

NCFE CACHE Level 3 Applied General Award in Health and Social Care – (603/2913/0)

Assessment code: AGAHSC

Assessment date: 8 March 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 and achievement information
- administering the external assessment
- evidence creation
- standard of learner work
- responses to the tasks within sections of the external assessment paper
- 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	33	45	57

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

Grade	NYA	Pass	Merit	Distinction	Learners	23
% of learners	78.26	17.39	4.35	0.00	Pass Rate	21.74

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 in order 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 use the space provided to answer questions – the spaces allocated being sufficient. No scripts were word processed. Handwriting was legible in most learners' scripts. However, it should be noted that learners' writing can be illegible even when neat, due to it being too small to read easily, even when magnified. This should be taken into consideration when reflecting on whether the use of a scribe or word processing is needed.

Standard of learner work

Quality and standard of work varied in terms of potential pass grade or merit grade scripts. No learners answered consistently enough throughout the paper to gain a distinction. Several questions were consistently answered with limited detail, answered incorrectly or not attempted, suggesting significant gaps in knowledge going into the exam.

Only a small number of learners attempted all the questions. Many learners omitted several questions across the paper. Although most learners omitted question 8 at the end of the paper, it was felt this was not due to poor time management, but a gap in learner knowledge.

The scenario was considered quite short, although further content appeared throughout the paper which provided further detail. The short scenario at the beginning of the paper may have made the application more demanding in some questions if learners did not engage fully with the other scenario content.

Responses to the tasks within sections of the external assessment paper

Question 1 (a)

Most learners were able to provide the correct answer using the acronym NMC.

Question 1 (b)

Many learners did not give a correct answer or did not answer. When a correct answer was given, it was not The Health and Care Professions Council (HCPC) but Ofsted, with a profession relevant to health and social care unable to then be given.

Question 1 (c)

Most learners gained some marks for this question, at least three out of the four available. Safety and quality of care were popular answers.

Question 1 (d)

There was a range of care values that would have been awarded, most learners made incorrect reference to the 4Cs within some of their four examples.

Question 2

Learners struggled to engage with 'how'. Many responses gave information on what individual practitioners could do rather than how they work together. What they need to consider when providing optimal care and support did pick up some credit for many learners who were able to apply the needs of older patients.

Question 3 (a)

Most learners did not gain any marks for this question. Some vague responses linked to helping people, which needed more development to gain credit.

Question 3 (b)

This was a question that learners often gained only one mark for through reference to memory problems in patients with dementia. Learners were however unable to develop this point to gain the further two marks available, for example in how dementia affects an individual's ability to give informed consent or the possibility of harming themselves.

Question 4 (a)

There was some confusion with the identification of which organisations or structural barriers. When barriers were correct there was lack of resources identified.

Question 4 (b)

As question 4 (a) proved a challenge then it followed that this question would too. Most learners did not gain any marks for this question.

Question 4 (c)

Learners focused on communicating in a multi-disciplinary team more than in team meetings specifically. There were some very generic responses that did not gain more than two marks of a possible six marks. Many learners did not attempt the question.

Question 5

There was a large range of possible answers. Financial was a popular response to pick up a mark. Most learners were not able to gain beyond one mark and several learners did not attempt the question.

Question 6 (a)

Learners were able to pick up marks in mark band one, and some moved with four marks to mark band two. Very few learners gained marks beyond this. In terms of other extended-response questions on the paper this question was considered more easier to access marks, as there was a wider range of

possible creditable points that could have been given; yet in most cases only a limited number of points were made.

Question 6 (b)

The majority of learners picked up a mark for stating that smokers have lower birth weight babies. By discussing the effects of this learners picked up a mark for the impact on delaying development. The second mark for the effects was rarely awarded.

Question 6 (c)

Again, as in question 6 (b), learners were able to use the data to draw the conclusion that non-smokers had less pre-term babies. It was apparent that engaging enough with the specifics of the data to access the other two marks was more difficult for most learners.

Question 6 (d)

Several learners gave features that were developed far earlier than 9 weeks, for example, the heart or they showed confusion with what is forming or what has formed.

Question 7 (a)

The majority of learners were able to name three organisations.

Question 7 (b)

There were some muddled terms used, but an explanation often made this clearer. Learners needed to be much clearer on the names of different inspections.

Question 7 (c)

Learners generally answered well to pick up both marks.

Question 8

This was the most challenging question on the paper that most learners did not answer. The very few learners that did pick up one or two marks provided very limited knowledge of Bronfenbrenner's theory.

Question 9

This question proved more challenging than a recall of knowledge question should perhaps be. Most learners attempted the question, but their knowledge of the life events relevant to infancy and late adulthood was poor. For example, many answers for late adulthood offered life events that were relevant to early or middle adulthood, such as parenthood, or that were not a life event, such as illness.



Regulations for the Conduct of External Assessment

Malpractice

There was one instance 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: Vickie Davis

Date: 13/05/24