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# **EXAMINERS' REPORTS**

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**LEVEL 3 CERTIFICATE AND DIPLOMA IN  
HEALTH AND SOCIAL CARE**

**SUMMER 2019**

Grade boundary information for this subject is available on the WJEC public website at:  
<https://www.wjecservices.co.uk/MarkToUMS/default.aspx?l=en>

### **Online Results Analysis**

WJEC provides information to examination centres via the WJEC secure website. This is restricted to centre staff only. Access is granted to centre staff by the Examinations Officer at the centre.

### **Annual Statistical Report**

The annual Statistical Report (issued in the second half of the Autumn Term) gives overall outcomes of all examinations administered by WJEC.

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## HEALTH AND SOCIAL CARE

### Level 3 Certificate and Diploma

Summer 2019

#### UNIT 1: CONTEMPORARY ISSUES IN HEALTH AND SOCIAL CARE

##### General comments

The majority of candidates attempted all questions and there was no evidence of candidates being restricted by time.

It was evident that candidates had been prepared by centres for the external examination and the content of the specification had been covered.

Many candidates were restricted from achieving the higher mark bands by not responding to key commands, for example: *role* of informal care in question 1 (c) or *impact* of long-term health conditions in question 3 (c).

Many candidates were not concise enough in their answers and wrote far more than was necessary to answer the question. For example: question 2 (d) asked how *women* may experience inequality, rather than asking about inequality in general.

##### Comments on individual questions/sections

- Q.1**
- (a)**
    - (i)** The majority of candidates correctly defined discrimination.
    - (ii)** Some candidates did not use a scenario from the case study or explain how discrimination might be *experienced* by Michael (i.e. make him feel).
  - (b)** Candidates generally answered this question quite well, explaining two ways inequality might be experienced by Michael. Higher marks were achieved where correct terminology was also used.
  - (c)** This question was answered well by the majority of candidates.
  - (d)** Although candidates knew what demographic data was, they failed to reach the higher mark bands as answers often did not relate to *adults with disabilities*.
- Q.2**
- (a)**
    - (i)** Most candidates identified the correct answer confidently.
    - (ii)** A range of good reasons were given by candidates.
  - (b)** Higher marks were gained by candidates who described the role of both men and women in the home. Some candidates focused only on women.
  - (c)** Responses to this question were mixed. Candidates should focus on how men can be more involved in childcare. Many candidates focused on how women could delay starting a family.

- (d) Generally, candidates did not gain high marks for this question, although they wrote a great deal. Many did not focus on how *women* may experience inequality or only considered inequality in employment. There was very little use of health and social care terminology by the majority of candidates.
- Q.3** (a) Candidates were asked for *one* reason which they should have elaborated on. Many candidates gave several reasons with little explanation.
- (b) (i) Most candidates gave acceptable responses to the question.
- (ii) Most candidates explained two reasons well, although there was some repetition.
- (c) Most candidates identified two conditions, but then wrote far too much about the conditions themselves. They did not read the question fully and describe the *impact* of each condition on health and social care service provision.
- (d) Responses to this question were, on the whole, weak. Candidates identified appropriate legislation but did not discuss how this supported *older adults*. Many answers were generalised, and some candidates confused several different legislations.

### Summary of key points

- Candidates should read the questions carefully and respond to the command words. Practice questions and 'mock' examinations will assist candidates.
- Clear reference should be made to the scenario, where appropriate.
- To gain the higher marks, health and social care terminology should be used confidently throughout the longer questions.
- Candidates need to be more concise in their answers to the longer-response questions. Many candidates had used continuation booklets but had not referred to this by the relevant question on the paper, which can cause confusion. This practice should be avoided.

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#### **UNIT 2: CORE VALUES AND SERVICES**

##### **General comments**

Most centres submitted work on time with the correct paperwork. Authentication forms must be included with the sample and, where this was not the case, centres were contacted to rectify this.

The list of samples to be sent is now generated by the WJEC's internal assessment mark input system (IAMIS) and all centres sent in the correct sample.

The annotation of candidates' work aids the moderation process, but not all centres had annotated work or completed any assessor comments on the mark sheets.

Generally, candidates had attempted all the tasks and been prepared by centres for the assessment.

##### **Comments on individual questions/sections**

###### **Learning Objective 1:**

###### **Understand the principles that underpin care provision**

Candidates were able to describe the principles of care and give some examples. For the higher mark bands, appropriate examples should be taken from a wide range of health and social care settings. The 6Cs were identified and briefly explained by candidates, but examples were limited. To gain the higher marks, the 6Cs should be explained, using examples from within nursing and other NHS roles.

###### **Learning Objective 2:**

###### **Explain how services and practitioners meet individual needs throughout the life stages**

The four approaches to care planning were identified, with some explanation. However, many candidates did not include the role of the patient in the planning process. The stages of care assessment planning were described, but many candidates did not achieve mark band 3 because the work lacked detail. For higher marks, candidates must include eligibility criteria (NHS, NAET, CAF), the role of direct payments and the multi-disciplinary team. Reference to NICE and NHS guidelines on care plans should also be included. All candidates had attempted to produce a care plan for an individual and, in many cases, these were detailed and well presented.

###### **Learning Objective 3:**

###### **Understand the role of legislation and policies**

This section was generally weak. Candidates must identify key policies and legislation which are up-to-date and relevant.

For the higher mark band, descriptions should be detailed and links should be made to how legislation can reduce inequality for specific individuals. Many candidates had only described one code of practice and made little or no reference to the role of professional bodies. For mark band 4, candidates need to explain several codes of practice and laws and the role of professional bodies (NMC, GMC) in protecting patients and clients. The inspection purpose and process should be explained (Ofsted, CQC) and organisational policies and NHS standards of care included.

#### **Learning Objective 4:**

#### **Understand the relationship between current issues and trends and local, regional and national policy and legislation**

Responses to this section were very varied. There was evidence that some candidates had completed a great deal of research on service provision prior to the assessment and were able to explain current issues, patterns and trends in detail. For mark band 3, reference should be made to demographic data and appropriate reasoning should be included. Unfortunately, some centres focused on local service provision only which limited marks. In the final section, issues and trends can be focused on the candidate's local/regional area and should include present and future service provision. Again, many candidates did not achieve the higher mark bands as the work was descriptive, rather than an assessment.

#### **Summary of key points**

- Marking by many centres was generous, particularly within the higher mark bands. Centres should refer to their individual centre moderator's report for guidance.
- To gain the higher marks, candidates must provide detailed explanations and assessments, and use health and social care terminology throughout.
- Centres should suggest ways in which candidates can present a care plan for an individual. Some centres did this very well, while others lacked structure and professionalism.
- Candidates should be encouraged to research and prepare in detail prior to the assessment. It was evident in the candidates' work when they had been well prepared and this gave more opportunity to access the higher mark bands.

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#### UNIT 3: EMPLOYMENT WITHIN THE SECTORS

##### General comments

Centres submitted work on time with the correct paperwork, including authenticity forms.

The list of samples to be sent is now generated by the WJEC's internal assessment mark input system (IAMIS) and all centres sent in the correct sample.

It would be helpful if samples were hole-punched and treasury tagged and not in plastic wallets.

Some centres had not annotated their candidates' work nor completed any assessor comments on the mark sheets, which can make the moderation process more difficult.

Candidates had attempted all the tasks and had produced leaflets and presentations in line with the assessment brief.

##### Comments on individual questions/sections

##### Learning Objective 1:

##### **Investigate the main areas of employment in the health, social care and early years sectors**

All candidates had described statutory, private and third sector services and made some reference to the needs of individual service users. To gain the higher marks, candidates should refer to all areas of service user needs (PIES) and how needs might change. Work on the roles and responsibilities of individuals who work in the sectors was weak, with many candidates unsure of the difference between *roles* and *responsibilities*. However, some higher-achieving candidates had included reference to interaction between sectors and multi-disciplinary teamwork. In many cases, some – but not all – care skills and techniques used by practitioners were identified. Qualifications, training and career pathways need to be included for mark band 2.

##### Learning Objective 2:

##### **Examine the values and principles underpinning those who work within the sectors to meet the needs of individuals**

To achieve high marks, candidates should look at a wide range of organisations that regulate and inspect services and professions (CQC, NICE, Public Health England, Ofsted, Monitor). The role, purpose and day-to-day work of these organisations should be described. Many candidates limited their response to one or two organisations. Safeguarding was generally explained well, and many candidates included pre-employment checks. Ways in which safeguarding can be promoted, including toolkits, codes of practice and whistle blowing, were also included. Candidates were limited in their discussion of safeguarding by not referring to a wide range of care settings.

### **Learning Objective 3:**

#### **Design research to investigate how far the needs of individuals are met by local services**

Responses to this section were very varied. All candidates had attempted some kind of research and presented their findings, but justifications and evaluations tended to be weak. Candidates had generally identified appropriate concepts of research and suggested suitable methods of data collection. Some candidates used interesting methods of data collection, using technology. Data was usually presented in a suitable format, but many candidates did not analyse their findings which limited the marks awarded. The higher-achieving candidates evaluated the research methods used and commented on their effectiveness. The use of examples in their evaluations may aid the candidates to achieve mark band 4.

#### **Summary of key points**

- Marking by many centres was slightly generous, particularly within the higher mark bands. Centres should refer to their individual centre moderator's report for guidance.
- Centres should guide the candidates in their choice of practitioners to study. Some candidates were limited in the marks awarded because of the choice of inappropriate practitioners.
- Centres should also ensure that candidates research settings within health, social care or early years. Some candidates had chosen inappropriate settings to research and, again, limited the marks awarded.
- Candidates should be encouraged to use the speaker notes section on PowerPoint presentations and keep information on each slide succinct.
- Candidates do not need to include all their research; one copy of a questionnaire is sufficient.
- Candidates achieving the highest marks showed clear evidence of being well prepared prior to the assessment.



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#### **UNIT 4: EXPERIENCE OF DISEASE, ILLNESS AND DISABILITY**

##### **General comments**

Centres submitted work on time with the correct paperwork, including authenticity forms.

The list of samples to be sent is now generated by the WJEC's internal assessment mark input system (IAMIS) and all centres sent in the correct sample.

Most centres had annotated the candidates work and written assessor comments on the mark sheets which aided the moderation process.

Candidates had attempted all the tasks and had produced leaflets and presentations in line with the assessment brief.

##### **Comments on individual questions/sections**

##### **Learning Objective 1:**

##### **Understand different types of common disorders**

All candidates had described the causes, signs and symptoms of a disease, illness or disability listed in the specification. Most had also considered other causes such as inheritance, lifestyle and the environment. Investigative and diagnostic procedures for the condition were described and reference was made to referrals. Treatments relevant to the condition were described and how these treatments might be perceived by society was included. This section was completed very well by the majority of candidates.

##### **Learning Objective 2:**

##### **Explain the care management for an individual with a common disorder**

The seven stages of the care management process were described, and most candidates made some reference to the PIES of the individual with the chosen condition. Higher-achieving candidates included the roles and responsibilities of professionals involved in the process. Safeguarding was generally explained well, and many candidates included pre-employment checks. Ways in which safeguarding can be promoted, including toolkits, codes of practice and whistle blowing, were also included. Candidates were limited in their discussion of safeguarding by not referring to a wider range of care settings.

##### **Learning Objective 3:**

##### **Design research to investigate how far the needs of individuals are met by local services**

Candidates had attempted to research two services within their local community and had explained concepts of research, although justification of these was weak. Candidates had chosen a variety of methods for data collection and these were generally suitable. The presentation of data was good, but many candidates did not analyse the data very well and made very general observations, which limited the marks achieved.

Again, many candidates' evaluation of research methods lacked detail, and the effectiveness of the research methods used should be included to achieve the higher mark bands. A small number of candidates did not complete an evaluation, perhaps due to poor time management.

### **Summary of key points**

- Marking by some centres was slightly generous, particularly within LO3. Centres should refer to their individual centre moderator's report for guidance.
- Centres should ensure candidates are familiar with command words, such as *justify*, *analyse* and *evaluate* prior to the commencement of the assessment.
- Ethical considerations and confidentiality must be a priority for candidates when conducting research with individuals.
- Candidates should be encouraged to use the speaker notes section on PowerPoint presentations and keep information on each slide succinct.
- Candidates do not need to include all their research; one copy of a questionnaire or interview questions is sufficient.

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#### **UNIT 5: HUMAN BEHAVIOUR AND DEVELOPMENT**

##### **General comments**

Candidates and teachers should be congratulated for their preparation and interpretation of this new specification. The candidates' reports demonstrated that, in most cases, there was evidence of good understanding of the learning objectives.

Most centres submitted their work on time. A few centres did not complete the authentication sheets. The inclusion of an authentication sheet signed by both the candidate and the teacher is a formal requirement of this qualification.

It was pleasing to note that most candidates adhered to the recommended word count of 4,500 words, although a small number of candidates from a few centres exceeded this requirement.

The requirements of the controlled assessment appear to have been adhered to in most cases, with candidates completing the required timesheet, indicating the report was completed in less than the 10-hour maximum.

A few centres allowed their candidates access to the internet during the ten hours' write-up time, which allowed candidates to take information directly from websites. Internet access is not permitted during this time, as clearly stated in the Learner Assignment Brief.

Evidence of primary and secondary research should be evident throughout the assignment and is an essential feature for higher band marks.

The assignments indicated a concern that, in some centres, all candidates addressed the same factors, theories, approaches and strategies, resulting in very similar work throughout the cohort. Candidates may be given initial guidance after receiving the assignment but should carry out their own research. If visiting speakers or external visits are arranged for candidates, each must make their own notes and not simply rely on information provided by the speaker or venue. This will help avoid replication of work, minimise issues relating to plagiarism, and aid differentiation.

##### **Comments on individual questions/sections**

###### **Task 1:**

###### **An explanation of the key factors that influence human development and behaviour**

Most candidates were able to identify a range of factors including inherited and genetic, socio-economic, environmental and psychological.

Candidates were awarded higher band marks where the identified factors were accurately explained and linked to the scenario. Factors should have been supported with evidence of relevant primary and secondary research.

**Task 2:**

**An outline and assessment of relevant psychological theories and approaches that may be used to support the work of the practitioners in the family support centre**

Most candidates were able to explain the main assumptions of key psychological theories and provide examples of the relative research from each theory. To achieve higher mark bands, a detailed assessment of each theory in relation to the family centre was required.

**Task 3:**

**An explanation of the strategies and activities that may be used to apply these theories and approaches at the centre**

A range of responses were given for this task, with weaker candidates writing generically and missing the requirement to link the strategies to the family centre. To access the higher mark bands, candidates were required to identify the range of practitioners that work in the family centre and explain how their understanding of the psychological theories informed their practice, with relevant practical examples explained.

**Task 4:**

**An evaluation of the effectiveness of these strategies and activities for families and the local community**

A range of responses was seen for this task. Understanding of the strategies lacked depth, making it difficult for candidates to evaluate thoroughly. Weaker responses were vague and lacked detail, identifying the strengths and weaknesses of the activities with limited application to the family centre.

Higher mark bands were awarded where candidates had clearly evaluated the benefits of the strategies for the families attending the centre and the local community.

**Summary of key points**

- Candidates should include evidence of primary and secondary research to support their writing throughout the assignment.
- Excessive word counts prevented some candidates from accessing top mark band.
- Heavy reliance on 'class style' notes prevented some candidates from accessing higher mark bands.
- Candidates who named a range of practitioner roles working in family centres produced a better explanation of the strategies used.
- The evaluation should be linked to the scenario in the learner assignment brief.



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