AQA

**General Certificate of Education (A-level) Applied
June 2011**

Health and Social Care   **HC01**

**(Specification
8621/8623/8626/8627/8629)**

Unit 1: Effective Caring

Report on the Examination

Unit 1: Effective Caring
June 2011

Comments on specific questions

Question 1

01 Given the scenario of an elderly care home resident walking on his own to a library, most candidates were able to name some relevant life quality factors in outlining the advantages and disadvantages of this. The least recognised factor was autonomy.

02 Almost all candidates suggested appropriate solutions to the problem of the elderly resident getting lost. Very few made the mistake of suggesting he should not be allowed to go to the library.

03 Asked to explain why there can be a conflict when providing the life quality factors of dignity and hygiene, most candidates showed awareness of the problem. The weakest answers failed to recognise the potential conflict and outlined both factors without showing any connection.

Question 2

04 Asked to identify from a scenario ways of treating clients badly, most candidates recognised the examples of punishment and rejection, and gained full marks. Of those gaining fewer marks, the commonest error was to mistake rejection for neglect.

05 Asked to name and illustrate three other ways in which carers might treat clients badly, many candidates were able to name at least two relevant ways and most illustrations were valid. Some candidates mistakenly described barriers to treating people well.

06 Most candidates gave a partial definition of informal care (and gained one of the two available marks for definition). Many candidates referred appropriately to the example in the scenario and gave another relevant example.   The weakest answers took their cue from the fact that the scenario provided an example of poor treatment and assumed that 'informal care' meant inappropriate or inadequate care.

07 Asked to name an NHS service provided in a child's own home that could give useful advice about that child's development, approximately half the candidates correctly suggested a developmental assessment by a health visitor. Candidates who were probably unaware of this service suggested NHS Direct. This did not receive credit.

Question 3

08 Asked about a child's access to special education provision, most candidates made some appropriate reference to assessment and the involvement of relevant practitioners. Many seemed to confuse the process with a needs assessment, carried out by a social worker.

09 Most candidates were able to give at least one reason why a child might need special education provision.

10 Most candidates showed awareness of some differences between education in a special school, compared with that in a mainstream school.

11 Almost all candidates gave a valid reason why a child might not be given access to special education provision. The majority of these answers referred to a lack of need, but there were also valid answers based on a shortage of resources.

Question 4

12 Most candidates were able to name and outline at least three caring skills illustrated in the scenario. Least often identified was the example of working alongside.

13 Asked to suggest three ways in which staff might use observation to monitor clients' health, many candidates made valid suggestions based on specific observations, e.g. of blood pressure, food intake or presence of sores.   Weaker answers erroneously included care actions such as providing medication.

14 Asked for two ways in which care workers can create trust with clients, a minority of candidates made two specific suggestions such as keeping promises and maintaining confidentiality. Weaker answers were more general and mainly referred to ways of forming relationships.

Grade boundaries

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