



General Certificate of Education

Health and Social Care 8626/8629

HC15 Clients with Disabilities

Report on the Examination

June 2009

Further copies of this Report are available to download from the AQA Website: www.aqa.org.uk

Copyright © 2009 AQA and its licensors. All rights reserved.

COPYRIGHT

AQA retains the copyright on all its publications. However, registered centres for AQA are permitted to copy material from this booklet for their own internal use, with the following important exception: AQA cannot give permission to centres to photocopy any material that is acknowledged to a third party even for internal use within the centre.

Set and published by the Assessment and Qualifications Alliance.

The Assessment and Qualifications Alliance (AQA) is a company limited by guarantee registered in England and Wales (company number 3644723) and a registered charity (registered charity number 1073334). Registered address: AQA, Devas Street, Manchester M15 6EX
Dr Michael Cresswell Director General.

HC15: Clients with Disabilities

General Comments

Candidates generally seemed well prepared for this examination although some weaknesses arose in examination technique where candidates did not read the question carefully or apply their knowledge appropriately.

Question 1

- (a) This proved a challenging first question as many candidates failed to focus on the 'progression' of MS and instead gave general symptoms.
- (b) Many candidates showed good knowledge of the Care Planning cycle and well-prepared candidates could access all 9 marks.
- (c) This question was generally answered well with the majority of candidates getting at least half marks. However, candidates must be urged to read the questions carefully as there were several who misread the question and wrote answers assuming both Greg and Julie were going into residential care.
A maximum of 6 marks was awarded if the candidates gave their answers in the form of a list, a table or bullet points. In a 'discuss' question at this level (for full marks), candidates must be able to write a convincing argument in complete sentences.

Question 2

- (a) Most candidates gained marks. Good technical knowledge was shown.
- (b) Many candidates gained full marks. There are more than 4 possible marks if the candidate includes precise details including the timing of the test.
- (c) All candidates were able to access this question and gain marks. However, for higher marks candidates must look at 'for' and 'against', noting that this is a 'discuss' question. There were also candidates who appeared to be answering a question from a previous paper on which they may have practiced including unrelated references to 'genetic counselling'.
- (d) Many candidates knew the term 'statementing' There were several ' SENCO' answers which could not be credited.
- (e) Many candidates achieved 4 marks. Again there were answers which did not refer directly to the question. For example, marks were not given for the idea that when children with disabilities attend mainstream school, able bodied children benefit. Although this is true it is less likely to influence the parents' decision. However marks were awarded when the candidates expressed this idea in the context of the parents wanting Shilpa to be accepted by children in the local community.

Question 3

- (a) All candidates knew some symptoms or behaviours. The better-prepared candidates were able to link 4 symptoms with behaviours to secure 8 marks.

- (b) There were a few candidates who did not gain any marks here as they could not name a caring skill or used life quality factors instead. Many candidates knew the 'caring skills' but could not link them 'effectively' to examples related to Alzheimers which was required for this question. However there were also many excellent answers which demonstrated the candidates' ability to apply their knowledge.
- (c) Only a few candidates gained full marks.

Question 4

- (a) There were some well-prepared candidates who were able to gain full marks here. Many used 'cystic fibrosis' for the nutritional example which is incorrect. Although people with cystic fibrosis require a special diet, diet does not cause the disability condition. Candidates should be discouraged from giving more than one disability condition for each cause of impairment. Even if one of the answers is correct, if others listed are incorrect the mark cannot be credited.
- (b) Candidates should use the lifestyle choices identified in the specification e.g. smoking, lack of exercise or obesity. A poor diet, e.g. high in fats should be identified which leads to obesity. Marks were awarded for examples related to alcohol, drugs and over exercise. Pregnancy examples were not awarded as the question required the impact of the lifestyle choice upon the person making the choice. For 5 marks candidates had to have the lifestyle choice, the 'how' which involved technical knowledge of how the body could be affected and the resulting impairment.
- (c) Many candidates clearly knew the provisions of the DDA. Vague references to providing equality without saying how were not credited. Specific knowledge is required. For example it is not enough to say the act makes it fairer for people with disability in employment, the candidate must refer to recruitment or training, promotion or dismissal.
- (d) Many candidates failed to gain marks here by not answering the question and gave general answers about why people discriminate. Many candidates referred to ignorance or stereotyping but this needed to be linked to the legislation. For example one successful candidate wrote 'The DDA can only suggest the change of peoples attitude, it cannot dictate to the public what to think' The key to the question is the link to the failure of the legislation and the ability to 'explain' why.

Grade boundaries

Grade boundaries and cumulative percentage grades are available on the AQA website at www.aqa.org.uk/over/stat.html