

**GCE** 

## **Health and Social Care**

Advanced Subsidiary GCE H103/H303

Advanced GCE H503/H703

# **Examiners' Reports**

January 2011

H103/H303/R/11J

OCR (Oxford Cambridge and RSA) is a leading UK awarding body, providing a wide range of qualifications to meet the needs of pupils of all ages and abilities. OCR qualifications include AS/A Levels, Diplomas, GCSEs, OCR Nationals, Functional Skills, Key Skills, Entry Level qualifications, NVQs and vocational qualifications in areas such as IT, business, languages, teaching/training, administration and secretarial skills.

It is also responsible for developing new specifications to meet national requirements and the needs of students and teachers. OCR is a not-for-profit organisation; any surplus made is invested back into the establishment to help towards the development of qualifications and support which keep pace with the changing needs of today's society.

This report on the Examination provides information on the performance of candidates which it is hoped will be useful to teachers in their preparation of candidates for future examinations. It is intended to be constructive and informative and to promote better understanding of the specification content, of the operation of the scheme of assessment and of the application of assessment criteria.

Reports should be read in conjunction with the published question papers and mark schemes for the Examination.

OCR will not enter into any discussion or correspondence in connection with this report.

© OCR 2011

Any enquiries about publications should be addressed to:

OCR Publications PO Box 5050 Annesley NOTTINGHAM NG15 0DL

Telephone: 0870 770 6622 Facsimile: 01223 552610

E-mail: publications@ocr.org.uk

#### **CONTENTS**

# Advanced Subsidiary GCE Health and Social Care (H103) Advanced Subsidiary GCE Health and Social Care (Double Award) (H303)

#### **Advanced GCE Health and Social Care (H503)**

#### Advanced GCE Health and Social Care (Double Award) (H703)

#### **EXAMINERS' REPORTS**

Content	Page
Chief Examiner's Report	1
Principal Moderator's Report – AS Units	3
Principal Moderator's Report – A2 Units	5
F910 Promoting Quality Care	9
F913 Health & Safety in Care settings	11
F918 Caring for Older People	13
F920 Understanding Human Behaviour	15
F921 Anatomy & Physiology in Practice	17
F924 Social Trends	20

### **Chief Examiner's Report**

Centre preparation of candidates whose presentation and achievement were exemplary is congratulated. There was evidence of candidates with a thorough understanding of key concepts of the units who applied their knowledge and understanding to the situations given very well.

The performance within externally assessed units was encouraging in this session. There was evidence of improvement in candidates overall achievements at both AS and A2 levels. The full range of grades was achieved across each of the units. Units F910 and F913 performed well at AS level and it was pleasing to see improved achievement in F920 and F921 at A2 level. Detailed feedback on the performance of each of the externally assessed units, along with the Principal Examiner's advice for improvement is given later in this report.

The key verbs in questions continue to be prevent some candidates from accessing the full range of marks available. Valuable marks were lost by identifying/describing when the question asks for an explanation or giving positive information only in questions which requires an evaluation. In a small number of cases the legibility of some papers, poor spelling and poor grammar made the awarding of marks difficult. Candidates must understand the literacy of the unit to ensure they can answer the questions accurately and ultimately achieve success. Glossaries of key words and reinforcement of correct spelling is recommended to support candidates when revising.

The majority of questions required candidates to 'apply' their knowledge and were not based on straight 'recall' of knowledge. There was a generally limited response to questions which asked for extended responses rather than a point by point listing of facts. Too many candidates just list points learnt from previous marks schemes without explaining/discussing they answer. Higher level questions expected candidates to discuss, evaluate and analyse, providing them with the opportunity to give detailed and reasoned answers in order to demonstrate the depth and breadth of their knowledge and their comprehension of the context of the question.

Accurate interpretation of the command verb is essential to ensure high marks are secured by the more able candidates. Where low marks were recorded it appeared to be the result of a lack of specific knowledge, a lack of examination technique and a miss-application of knowledge. Lack of clarity of expression occasionally contributed to a lower mark. Successful answers and good practice were reflected in responses that were factually accurate and successfully applied to the question. Candidates were rewarded for quality of written communication in the longer, levelled response, questions.

Centres could help to improve candidate performance in external assessments by:

- Helping candidates to improve the way they approach the command verbs 'discuss', 'explain', 'describe', 'evaluate' and 'analyse'.
- Practicing questions that require discussion, explanation, evaluation and analysis before candidates reach the controlled conditions of the examination.
- Improving the techniques used by candidates when answering the question, for example, sentence construction and accurate spelling and avoiding the 'scattergun effect' of telling all that they know rather than applying their knowledge to the context of the question.
- Making sure candidates are familiar and know the meaning of the technical terminology used within the units, the underpinning knowledge and its application in context.

- Developing candidates' ability to write concise responses to short questions and avoid reinterpreting or rewriting the question.
- Preparing candidates to accept that papers do vary and specific areas of the specifications will not always be asked on every paper.

The quality of the work completed for the portfolio units continues to demonstrate a wide range of knowledge and understanding. F911 and F923 both performed particularly well. Higher achieving candidates clearly demonstrated excellent ability to apply their knowledge and understanding to the assessment criteria for each unit. Their evidence fulfilled the requirements of the amplification criteria provided in the specification to a high standard. The most popular optional units are still F915 and F922. F914 and F917 seem to be the least popular units, although the candidates entered for these units applied their knowledge thoroughly demonstrating a high level of understanding.

A small number of centres are not providing candidates with clear guidance about the evidence required to ensure all assessment criteria are met within each unit. Centres are advised to refer to the amplification sections of the specifications for each unit and also to use the Assessment Evidence Recording sheets (AERS) provided by OCR when assessing portfolio work in order to accurately apply marks to the assessment criteria. It is important for centres to send representatives to training sessions to ensure that they fully understand the assessment requirements of each unit and can guide their candidates accordingly. Detailed guidance from the Principal Moderators relating to each portfolio unit can be found later in this report.

Internal standardisation within centres or across consortia should be completed before marks are submitted to OCR to ensure consistent marking across different assessors and that the evidence meets the requirements of the mark awarded. Where there is evidence of rank order violations moderators will return work to the centre for reassessment.

Centres are reminded that, although the specifications have been revised, past papers are an effective aid to support with revision for the externally assessed units. Additional support material, including CD-ROMs containing live exemplar portfolio work, is available from the OCR Publications department and via the OCR website (<a href="www.ocr.org.uk">www.ocr.org.uk</a>) which contains useful revision guides for the tested units and strand exemplar for a range of portfolio units.

### **Principal Moderator's Report – AS Units**

#### **General Comments**

The majority of centres presented portfolio work in a well organised manner which ensured the moderation process ran smoothly. Annotation of coursework continues to vary considerably from centre to centre.

All centres used the Unit Recording Sheets and some centre's supplemented these with Assessment Evidence Recording Sheets (AERS). Assessment evidence recording sheets allow assessors to see how many marks certain tasks within an assessment objective have been awarded. These sheets are not compulsory and should be used only in addition to the mandatory URS.

Many centre's appeared to have followed guidance given at recent training sessions. It is highly recommended that a representative should be sent to training sessions to up-date their knowledge and understanding of the of the assessment criteria.

#### **Comments on Individual Questions**

#### **F911 Communication in Care Settings**

AO1 focuses on the different types of communication and how and why these are used in different settings. AO1 is generic and examples should be given from a wide range of settings, across health, social care and early years. An area of weakness seen in the evidence submitted is the lack of understanding of how the different types of communication can help to value and support people who use services. When considering factors which can inhibit/enhance communication, candidates should include the three values of care listed in the specification.

In AO2 candidates could include an introduction to the setting being used. Many candidates appeared to use evidence collected through work placement and this is acceptable. When applying the values of care, candidates are required to discuss the appropriate use of communication skills.

In AO3 candidates must research two theories of communication and then show understanding of how these provide guidance about how to effectively communicate and how they can affect people who use services or practitioners.

AO4 was completed well by the majority of candidates.

#### F912 Promoting Good Health

In AO1 candidates need to describe what is meant by health and well-being. To do this they are no longer required to consider the service user and service providers perspective or in fact to conduct any primary research. There are four task based sections to AO1 and it is strongly recommended that centres use the assessment evidence recording sheets when assessing portfolios. AO1 requires candidates to describe two ways in which an individuals' quality of life can be affected by ill health. Candidates can choose to look at an individual with a health condition or to look at two different individuals. There should be no time spent defining the condition, symptoms of the condition or treatment for it.

As part of AO2, candidates are required to show understanding of the implications of a current health promotion initiative. The implications can be potential implications and do not need to be proven through statistical evidence.

AO3 is dedicated to researching and carrying out the small scale health promotion initiative. Candidates are expected to use both primary and secondary research, in order to plan their campaign. Guidance as to what the plan must cover is given in the specification. Candidates seem to thoroughly enjoy this activity and this is often reflected in their write up.

AO4 asks candidates to evaluate not only the impact of their health promotion campaign, which must include information relating to the measure of the outcomes against the pre set criteria but also their own performance, during the planning and implementation of the campaign.

#### F914/F915/F916/F917

Entry for the optional units was very small. Centres are advised to look at the amplification section of the specification and the assessment evidence recording sheets for a break down of what is required.

Few centres opted to enter via the OCR Repository and for future sessions attention should be paid to the entry code. When centres do submit entries via the repository it is expected that each candidate's work will be uploaded as one document and not several folders containing many documents. Centres must still send a paper copy of the centre authentication form to the moderator.

### Principal Moderator's Report – A2 Units

#### **General Comments**

Portfolio work submitted this session clearly demonstrated a range of standards in work. Centre's must follow the amplification sections of the specifications to ensure that the evidence presented meets the depth of understanding required and also the required coverage of specific numbers within their evidence. In order to meet 'a wide range' candidates must include at least four different examples in the required depth to achieve mark band 3. To meet a range three examples must be covered to meet the requirements of mark band 2. Finally 'a limited range' would be one or two examples at a basic level to meet the requirements of mark band 1.

All centre's submitted marks through Interchange this session and received notification of any sample required via an e mail. This appeared to work well and the process of sending work to moderators was quick and efficient.

Centre's not following the required administration procedures continues to be an issue and it would be appreciated if the following could be adhered to so that the moderator can focus on completing the moderation of the work:

- Ensure MS1s and portfolios are sent to the moderator within three days of the sample being selected.
- Where there are 10 or less candidates entered, all portfolios must be sent with the MS1s.
- Portfolios must be marked out 50 and not 100.
- URS included with the work and completed fully including:
  - Centre numbers and candidate numbers
  - page referencing
  - comments
  - Only send final version of portfolios previous drafts are not required for moderation.
- CCS160s (Centre Authentication sheets) sent with the portfolio work.

#### **Unit F919 Care Practice and Provision**

For AO1 evidence should be generic and applied to the planning of services in the local area, not just focused on explicit settings as this restricts the candidates' ability to meet the requirements of the assessment criteria. Candidates must select their two demographic factors carefully to ensure that there is sufficient evidence to show how they have actually influenced the planning and provision of services. Candidates must include a description of the process of the planning of services in the local area. A diagram is not in sufficient depth to meet the requirements of 'describe'. When explaining the influence of national and local standards, targets and objectives on the planning and provision of services, candidates should consider explicit examples that are relevant to the planning and provision of services in the area considered. Influences should be considered in terms of both positive and negative impact. Centre's are not expected to cover all aspects of national and local standards, targets and objectives, as a minimum requirement they should cover at least one national and one local standard, target or objective. It is acceptable for centre's to use an area other than their own if there is a lack of supporting evidence – for example some local delivery plans are more detailed than others.

For AO2, candidates must introduce one national policy or piece of legislation. This can be applied to care practice and provision generically or relevant to either of the chosen services for AO4. An overview of the content of the chosen policy or piece of legislation is not sufficient to meet the assessment criteria; candidates must apply their knowledge and understanding to the impact on care practice and provision.

In AO3 candidates need to demonstrate that they have used both primary and secondary sources of information by clearly referencing the sources of information within the main body of the text and include a detailed bibliography at the end of the portfolio.

Candidates must use the information gathered effectively to analyse a range of quality assurance mechanisms used by two services. They must include explicit examples of the actual use of the chosen quality assurance mechanisms by the two services and explain how the information collected from quality assurance procedures is used by each service and how it helps to inform future practice.

In AO4 candidates should introduce their chosen case study and explicitly identify the needs of their chosen person who uses services and relate these to PIES. Candidates need to choose two services, relevant to meeting the needs of their chosen person who uses services.

It is advised that AO4 is completed before AO2 and AO3 to enable candidates to relate their evidence to the same two services across these assessment criteria.

#### **Unit F922 Child Development**

In AO1 candidates must actually describe the two chosen patterns for each area of development in children, from birth to eight years to demonstrate their own knowledge and understanding. This refers to describing the progression of each pattern from one milestone to the next. Milestone charts do not lend themselves to mark band two or three quality work. Many candidates were able to explain the importance of two methods used to monitor the development of children. This should include what happens where any abnormalities are detected or children are found not to be developing according to the norms or expectations.

In AO2 candidates should introduce a case study or profile of a child aged 8 or over. They must choose factors that have actually affected the child's development and apply their knowledge and understanding by explaining the effects of the factors on the child in relation to PIES. It is not necessary for all of the factors listed in the specification to be covered as these may no be appropriate for the child studied.

Candidates must compare the child's development against the norms for each area of development from birth to eight years, identifying where the child was advanced, delayed or in line with the norms. Best practice suggests that the child selected should be 8 years or over, so that the first eight years of life can be reflected upon. If a younger child is selected, then predictions would be difficult to make about future development.

Candidates must explain fully the reasons for any variations from the norms. Factors that have affected the child's development could be used to explain these variations.

AO3 requires candidates to show that an appropriate and wide range of different sources of information have been used to research two roles of play by keeping a comprehensive record of the resources used and clearly referencing sources of information within the main body of the text, including a detailed bibliography at the end of the portfolio. Candidates must analyse in detail the two chosen roles of play and make reasoned judgments about how two roles of play can be reflected in the child's development by using a range of appropriate examples for each role, in relation to the child's development.

AO4 was done well by the majority of candidates. There was evidence of comprehensive planning of the learning aid/activity.

The evaluation of the learning aid/activity should reflect the effectiveness of the learning aid/activity and analyse the benefits to the child studied. The recommendations for improvements to the learning aid/activity should be realistic and demonstrate that informed decisions have been made.

Please do not send the learning aids for Unit 13 to the moderators – they do not have the space to store these and often they are damaged or pieces lost which is disappointing for candidates when they eventually get them returned.

#### **Unit F923 Mental Health Issues**

For this unit it is recommended that candidates start their portfolios with AO4 to give them an insight into the concepts and definitions of mental health and develop their knowledge an understanding which can be applied in other assessment objectives.

AO1 was done well by the majority of candidates. Candidates must ensure they explain the resultant mental-health needs of each of the three types of mental illness. When discussing the possible causes of mental illness candidates must demonstrate their understanding of the complexity of isolating causes and how causes of mental-health illness may interrelate.

To start AO2 candidates should give an introduction to their chosen person who uses services. They should then explain a wide range of effects of mental illness on their chosen person who uses services in the short- and long-term referring to PIES. Candidates must explain a wide range of specific and general effects (long and short term) using examples in day-to-day situations such as work, education, home life and social activities, referring also to the effects on their family and wider society.

As with all units, it is important in AO3 that candidates explicitly demonstrate their research is from a wide range of different sources by clearly referencing the sources of information they have used within the main body of the text and including a detailed bibliography at the end of the portfolio. Candidates must analyse a range of preventative/coping strategies that are relevant for their chosen person who uses services, making sure the link is explicit throughout. The piece of current legislation chosen for analysis must be appropriate for the chosen individual with explicit evidence of reasoned judgements on the appropriateness for their chosen individual included.

In AO4 candidates must explicitly show that they have used a wide range of appropriate sources for their evaluation of the concepts and definitions of mental health to achieve mark band 3. A range of positive and negative examples of the media's portrayal of people with mental-health needs must also be evaluated. Their evaluation must include the possible positive and negative effects of portrayal in the media on individuals and wider society together with realistic and informed recommendations for improvements which demonstrate understanding of the main issues associated with the way the media can influence attitudes.

#### **Unit F925 Research Methods**

In AO1 candidates must explain generically each of the purposes of research included in the specification. This section should not be based on the candidates' chosen research project. Candidates should give reasons why each purpose is relevant to the work of health and social care organisations/services. They also need to describe three different research methods. It is recommended that two primary and one secondary method are included. These could be linked to the methods to be used for their research, however, the evidence should generically cover what the research methods are, how they are carried out and possible strengths and weaknesses.

In AO2 candidates should then choose the subject area for their research. Best practice suggests that candidates achieve higher results when researching an area that interests them and they are able to access relevant sources of information. It is perfectly acceptable for candidates to relate their research to another unit of work such as media portrayal of mental health, roles of play, quality assurance mechanisms etc

The rationale should include a hypothesis which can be proved or disproved; alternatively an issue or research question which can be answered could be used. The aims and objectives for the research must be relevant and explicitly stated so that these can be used later in the research when evaluating the success of the research.

Throughout their evidence for AO2 candidates must show that they understand the impact ethical issues and sources of error and bias could have on their chosen research area.

For AO3 candidates must describe the research methods they have chosen to use for their research and fully justifying the reasons for their choice. Candidates should demonstrate that they have used a wide range of different sources to undertake their research, including a balance of primary and secondary sources, in order to meet the requirements of mark band 3. Referencing of their sources within the main body of the text and inclusion of a detailed bibliography are essential to show that the sources have actually been used.

Evidence needs to be presented in an appropriate and coherent format using the information gathered from all sources. The analysis of the findings from all their sources of information must be detailed and relate directly to the aims of their research project. It is also important for conclusions from their findings to be presented logically so that they clearly demonstrate their understanding.

In AO4 candidates need to use their pre-determined aims and objectives from their research project, as outlined in their rationale, to give a comprehensive evaluation of its success. They should refer to what has been completed successfully and why and also give reasons for any aims and objectives that were not met. Candidates do not seem to fully understand issues of validity, reliability and representation and many find it difficult to apply them accurately to their research or explicitly link them to the evaluation. Analysis of the strengths and weaknesses of the evidence often lacks detail, with some candidates presenting their work in bullet points which is considered to be basic. Recommendations for improvements and continuation of the research must be realistic and detailed.

### F910 Promoting Quality Care

#### **General Comments**

Overall many candidates performed well in this exam and had clearly made use of previous papers in preparation. The vast majority managed to answer all the questions asked, although a notable number spent too much time on short response questions, listing a wide range of points when they had already gained full marks in the initial part of their answer, this was particularly apparent in questions 1b, 1d and 5a. To aid candidates reaching the higher mark levels in banded response questions it would be good practice to advise candidates to focus on the key words in the question and always check what is being asked of them Doing this should help avoid candidates losing marks by just tackling half the question, eg in questions 2b and 3b. As has been mentioned in previous reports too many candidates just list points learnt from previous marks schemes without explaining/discussing they answer. This was a problem in questions 4b and 6b.

On this occasion many candidates gained full marks for the short answer questions, but then when tackling the longer response questions just listed health and social care relevant words without any context. A significant number of candidates, for instance, attempted to describe circumstances when confidentiality could be broken throughout the paper, even though it was not specifically asked for in this paper. Candidates should be prepared to accept that papers do vary and specific areas of the specifications will not always be asked on every paper. Many candidates did though show the ability to effectively evaluate legislation designed to protect men and women when answering question 6b.

#### **Comments on individual questions**

- 1(a) Generally well answered though a few candidates did not give racial examples.
- 1(b) Well answered.
- 1(c) Well answered.
- 1(d) The majority of candidates could identify relevant barriers but they did not always give an example that related to ethnic minority groups, instead many changed the example and proposed most ethnic minorities used wheel chairs.
- 1(e) Generally well answered although some candidates just listed the components of an equal opportunities policy and/or the main values of care.
- 2(a) Well answered.
- 2(b) Quite a few candidates gave no response to this question whist others confused policies with laws and just listed features of pieces of legislation. Nonetheless, many did choose an appropriate policy and linked benefits to both users and providers of care.
- 3(a) Compared to previous years, candidates did recognise the question was about the early years values of care and so many gained full marks.
- 3(b) Many candidates were limited in going into the higher band by not addressing the environment side of the question, or just wrote about general activities behaviours staff could show.

- 4(a) Well answered.
- 4(b) Many candidates just listed ways but did not attempt to explain any.
- 4(c) Many candidates did not explain their answers.
- 5(a) Most candidates could identify the three main agencies; though not always explain how they could influence attitudes, instead just repeated that they could influence attitudes.
- 5(b) Well answered with many candidates discussing effects, although some just describe barriers rather than focus on the effects of them.
- 6(a) Although most candidates gained at least half marks for this question, many muddled up pieces of legislation or gave a evaluation of the effectiveness of the legislation.
- 6(b) Candidates did show awareness of the key issues associated with the effectiveness of legislation, though tended to focus on weaknesses and/or just list many points recalled from previous exams without explaining them or linking them to men and women.

### F913 Health & Safety in Care settings

#### **Overall Performance**

#### General

There was no evidence that candidates were unable to access the questions set, or of them running short of time. Even in the more demanding levels response questions, almost all candidates were able to offer some relevant information, even if it was severely limited and scored few marks.

The range of marks from candidates was as wide as ever. There was a generally limited response to questions which asked for an overview rather than a point by point listing of facts. The poor standard of spelling and grammar limited a minority of candidates in banded response questions.

#### Responses to individual questions

- 1(a) The signs were mainly identified correctly, with only the eyewash sign proving difficult for a few candidates. The description of how safety was improved was less well answered. Many candidates simply gave a further definition of the sign: for example, saying that the first sign was location of first aid box and that this improves safety by telling people where the first aid box is. This is not adequate to gain the second mark at this level.
  - The vast majority could answer 1a(ii), 1b, 1c(i) and 1d correctly. A small number of candidates could not identify any function of the HSE apart from enforcement.
- 1(c)(ii) Was generally poorly known. Few candidates were able to give the overview of the thrust of this legislation.
- 2(a) Generally well answered.
- 2(b) Most candidates could identify three items of PPE. Unfortunately there were still a number who gave 'overshoes' as an answer. Despite the fact that this equipment has not been used for a number of years in health care settings such as operating theatres, a surprising number of candidates are still offering this answer, which was not accepted. The explanations often lacked sufficiently precise details including both practitioners and pwus to score full marks.
- 2(c) Few candidates were able to give a complete description of standard precautions, and many listed special precautions or PPE in the second part of the answer. Centres are advised to stress the idea of standard precautions being what everyone might be expected to do to ensure general hygiene and cleanliness in any low risk situation, even one's own home.
- 3(a) Generally well known. Some candidates did not give quite enough to gain the mark for the third stage of risk assessment.
- 3(b) Candidates show a sound understanding of the risk assessment process. Those who scored most highly tended to be those who approached the task systematically, considering one hazard fully before moving on to another. A few candidates still got tied up in issues of fair and equal access, which was not credited. No credit was given for any suggestions implying that all elderly service users need to be locked inside their nursing home.

- 4(a) Many very good answers were given for this question. The poorer answers did not focus on how the procedure or equipment slowed the spread of fire and hence allowed greater evacuation time.
- 4(b) Answers to this question were generally limited. Many simply described or listed standard evacuation procedures with little if any attempt at explanation.
- 4(c) Another question which gave scope for some excellent answers from the relatively small number of candidates who did actually analyse. The majority simply repeated the notion that procedure X would allow people to know what to do in an emergency. This limited and repetitious answer failed to score highly.
- Most candidates were able to correctly identify the two pieces of legislation. Few were able to give the overview necessary to score highly on describing the key features of each piece of legislation. Many could only give examples of specific occurrences (RIDDOR) or hazardous chemicals (COSHH) rather than showing an understanding of the strategic vision of the legislation.
- 6(a) Key procedures well known, but usually described and not explained, limiting the mark that could be awarded.
- 6(b) Most candidates could readily identify items or procedures that might form part of a security policy, but few could explain them adequately. Those who attempted analysis were even fewer.

### F918 Caring for Older People

#### **General Comments:**

Candidates entered for the exam attempted to answer all questions and fully utilised the time available. There was evidence of improved achievement in higher grades with success achieved across all grades A – E.

Candidates were well prepared for their examination with the majority confidently demonstrating their ability to apply their knowledge and understanding to the questions asked. Technical terminology was generally used accurately although candidates continue to struggle to spell technical words correctly. Candidates must understand the literacy of the unit to ensure they can answer the questions accurately and ultimately achieve success. Glossaries of key words and reinforcement of correct spelling is recommended to support candidates when revising.

Not reading the question thoroughly before writing the answer created problems for a few candidates and limited their ability to access the marks available. For example, giving responses relating to the wrong body system or sector of services. There are no marks available for information given which repeats the question or the question stem. This type of response also takes up valuable lineage so candidates are deceived into thinking that they have given an answer worthy of marks when no relevant response has been given. Candidates must provide a relevant answer to the question as it is asked to ensure they do not lose unnecessary marks.

The key verbs in questions continue to be a problem for many candidates to access the marks available. Valuable marks were lost by identifying/describing when the question asks for an explanation or giving positive information only in questions which requires an evaluation. A revision exercise giving candidates the same question and changing the command verb, starting with identify, then describe, then explain, then evaluate and finally analyse would help to reinforce the changes in the type and level of information required for each of the command verbs used across the paper.

There was evidence of candidates with a thorough understanding of key concepts of the unit who applied their knowledge and understanding to the situations given very well. Centre preparation of candidates whose presentation and achievement were exemplary is congratulated.

#### **Comments on Individual Questions:**

- 1(a)(i) Generally answered well with most candidates identifying a relevant sensory impairment caused by the physical effects of ageing.
- 1(a)(ii) Answered well, although a few candidates did not link their response to affects on daily living.
- 1(b) Many candidates identified reasons why an older person with sensory impairment could be socially isolated but did not go on to explain why the reasons given would make then socially isolated.
- 1(c) Answered well on the whole. A few candidates lost marks due to lack of explanation and some did not link their response to social development as requested.
- 2(a) Answered very well marks were lost where candidates did not read the question properly and failed to link their responses to economic issues following retirement.

- 2(b) Many candidates did not describe lifestyle changes due to a lack of understanding of the terminology. A few repeated their answers to Q2a which did not gain them marks.
- 2(c) Some candidates did not mention changes in role which limited their achievement. Candidates who balanced their evaluation of the effects of the changes in role they stated scored well. A significant number of candidates only gave either positive or negative responses.
- 3(a)(i) Most candidates identified a disorder of the respiratory system associated with later life, a minority did not link this to later life so did not gain the mark.
- 3(a)(ii) A sound understanding of physical effects of the respiratory disorder was shown.
- 3(b) Few candidates understood the role of a physiotherapist in detail. There was a lack of explanation of how the physiotherapist's actions could help Owen to cope with his disorder.
- 3(c) Answered well where candidates discussed both positive and negative impact on Owen of moving into a residential home.
- 4(a) Most candidates named a relevant disorder of the musculo-skeletal system.
- 4(b) Identification of possible changes in health needs was sound, however candidates often missed their explanation of reasons why the health needs have changed or links to post-operative situation.
- 4(c) Candidates not reading the question properly and giving health practitioners rather than social-service practitioners contributed to loss of marks.
- 5(a) Generally answered well. It should be noted that 'stroke' is not a disorder of the nervous system it is a disorder of the circulatory system.
- 5(b) Candidates analysed coping strategies that could be used by a person with this disorder of the nervous system very well. There were some insightful responses given.
- 5(c) Candidates who identified the Health Act correctly gave excellent responses. Many candidates identified the wrong legislation and gained low marks as a result.
- 6(a) Generally well answered, however, some candidates did not understand which services are health-care services. Many gave practitioners rather than services eg physiotherapist rather than physiotherapy service.
- 6(b) Values of care are understood well by candidates, however, many identified ways rather than analysing how health-care practitioners should apply the Values of Care within their day-to-day tasks. Lack of reference to day-to-day tasks limited marks to Level 1 due to lack of understanding or application being evident.

### F920 Understanding Human Behaviour

#### **General comments:**

The majority of candidates were evidently well prepared for this examination, with most completing all questions and demonstrating sound knowledge. There was no indication that candidates had insufficient time to complete the paper with many candidates continuing their answers onto extra pages. It is worth reminding candidates that if they do continue their answers on the pages at the back of the booklet it is helpful if they indicate that they are doing so on the original question page.

However, in most cases candidates should find that the space allowed for each question is appropriate and should act as an indication of the length of answer expected. Many candidates lost time and did not gain extra marks by giving lengthy explanations to questions which only required identification, such as 2a 'Identify four socio-economic factors which could affect human development', which simply required four factors to be named.

Most candidates are able to identify appropriate theorists to the psychological perspectives studied, but many still experience difficulty in applying their knowledge to the settings and life stages specified. In some situations candidates are reproducing answers to questions from previous papers without adapting them to the situation required.

Candidates would benefit from practice in summarising their knowledge in preparation for questions which ask them to outline key features of specific theorists work. It is also useful if candidates can adapt the language they use to fit the question, such as in using Maslow's hierarchy to suggest ways in which a childminder could meet a child's deficit needs, few candidates wrote about the childminder giving the child something to eat and drink, providing snacks or meals etc, most candidates merely repeated the terminology of 'providing food, water and shelter'. This was also evident in question 5 where candidates were using social learning theory to explain language development, it would have been more appropriate to refer to a child 'imitating the language they heard' rather than 'copying observed behaviour'.

- 1(a) Most candidates identified Bandura.
- 1(b) Although the majority of candidates gained full marks, many wrote a full explanation of the theory rather than just outlining two clear features.
- 1(c) Most candidates could write accurately about the theory chosen, although some answers were only loosely related to adolescence and few candidates gave specific examples of the types of behaviour changes which could occur.
- 2(a) Many candidates wrote lengthy answers giving full explanations of the effects, rather than just identifying four factors, thus wasting time.
- 2(b) Most candidates identified Maslow.
- 2(c) Most candidates demonstrated a general understanding of Maslow's theory. However, few candidates referred specifically to the stage of 'cognitive development', or suggested activities which related specifically to intellectual development. There was some evidence of misunderstanding of the theory, such as seeing it as an 'age stage' theory, in which the first level of needs (physiological)only applied to babies, or that it only applied to children in third world counties. Conversely many candidates wrote about children reaching self actualisation which is inappropriate. The role of a childminder was generally interpreted appropriately.

- 3(a) There was a wide range of answers given to this question, beyond the examples given in the specification.
- 3(b) Both Eysenck and Cattell given.
- 3(c) Most candidates focussed on the extremes of the personality traits identified and could give appropriate descriptions of the behaviours associated with the terms in common usage (introvert/extrovert, etc). Candidates demonstrated a better understanding of the theories by referring to a person's personality being at a point on a continuum between the two poles or within a spectrum of the different characteristics. Many candidates referred to the possibility of predicting criminal personality types, although few commented on individual's being able to learn new behaviours and responses eg the extrovert learning to concentrate in lessons, the introvert being able to make friends.
- 4(a) Many candidates experienced some difficulties with this question and perhaps made it more complicated for themselves than intended. A significant number of answers were more relevant to children and others referred to people in later adulthood being able to care for their children, or having stressful jobs. Later adulthood as a life stage is more appropriately interpreted as 70+.
- 4(b) Most candidates identified Freud, although there were more answering with Erikson than in past series.
- 4(c) Most candidates gave a description of the theory chosen but found it difficult to select appropriate features to relate to an older person adapting to change. Candidates using Erikson's theory usually started well by identifying the first 'crisis' of establishing trust but often failed to develop their answer fully.
- 5 Candidates were required to select one or more theories to explain how a child learns language and much depended on the suitability of their choice of theorist(s). Few candidates gave any real detail about the process of learning language. Candidates who based their answer on Skinner's behaviourist approach tended to gain more marks since they referred to the different stages of language. Candidates using Piaget tended to give a generalised answer relating to cognitive development with little reference specifically to learning language. They were also likely to emphasise the need for a child to learn by themselves, which is not the most efficient way of learning language. The case study of Genie was frequently written up in some detail, but with little application. The application of the question to a child in foster care created some difficulties for many candidates, since they tended to refer to the foster parents as being the ones who neglected, ignored and ill-treated the child. The large number of children being cared for and foster parents not having enough time or money were often given as reasons for the 5 year old not receiving sufficient attention, as was having different languages, accents and cultures. Candidates who saw that it was probably because the child had been neglected, ignored or ill-treated as a baby/toddler that led to them being in foster care could answer with greater understanding.

### F921 Anatomy & Physiology in Practice

#### **General Comments**

This session's questions were based on five of the six systems in the unit outline and the associated underpinning knowledge. The majority of questions required candidates to 'apply' their knowledge and were not based on straight 'recall' of knowledge. Short answer questions and diagrams were used to help stimulate candidate responses and increase accessibility.

Most candidates interpreted the requirements of the question accurately and attempted all of the questions. Candidates appeared to be well-prepared for the paper.

In a small number of cases the legibility of some papers, poor spelling and poor grammar made the awarding of marks difficult. The spelling of scientific terminology was a problem for many candidates; however, candidates were not penalised providing that the word was understandable and matched any description given. However, a noticeable number of candidates still do not understand the word 'physiological'.

Responses were found to be less accurate in questions that required an explanation; here candidates often provided descriptions which were weak in content. Only a few candidates failed to provide a correct dysfunction for the named body system and the diagram relating to the body system was generally answered well by most candidates. Poor examination technique when formulating their answers was also a problem for some candidates who on occasion failed to express themselves using incomplete sentences and weak explanations and descriptions. Many started their answer with an irrelevant introduction, thus wasting time and space.

In the higher level questions the candidates were asked to explain and discuss, providing the candidates with the opportunity to give detailed and reasoned answers in order to demonstrate the depth and breadth of their knowledge and their comprehension of the effects on the body system.

Knowledge was required for five of the six systems and related to the structure, function, dysfunction, diagnosis and treatment in relation to the systems and their chosen dysfunctions. The candidates were also asked to either discuss or explain the physiological effects on the systems. Candidates generally wrote in a coherent manner giving facts connected to the question but occasionally used vague comments such as 'serious effect', 'help in their diagnosis', affect their health' or repeated the question stem in their answer.

Centres could help to improve candidate performance by:

- Helping candidates to improve the way they approach the command verbs 'discuss', 'explain' and 'describe'.
- Practicing questions that require discussion or explanations before they reach the controlled conditions of the examination.
- Improving the techniques used by candidates when answering the question, for example, sentence construction and accurate spelling and avoiding the 'scattergun effect' of telling all that they know on any one system.
- Making sure candidates are familiar and know the meaning of the technical terminology used within the unit, the underpinning knowledge and its application in context.

Where low marks were recorded it appeared to be the result of a lack of specific knowledge and a lack of examination technique. Lack of clarity of expression occasionally contributed to a lower mark. Successful answers and good practice were reflected in responses that were factually accurate and successfully applied to the question. Candidates were rewarded for quality of written communication.

#### Comments on individual questions:

- 1(a) The component parts of the digestive system were accurately identified by most candidates. When they did have difficulty it was through incorrect identification and poor spelling. A large number could not identify the common bile duct on the diagram.
- 1(b) Descriptions of the purpose of the component parts of the digestive system proved difficult for a number of candidates as did the spelling of the names and functions. A large number could not provide functions for the rectum.
- 1(c) This question was generally well answered and candidates described a good selection of suitable treatments for their named dysfunction of the digestive system.
- 2(a) This question was answered with varying degrees of accuracy. Many candidates excluded themselves from the top mark level by only providing a basic description which provided a simple route.
- 2(b) This question was poorly answered by many who could not comment on the basic activities within the heart that occur during an ECG. Many were unable to relate the reading to the actions and functions.
- 2(c) This question was attempted by most candidates. Where they scored low marks it was usually because their descriptions were underdeveloped. Many tended to identify many methods of diagnosis rather than describe one or two, well.
- 3(a) A large number of candidates were unprepared for the kidney tubule diagram, which is included in the current specification. Spelling was generally poor and where candidates were unsure it was obvious that they were using their best guess.
- 3(b)(i) This question was attempted by virtually all candidates. Again where they scored low marks it was usually because their descriptions were underdeveloped. Many tended to identify many methods of diagnosis rather than describe one or two, well.
- 3(b)(ii) There were a large number of candidates who still read the word 'physiological' as 'physical'. Those who did not understand the meaning of the word physiological provided responses that included the complete range of physical, intellectual, emotional and social effects (PIES). By doing so their score was zero unless they were credited with 'pain' when they mentioned physical effects.
- 4(a) The female reproductive system diagram question was answered accurately by many candidates with many receiving full marks for this question.
- 4(b) This question was attempted by the majority of the candidates. Again where they scored low marks it was usually because their descriptions were underdeveloped. Many tended to identify many causes of infertility rather than describe one or two well.
- 4(c) This question was attempted by most candidates. Responses varied from those who only identified diagnoses and treatments to those who were well prepared and provided sound descriptions of both activities.

The final question was accessed by the majority of the candidates. There appeared to be some difficulty in understanding the meaning of the word 'physiological'. Again a noticeable number of candidates launched into a discussion that revolved around life style rather than the effects of smoking on body systems. A number of candidates did not achieve high marks because they failed to read the question correctly and only discussed one or two systems. As the question asked them to discuss the effects on the respiratory and other body **systems** the optimum would have been to discuss the respiratory system and two others. Those who discussed two well were still able to access 50% of the marks.

### F924 Social Trends

#### **General comments**

Candidates applied their knowledge and understanding to the majority of the questions set on the paper well. There was obviously good use of the pre-release data provided by most candidates and research around the topic areas appears to be increasing with an awareness of the most up to date information emerging.

There is still a high level of stereotypical answers, for example women are carers because it is 'natural'.

Some candidates tend to offer 'catch all' answers to any question referring to research, clearly not understanding the key terms in practice especially, reliability, validity, generalisability, representativeness, etc.

Centres need to develop candidates' ability to write concise responses to short questions and avoid reinterpreting or rewriting the question. However, there also needs to be some thought to interpretation of the command verb to ensure high marks are secured by the more able candidates.

#### **Comments on individual questions**

- 1(a) Well answered most knew the name of the legislation and content.
- 1(b) Some excellent responses linked to recession, cohabitation and consequent effect on numbers of divorce, secularisation, mediation, etc.
- 1(c) Usually well answered with a large number of candidates understanding decline is not disillusionment with the institution of marriage. However, too many candidates concentrated on divorce rather than marriage, seeming to want to apply their knowledge in this area to the question.
- 2 Generally well answered in that many candidates understood the main reasons for migration, but failed to give explanations coherently or develop in any depth. Some did confuse immigration and migration with illegal immigration and gap year travel.
- 3(a) Main errors were restating the question and simply saying women live longer.
- 3(b) Main errors were reference to baby boom and WW2. However, a considerable number accessed the marks with concisely written identification and explanation.
- 3(c) Most knew the name of a sampling method but many were vague in the explanation or gave catch all responses.
- 3(d) Good range of both ethical and practical problems offered. Full marks were missed by those who did not refer to 'older people'.
- 3(e) Some gave generic responses with good knowledge of research method but higher in the levels answers must link to context of older people and closed questions.
- 4(a) Generally answered well candidates had a good grasp of problems encountered.

- 4(b) Stereotypical responses were overwhelmingly offered here women being born to care with little reference to socialisation, a more common sense/knee jerk answer to this question than a studied one so explanation missing.
- 4(c) On the whole discussed well. The candidates seemed to understand the question and information that was needed to identify and explain help that is needed.
- This question differentiated well, as was intended. A common error was failure to read the question fully leading, therefore, to candidates failing to reference more than one stage of the education system for full marks. Some candidates spent a lot of time talking about female characteristics rather than reasons for achievement. The more able candidates clearly understood the question and had a range of knowledge to offer which was well argued.

OCR (Oxford Cambridge and RSA Examinations)
1 Hills Road
Cambridge
CB1 2EU

#### **OCR Customer Contact Centre**

#### 14 – 19 Qualifications (General)

Telephone: 01223 553998 Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

#### www.ocr.org.uk

For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored

Oxford Cambridge and RSA Examinations is a Company Limited by Guarantee Registered in England Registered Office; 1 Hills Road, Cambridge, CB1 2EU Registered Company Number: 3484466 OCR is an exempt Charity

OCR (Oxford Cambridge and RSA Examinations) Head office

Telephone: 01223 552552 Facsimile: 01223 552553

