

Examiners' report

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KS4 PERFORMANCE TABLES

OCR Level 1/Level 2

Cambridge National in
Health and Social Care

J835

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R032 Summer 2025 series

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Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates.

The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. A selection of candidate responses is also provided. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

A full copy of the question paper and the mark scheme can be downloaded from [Teach Cambridge](#).

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R032 series overview

Most candidates attempted all questions with very few 'no responses' seen. This indicated that candidates made good use of time and pace in answering.

Many candidates were well prepared for this paper and showed knowledge of the topics covered such as non-verbal communication skills, privacy and patience. However, some candidates had gaps in their knowledge and answers showed a lack of familiarity with these topics.

Some candidates had typed their responses, and it was evident that they often gave responses that were too short, or too long and detailed, writing everything they knew about a topic. It is recommended that candidates keep in mind the size of the answer space provided on the exam paper as this is an accurate guide as to how long a response needs to be and to be aware that the time allowed is designed to give students approximately one minute per mark plus reading time.

Candidates who did well on this paper generally:	Candidates who did less well on this paper generally:
- understood the demands of different command verbs, e.g. describe, explain, identify - structured their answers to level of response questions which allowed for well organised, focused answers - were able to develop their explanations to give detailed answers - showed an understanding of the benefits of an advocate Question 3 (b) - applied their answers to the context or scenario provided - were aware of the difference between and definitions of safety procedures and safety measures.	- repeated the question within their answer without adding any additional detail, e.g. stating protects from harm and abuse in Question 3 (c) or referring to safety in their definitions on Question 6 (a) - misunderstood the demands of command verbs - confused special methods of communication with non-verbal communication skills - repeated information when asked for 'ways', 'reasons' and 'benefits' and did not gain marks for the repeats - mixed up PPE and general cleanliness with personal hygiene Question 6 (b).

Question 1 (a)

1 Beth, aged 65, is leaving hospital following surgery for a knee replacement. A nurse helps Beth to get dressed and provides information about other professionals who will be able to offer support once she is home.

(a) State how the nurse could apply the person-centred value of **privacy** when helping Beth get dressed.

..... [1]

Generally, well answered by many candidates with common correct answers referring to pulling a curtain round the bed or shutting the door.

Most achieved a mark, although some did not when they wrote 'leave the room'. These candidates had misread the question, which was about helping Beth get dressed, so leaving the room is not a correct answer.

Question 1 (b)

(b) Describe **two** ways that professionals who provide support to Beth can maintain her right to **confidentiality**.

1

.....

.....

.....

2

.....

.....

.....

[4]

Good response overall. Many candidates were able to mention key words, for example, 'need to know' 'not gossiping' 'password protected files' but were not able to follow this with a description of why it is undertaken.

Many still put 'locked away' which is a vague response.

Some candidates confused privacy with confidentiality and gave incorrect answers which linked to Question 1 (a) about getting dressed.

Question 1 (c)

- (c) Beth lives alone in a house that has an upstairs bathroom. Her bedroom is also upstairs. Before she leaves hospital, she will meet with professionals to discuss her needs and how they will be met.

Explain **two** benefits to Beth when her rights of **choice** and **consultation** are maintained:

Choice
.....
.....
..... [2]

Consultation
.....
.....
..... [2]

In response to this question many candidates gave examples of how choice and consultation could be achieved. However, as the question asked for the benefits to Beth when her rights of choice and consultation were maintained these could not be given. This may be indicative of candidates not reading the question in detail or not fully understanding the requirements of the question.

Some candidates gave repeat answers for both sections.

Question 2 (a)

- 2 Amit has started work in a hospital as a nurse on the children's ward. In his induction he learned about communication skills and special methods of communication.

One of Amit's young patients has hearing loss.

- (a) Describe a special **method** of communication Amit could use to support this patient during a consultation.

.....

.....

.....

..... [2]

The most common correct answer was sign language with some candidates being able to achieve two marks for describing this. Many were able to identify a special method of communication, but could not describe, showing a lack of understanding of the command verb.

OCR support



Attention must be paid to the command word which on this question was 'Describe'.

[Command words used in Cambridge Nationals.](#)

Question 2 (b)

- (b) Discuss the **benefits** of using **non-verbal** communication **skills** when meeting the patient with hearing loss.

Your answer should include:

- **three** examples of non-verbal communication skills
- the benefits to the patient.

[8]

This question elicited mixed responses from candidates. Where understanding of non-verbal communication skills was shown candidates were able to access the full range of marks.

However, there was confusion among candidates between non-verbal skills and special methods with many responses discussing sign language, Makaton and even Braille alongside other alternative communication methods that were not relevant to the question (writing things down/using the internet, etc), – which limited the marks that could be given.

Exemplar 1

1. Gestures, gestures are movements with peoples hands that help to suggest what someone is communicating about. If the patient has hearing loss they will be used to watching peoples movements so gestures will help them understand and become more confident in the care they are receiving.
2. Body language, In a health or social care setting body language is very important. This is because positive body language such as facing the patient whilst speaking or ~~stai~~ having good posture shows that the service provider/practitioner is showing an interest in ~~to~~ the patients care. This makes the patient feel empowered because they can trust and open up to the service providers without feeling judged.
3. Facial expressions, When communicating and meeting with a patient with hearing loss facial expressions are very important. Some deaf people look to read lips or watch your expressions to see if they understood what the provider/practitioner said properly. For example ^{le} smiling when there is good news about their care. This makes the patient fully understand ~~their~~ ^{and} their treatment, instilling confidence.

Exemplar 1 shows a Level 3 thorough discussion.

It is well structured with three examples of non-verbal communication skills clearly stated at the start of each paragraph. Examples are given of each of these skills, and these are then discussed and relevant to the patient with hearing loss.

Assessment for learning



A context/scenario-based question must relate to or be relevant to the given scenario rather than just a generic response that could relate to any situation. It is not just factual recall.

For example, a response could reference using non-verbal communication skills such as gestures to point to information or diagrams such as X-rays, this will give clues as to the content of the conversation which increases understanding for the patient with hearing loss.

Question 2 (c)

(c) Amit also learned about safeguarding during his induction.

Tick **three** of the following statements, identifying those which Amit should follow if he has any safeguarding concerns.

Being aware of his duty to report a serious concern.	
Discussing his concerns with parents/guardians.	
Knowing the care setting's procedures for reporting a disclosure of abuse or serious concern.	
Knowing who to report any concerns to.	
Only reporting a serious concern if you see the incident.	

[3]

Well answered with most candidates being given the full three marks.

Most candidates only ticked 3 boxes and there were no NR's.

Question 3 (a) (i)

- 3 Henry, aged 25, has previously experienced abuse. He is homeless and vulnerable. He is attending a mental health support session with his advocate.

Homeless people will often need to be safeguarded.

(a)

- (i) Identify **two** other **service users** who may need to be safeguarded.

1

2

[2]

Well answered with many candidates being given two marks.

Most correct answers referred to children and disabled people.

Where candidates were given only one mark this was for responses such as the inclusion of elderly without the required 'in residential care/with care needs.' Also, quite a few missed marks for vague answers of vulnerable/young people.

Question 3 (a) (ii)

- (ii) State **one** reason, other than being homeless, why Henry may need to be safeguarded.

..... [1]

Well answered with many responses identifying previous abuse as a reason for safeguarding, with mental health condition coming second. A few missed marks for just saying he is vulnerable or repeating the question and saying he needs protecting from harm and abuse.

Question 3 (b)

(b) Describe **two benefits** for Henry of using an advocate.

- 1
-
-
-
- 2
-
-
-

[4]

There was significant lack of knowledge evident in many responses to this question regarding the role of an advocate. Many responses focused more on a role suited to a support worker or counsellor. There was also widespread misunderstanding of the question with many candidates describing a role rather than focusing on the benefits to Henry as the question requested.

Exemplar 2

- 1 The advocate will be able to aid Henry in communicating any concerns or opinions that he may not be able to state himself.
- 2 The advocate can be present to clarify and further explain a situation to Henry so that he is aware what is happening so that he is not being taken advantage of.

[4]

Exemplar 2 shows an example of a good, full mark response for Question 4 (b).

Benefits to Henry of using an advocate have been identified with further description provided of this benefit.

Question 3 (c)

(c) Henry has a right to be protected from harm and abuse.

Explain **two** ways that Henry will **benefit** from this protection.

1

.....

.....

.....

2

.....

.....

.....

[4]

Most candidates were able to achieve two to three marks for how Henry will benefit with very few achieving the full marks. Common responses included identification of the impact without further expansion, e.g. just giving 'feel safe' or 'empowered' or 'improve mental health'.

Question 4 (a)

4

(a) **Commitment** and **compassion** are two of the **6Cs**.

Describe how a **nurse** could apply these **two** qualities to patients in their care.

Commitment

.....

.....

.....

.....

Compassion

.....

.....

.....

[4]

Very few candidates achieved the full four marks with many providing generic descriptions of what would be expected of a nurse in a day-to-day role, rather than providing specific examples of commitment and compassion. (e.g. turn up on time, give correct medicine etc).

Many candidates were able to achieve two marks with few having sufficient expansion for further marks.

Compassion seemed to be better answered than commitment.

Common correct answers:

Commitment – staying after shift to follow up concerns, working to the best of their ability.

Compassion – showing of empathy when receiving bad/sad news, showing sympathy, comforting them. For compassion there were some incorrect answers around overfamiliarity with patients.

Question 4 (b)

(b) For each of the following, identify **two** possible effects on **service users'** health and wellbeing if the person-centred values are **not** applied.

Emotional effect

1

2

Social effect

1

2

[4]

Most candidates had a good understanding of the effects if person-centred values are not applied. There were some repeat responses for emotional and social with some candidates muddling up the two. Most candidates were able to achieve some marks, although few achieved 4.

Many were able to identify basic emotional effects such as anxiety, depression, angry, stressed, etc. However vague answers provided for social impacts sometimes used informal language for example, 'not reach out for help' 'become distanced' 'not have any friends' which were not given.

Question 4 (c)

- (c) Explain how the person-centred values of **individuality** and **independence** can be applied by staff working with **older adults** in a residential home.

.....

.....

.....

.....

.....

..... [6]

There were mixed responses to this question but often limited with candidates struggling to distinguish independence from individuality. This often led to repetition which resulted in many responses not achieving more than Level 1 or low Level 2.

Some candidates discussed choice repeatedly for both individuality and independence which limited marks that could be given.

Several candidates provided a discussion about benefits of these values rather than how they can be applied.

Those that did achieve Level 3 produced some exceptional responses that demonstrated a full understanding of both terms.

Exemplar 3

Individuality can be applied by giving each person in the care home personalised care regarding their own choices and desires. Also recognising different personalities can provide a feeling of individuality to older adults through ^{individualised} relationship with staff. People may also have different cultures and beliefs ~~for example~~, which may require additional needs for example, dietary requirements or just food preferences. Providing them with this ensures individuality. Independence can be applied by staff through giving older people their own freedom to do activities on their own and also doing simple tasks like getting dressed on their own if they wish to. Respecting their own choices of independence is important. Staff should prevent patronising older people which will prevent feeling of independence. It can also be applied through giving residents their own free time without the constant requirement of staff when safe to [6]

Exemplar 3 is a Level 3 response. The candidate has provided a thorough explanation of both individuality and independence. They have used appropriate terminology and made many relevant, developed points.

Question 5 (a) (i)

5

(a)

(i) Patience is a **verbal** communication skill.

Describe **two** ways patience can be applied when working with **older people** who need support.

1

.....

.....

.....

2

.....

.....

.....

[4]

A full range of answers from the mark scheme were seen on this question.

Candidates who did not gain marks tended to write about situations where patience would be required rather than how it could be applied or repeated answers such as give time or not rush them.

Question 5 (a) (ii)

(ii) Apart from patience, identify **three** other **verbal** communication skills.

1

2

3

[3]

Three marks were frequently given with tone, volume and pace most seen.

Some confusion with some responses where candidates did not seem sure of verbal communication versus non-verbal communication with incorrect answers commonly being body language, facial expressions or gestures.

Question 5 (b)

(b) Active listening is an important part of communicating.

Identify **two skills** used in active listening and a different **benefit** of using each one.

Skill

Benefit

.....

Skill

Benefit

.....

[4]

There was some confusion evident in this question between active listening and non-verbal communication skills with several candidates listing the latter, e.g. body language/facial expressions/gestures. Despite this, four-mark responses were quite common.

Question 6 (a)

6

(a) Outline the meaning of the following terms.

Identify **one** example of each.

Safety procedure

Meaning

.....

..... [2]

Example [1]

Safety measure

Meaning

.....

..... [2]

Example [1]

Most candidates were given two or three marks with evacuation/fire drill and wet floor sign being the most common responses. Many candidates did not know the difference between a procedure and safety measure. Accurate meaning of safety measure was rarely seen with many responses referring to security measures.

Assessment for learning



Mix and match exercises could help with understanding the difference between a security measure and safety procedure/measure.

A three-column table with the content from 4.3 and 4.4 of the specification mixed up in the left column, e.g. emergency procedure, warning signs, identifying staff and in the middle column students indicate whether it is a safety procedure/measure or security measure and in the right hand column give an example, e.g. identifying staff, security measure, ID lanyards.

Question 6 (b)

(b) Explain **one** way that **personal hygiene** measures protect the health and wellbeing of **service users** within a health care setting.

.....

.....

.....

..... [2]

Mixed responses with generic responses given one mark for describing the impact of good personal hygiene without naming a specific practice. Evidence of confusion between personal hygiene and other infection prevention and control measures such as the use of PPE and general cleanliness.

Question 6 (c)

(c) Complete the following sentence.

Use **four** different terms from the list.

barrier disposable gloves dressings face masks safety

Personal Protective Equipment is one way to prevent the spread of infection in a health and social care setting. An example of this is They are used as a that prevents droplets being released. It is important that employees wear protective when carrying out operations and surgical procedures. By doing this it will reduce the risk of the spread of infection and ensure patient [4]

Majority of students scored at least 2 for barrier and safety. Disposable gloves was the answer often missed out – usually dressing was given in its place. Occasionally face marks and disposable gloves were the wrong way around.

There were virtually no NR's.

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