

Cambridge Technicals Level 3

Health & Social Care

05830-05833 & 05871

Unit 3 Health, Safety and Security in Health and Social Care

OCR Report to Centres June 2018

About this Examiner Report to Centres

This report on the 2018 Summer assessments aims to highlight:

- areas where students were more successful
- main areas where students may need additional support and some reflection
- points of advice 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.

The report also includes links and brief information on:

- A reminder of our **post-results services** including **reviews of results**
- Link to **grade boundaries**
- **Further support that you can expect from OCR**, such as our CPD programme

Reviews of results

If any of your students' results are not as expected you may wish to consider one of our Reviews of results services. For full information about the options available visit the [OCR website](#). If University places are at stake you may wish to consider priority service 2 reviews of marking which have an earlier deadline to ensure your reviews are processed in time for university applications: <http://www.ocr.org.uk/administration/stage-5-post-results-services/enquiries-about-results/service-2-priority-service-2-2a-2b/>

Grade boundaries

Grade boundaries for this, and all other assessments, can be found on the [OCR website](#).

Further support from OCR



Attend one of our popular CPD courses to hear exam feedback directly from a senior assessors or drop in to an online Q&A session.

<https://www.cpdhub.ocr.org.uk>

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Unit 3 Health, Safety and Security in Health and Social Care

1. General Comments:

The candidates appeared to have sufficient time to answer all the questions on the paper in full. There were few non-responses with most candidates attempting all questions. The majority of candidates used the available space on the question paper. When candidates' answers were continued on the additional sheets they did not always clearly indicate this on the question paper and should be encouraged to do so.

The paper differentiated well between candidates. In general, those who scored well wrote with clarity and precision. They also were able to apply the concepts of health, safety and security to practice scenarios. Those who scored less well were often able to use some of the key terminology but were not able to explain the concepts or apply them to practice scenarios.

2. Comments on Individual Questions:

Q 1(a)

The question required candidates to identify two safeguarding procedures. DBS checks and security measures were the most frequent correct responses given. There were few references to having a named person responsible for safeguarding or the recording and reporting of staff concerns of abuse. This may indicate that candidates have a general understanding of health, safety and security but lack a clear understanding that safeguarding relates to protecting individuals from the risk of abuse and harm. A significant number of candidates incorrectly identified procedures relating to data protection or confidentiality. Centres should ensure that candidates are better informed about the precise meaning of safeguarding and how it relates to practice.

Q 1 (b)

The question required candidates to identify a working practice and explain how this could be a hazard to a care practitioner in a care home. The most frequent correct working practice identified was long working hours and candidates were able to give a good explanation of how this could be a hazard for a care practitioner. Some candidates did not identify a working practice correctly but were awarded marks if they gave a working practice within their explanation, for example, the practitioner could be injured when caring for residents if they were not trained in manual handling.

Q 1 (c)

Candidates were required to identify a policy, which related to the practice scenario given in the question. The majority of candidates did not score well as they either named legislation or described procedures. Centres should ensure that candidates have a sound understanding of

the distinction between legislation, policies and procedures, i.e. legislation sets out the laws, which must be followed, such as *The Health and Safety at Work Act 1974*. Policies are developed at management level and set out the procedures, which must be followed in practice to ensure legislation is being adhered to, such as a 'personal care policy'. Procedures are specific actions such as 'washing hands before and after providing personal care'.

Q 1 (d)

Candidates were required to identify three actions staff should take when a resident in a care home goes missing. This was answered well with the majority of candidates identifying three actions without repetition and therefore achieving full marks. Candidates were aware of the need to respond proactively to the incident by reporting the resident missing, searching for them and informing the next of kin.

Q 1 (e)

This question differentiated well. Candidates were required to analyse the types of hazards, which could be encountered in a public environment. To achieve level 3 candidates were required to identify types of hazards, such as environmental or chemical hazards and give examples related to the public environment. For instance in a park, residents may be exposed to environmental hazards such as uneven surfaces which could cause them to trip and injure themselves. When candidates were clear about what might constitute a hazard, there were some excellent and creative responses. The majority of candidates were able to give examples of hazards but were unable to classify their examples into types of hazard and therefore were awarded level 2. Those who did not score well gave examples, which were not especially relevant to the public environment identified.

Q 2 (a)

Candidates were required to describe three responsibilities that an employer in a hospital has due to the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR 2013). Common correct answers included the requirement to report diseases/accidents/ injuries, carry out risk assessments and train staff. The majority of candidates did not appear to have a detailed understanding of the legislation but were able to score some marks by giving one or two simplified descriptions.

Q 2 (b)

This question required candidates to analyse how the Control of Substances Hazardous to Health (COSHH) Regulations 2002 promotes health and safety. To achieve level 3 candidates were required to make explicit reference to the regulations and how they are implemented in practice. Few candidates scored highly as the majority were only able to make general references to following policy when handling hazardous substances, with little detail given regarding specific procedures, such as disposing of waste in the correct colour coded bin. The most frequently credited responses related to the safe storage of cleaning products and the use of personal protective equipment (PPE).

Q 2 (c)

To score highly on this question, candidates were required to provide a detailed explanation of two consequences for the owner of a private nursery in the event of a child being injured. The majority of candidates understood that due to a risk assessment not being carried out, the owner would be held responsible. Most were able to give a sound explanation of the consequences including job loss or being sued. Candidates were awarded marks for the quality of their explanation rather than for a list of consequences. Centres should ensure that candidates know that they must explain one consequence in detail to gain full marks for these kinds of questions.

Q 2 (d)

Candidates were required to describe two actions a first aider should take when a child is seriously injured. Most candidates gained some marks and appeared to have a good understanding of the responsibilities of a first aider. Not all candidates were able to describe the action in sufficient detail to be awarded the additional mark. Centres should ensure that candidates know they must describe one action in detail to gain full marks for these kinds of questions.

Q 3 (a)

This question required candidates to explain the features of a fire safety policy, which should be included in a policy for a care home for adults with disabilities. The majority of candidates demonstrated good general knowledge about fire safety procedures. They appeared to be well-versed in the procedures for evacuation and the features that a building should have to minimise the spread of fire. To achieve level 3 candidates needed to relate their answer to the question: many described fire evacuation procedures but not in relation to what should be included in the policy, in particular relating to reducing the risk of fire breaking out. Additionally, very few candidates recognised the need for special procedures, which would need to be in place, which were explicitly related to the setting and the potential limited mobility or capacity of residents.

Q 3 (b)

Candidates were required to explain one responsibility the residents have for fire safety. Those who scored well understood that in the event of a fire alarm sounding that residents should follow staff instructions in order to keep themselves and others safe. 'Evacuating the building' was not credited, as this was too vague and not accurate in this context. Few candidates gave an example relating to the residents' responsibility for preventing fires.

Q 3 (c)

To achieve level three on this question candidates were required to provide a detailed explanation of the consequences of not following food safety procedures for the individual and the care worker. The explanation needed to include detail about how the consequences arise, for instance the individual could lose trust in their care worker if they got food poisoning due to

eating out of date food. The majority of candidates did not include an explanation of sufficient depth to achieve level 3. However most candidates were able to provide a sound explanation of consequences for both the care worker and the individual and were therefore able to achieve a level 2.

Candidates appeared to be well prepared for this question suggesting that they had undertaken some practice questions. Centres should ensure that candidates tailor their responses very carefully to the question asked rather than to provide their answer as practiced.

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