

## **CAMBRIDGE TECHNICALS LEVEL 3 (2016)**

*Examiners' report*

# **HEALTH AND SOCIAL CARE**



**05830–05833, 05871**

## **Unit 6 Summer 2019 series**

Version 1

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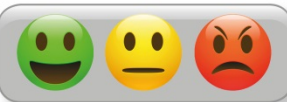
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## Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates. The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report. A full copy of the question paper can be downloaded from OCR.

## Note to Centres

There were a number of centres who had selected an invalid combination of units or had claimed the wrong units for a candidate that prevented overall qualifications results being issued. Please note that it is the responsibility of the centre to check that correct units have been entered for certification claims. OCR cannot guarantee that the issuing of results in these circumstances will meet deadlines for UCAS confirmation.

## Sector Update

Two key changes have occurred in relation to the Level 3 Technicals qualifications, both in relation to the examined units; firstly, an additional re-sit has been allowed, so candidates can have two further attempts at an examined unit if they wish to improve their result from the first attempt made. And secondly, a 'near pass' R grade has been introduced, which enables candidates who do not pass but achieve sufficient marks to gain some points for their examined unit outcome, which may mean that it is not necessary to re-sit the exam.

## Paper Unit 6 series overview

Candidates who scored well on this paper had a sound knowledge of the principles of personalisation. They also understood how a person-centred approach might be used by those providing care. The paper differentiated well with most candidates providing a response to all questions. Candidates gained marks for using person-centred terminology although lost marks for not demonstrating a sound understanding of key terms. A very few candidates did not appear to be aware that the paper had four questions and did not provide a response to question four.

### Question 1 (a)

1 (a) List **three** responsibilities of a facilitator in relation to a person-centred review meeting.

1 .....

.....

2 .....

.....

3 .....

.....

[3]

Candidates scored well on this question with most able to list at least two responsibilities. Frequent correct responses were giving individuals a choice over the people attending and asking appropriate questions. Candidates lost marks for giving vague responses such as checking the individual is happy.

### Question 1 (b)

(b) Explain **one** of the principles of a person-centred approach.

.....

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.....

.....

[2]

Candidates were expected to identify and explain one principle. Candidates scored well with the majority demonstrating a good understanding. Some were able to identify a principle but were not able to gain the additional mark for explaining the principle. This suggests some candidates lack a clear understanding of the terminology.

### Question 1 (c)

(c)\* Describe in detail the challenges which limit the positive impacts of personalisation.

.....[6]


Candidates were expected to provide a detailed description of challenges with explicit reference to how these limit the positive impact. For example lack of staff trained in a person-centred approach could lead to staff believing they know best and they may not take account of individuals' preferences. The majority of candidates were able to describe challenges with frequent correct responses being lack of staff training, limited availability of services and limited budgets. Fewer candidates were able to describe how these limited the positive impacts of personalisation.

### Question 2 (a)

2 (a) Explain how commissioning of services by the local authority promotes choice and fair access to care.

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.....[3]

Very few candidates knew what commissioning was and even fewer were able to explain it. The majority of candidates did not score well on this question. Some were able to gain a mark for referring to the provision of 'a range of services'.

	<b>AfL</b>	Commissioning is the outsourcing of services by the local authority and NHS. Candidates should be encouraged to investigate the range of health and social care services which have been commissioned in their locality. Local CCG (clinical commissioning) and Local government websites are a good source of information.
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### Question 2 (b)

(b) List **three** ways local authorities support personalisation of care.

1.....  
 .....  
 2.....  
 .....  
 3.....  
 .....

[3]

Candidates answered this question well demonstrating a good understanding of the role of local authorities. Frequent correct responses were assessing needs, allocating personal budgets and removing geographical barriers.

### Question 2 (c)

(c)\* Jez, 54, has a physical disability which limits his mobility. At his person-centred review meeting he reported that he could no longer leave the house independently.

Jez's wife, Maisie, also attended the person-centred review. Maisie spoke of Jez's emotional well-being, reporting that he was frequently depressed. She admitted she was finding it increasingly difficult to provide him with the support he needed.

Identify a person-centred tool, **other** than a one page profile or a relationship circle, which could be used in Jez's review meeting, and then explain how it could benefit both Jez and Maisie.

Person-centred tool

.....  
 .....

How it could benefit

.....  
 .....  
 .....

[8]

To score well on this question candidates were expected to provide a detailed explanation of how a person-centred tool could be used in a review meeting. They needed to refer to benefits for both Jez and Maisie. When candidates wrote about benefits they tended to give generic answers which could have been related to any tool rather than the one they identified. This prevented many candidates from achieving Level 3.

### Question 3 (a)

3 Anna has recently started as the manager of Southfields residential home for older adults. She has noticed that several residents who are not able to communicate verbally are always given the same meals and routines as each other.

Julie, one of the care workers explained to Anna:

'They can't tell you what they like or don't like, so we just give them all the same, then its fair.'

(a) Describe **three** reasons why the care at Southfields is not person-centred.

1.....  
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 .....  
 .....  
 2.....  
 .....  
 .....  
 .....  
 3.....  
 .....  
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 .....

[6]

Most candidates were able to score some marks on this question. They frequently described the lack of choice of meals and set routines. Candidates lost marks for giving repetitive descriptions. Centres should encourage candidates to take care they identify different ways when asked to provide a number of responses to a question.

### Question 3 (b)

(b)\* Analyse ways Anna could introduce a person-centred approach to care at Southfields.

.....  
 ..... [9]

Candidates who scored well on this question were able to weigh up the pros and cons of different ways Anna could introduce a person-centred approach. For example, training staff could encourage them to use a person-centred approach although they may be resistant to change. Anna should therefore supervise staff and identify when they are not using a person-centred approach.

Frequent ways which candidates referred to in their answers were by training staff and overcoming communication barriers. However few candidates were able to provide an analysis of these ways and therefore were unable to achieve a Level 3.



### Question 3 (c)


(c) Alfred is a resident at Southfields.

Identify **four** ways Alfred could be put at the centre of a meeting to review his care plan.

- 1.....  
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- 2.....  
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- 3.....  
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- 4.....  
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[4]

Candidates' scores on this question were varied. Frequent correct responses referred to asking Alfred relevant questions such as what was working or not working. Some candidates lost marks for giving repeated answers related to giving Alfred a choice about the time/place or location of the meeting.

	<b>AfL</b>	Candidates would benefit from being given opportunities to develop their understanding of what happens in a person-centred review meeting. Inviting a health or social care professional to talk to candidates about this aspect of their work might increase their understanding of how individuals are put at the centre of a meeting.
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### Question 4 (a)

**4** Joshua, 28, has recently been discharged from hospital after being involved in a road traffic accident. Joshua has a permanent spinal injury and is no longer able to walk.

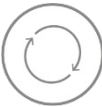
Before the accident Joshua worked as a bricklayer and played football every weekend. He lived in a flat which he shared with friends.

Since being discharged from hospital Joshua has been staying at his parents' house but he would like to regain his independence.

(a)\* Evaluate how a person-centred review meeting could benefit Joshua.

.....[6]

Candidates generally wrote detailed responses referring to benefits for Joshua. These commonly included helping him to regain his independence and identifying care to meet his needs. However few candidates provided an evaluation as they made no reference to the limitations to providing a person-centred approach. The majority of candidates were only able to achieve a Level 2 as they did not refer to limitations. For instance suitable sports activities could be identified however there may not be a football team in his area for those with physical disabilities.

	<b>AfL</b>	Candidates should be taught to consider the command verb used in the question. For an evaluation they must weigh up both sides of the situation under consideration. For instance, in this question they were asked to evaluate the benefits and were therefore expected to consider the limitations.
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### Question 4 (b)

- (b) Describe in detail how a one page profile and a relationship circle could be used to support Joshua in his review meeting.

One page profile

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Relationship circle

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**[6]**

Many candidates demonstrated an understanding of these person-centred tools and could describe them. Fewer candidates referred to how they could be used in a review meeting to support Joshua. For instance some candidates described a one page profile as a tool which could be read quickly and which identified what was important to Joshua. They did not frequently refer to how this could be used to create a care plan/ generate actions.


### Question 4 (c)

(c) Describe **two** ways a personal budget could be used to benefit Joshua.

1.....  
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.....  
2.....  
.....  
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[4]

Candidates' scored across the range on this question. Many were able to identify how the budget could be used but fewer were able to describe how this would benefit Joshua.

	<b>Misconception</b>	Personal budgets are used to meet individuals' care needs. However candidates should be discouraged from suggesting personal budgets can be used to 'buy whatever they want'.
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