and objectives show limited understanding of the purpose of the investigation</p> <p>Evidence of limited planning of the information to be used, including sources of primary and/or secondary data which will have limited relevance to the context of the investigation</p> <p>In teamwork situations, the candidate has made limited contribution to the efforts of the team</p> <p>1 2 3</p>	<p>Identify the person on which the investigation will be based</p> <p>Produce a sound plan/checklist for the investigation; aims and objectives show some understanding of the purpose of the investigation</p> <p>Evidence of some planning of the information to be used, including sources of primary and/or secondary data which will be mostly appropriate to the context of the investigation</p> <p>In teamwork situations, the candidate has made some contribution to the efforts of the team ✓</p> <p>4 5 6</p>	<p>Identify the person on which the investigation will be based</p> <p>Produce a comprehensive plan/checklist for the investigation; aims and objectives show sound understanding of the purpose of the investigation ✓</p> <p>Evidence of comprehensive planning of the information to be used, including sources of primary and secondary data which will be appropriate to the context of the investigation ✓</p> <p>In teamwork situations, the candidate has made a significant contribution to the efforts of the team and in teacher comments say what contribution had been made</p> <p>7 8</p>

A different approach is needed for this unit from the Legacy GCSE unit4870. Those centres that tried to follow the previous format did not support their candidates sufficiently to achieve the higher level marks.

Task 1 Introduction

Candidates would be advised to identify clearly on whom their controlled assessment is focussed and the aims and objectives of their investigation. This will enable them to access more marks in Task 3 when they are reviewing their work.

Those candidates who had been well prepared produced excellent plans and checklists. A pre-set format for a chart made by the centre was useful; however, when centres had itemised task by task in the chart, it did not provide the opportunity for candidates to gain marks at a higher level.

Within the plan candidates need to show where they will access the primary and secondary information needed. This will not be an exhaustive list and may well be developed as the work progresses as part of their ongoing evaluation.

There is an opportunity (but not essential) for team work to take place; this enables candidates to share the gathering of information. If this does take place, the assessor and the candidates must clearly indicate the contribution each individual has made to the work.

- Centres should note that It is insufficient evidence for an assessor to place a mark on the URS that '*in teamwork situations the candidate has made a significant contribution to the efforts of the team*' without qualifying the statement.

Task 1 Introduction Continued

Candidates researched the meaning of 'health' and there were numerous opportunities for higher level candidates to reference a variety of opinions including the individual whom they were studying and to give their own opinions. Some candidates extended this to show how they would recognise if someone was in need of a health plan and brought in the purpose of the investigation from the scenario.

The planning and carrying out of the research into the individual's health and wellbeing was generally done well. Where candidates had worked as a team to compile a questionnaire, it is important that the assessor and the candidate clearly indicate the contribution each individual has made to the work.

Candidates showed that they could analyse the physical, intellectual, emotional, and social health and wellbeing of the individual.

Task 2 The Health Plan (1)

Candidates often did not refer to or explain the features of the individual's lifestyle which could affect their physical health. More able candidates made reference to the person's age, illness, occupation and lifestyle.

eg smoking would affect the persons ability to breathe and therefore a peak flow measurement would be suitable to use so that if a plan was drawn up to stop smoking there would be a physical measurement that could be used to see the improvement that this has made on the person's health.

Candidates usually were able to accurately calculate at least two physical measures of health selected from the specification. More able candidates made an analysis of the results they found, referencing why they had used that particular measurement, noting the variations from the norms and why there were variations.

Some candidates described, generically, all the physical measurements of health; no marks were awarded for this.

Task 2 The Health Plan (2)

Well prepared candidates followed a logical format and were able to access the higher level marks.

Some candidates did not make it clear why there was a need for the health plan. Candidates are advised that they needed to give two health needs of the individual and then explain why those needs had been chosen. Where this was done well, candidates developed two specific targets which they would address in the health plan, stating how the physical measurements of health would improve if the targets in the plan were successful and how the person's needs have been addressed.

Some candidates did not produce a plan which the individual could use to show how they could maintain or improve their health.

Task 2 The Health Plan (3)

The response from candidates for this section was variable. Where candidates had directed the focus on showing how an individual's health might be at risk if a plan were not followed, and the factors which were having a positive effect on the person's health, the candidates gained higher level marks.

Candidates needed to explain possible risks (at least two) that are relevant to the individual and then analyse the damage that these risks may cause in the short and long term. Candidates wishing to access higher level marks should avoid list like answers. A variety of presentation methods were seen, some of which could have been used for the health promotion campaign.

The explanation of the difference between the individual's state of health and recommended norms was often weak. The best work seen was when a chart had been compiled showing findings from the initial investigation to the expected norms (the chart could be used for publicity purposes) with the candidate adding a short paragraph to explain the differences allowing access to higher level marks.

When candidates analysed the factors that had positively affected the health and well-being of the individual, this was done either extremely well or was poor. A minimum of two factors should be analysed and then the candidate needs to show how these factors have worked together to positively affect the person's health and wellbeing. It should be remembered that a mind-map approach to the interrelation of factors is not an explanation, however, it can be used by candidates as a prompt sheet.

Task 3 Conclusion

This task consisted of two different evaluations - the plan and the candidate's investigation.

Candidates lost marks here because they had run out of time, or they had not followed the criteria, or they struggled to write an evaluation.

- Centres would be advised to practise writing an evaluation prior to commencing a controlled assessment.

Reports on the Units taken in June 2010

Candidates who gained higher marks explained why the health plan was relevant for the individual. They analysed the difficulties that the individual might have in following or achieving the proposed plan and how support could be given in order that the targets were met.

Most candidates drew conclusions about the physical, intellectual, emotional and social effects the plan may have on the individual and those gaining higher level marks were realistic in their suggestions.

Where candidates had set out clear aims and objectives in Task 1 they were able to refer to these as part of their evaluation. Some candidates reflected on their plans as the controlled assessment progressed, making notes in a separate column on their planning sheet; this was good practice. Candidates were then able to access relevant material to form part of their evaluation and make recommendations for future investigations. By making regular notes during the controlled assessment they were able to give detail and show understating about their own performance and in turn gain higher marks within this task.

The use of references was mixed; some bibliographies were list like and there was very little evidence of how these sources had been used within the text. Some candidates showed they would have extended their research if they undertook a future investigation.

- Candidates need training to reference sources of information used within the context of their controlled assessment.

QWC

Whilst specific marks are not awarded for QWC, assessors should be mindful that once the tasks have been assessed and an overall mark decided, it is important that the mark is complementary to the description of the quality of work for a candidate at a particular level.

A914 Safeguarding and Protecting Individuals

General Comments

The examination paper consisted of a combination of question styles involving identification, description, discussion and explanation. Despite all the questions being based on the specification unit, candidate responses to the levelled questions reflected mixed responses. Some responses were quite poor, demonstrating little basic knowledge of the unit whilst other responses showed a sound or high knowledge of each topic. There were a number of incorrect responses or nil responses where candidates did not attempt the first question about legislation. Those candidates awarded high marks demonstrated their ability to synthesise information and the ability to write with fluency. This was an advantage when dealing with questions that required continuous prose answers.

The levelled questions in the paper were accessible to F/G level candidates and also provided opportunity for differentiation for the more able candidates to demonstrate depth of knowledge. There was little evidence to suggest that candidates ran out of time. The topics covered in this examination paper included legislation, infection control, personal protective equipment, first aid, safety signs, ill treatment, security measures, the role of the Health and Safety Executive and risk assessments, covering the breadth of the specification.

Centres could help to improve the quality of responses from candidates by:

- Making sure that candidates have sound understanding of the command words for example, identify, explain, describe, evaluate.
- Preparing candidates thoroughly for the examination by revision exercises, case studies, specialist guest speakers, class tests and repetition of the topics in the specification.
- Ensuring that all sections of the unit specification are thoroughly covered, for example, safeguarding individuals, legislation, the effects of ill treatment, infection control, first aid, potential risks and risk assessments
- Making sure that candidates understand the differences between safety and security.

Comments on Individual Questions

1. Candidates were required to name one piece of legislation which helps to protect the rights of people with disabilities. Some candidates gave a nil response and some gave completely inappropriate responses such as *'parking badges'*.
2. Candidates were asked to describe one security feature which could be in place at a care setting. This was generally answered well for example, candidates responded with *'install CCTV so you can monitor what is going on in the building'*. Some candidates confused security with safety and gave incorrect answers such as *'it would keep people safe'* and *'so residents cannot escape'*.
3. The command word in this question was identify. This was generally answered well and most candidates gained both marks for identifying two situations when a care worker should wash their hands.
4. The command words in this question were – 'name' and 'explain'.

Reports on the Units taken in June 2010

This was generally answered well, however some candidates talked about *'clean uniforms'* and *'sensible shoes'*. Candidates gave a range of appropriate personal protective clothing to reflect sound understanding.

5. Candidates were required to identify one piece of fire fighting equipment and most gave relevant responses. A common answer was a fire extinguisher. More obscure responses were ladders and helmets.
6. This question required candidates to identify three safety signs and the majority of candidates were able to achieve the three marks. Some candidates used lack of precision and therefore lost marks, for example, for sign A, some candidates wrote *'science lab'* rather than the correct answer *'wear safety goggles'*. Some candidates appeared to simply guess at the correct answer for sign B by stating *'electric shock'* *'lightening'* and *'danger'*.
7. This question required candidates to identify two key signs of a person having an asthma attack. Most candidates gave correct responses such as *'wheezing'*, *'difficulty in speaking'*. A few candidates gave incorrect responses for example, *'pointing to the throat'* and *'reaching for the ground'*.
8. Candidates were required to state four ways of maintaining good food hygiene preparation. This was particularly well answered as most candidates achieved full marks.
9. This question required candidates to identify one action which should be taken when there is a gas leak in a kitchen. Candidates were also required to explain the importance of the action. The action was not always supported by the explanation and the explanations were often limited which meant that some candidates were not awarded three marks.
10. This was the first of the levelled questions which allowed for differentiation. This was a quality response answer and in order to achieve five marks for Level 3, candidates needed to give a detailed description of the procedure for providing first aid to a person who is choking. Very few candidates gained full marks and many gave a limited description of the procedure. Some candidates included *'encouraging the person to cough'* whilst other candidates talked about *'giving sips of water'* or *'give them something to eat to dislodge the object'*. Many students talked about abdominal thrusts in great detail, which was only one part of the procedure.

An example of an acceptable answer could have been:

'The first thing to do is to ask the person to lean forward and cough. If that doesn't help, then give up to 5 back slaps between the shoulder blades with the palm of your hand. If the person is still choking, then give 5 abdominal thrusts. If the obstruction has not cleared then repeat the actions and dial 999. If the obstruction has cleared and you have used the up thrusts seek medical help.'

11. The focus of this question was for candidates to identify the correct type of abuse. Most responses were correct however some candidates gave obscure responses such as *'stealing'*, *'taking advantage'* and *'intellectual abuse'*.
12. This was a levelled question and stimulated a good range of answers with most candidates being able to explain the possible effects of ill treatment to a young child attending a day nursery. The actual detail varied, but overall candidates produced some excellent answers that were relevant and to a high standard. Many candidates achieved marks at Level 3 but most achieved marks at Level 2.

An example of an acceptable answer could have been:

'Because he is getting shouted at regularly, Martin will feel humiliated and upset. The other children may laugh at him for getting shouted at which may make Martin feel left out and withdrawn. Martin may lose confidence and not want to go the nursery or he may copy the nursery nurse's behaviour and start to shout at others or become a bully to the other children. Martin may start to think there was something wrong with him and blame himself for the ill treatment resulting in a low self esteem'.

13. Candidates were required to explain the benefits of having equipment regularly checked and serviced in a care setting. Few candidates were able to demonstrate the strategic knowledge and understanding required. Many candidates simply gave examples showing the danger that might be caused by specific failures to check and service equipment
- 14(i) This question required candidates to say what the letters 'CRB' stand for. Responses were disappointing with some candidates purely guessing at the correct answer. An example of a poor answer was *'care risk balance'* rather than the correct response 'Criminal Record Bureau'. For those students who answered this correctly there was an interesting variety of the spelling for 'Bureau'.
- 14(ii) Candidates were required to explain the purpose of a CRB check. Most candidates understood the purpose but could not give a full explanation about the link between the vulnerability of the people who use services and the type of criminal record.
- 15 This question required candidates to discuss the role of the Health and Safety Executive (HSE). This was generally poorly answered with many candidates giving a limited discussion, demonstrating little knowledge or understanding. Many candidates thought that the role of the HSE was to carry out risk assessments within a specific care setting. Some candidates, however, were able to discuss the HSE role at a basic level securing marks from Level 2.
- 16 This levelled response question achieved the differentiation intended. Almost all candidates answered this question well, making some perceptive assessments with detailed knowledge about the hazards, who might be harmed, and correct identification of adequate precautions. Most candidates achieved marks at either Level 2 or Level 3. There was clear evidence that risk assessment had been taught well in centres, but because some candidates did not include all three bullet points, they did not secure marks from Level 3.

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