

Health & Social Care (Double Award)

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

Reports on the Units

January 2010

J406/J412/R/10J

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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 (Double Award) (J406 J412)

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Chief Examiner's Report

For the first awarding series of this new qualification entries were low for A911 and A914; a number of Centres entered candidates for A912, with no entries for A913. It is important for Centres to ensure that all candidates have been adequately prepared as they need to be given sufficient time to cover the whole of the unit specification.

Whilst OCR were hoping that candidates could sit the A914 paper on line this series, regrettably the system which would allow this were not in place to allow this to happen and the exam will continue to be a paper entry (code 02) for the summer examination as well.

It is important that Centres use the correct entry code - 02 for paper-based entries and 01 for Repository; for controlled assessments A911 and A913 centres are requested to use the correct proforma when assessing candidate work, which can be downloaded from OCR Interchange. When work is annotated in the body of the assignment the moderator can see how marks have been awarded. The teaching of specific skills needs to be incorporated into Centres' Schemes of Work so that candidates have the knowledge to undertake the requirements of Task 1 and Task 5 in the controlled assignments.

Internal standardisation good practice was seen when assessing the controlled assignments A911 and A913. It must be remembered that the work should be presented by using a treasury tag or staple; plastic wallets should not be used. A signed copy of the CCS160 Centre Authentication Form must be completed and sent 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 returned to OCR.

Centres are advised to ensure that time is allocated during teaching time to ensure candidates are able to spell correctly, particularly the more complex terminology associated with health and social care. This would enable candidates to access the highest marks when making quality responses. When preparing for the examined units, candidates need to clearly indicate if they have used additional writing space at the back of their script. All candidates should use a biro pen and not the 'gel type' because these leak through to other pages and make it difficult for examiners to see clearly the answers given.

A911 01/02

There was a small entry for A911 for this examination series and the comments given in this report can only be of a general nature and hopefully give guidance for centres for future series.

Task One

A variety of ways of producing a plan were seen. Candidates gained more marks when they clearly set out the range of services in their locality that provided services for people who have health, social care and/or early years needs.

Team work was evident in that group questionnaires had been produced; however, candidates lost marks when assessors did not provide supporting information, eg witness statements, to clearly indicate the contribution that candidates had made to the group.

Task Two

Candidates need only look at one client group. Valuable time was lost by some candidates who explored all five client groups. Some candidates just inserted class notes about a client group and did not give an explanation about the health and/or developmental and/or social care needs that the client group had and the reason they were using the service. For example, an adolescent may attend a doctor's surgery to have medication to support their health needs. At the consultation with the doctor there could be a discussion about the young person's general health and advice given to have screening for a disease.

Work needs to be developed to show how an initial need may have an escalating effect eg the young person has an allergy to medication given or when screened for health, further complications are discovered in relation to their health.

Some candidates who studied early years looked at other nurseries in the area. Work could have been developed to show other ways children could be cared for eg child minders, and they also need to show the role of other services eg health and social services that provide for the needs of a young child.

Good group surveys were developed to obtain a lot of primary information. Survey work was not always used nor was there an analysis to show how the service met the different needs of its clients. This analysis contributes to the conclusions required in Task 5.

Some candidates used demographic figures to show why a service(s) was/were provided eg nurseries in an industrial area - lots of young families with both parents needing to work to pay mortgages. Producing a chart did not provide candidates with marks as the evidence needed to be supported by an interpretation by the candidate to show their understanding of demographic characteristics.

Task Three

The analysis of the different ways that users of services are referred needs to be applied to the service being studied; candidates often only looked at the methods in general terms.

Candidates were aware of barriers that could possibly prevent access to the service, but often did not show how this could affect the health, developmental or social care needs of the clients.

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Some examples of procedures that have been put in place to overcome possible barriers had not been applied to the service, and little understanding shown of how this empowers clients.

The two main pieces of legislation looked at were Every Child Matters and the Human Rights Act. Only one is required to be investigated although it needs to show the impact that it has on service provision for their chosen service. Far too much generic information was found in this section, as well as the inclusion of class notes.

Task Four

Candidates looked at a care worker within the service they were studying, and whilst an explanation of their day to day tasks was written about either in the form of a timetable of the day or a description of the tasks that would be covered, candidates often did not show how the individual's daily programme helped the health, developmental or social care needs of the clients.

Care values were often written about well; however, it should be noted that if the sector being studied is early years then candidates must focus on those principles. Candidates were able to explore how the care values were applied but often did not refer to the effects on the clients if care values were not applied.

Care workers need different skills as well as qualities; candidates often did not show the difference between a skill and a quality. Possible qualification pathways were either completed really well or showed limited application.

Task Five

Candidates showed that they could reflect on their work, some referring to their action plan/check list and some writing in general terms. Often the aims and objective were not referred to. Candidates who achieved higher marks used their aims and objectives as a measuring tool.

Most candidates attempted to make recommendations for future investigations in terms of their own performance, but did not relate this to the investigation that they undertook.

It was disappointing that candidates did not draw conclusions about their findings eg how well the service met the needs of the client group, how it interacted with other services or if there was scope for a more integrated package of care.

Whilst most candidates included a bibliography, few showed a reflection on sources of information that they had used in the body of the evidence.

A912

General comments

Performance and results for this unit were very encouraging. Centres had obviously prepared their candidates well and had followed the requirements of the new specification.

Given that this is a new qualification, Centres are advised to spend time going through all of the command verbs which will be found within this examination paper:

- Identify (give, name, state)
- Describe
- Explain
- Analyse
- Evaluate

The term 'development' will often be used in questions. Centres are advised to guide their candidates in knowing that this term refers to four aspects of development, ie physical, intellectual, emotional and social. Unless the aspect of development is specified within the question, candidates are advised to attempt to cover at least three aspects when responding to questions.

Centres need to inform candidates that the quality of their written communication will be taken into account in questions which require a piece of extended writing.

Question 1(a)

The command verb was 'identification'.

The candidates were asked to identify the life stage, the age range and, for one response, the name of the member of the Evans family who was in the life stage of childhood.

The majority of candidates' scored full marks; they were fully versed with the correct terminology of life stages and were able to link this to the stem of the question.

Very occasionally a candidate would use the term teenager instead of adolescent, and baby instead of infancy. These responses do not identify the life stage.

Question 1(b)

This question required the candidates to demonstrate their understanding of the term 'development'.

This was generally a well answered question, with many candidates identifying the key categories of development, namely:

- skills
- emotions
- abilities

Some candidates answered this question by talking about the four different aspects of development – physical, intellectual, emotional and social.

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Where candidates failed to gain the full two marks they did not identify that development is an *increase* of the aforementioned categories and/or aspects.

The most common error was the candidates' only giving one category or aspect of development. A few number of candidates talked about growth and wrote about a person's height and weight; there was some confusion with regards to development and growth.

Question 1(c)

The command verb was 'identification'. Candidates were required to identify three physical characteristics associated with later adulthood.

This was a particularly well-answered question.

The most common responses were:

- loss of elasticity of the skin / wrinkles
- loss of hair colour / going grey

It was very pleasing to see some more thoughtful responses from candidates. Some centres had obviously delivered this section in depth and the more able candidates were able to give more considered responses:

- weakened immune system
- spine compresses
- greater inefficiency with some internal organs, eg the lungs

The most common error was candidates stating loss of hearing / loss of sight. They should have specified that eyesight / hearing can deteriorate.

Question 1(d)

The command verb was 'identification'. Candidates were required to identify three intellectual characteristics associated with infancy.

The most common responses were:

- recognising carers / named people
- understanding commands / words
- starting to talk

Once again it was apparent that Centres had delivered this section well and most candidates were very secure in their knowledge and were able to access at least two marks.

Some candidates had failed to pick up on the word 'intellectual' and went on to identify physical characteristics.

Some candidates gave specific activities eg building blocks, rather than give the characteristic.

Question 1(e)

The command verb was 'identification'.

Candidates were required to identify two social characteristics associated with adolescence. In the main this was a poorly answered question. Many candidates gave generalised answers that could apply to most life stages, eg making more friends / go out with friends.

The most common response was having a girlfriend / boyfriend / intimate relationship. However, some candidates only identified having a relationship; given that they did not qualify the term relationship, no marks could be awarded.

A small minority of candidates gave physical characteristics.

Those candidates that scored full marks gave more specific answers:

- more conflict /disagreements with parents / carers
- wanting to spend more time with friends / peer groups than parents / carers
- wanting / pursuing greater independence

Question 2(a)

The command verb was 'identification'.

The majority of candidates correctly identified the two types of relationship:

- sexual / intimate
- friendship
- family

Many identified marriage which was accepted.

A few candidates incorrectly identified two factors that affected development (a requirement for question 2(b)).

Some candidates incorrectly identified features of relationships, most notably trust and love. A few candidates identified working relationship; candidates are advised to spend some time reading the question stem to ensure they are interpreting the requirements of the question correctly.

Question 2(b)

The command verbs were 'identification' and 'explain'.

The majority of candidates were able to correctly identify the factors.

The most common responses were:

- holidays
- having a good pension
- being active – both swimming and golf

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Some candidates gave the answer of economic – they needed to give the specific factor from the stem of the question.

Candidates often failed to explain how these factors affected development; they gave very brief answers which lacked specifics. For example, many wrote that playing golf / swimming was healthy; this answer needed qualifying and they needed to state *how* it made them healthier, eg increasing stamina, developing more muscle tone.

A few candidates gave their answer as a negative and explained what would happen if they did not have a good pension / did not go on holiday – no marks were awarded for these answers since they did not answer the question.

Question 2(c)

The command verb was 'describe'.

This was an extended response question which is marked using levels of response marking bands which take into account the quality of written communication.

The answers seen ranged from poor to outstanding.

Unfortunately, a number of candidates misinterpreted the question and thought that June and Adrian were attending full time education and wrote about negative aspects and effects. Many thought that June and Adrian would no longer be able to take part in all of their other pursuits (swimming, golf and holidays with friends) and so gave a very negative account.

Many candidates also failed to take into consideration their ages.

The most common responses were:

- stimulating their brain – many of the more able candidates expanded on this point and linked it to the life stage of later adulthood and the positive aspect of continuing keep mentally alert / stimulated
- developing more friendships – the more able candidates expanded on this and developed their answers on the social development of June and Adrian e.g. being able to discuss issues related to the course
- taking holidays in Italy – expanding their knowledge of the country / culture
- enhanced confidence
- being proud of their achievements.

Question 3(a)

This question required the candidates to demonstrate their understanding of the term 'self - concept'.

It was pleasing to see that many candidates were able to correctly identify both of the two aspects of self concept - self esteem and self image.

Many candidates only focussed in on one aspect so could only gain one mark.

The most common error was candidates identifying 'how other people see them' – this by itself is not correct. Yes, this will impact on a person's self concept but only when it is translated into how we see our self (self image).

Question 3(b)

The command verb was 'analyse'.

This was an extended response question which is marked using levels of response marking bands which take into account the quality of written communication.

Generally candidates answered this question well. Many were able to access level 2 which required significant description of the effects on social and emotional development. Candidates were able to comment on both the positives and negatives. The most common responses were:

	Social Development	Emotional Development
Positives	<ul style="list-style-type: none"> • more friends • opportunity to discuss issues 	<ul style="list-style-type: none"> • more confident • happy
Negatives	<ul style="list-style-type: none"> • becoming socially isolated • becoming withdrawn 	<ul style="list-style-type: none"> • lacking confidence • sad

Only those candidates who 'analysed' the effect on social and emotional development could access level 3. Candidates needed to show the impact of one aspect on another. For example, *Steven would have been proud of his achievements which would have enhanced his confidence and enabled him to make more friends. Having more friends would impact on him emotionally as he will feel more secure with himself as well as being happier. In contrast to Steven, Harpreet will have a lowered self esteem and will lack the confidence required to go out in social situations. This will eventually lead to her becoming more withdrawn and socially isolated. Being socially isolated will have a detrimental impact on her communication skills and this will significantly reduce her confidence even further.*

Question 3(c)

The command verbs were 'identification' and 'explain'.

Many of the candidates were able to identify the health care services. However, candidates often failed to explain the benefits in accessing these health care services on development. Many answers given were vague and lacked specifics. A lot of candidates talked about the services would help the family to be healthier; this needed to be qualified.

Within the explanation, candidates should be encouraged to give an 'action' and then go on to say how this would help 'development', for example:

Asthma Clinic – at the clinic a person’s peak flow will be taken (action), this will determine the medication that will be prescribed. Having the correct medication will enable a person to breathe more easily (physical development).

Dentist – teeth will be checked and, if necessary, a filling can be given (action). This will reduce any pain for the patient (physical development).

Question 4(a)

The command verbs were 'identification' and 'explain'.

The majority of candidates were able to identify the professional support. The most common responses were:

- GP / Doctor

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- Counsellor

Candidates were also able to explain the support that could be given. Where candidates fell down was in their ability to explain how this support could help Isabel to cope. Some had not read this part of the question.

A few candidates had given family and friends as the professional support.

Question 4(b)

The command verb was 'evaluate'.

This was an extended response question which is marked using levels of response marking bands which take into account the quality of written communication.

Some fantastic answers were seen here. The more able candidates were able to identify both positive and negative impacts on development, incorporating at least three aspects, and had addressed both Isabel and her children. These candidates had significant knowledge and had developed the capability of applying their underlying knowledge; Centres are to be congratulated in preparing their candidates.

The main error that occurred within this question was the candidate only addressing negative impacts upon development; this only enabled them to gain 4 marks – the lowest mark in level 2.

A913 01/02

There were no entries this series for this controlled assessment.

A914

General Comments

This externally assessed unit (A914) equates to 20% of the new specification. January 2010 was the first time students were examined on Safeguarding and Protecting Individuals. Centres were ambitious in delivering the unit over one term and to the responses seen suggest that candidates would have benefited from additional preparation time. The examination paper consisted of a combination of question styles involving identification, description and explanation. Despite all the questions being based on the specifications for the unit, some candidates' responses to the levelled questions were poor. There was, however, a reasonable range of attainment demonstrated by candidates. 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 and understanding. There were minimal numbers of 'nil responses'. There was little evidence to suggest that candidates ran out of time. The topics covered in this examination paper included legislation, infection control, COSHH, first aid, safety signs, ill treatment, security measures, fire safety and risk assessments, covering the breadth of the specification.

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

Making sure that candidates have sound understanding of the command verbs, for example, identify, explain, describe, evaluate.

Preparing candidates thoroughly for the examination by using revision exercises, tests and repetition of the topics covered 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 legislation and guidelines.

Comments on individual Questions

- 1 Candidates were required to identify two types of abuse that children could experience and this was generally answered well with most candidates gaining full marks.
- 2 Candidates were asked to name one piece of legislation that aims to keep children safe; very few candidates answered this correctly with many candidates giving 'Every Child Matters' as their answer. Other answers included, 'help lines', 'social workers' and even more obscure answers such as 'must not be left alone'.
- 3 The command word in this question was explain; many candidates were able to identify **how** to prevent the spread of infection, for example wearing disposable gloves or washing hands, but were unable to give explanations as to **why** it would prevent the spread of infection. As a result, few candidates were able to achieve both marks for this question.
- 4 This question required candidates to identify three pieces of information that should be given when calling the emergency services; candidates also had to explain why each piece of information is important. Most candidates answered this question well, which enabled them to achieve full marks.

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- 5 Candidates were required to name one hazardous substance - most candidates answered this correctly and a common answer was 'bleach'.
- 6 This question was answered poorly in the main. The correct answer to the question was:
A sign - something a first aider or casualty can look at/ see/observe
A symptom - something a casualty can feel
- 7 Question seven required candidates to give two ways a first aider should monitor a casualty whilst waiting for an ambulance. There were many correct answers given by candidates such as 'monitor airways', 'check breathing', 'check pulse' and 'check levels of consciousness'.
- 8 Candidates were required to describe one first aid action that should be carried out on a person who has fainted. From some of the answers given there was evidence that candidates did not understand fainting; therefore, many answers were inappropriate such as 'put ice on her forehead', 'if she's still not breathing after 5 minutes, carry out CPR', and 'abdominal thrusts'. The command word for this question was describe, but few candidates used a complete phrase or a full sentence, which led to some candidates not being awarded both marks.
- 9 This question required candidates to identify three safety signs and the majority of candidates were able to achieve the three marks. Some candidates abbreviated their answer and therefore lost marks, for example, some candidates wrote 'exit' or 'way out' rather than the correct answer 'fire exit'. Some candidates appeared to simply guess at the correct answer by stating 'forbidden', 'danger' and 'no lighting matches'.
- 10 This was the first of the extended response questions marked using levels of response marking bands which take into account the quality of written communication. This was a quality response answer and in order to achieve 5 marks for Level 3 candidates needed to give a detailed description of at least two effects on the ill treatment of a person using a care service. The question received a mixed response; some candidates simply repeated the question rather than describing the effects on the person using the service.

An example of an acceptable answer could have been:

'Because Dennis has poor mobility he has to rely on the staff getting him safely off the toilet, but the staff are too busy so Dennis has to sit there for long periods getting cold and feeling frightened. Dennis might try getting himself off the toilet and might fall and cause himself an injury. Dennis will be feeling upset by the lack of care or might even feel angry that he is left for long periods. Dennis might not want to go the toilet and become withdrawn in the nursing home'.

- 11 The focus of this question was for candidates to identify three security measures for a nursing home. Candidates were also required to explain the importance of each measure. Whilst the majority of candidates correctly identified the security measures, not all could explain the importance and gave vague answers such as 'it would keep residents safe' or 'so residents cannot escape'. The biggest challenge with this question was that candidates did not appear to understand the difference between safety and security. Many candidates therefore based their answers on safety and gave irrelevant answers about 'having more staff to look after residents', 'child gates', 'ramps and stair-lifts', and 'fire alarms'. Candidates were not required to talk about safety measures.
- 12 This was a levelled question and stimulated a good range of answers with most candidates being able to explain what should be done to ensure a safe working environment in a bathroom in a care setting. The actual detail varied, but overall candidates produced some

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excellent answers that were relevant and a high standard. Some candidates achieved marks at Level 3 but the majority achieved marks at Level 2.

- 13** Candidates were required to explain how using fire safety procedures helps to reduce potential risks in care settings. The focus of this question was for candidates to demonstrate their knowledge about how fire safety procedures help to reduce potential risks. Many candidates appeared to misread the question. Some candidates gave vague answers such as, 'so that staff know what to do' and 'to get people out quickly and safely'.

An example of an acceptable answer could have been:

'Having a regular fire drill could be used so that both staff and service users know where the meeting point is, this is important in the case of a real fire because people need to know how to get out of the building safely. Also there should be nothing blocking fire escapes otherwise people might get trapped by the fire. Staff should be regularly trained to keep up with legislation and there should be fire notices so that people know where the fire exits are.'

- 14** This question required candidates to state two actions when dealing with a water spillage. Most candidates answered this question well and therefore gained full marks.

- 15** This question achieved the intended differentiation. Some candidates were able to evaluate as per the command word, making sound links about the impact of risk assessments in the workplace. Weaker candidates failed to read the question and simply talked about using the five steps of risk assessments.

An example of an acceptable answer could have been:

'One impact of having a risk assessment in the workplace is that staff and service users have the right to be protected and kept safe from harm. If the staff know what the dangers are, they can put risk assessments in place and this would help reduce accidents or injury. Also it might reduce the amount of cases going court and this would help save employers money. Finally, staff and service users would feel more confident knowing that the workplace was safe'

- 16** This levelled response question again 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.

Grade Thresholds

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Health and Social Care (Double Award) (J406 J412)
January 2010 Examination Series

Unit Threshold Marks

Unit		Maximum Mark	A*	A	B	C	D	E	F	G	U
A911	Raw	60	54	48	42	36	30	24	18	12	0
	UMS	90	81	72	63	54	45	36	27	18	0
A912	Raw	60	54	48	42	36	30	24	18	12	0
	UMS	60	54	48	42	36	30	24	18	12	0
A914	Raw	60	54	48	42	36	30	24	18	12	0
	UMS	60	54	48	42	36	30	24	18	12	0

Specification Aggregation Results

Overall threshold marks in UMS (ie after conversion of raw marks to uniform marks)

Single Award J406

Qualification	Max UMS	Qualification Grade									U
		A*	A	B	C	D	E	F	G		
GCSE (Single Award)	150	135	120	105	90	75	60	45	30	0	

Double Award J412

Qual	Max UMS	Qualification Grade															UU
		A*A*	A*A	AA	AB	BB	BC	CC	CD	DD	DE	EE	EF	FF	FG	GG	
GCSE (Double Award)	300	270	255	240	225	210	195	180	165	150	135	120	105	90	75	60	0

Aggregation is not available until June 2011.

For a description of how UMS marks are calculated see:

<http://www.ocr.org.uk/learners/ums/index.html>

Statistics are correct at the time of publication.

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