

Examiners' report

CAMBRIDGE TECHNICALS LEVEL 3 (2016)

HEALTH AND SOCIAL CARE

**OCR Level 3 Cambridge Technical
in Health and Social Care**

Certificate: 05830

Extended Certificate: 05831

Foundation Diploma: 05832

Diploma: 05833

Extended Diploma: 05871

Unit 6 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. 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](https://www.teachcambridge.org/).

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Unit 6 series overview

The question paper required candidates to understand personalisation and ways to deliver person-centred care. This knowledge and understanding was tested through short response questions, and extended responses. All the extended response questions asked candidates to show application of their knowledge, some linked to scenarios.

Candidates were required to recall some information and apply that as well as responding to shorter fact recall questions.

Many candidates attempted all the questions, although there were a few scripts where candidates provided no responses, and a few who wrote comments to the examiners about their experiences of this qualification. It appeared that few candidates ran out of time and there were many who extended their responses onto extra paper. If doing this, candidates must be encouraged to write the number of the question next to their response on every extra page to avoid confusion.

A few candidates misread the questions especially Question 3 (b) and wrote extensively about review meetings, despite the question asking not to. A few candidates chose the wrong tool for Question 2 (d) (i) but where the wrong tool had been given the evaluation of how that tool could be used to enhance voice choice and control was allowed. Other candidates ignored the command verb evaluate and wrote one sided response: mainly of positive points.

The phrase 'voice choice' and 'control' - either together or separately was used extensively by less successful candidates as a response for almost every question. This was a correct response to some questions, but candidates should be aware that it is not always relevant. It was clear that less successful candidates used some of the questions and phrases on the question paper as a basis for their responses which resulted in low marks.

The question paper allowed candidates to show the depth of knowledge and understanding of the principles of personalisation either theoretically or applied to settings and individuals. Good responses were used by candidates to explain and amplify points. Level of response questions tended to be at Level 2 as some candidates did not have a sufficient understanding of the command verb to reach Level 3. This was evident in Question 3 (b) where less successful candidates did not understand what was required for the command verb analyse. In Question 4 (a) responses from less successful candidates only addressed the positives rather than evaluating.

Candidates who did well on this paper generally:	Candidates who did less well on this paper generally:
- understood the requirements of the command verbs - could give appropriate examples - understood the key features of person-centred care - did not give repetitive responses - read the question carefully.	- did not read the questions carefully - did not attempt questions all the questions - had poor knowledge of person-centred care - could not give relevant examples to illustrate their responses or apply knowledge.

Question 1 (a) (i)

1

(a)

(i) A managed account is a key feature of personalisation.

Identify **one** advantage of a managed account.

.....
..... [1]

Many candidates responded to this question successfully; the most common response being avoiding stress.

Question 1 (a) (ii)

(ii) Identify **one** disadvantage of a managed account.

.....
..... [1]

This question was successfully responded too with the most frequent response being less independence.

Question 1 (b) (i)

(b)

(i) The aim of the Health and Social Care Act of 2012 is to improve the quality of care in health and social care settings. Describe **one** way the Act has done this.

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

Candidates knew the aims of this Act well and were able describe a way it has improved individual lives. A few candidates confused this with other Acts and wrote about budgets and the formation of the Care Quality Commission (CQC) which was the Care Act of 2008.

Misconception



A few candidates wrote about the formation of Clinical Commissioning Groups (CCGs). This did happen as a result of the Health and Social Care Act (2012) but they were abolished in 2022 and replaced by ICS (Integrated Care Systems). Although the original 2012 Act was not updated and still refers to CCGs, candidates should be taught about and referring to ICSs in their responses. Marks were given to any candidates who gave this as a response.

Question 1 (b) (ii)

- (ii) The Care Act of 2014 enables carers and individuals to be in control of their care and to have voice, choice and control. Identify **one other** right individuals and carers have because of this legislation.

.....
 [1]

Many candidates gave successful responses to this question including the use of advocates and information and guidance. A few candidates wrote the word 'support' as their response. This was not given without qualification, for example 'support to remain in your own home'.

Question 1 (b) (iii)

- (iii) Self-assessment of needs is a feature of personalisation.

Tick (✓) **three other** key features of personalisation.

Feature of personalisation	Tick (✓)
Changing role of professionals	
Coproduction	
Focusing on deficits	
Medical model of care	
Personal budgets	
Treating everyone the same	

[3]

Most responses were correct to this question.

Question 1 (c)

- (c) Identify **one** role of a Local Authority, **other than personal budgets**, in delivering personalisation.

.....
..... [1]

Most candidates gave successful responses to this question, the most frequent being 'assessment'. When the command verb is **identify**, it is not necessary to provide a description or explanation.

Question 2 (a)

- 2 Jane is 63. She has some physical difficulties and finds walking hard. She lives at home and has carers who visit every day to help her with daily tasks. She is finding it difficult to walk outside and socialise. Sometimes Jane does not feel in control of her care.

- (a) Explain **three** reasons why a person-centred review meeting is important for Jane.

1
.....
.....
.....
2
.....
.....
.....
3
.....
.....
..... [6]

Less successful responses to this question tended to be repetitive. Candidates needed to give three different reasons, for example, 'sharing information about Jane from her care team' and then explaining why this was important for her; for example, 'allowing collaboration and co-production to meet Jane's needs and help her to regain control'.

Exemplar 1

- 1 To identify any changes that need to be made to her care plan. This is important to ensure that all her needs are being met.
- 2 To ensure her personal budget is meeting her care needs. This is important because if it's not then her personal budget may need increasing to ensure her needs can be met.
- 3 To make sure that the person who is providing care to Jane is doing so effectively and if not then a change of practitioner will be needed to ensure Jane is receiving personalised care. [6]

This response was given full marks of 6. There are three clear reasons each with a different explanation that relates specifically to Jane and her needs.

Exemplar 2

- 1- A person-centred review meeting is important for Jane because it helps her to feel empowered if she is in a meeting about herself and having people to listen to her needs, it also means that she gets the care she needs and wants
- 2- A person-centred review meeting is important for Jane because it gives her choice and control over her own care which is something she felt like she wasn't getting.
- 3- A person-centred review meeting is important for Jane because it will increase her mental health and self-esteem which will be slowly decreasing because she never goes outside to socialise. But feeling in control will increase her mental health and self-esteem.

This response did not provide three different reasons or a clear explanation of all three and was given 3 marks.

Question 2 (b)

(b) Describe **two** ways the facilitator would ensure that Jane is at the centre of her person-centred review meeting.

- 1
-
-
-
-
-
- 2
-
-
-
-
-

[6]

A few candidates were unsure of the role of a facilitator in a meeting. Two different ways needed to be described; the most common response was 'giving Jane the choice of time/location of the meeting' or 'listening to Jane'. The initial response then needed expanding into a description. For example, 'listening to Jane and asking her questions to clarify her feelings about her care so that the care plan can be more personalised'.

Question 2 (c)

(c) State **two** questions a facilitator could ask at Jane's person-centred review meeting.

- 1
-
- 2
-
- [2]

Many candidates were able to give two suitable questions to ask Jane although in less successful responses the questions were repetitive.

Assessment for learning



Questions that can be asked at a review meeting do not need to be complicated – often the simplest work best such as 'What is working?' or 'What is not working?'.

Question 2 (d) (i)

(d)

(i) Identify **one** person-centred tool that will enhance Jane's voice, choice and control.

Tool [1]

Many candidates found this question difficult as they could not correctly identify a tool from the specification teaching content that enhances voice choice and control. Acceptable responses were 'communication charts', 'decision making charts' or 'building effective relationships'. A variety of other tools were identified and marked incorrect.

Question 2 (d) (ii)

(ii) Evaluate how the tool may or may not help Jane.

.....

.....

.....

.....

.....

..... [6]

Those candidates who identified the correct tool and evaluated that tool, scored well. Candidates who had the wrong tool but could relate it to enhancing voice choice and control were given some credit. Many candidates missed the command verb evaluate and produced only positive points which limited marks that could be given.

OCR support



For a full list of command verbs and how to apply them [click here](#).

Question 3 (a)*

3

(a)* Discuss **two** challenges of delivering person-centred care.

.....

.....

.....

.....

.....

..... [8]

This question required candidates to choose two challenges of delivering person-centred care and then discuss how those challenges may prevent person-centred care being given to an individual. Solutions to the challenges were not required. Many candidates had given relevant challenges, the most common being 'staff training' and 'resistance to change'. However, the discussion of how these may affect care was often less successful. The response did not require emotional effects to be discussed. A few candidates wrote about more than two challenges and as a result the depth of their response was limited reducing marks that could be given.

Exemplar 3

One challenge of delivering person-centred care is the institutional practices that have been put in place. For example, the medical model of ~~care~~ ^{care}. This is the idea that 'doctors know best' and that the individual receiving care has no say in their own care. This is a challenge to delivering person-centred care as the individuals have lack of voice, choice and control over their own care which can be disempowering and result in an individual not getting the best possible care tailored specifically to their wants and needs.

A second challenge is focusing on deficits rather than capabilities. This is a challenge in delivering person-centred care as focusing on an individual's weaknesses for example a lack of mental capacity, may mean that they may treat the individual as if they cannot make decisions for themselves, and giving them less or no voice, choice and control when it comes to their care instead of looking at what they are capable of. This then results in a person-centred approach not taking place [18]

This response is Level 3 achieving 7 marks out of 8. It has two very clear challenges for delivering personalised care which are among those listed on the specification – 'institutional practices' and 'focussing on deficits'. Each challenge is discussed with subject-specific vocabulary and is clearly understood by the candidate.

Question 3 (b)*

(b)* Regular review of support provided for individuals is one method of overcoming challenges to person-centred care.

Analyse **other** ways these challenges can be overcome.

.....

.....

.....

.....

.....

..... [9]

A few candidates misread the question and wrote about 'review meetings' which was not given. In many responses the ways to overcome challenges were appropriate, but the analysis was less successful and focused on positive aspects instead of both positive and negative aspects. This reduced marks that could be given. Value based recruitment and training were the most common ways analysed.

Question 4 (a)

4 Gabi is 18 and has physical disabilities which limit mobility and vision. Gabi lives at home and has carers for support as well as extra assistance at college. Gabi has physiotherapy three times a week to help her mobility. She has an assistance dog. Gabi enjoys sports and going out with friends and is going to university soon.

(a) Evaluate **one** way that the disability rights movement may have an impact on Gabi.

.....

.....

.....

.....

.....

..... [6]

Many candidates didn't recognise the command verb evaluate and wrote only positive points. Many candidates also misread the question and wrote about many ways instead of just **one**. As a result, responses were less successful and lacked depth. Many candidates wrote that the disability rights movement meant Gabi could go to school. This was not accepted, and no marks were given.

Question 4 (b)

(b) Match the following statements to each tool.

Statements:

- 1 Clarify roles and responsibilities
- 2 Enhance voice, choice and control
- 3 Resistance to change
- 4 What is important for/to a person

Complete the table below by putting a number in each row.

Each statement can be used once, more than once, or not at all.

The first one has been done for you.

Tool	Statement
Routines	4
One page profile	
Decision-making chart	
Doughnut chart	
Relationship circle	
Good days/bad days	
Communication chart	
Building effective relationships	

[7]

Many candidates attempted this question, and a full range of marks were given. A few candidates did not attempt to match all the statements in Question 4 (b) to the correct tools which limited the marks which could be given.

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