

Moderators' Report/ Principal Moderator Feedback

January 2012

GCE Health & Social Care (6946) Unit 9 - Investigating Disease



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General comments

There were some very extensive and well-presented portfolios submitted for moderation this series.

The quality of written communication is rarely commented on by centre assessors and learners are still taking material directly from published records. Centres are reminded that reports should be in the individuals' own words and each assessment objective completed after the research is carried out. When learners cannot find material to fit with objective criteria it is often omitted rather than thought through from their own knowledge and understanding. All images should be sourced and referencing included at the end of the report. It is not necessary to include print-out copies of information or leaflets. Primary sources of research, which are highly recommended, should be included.

On the whole, learners chose appropriate communicable and non communicable diseases although there is still a lack of guidance in choosing subjects which will allow access to higher grades especially in Assessment Objective 4. For example, Alzheimer's disease, conjunctivitis and cataract were offered but there are no strategies for prevention of these conditions.

A few centres allowed or directed learners to investigate the same two diseases despite instruction to the contrary in the specification. However, this is allowed only when a centre has a large number of candidates.

Although not specifically stated, centres should encourage the choice of diseases prevalent in the U.K in order to successfully access strategies for prevention, support and treatment. U.K sources are preferable particularly for Assessment Objective 2.

Some re-submissions are disorganised with additional material not inserted in appropriate positions.

Learners would be well-advised to place information regarding all facets of the assessment objectives under separate headings linked to the assessment grid to ensure that the evidence is clear and unequivocal.

Assessment Objective 1

Learners are providing descriptions of the two diseases and some biological bases are excellent but weaker learners are generally too brief. The bodies' responses tend to be implicit rather than explicit and these could be strengthened.

Signs and symptoms are mainly listed as learners dependent on the internet cannot say how they are produced and displayed therefore are limited to Mark Band 1.

Differentiation from diseases with similar signs and symptoms is still weak and linking the diagnoses to the changes wrought by the disease is not made explicit in the majority of reports.

Assessment Objective 2

Distribution is still being confused with transmission although there was an improvement in this area. Factors affecting distribution might be offered but few learners compare these whether they are working in Mark Band 2 or 3. Using sub-headings is very useful here for clarity. Causes are satisfactory but comparisons tend to be very superficial and frequently do not include the factors affecting distribution as previously mentioned.

Assessment Objective 3

Factors affecting the outcome of the diseases are generally well done. However, few centres compare the support available either with the two chosen or with at least one other disease of a similar type. ie. Communicable or non-communicable thus limiting the work to Mark Band 2. For learners in Mark Band 2, differentiation remains an issue and seems to be poorly understood. Centres are still addressing local and national provision of support or treatment and it was noted that some assignment sheets included in the reports have not been updated to the re-launched specification despite regular and persistent comment on this issue in previous reports.

Treatment is well described but justification for differences in provision is usually not included. When work-related issues are discussed, which is seldom, they are nearly always employment-related which rarely supplies convincing evidence for Assessment Objective 4. Work-related issues can be treated broadly and can include postcode lottery for medication, specialist equipment, centres and professionals for example.

Support continues to be lists of agencies and organisations whereas more interesting material could be drawn from using professional sources such as palliative care, physiotherapy etc. Learners should briefly describe the role of the individual/s providing the support.

Research continues to be mainly web-based with very little primary research carried out which is regrettable. The requirement for different types of resources is often ignored, four or more websites does not usually offer more than one type of resource.

Assessment Objective 4

This assessment objective continues to be the weakest. Learners with appropriate disease choices described strategies for prevention but overall failed to provide their strengths and weaknesses in evaluation. Learners need to practice evaluative skills more thoroughly. Lifestyle choices are not strategies for prevention of specific diseases.

Independent thinking and the use of initiative remains weak generally. However some learners apply themselves to the criteria and by default demonstrate a remarkable ability to produce work of their own to a high standard. Other learners expect all material to be found on the internet and are not prepared to research independently. Several centres continue to assess their learners leniently and give Mark Band 3 marks when all criteria have not been addressed and the work has been constructed from published sources but overall, there were pleasing results.

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