

NCFE CACHE Level 2 Technical Award in Health and Social Care (603/3294/3)

Assessment code: TAHSC/SAE

Paper number: P002207

Assessment date: 5 February 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 generally perform well as well as any areas where further development may be required.

Key points:

- grade boundary information
- administering the external assessment
- evidence creation
- standard of learner work
- responses of the tasks
- 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 and achievement information

Each learner's external assessment paper is marked by an examiner and awarded a raw mark. During the awarding process, a combination of statistical analysis and professional judgement is used to establish the raw marks that represent the minimum required standard to achieve each grade. These raw marks are outlined in the table below.

Grade	NYA	Pass	Merit	Distinction
Raw mark grade boundaries	0	29	40	52

Below you will find the percentage of learners that achieved each grade.

Grade	NYA	Pass	Merit	Distinction	Learners	40
% of learners	35.00	35.00	22.50	7.50	Pass Rate	65%

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 Document \(QSID\)](#).

Evidence creation

Learners did use the space provided to answer questions. Where answers were typed or additional pages included, the learners name, centre number, centre name and task number were clearly visible.

Standard of learner work

Very few candidates consistently answered well enough throughout the paper to gain a distinction. There were a significant number of candidates that did not gain a pass. Most candidates who did pass gained a pass grade. There were several questions that consistently highlighted gaps in candidate knowledge, such as the care planning cycle, care values, legislation, policies and procedures, and partnership working. Many of the gaps in knowledge were apparent in the AO1 recall of knowledge responses. This suggests some aspects of the specification are not being adequately covered, not only in the application of knowledge but in recall of knowledge too.

Candidates who achieved a distinction grade attempted all the questions. Candidates who did not pass, or achieved a pass grade, unusually, did not have a lot of omitted questions, but as expected, they did have a high number of questions that gained no marks. This supports the assumption that these candidates, while attempting most questions, had gaps in their knowledge. There were no scripts that only had questions omitted at the end of the paper, suggesting candidate's time management was effective, and the paper could be answered in the time permitted.

There was evidence throughout the paper of poor exam technique, such as misreading of questions, seen in questions in 17, 18 and 22. These questions were in the latter part of the paper, which may indicate that candidates were rushing to complete the paper. Candidates spent too much time on extended-response questions, repeating the stem and setting the scene. Many responses lacked explicit examples, such as not giving examples of the needs of a service user, this tendency was particularly apparent in the extended-response questions.

Responses of the tasks within the sections of the external assessment paper

Question 1 – most students answered this question correctly and were able to recall knowledge of life stages.

Question 2 – this was a multiple-choice question about types of referrals, which most candidates correctly identified.

Question 3 – candidates identified the health and social care service that could be accessed by Harry in late adulthood but did not demonstrate an understanding of how the service was private.

Question 4 – most candidates understood that the role of an activities co-ordinator was to organise activities, which was implied by the name, but often failed to engage any further with the role or provided description that was very generic, such as ensuring the safety of service users.

Question 5 (a) – responses correctly provided ways that informal carers can help Harry, including practical (for example, shopping and cooking) to emotional and social in the form of company.

Question 5 (b) – ways informal carers can help Harry provided correct response from a range of relevant ways from the practical i.e. shopping, cooking to emotional and social in the form of company.

Question 6 (a) – identifying barriers to accessing day care proved challenging for many candidates. Some candidates stated only 'physical' as a barrier, which required more extension.

Question 6 (b) – responses were relevant as to how the barrier identified in Q6 (b) could be overcome, although not enough depth or range was always provided to gain the full two marks.

Question 7 – this was the first extended-response question requiring the application of care values by staff in a day care setting. Candidates were not clear on what care values were. When care values were correctly identified the application of them was limited.

Question 8 – candidates showed knowledge of how to maintain confidentiality. There was also some limited knowledge shown in responses that focused on not sharing information. These candidates did not appreciate that not sharing information is incorrect, as it is about not sharing information with those who do not need to know.

Question 9 – candidates generally struggled to identify communication skills, often referring to using sign language, which could have been valid if it was made relevant to meeting communication needs. Describing how the communication skills support service users was poorly addressed. An appreciation of why communication skills are used was therefore lacking.

Question 10 – this is the second extended-response question and it focused on how partnership working can meet service user's needs. This was not effectively answered. Candidates struggled to move beyond the first mark band. Many candidates understood partnership working only in terms of practitioners having different, often isolated roles, regarding a service user, but did not show an understanding of how practitioners work in partnership. Responses were often non-specific, referring only to partnership working 'meeting needs' of service users, rather than providing specific examples of needs, or using the stem and scenario to add focus to their response.

Question 11 – most candidates identified Ofsted as the regulatory body for schools. Explaining two roles of Ofsted proved challenging, with candidates struggling to provide further development other than

Ofsted 'checking schools and teaching'. When teaching was considered, it tended to focus on what learners were being taught, rather than referring to the quality of the teaching. Likewise, how Ofsted perform their role (for example, observations and grading) was rarely given as a response.

Question 12 – candidates generally engaged well with the three ways education can positively influence development. Although some repeated points were seen in most awardable responses, this was often in terms of qualifications, jobs, and future prospects. As the questions referenced development, it was surprising that more candidates did not use PIES to structure their responses, which would have helped in reducing repeated points.

Question 13 – most candidates did not gain more than two marks out of a possible four for describing how the transition to university impacts on emotions and independence. Responses were often limited and offered no extension, such as stating that Jacob will need to be more independent, but explaining how he could be more independent, or what will make Jacob feel sad or lonely. Likewise, responses were all negative in terms of the impact of the transition.

Question 14 – sources of information for job roles in the health and social care sector were generally identified correctly by candidates. A small number of responses lacked thought in the source that was stated, such as 'family' being given as a source of information.

Question 15 – the reasons for continuing professional development (CPD) were understood by candidates, with most picking up a mark for keeping up to date with knowledge and skills.

Question 16 – most candidates picked up a mark from the three possible marks available, by identifying a role of a keyworker in supporting service users, with many candidates making reference to safeguarding and support. Many candidates did not have the range of knowledge to identify three roles.

Question 17 – this question proved challenging for candidates despite a range of possible responses that could have been given. Many candidates gave legislation rather than policies and procedures.

Question 18 – ways managers can ensure staff meet National Occupational Standards was often misread, by focusing on what staff need to do to meet standards, rather than on ways managers can ensure standards.

Question 19 – this was a question in which no candidates gained all the marks available. Candidates needed knowledge of all parts of the care plan cycle. Most candidates did not pick up any marks, suggesting a clear gap in knowledge.

Question 20 – limited knowledge of the purpose of individualised care planning was evident. Although most candidates picked up a mark for reference to meeting individual's needs, the two further marks were often not gained.

Question 21 – most candidates gained all two of the three marks for physical changes in puberty. The third mark was possibly made more difficult as candidates tended to focus on male puberty, when the question was open to female puberty too.

Question 22 – despite a range of responses possible for this question, regarding possible health and social care services accessed in the adolescence life stage, a high number of candidates did not read the question carefully and gave practitioners and not services.

Question 23 – many candidates, in this multiple-choice question, did not know that the Care Act (2014) was the legislation that has a principle of the person-centred approach.

Question 24 – this question asked candidates about how the practitioner can safeguard service users at the day centre. Most candidates gained only one mark from four possible marks available. From answers that did gain marks, references to data protection and confidentiality were the most recorded response.



Regulations for the conduct of external assessment

Malpractice

There were no 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

No instance of maladministration was 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: Vickie Davies

Date: 08/04/2024