

NCFE CACHE Technical Level 3 Certificate in Health and Social Care 601/8435/8

Assessment code: HSED2

Submission date: 30/01/2024 - 22/02/2024

This report contains information in relation to the external assessment from the chief examiner, with an emphasis on the standard of learner work within this assessment window.

The aim is to highlight where learners perform well as well as any areas where further development may be required.

Key points:

- grade boundary information
- administering the external assessment
- standard of learner work
- assessment structure
- use of word allocation
- criteria requirements and command verbs
- referencing of external assessment tasks
- assessment criteria (AC)
- regulations for the conduct of external assessment

It is important to note that learners should not sit the external assessment until they have taken part in the relevant teaching of the full qualification content.

Grade boundary information

Grade	NYA	D	C	B	A	A*	Learners	1875
% of learners	24.53%	31.36%	31.09%	12.69%	0.32%	0.00%	Pass rate	75.47%

Administering the external assessment

The external assessment is invigilated and must be conducted in line with our regulations for the conduct of external assessment. Learners may require additional pre-release material to complete the tasks within the paper. These must be provided to learners in line with our regulations.

Learners must be given the resources to carry out the tasks and these are highlighted within the [Qualification Specific Instructions for Delivery](#) (QSID) document.

Assessment structure

The assessment was achieved by learners who clearly focused on the title, command verb and criteria when responding in their own words.

The main reasons for non-achievement included:

- a lack of consideration of the criteria and title, 'Health of individuals through the life stages'.
- learners responding in context of the criteria, e.g. wellbeing/care, but not linking to 'health of individuals'.
- Some learners copied text which is not attributed to the original writer, or there was an overuse of sourced text (this content was marked around where it was deemed that there was adequate amount of original learner work).

To achieve a grade within this assessment, learners must demonstrate their own knowledge and understanding. Learners should be instructed not to over rely on sourced text and must not use AI to respond to criteria as this will result in non-achievement. Essay writing sources must not be used for content or when referencing.

Tutors should ensure students carefully read 'Information for learners' at the start of the assessment, as this document provides an explanation of the requirements when responding to each criterion.

Use of word allocation and command verbs

The word allocation should be carefully used to ensure that the response meets the requirements of the command verb, e.g. 'describe' will not be met by simply 'identifying'.

D grade achievement: D grade criteria was achieved when the response either focused appropriately on 'health' or on service user's care/needs/wellbeing which was then clearly linked to the health of individuals throughout the life stages.

Where the D grade criteria was not achieved, this was due to:

- D1/2/3 - limited responses, not meeting the requirements of the command verbs – describe and explain.
- D1 - generic responses to meeting individual care needs presented without mentioning or focusing on 'health through the life stages' as required.
- D1 - responses not giving two 'ways' as required, instead including reasons 'why' or 'what'.
- D2 - explaining the importance of supporting individuals' general wellbeing, but not explaining 'two reasons' in context of supporting 'health through life stages'.

- D3 - lack of description of **two** ways to assess the wellbeing of service users in context of 'health'. For example, selecting 'assessing living conditions', but not describing **how**, for example measuring how damp a house is or observing the number of people sleeping in one bedroom, and then linking poor housing to potential negative impacts on an individual's health.
- D3 - responding with 'why' or 'what to assess' rather than describing **two** ways to assess, as required. For example, simply stating a GP assessment can assess health, but then not describing how, e.g. taking a child's temperature orally to indicate infection/illness, using a blood pressure monitor to measure an adult's blood pressure to assess health, or checking vaccinations records are up to date, to keep individuals of all ages healthy and disease free.

C grade achievement: C grade criteria was achieved when the discussion focused appropriately on reflective practice to maintain professional standards in context of 'health' and the explanation of professional development was also in context of the title.

Where the C grade criteria was not achieved, this was due to:

- Generical responses to criteria, lacking focus on the title
- C1 - explanation of theory of reflective practice, or how to undertake, without links to the title, through responding in context of 'health through the life stages' as required.
- C1 - discussing what to reflect on, or benefits to practitioner, but not in context of supporting health through the life stages.
- C1/C2 - confusing reflective practice and professional development.
- C1/C2 - focus on benefits to the individual practitioner, not in support of 'health of individuals.
- C2 - focus on the importance of professional development in relation to meeting individual care needs, rather than in context of supporting 'health' as required.
- C3 - a standard described or not discussed context of 'health of individuals'. For example, 'confidentiality' generically discussed in context of care needs/laws, with no appropriate links to confidentiality of an individual's health records or maintaining confidentiality when discussing a services user's illness/mental health/medical treatments.

B grade achievement: B grade criteria was achieved when the discussion/analysis focused appropriately on both the criteria and 'health of individuals through the life stages'.

Where the B grade criteria was not achieved this was due to:

- B1 - describing one piece of legislation/report rather than **discussing** in relation to the impact on practice in context of 'health of individuals through the life stages'.
- B1 - more than one piece/report included, which did not allow for the depth of discussion in context of the title.
- B2 - description of the characteristics of an ineffective, non-inclusive environment presented.
- B2 - a generic account of inclusion and equality presented, such as needing ramps to support access or having information in accessible format but lacking strong links to supporting health through the life stages as required to achieve. For example, an easily accessible environment, with ramps and lift access may support an older aged adult with limited mobility to attend an appointment, which will positively impact on their long-term health outcomes or having accessible information on treatment options available, will support an adolescent to make informed choices about their treatment.

A grade achievement: Where 'A' grade criteria was achieved, an evaluative and analytical discussion was presented, focused appropriately on both the criteria and 'health of individuals through the life stages'. Analysis of learner's 'own' opinions and values was given in context of impacting on their own practice, to support health of individuals through the life stages.

Where the A grade criteria was not achieved this was due to:

- A1/2 - a lack of focus on the command verb and the title.
- A1 - describing strategies or discussing holistic approaches with limited evaluation in context of health.
- A2 - presenting a generic account of how values and beliefs may impact on practitioners' ways of working, which does meet requirements.

To achieve A2, learners should take a reflective approach to explore their own opinions and values and how these may impact on their own practice.

A*1 - criteria requires a critical analysis of one piece of research, with reasoned judgements in context of the health of individuals through the life stages. For example, research on the harmful consequences of smoking cigarettes should be critically evaluated to include the impact on newborn infants to older aged adults and use of this research in promoting wellbeing in context of health of these individuals.

Referencing of external assessment tasks

- Learners' must follow the recently updated referencing guidance.
- Quotes must be clearly identifiable and traceable.
- Use of essay writing websites must not be used to provide content/quotes.
- AI must not be used to generate content/quotes.
- Quotes must support learners' own knowledge and understanding. Therefore, learners should follow the referencing requirements (two identifiable and referenced quotations per grade) to ensure there is not an over reliance on sources material, which may impact on achievement.

Regulations for the conduct of external assessment

Malpractice

There were **15** instances of malpractice in this assessment window. The chief examiner would like to take this opportunity to advise learners that instances of malpractice (for example, copying of work from another learner) will affect the outcome on the assessment.

Maladministration

There were no instances of maladministration reported in this assessment window. The chief examiner would like to highlight the importance of adhering to the regulations for the conduct of external assessment document in this respect.

Chief examiner: Corinne Barker

Date: 12/04/2024