GCE MARKING SCHEME

SUMMER 2016

HEALTH AND SOCIAL CARE - UNIT 7
1627/01

INTRODUCTION

This marking scheme was used by WJEC for the 2016 examination. It was finalised after detailed discussion at examiners' conferences by all the examiners involved in the assessment. The conference was held shortly after the paper was taken so that reference could be made to the full range of candidates' responses, with photocopied scripts forming the basis of discussion. The aim of the conference was to ensure that the marking scheme was interpreted and applied in the same way by all examiners.

It is hoped that this information will be of assistance to centres but it is recognised at the same time that, without the benefit of participation in the examiners' conference, teachers may have different views on certain matters of detail or interpretation.

WJEC regrets that it cannot enter into any discussion or correspondence about this marking scheme.

GCE Health and Social Care

Unit 7 (1627)
Coursework Assignment

Mark Scheme

	Criteria for mark allocation	Guidance	Marks
Aims and Investigation (40 marks)	Candidates will be expected to: • state the aims of their coursework assignment • use a variety of resources to investigate the chosen assignment • identify and interpret issues relevant to the assignment • use investigation to assemble relevant information		
	Poorly formulated aims, little evidence of background knowledge and a restricted investigation of the issues relevant to the assignment. Evidence will reflect lack of understanding. No use of specialist vocabulary. Work will contain inaccuracies.	• Basic identification of needs. • List of services to meet needs/brief descriptions.	0-10
	Aims are restrictive, limited resources used to investigate. Little evidence of investigation of issues relevant to the assignment. Evidence will communicate meaning but will lack detail. Little use of specialist vocabulary. Work may contain inaccuracies.	• Brief description of care needs/effects of condition – some of which may be may be omitted. • Basic descriptions of care services - some of which may be irrelevant	11-20
	The aims are clearly expressed and a range of resources used to investigate the assignment. Evidence presented demonstrates an understanding of issues relevant to the study. Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. Work will contain relatively few errors.	• Clear descriptions of the care needs, showing knowledge of the effects of the condition. • Clear descriptions of a range of care services from the different sectors, describing how they support the care needs of the condition. • Local provision should be identified. • Some reference may be made to statutory, private, voluntary provision. • Some referencing may be present.	21-30
	The aims are comprehensive, realistic and well expressed. The candidate has demonstrated knowledge and has been selective in their choice of resources used to investigate. Evidence presented shows sound understanding of issues raised by the study. Evidence at this level is well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.	• Clear explanation of the care needs, showing thorough knowledge and understanding of the effects of the condition. • Clear descriptions of a wide range of care services from the different sectors, explaining how they support the care needs of the condition. • Knowledge and understanding of statutory, private, voluntary provision shown. • Local provision must be identified. • Evidence of referencing must be present.	31-40

		Criteria for mark allocation	Guidance	Marks
Analysis and Research (35 marks)		Candidates will be expected to: • apply knowledge and understanding to the chosen assignment • use both primary and secondary research to support their findings • analyse and discuss findings in relation to the chosen assignment		
		Limited knowledge and understanding of the requirements of the assignment. Minimal attempt to analyse and interpret findings. Evidence will reflect lack of understanding. No use of specialist vocabulary. Work will contain inaccuracies.	• Not all sections of the work addressed. or • Very brief descriptions, some of which may be irrelevant or inaccurate.	0-8
		Demonstrates knowledge with limited understanding of the assignment. A limited range of research is used to support the findings. Restricted analysis and interpretation of the findings. Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. Work may contain inaccuracies.	• Basic descriptions of most of the requirements of the section (2/3 of the 4) – some work may be irrelevant or inaccurate. • Possibly factual/generic information with little or no attempt to link to individual/service provision.	9-16
		Demonstrates sound knowledge and understanding of the assignment. Appropriate primary and secondary research is used to support findings. Clear analysis and interpretation of the findings. Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. Work will contain relatively few errors.	• Evidence of at least three sections should be included: ✓ Practitioners – identified with brief description of how they support individuals. ✓ Care planning – identification of stages with some reference to individual/ service provision. ✓ Quality assurance (QA) – should describe several methods of QA with some reference to how they support the individuals' care and/or service provision. ✓ National policy and legislation – several different types should be addressed	17-26
		Demonstrates detailed knowledge and a thorough understanding of the assignment. A range of both primary and secondary research is used confidently in support of the findings. Sound and comprehensive analysis and interpretation of the findings. Evidence at this level is well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error-free.	• Evidence of all sections must be included, showing knowledge and understanding of how they support the individuals: ✓ Practitioners – a range is identified, with explanation of how each one supports the individual and how they work together as a multi-disciplinary team. ✓ Care planning – showing clear understanding of the process and the effects on the chosen individual/service provision. ✓ Quality assurance (QA) – should explain how several different methods of appropriate QA affect services used/ care provided for the chosen individual(s). ✓ National policy and legislation – several different types should be addressed, showing clear understanding of the effect on individual/services used. • Evidence of referencing must be present.	27-35

		Criteria for mark allocation	Guidance	Marks
Evaluation (25 marks)		Candidates will be expected to evaluate: • methods used to obtain information and evidence • outcomes of the assignment	Marks can be awarded in two sections: up to 12 marks if only evaluation of methods used to collect data; up to 13 marks if only evaluation of the findings of the assignment.	*Marks in brackets apply if only one section of work is addressed*
		Brief description of the strengths and weaknesses of the assignment, with one or two comments on methodology. Outcome does not address the issues of the assignment and may be limited to one area. Evidence will reflect lack of understanding. No use of specialist vocabulary. Work will contain inaccuracies.	• Identification of resources used – brief descriptions of how they were used/what they were used for (bibliography or a list of books/websites). • Little or no attempt to discuss findings of the assignment. • May discuss strengths or weaknesses of work	0-6 (0-3)
		Describes the strengths and weaknesses of the assignment with superficial comments on methodology. Outcome addresses the assignment but knowledge is limited and presentation is basic. Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. Work may contain inaccuracies.	• Basic descriptions of one or two resources used; brief comments as to how useful or not they were. • Brief description of how service provision meets individuals needs; possibly a repeat of AI.	7-12 (4-6)
		Realistic evaluation of the assignment with justification for the methodologies. Outcome demonstrates knowledge and understanding of the study and addresses the issues identified. Work is well presented and may contain several well thought out and differing ideas. Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.	• Detailed descriptions of several resources used, including specific names, clearly showing advantages and disadvantages of each. May include suggestions for other methods to be used. • Some attempt to evaluate the findings of the assignment – Is local service provision good or not? Reference may be made to national policy/ demographics/funding.	13-18 (7-9)
		Thorough and comprehensive evaluation with sound justification of the methodologies used. Use of reasoned judgements to draw valid conclusions from all evidence present which are clear and detailed in order to produce a high standard evaluation. Evidence at this level is well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.	• Detailed evaluation and justification of the use of a range of resources (including specific names/titles) to include both primary and secondary data – use of Internet, text books, magazines, local health directories, questionnaires, interviews, etc. • Valid conclusions made to evaluate local service provision with reference to the amount of services available, access and barriers to care; national policy and funding and national and local priorities.	19-25 (9-12)