

**CAMBRIDGE TECHNICALS LEVEL 3 (2016)** 

Moderators' report

# HEALTH AND SOCIAL CARE

05830-05833, 05871

**Summer 2023 series** 

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#### Introduction

Our lead moderators' reports are produced to offer constructive feedback on centres' assessment of moderated work, based on what has been observed by the moderation team. These reports include a general commentary of accuracy of internal assessment judgements; identify good practice in relation to evidence collation and presentation and comments on the quality of centre assessment decisions against individual Learning Objectives. This report also highlights areas where requirements have been misinterpreted and provides guidance to centre assessors on requirements for accessing higher mark bands. Where appropriate, the report will also signpost to other sources of information that centre assessors will find helpful.

OCR completes moderation of centre-assessed work in order to quality assure the internal assessment judgements made by assessors within a centre. Where OCR cannot confirm the centre's marks, we may adjust them in order to align them to the national standard. Any adjustments to centre marks are detailed on the Moderation Adjustments report, which can be downloaded from Interchange when results are issued. Centres should also refer to their individual centre report provided after moderation has been completed. In combination, these centre-specific documents and this overall report should help to support centres' internal assessment and moderation practice for future series.

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We have created online courses to build your confidence in delivering, marking and administering internal assessment for our qualifications. Courses are available for Cambridge Nationals, GCSE, A Level and Cambridge Technicals (2016).

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#### General overview

The Level 3 Cambridge Technical Health and Social Care qualification is fast growing and popular among centres. Centres run a two year course post sixteen and offer candidates either a one, two or three A Level equivalent Cambridge Technical qualification.

It has been wonderful to offer centres a choice of either a face to face visit or a remote moderation visit this year. Many centres have opted for at least one face to face meeting and this has aided the reconnection between moderator and centre post pandemic.

When completing evidence for moderated units there are three guiding principles:

- The command verb must be adhered to. The level and depth of command verb dictates the style/type
  of evidence which should be produced.
- The plural rule. Wherever a plural is used it should be interpreted as meaning 'at least two'.
- The application rule. Wherever the term 'environments' is used, application should be to 'at least two'
  environments.

The following comments attempt to sum up what has been observed this academic year when moderating work. There will be a separate section following this on administration of the Cambridge Technical Health and Social Care.

- Centres have taken on board the need to develop application, with many using a range of case studies that provide sufficient detail for candidates to think about not just the 'how' but the 'why'.
- Centres have started to develop good practice towards providing evidence of extra research, especially when completing an 'analyse' task.
- Some centres have continued to offer their candidates work experience, and practical demonstrations have been completed in these environments.
- There have been centres that have blended criteria to help candidates and where this has been well annotated it has been very successful. If however two criteria which contain two different command verbs are blended, this can sometimes mean one of the two is not addressed in the body of the work.
- Where centres have been creative, there has been some interesting assessment evidence, e.g., newspaper front pages to cover 'summarise' and visual representations for 'outline'.
- The use of criteria as headings has been useful to aid candidates to focus on the requirements of the grading criteria.
- Centres seem to be a bit more adventurous with their units and are 'branching out' and making different choices for variety.
- There is a trend in some centres to allow students free choice of units depending on their personal interests. Other centres say they can't manage that.
- The standard of work and adherence to the plural rule and environments is significantly better and fewer are referred for this reason.

There are however some common problems/issues that have also been noted:

- There is over production of evidence to address the command verb 'identify' with many centres
  offering a description.
- There is still a preoccupation for candidates to present the whole of the teaching content. The
  teaching content is there to guide what should be delivered by the teacher, candidates should not use
  the teaching content as a tick list or check list of what to include as evidence.
- Confusion with the command verb 'analyse' with 'evaluation' with many offering positive and negatives only for 'analyse'.
- Candidates follow the plural rule but the examples they use are brief and that can mean they do not address the command verb. Candidates must be careful when selecting the assessment method and make sure it allows for the command verb to be addressed, e.g. a PowerPoint alone may not be sufficient to achieve the command verb 'explain'.

#### Administration of Cambridge Technical Health and Social Care

More and more it is becoming increasingly popular for the teachers involved in delivery to be the ones responsible for entering candidates and building interchange claims. This is the role of the examinations officer and training is available for this. Moderators are being asked more than ever for assistance with incorrect claims, late claims, inaccurate entries, etc.

The following points have been raised by moderators and team leaders alike:

- Some centres have put claims in quite late. This isn't as much of a problem with face to face visits, but with remote ones it can seriously interfere with moderating schedules and make extra work. Some centres underestimated the external moderation date with many rescheduling and wanting to have a visit right at the end of June. This does not allow for any changes/mop up visits as candidates have already left centres. Where possible all interchange claims should all be made on the same day.
- Several centres seem to have reverted to putting separate claims in for each unit rather than one claim per qualification. Correct staff initials on claims continue to be an issue. The correct assessor initials for each candidate for each unit should appear under the grade submitted on an Interchange claim. This allows the moderator to select their sample correctly, ensuring all assessors are represented in their sample.
- Internal standardisation is a mandatory requirement for centres. Quite often records shown merely
  agree or not with the overall grade without giving evidence of specific criteria within the work. Where
  centres have only one teacher involved in delivery and assessment, any other Level 3 assessor can
  be asked to internally standardise. They are checking the standard rather than the accuracy of the
  content.
- The secure site was difficult to use for some centres and therefore they did not upload their work in a systematic manner, so it was difficult to navigate.

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#### Comments on individual units

#### Unit 1: Building positive relationships in health and social care

P1 asks candidates to explain different types of relationships that can be built in health, social care or childcare environments. The command verb is explain, which requires detail covering the how and why. At least two types of relationship should be explained and at least two environments must be used. Candidates can use two health, social care or childcare environments from the same sector. This task is often over produced as candidates cover all five types of relationship listed in the specification, rather than apply the plural rule.

M1 candidates must make sure they address the command verb 'analyse' and use the teaching content to interpret the word 'context'. The word 'and' in the final part of the assessment criteria has caused some confusion. To clarify, at least two environments should be referred to, there is no need to cover all three sectors. Candidates would benefit from watching TV programmes such as 999 Emergency or Casualty to observe the role context plays in building positive relationships.

For P2 candidates must explain factors that can influence the building of positive relationships in health, social care or childcare environments. While the teaching content guides what factors must be delivered in the classroom, in terms of types and examples, candidates are required to explain at least two. 'At least two' means two examples of factors (e.g. eye contact and lighting) not the whole of the content for at least two types of factors, e.g. communication and cultural. Again as with P1 and in fact all assessment criteria except P4 and P5, at least two environments must be referred to. This task is often over produced, with candidates producing reams of evidence when the plural rule can be applied.

P3 requires candidates to explain at least two strategies to make sure a person-centred approach in health, social care or childcare environments. At least two strategies must be explained; many candidates explain all four strategies listed in the specification. M2 is occasionally blended with P3, but good practice is to attempt this separately as the command verb is 'analyse'. Candidates would benefit from watching videos from the Social Care Institute of Excellence (SCIE) and observing strategies being put into action.

P4 and P5 are practical tasks which require the candidate to do something. Candidates must demonstrate effective communication skills in a one to one and group interaction to build a positive relationship in a health, social care or childcare environment. Only one environment is required and many may choose to use interactions from work placement. Both interactions must be **effective** and therefore if a witness statement is used as the assessment method, there must be reference to this.

When candidates address M3 they must review the effectiveness of the communication skills used during both interactions rather than just the one to one or group.

D1 is very much a stand-alone task. Candidates must justify the use of reflective practice to make sure interactions build positive relationships in health, social care or childcare environments. There is no requirement to reflect further on their own interactions but instead to justify the use of the concept of reflective practice. Candidates can go off on a tangent in D1 writing reams about reflective practice without focusing on how it ensures interactions build positive relationships.

#### **Unit 5: Infection Control**

P1 relates to 1.1 and 1.2 of the teaching content and all common terms should be described. P2 asks candidates to explain how risks associated with poor infection control are different for different health and social care environments. At least two risks should be explained and there should be application to at least two environments. These criteria had proved difficult for some candidates; the differences should

be linked to the service users and it would therefore be helpful to have, for example, a nursery environment and a residential care home environment.

P4 asks candidates to outline the ways in which infection can be transmitted from one body to another. While the command verb is 'to outline', much of the information in 2.1 of the teaching content should be covered. Both P3 and P4 could be assessed through a poster, chart, booklet or PowerPoint presentation.

Candidates need to demonstrate at least two methods used to prevent the spread of infection to address P5. This could be evidenced through the use of witness statements. Candidates are still producing extra, unnecessary written work as well as a witness statement.

In P7 candidates are asked to explain the purpose of protective clothing in controlling the spread of infection. The emphasis should be on the purpose of the protective clothing rather than naming different types of protective clothing.

Good practice would be to use statistical evidence to back up D1, to analyse the effectiveness of immunisation in controlling infection. Candidates neglect to use recent current data, for example Covid figures, which would be ideal for the effectiveness of immunisation.

P8 requires candidates to state a range of methods of monitoring to make sure adequate cleaning. The command verb lends itself to poster or leaflet work, however candidates must focus in on the term 'methods of monitoring' rather than 'methods of cleaning'.

There have been some queries over the following two criteria; P10: Explain the importance of following policies and procedures to ensure effective infection control and M4: Explain the purpose of policies and procedures in promoting good standards of infection control. Guidance has been to merge the two criteria together as one task and to make sure that when explaining the purpose of policies and procedures, reference is also made to the importance.

#### Unit 12: Promote positive behaviour

This unit is growing in popularity and there has been some excellent work produced. It is a synoptic unit which draws together knowledge and understanding from other units. As such, it is advisable to cover this unit towards the end of the qualification.

P1, P2 and P4 are all practical tasks where candidates need to demonstrate skills. Each could be evidenced through the use of witness statements or video evidence. P1, 2 and 4 are usually based around a character or a case study. Often candidates submit a profile of the individual and use this to develop scripts and daily plans.

M1 and M2 both require the candidate to 'assess' and that requires them to form an opinion or provide a judgement. The command verb assess is usually addressed through continuous prose.

M3 and D1 ask the candidate to evaluate and this means both sides should be presented, whether that is advantages and disadvantages or strengths and weaknesses. A conclusion would be expected.

When producing evidence to address P5, describe legislation related to promoting positive behaviour, the content should relate to 4.1 of the teaching content. At least two pieces of legislation should be described.

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#### Unit 14: The impact of long-term physiological conditions

This unit is a synoptic unit which draws together knowledge and understanding from other units. As such, it is advisable to cover this unit towards the end of the qualification.

P1 requires candidates to summarise types of long-term physiological conditions. The teaching content identifies five different types and all should be covered, as a summary is asked for.

P2, P3 and M1 could be blended together in one task. The information provided in the teaching content 1.2, 1.3 and 1.4 should form the basis of the evidence. Candidates could select at least two long-term physiological conditions for this and may continue to use the same conditions for P4, P6 and P7.

P5 requires candidates to describe two possible ways of monitoring a long-term physical condition. Please note, this is one condition only and the emphasis is on 'ways of monitoring', as outlined in 2.2 of the teaching content.

Candidates could use a case study or a blog as the basis for M2: analyse the impact of current monitoring and treatment of long-term physiological conditions on an individual's life. The impact can extend beyond the physical impact and consider other areas of PIES (physical, intellectual, emotional and social).

When completing evidence for P8 candidates should describe services that best support the needs of two individuals, each of whom has a long-term physiological condition. M3 however focuses on one individual and one long-term physiological condition. Candidates must analyse local service provision available for an individual with a long-term physiological condition.

Learning Objective 4 requires candidates to know about end of life care. P11 asks candidates to describe strategies and frameworks available to support individuals in the terminal stages of a long-term physiological condition, as strategies and frameworks are plurals at least two of each should be described. This assessment criteria relates to 4.1 and 4.2 of the teaching content.

#### Other popular units

Units 10, 13, 17 and 24 remain popular optional units. In Unit 10 M2 candidates often miss sustainability of diet, instead concentrating on how the diet benefits the individual.

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Unit 24 seems to be taking over from Unit 10 in terms of popularity. There is a wealth of information concerning Covid, which could be used to support assessment of Unit 24.

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