



**General Certificate of Secondary Education
June 2012**

Health and Social Care 48202

(Specification 4820)

**Unit 2: Health, Social Care and Early Years
Provision**

Report on the Examination

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Generally candidates' work was well-organised and arrived in good time for moderation for which the moderators were grateful. Where candidates' work followed the bullet point order in the specification and used each bullet point as a sub-heading, the work tended to be focussed appropriately and the moderation process was greatly assisted. There was relatively little incomplete work submitted. The work of some candidates on this unit, however, could be improved and would justify higher marks if a more organised and focussed approach was adopted and/or additional detail included.

Assignment 1

The needs of the chosen individual were generally clearly identified by the majority of candidates. In some cases, however, the focus of this introductory part of the work tended to drift into other areas, e.g. treatments that the chosen individual received. Some candidates produced detailed case study information about their chosen individual, but failed to identify the needs requiring professional services clearly. There is no requirement, or credit, for the inclusion of needs which do not lead to service provision for the individual.

More-able candidates tended to give very detailed accounts of the relevant medical conditions. This is appropriate, provided that the work is an account of the individual's medical condition and not just a general account of the condition itself.

Work for the second bullet point could still be significantly better in many portfolios. Descriptions of local services that may meet the client's needs do not require information identifying and describing alternative providers within the local community, e.g. different GP services. Candidates should focus exclusively on the service providers actually engaged with the chosen individual. Candidates should be encouraged to include relevant information about the services in terms of their position in the national framework and their internal organisation, e.g. departmental structure.

Candidates may include labelled diagrams to support their work in this section, but they should not rely only on such diagrams. The work for this bullet point benefits greatly if written explanations of what the diagrams show are included, e.g. what is the local Primary Care Trust, Strategic Health Authority, etc. The focus of this section and this first assignment in general is service provision to meet the individual's needs. While it is inevitable that candidates will mention job roles in their work, these are the focus of Assignment 2 and should not, therefore, be included in detail here. There is no requirement for candidates to include funding or any financial arrangements or information in their work. Detailed information of the nature of services provided is best employed in the last bullet point of the assignment.

Identification of local and national partnerships working to ensure the integration of services still tends to be weak or absent in the work of some candidates. Candidates may include any combination of teams, groups and/or services from within the same sector or cross sector, who work together to provide integrated care services for the individual. Many candidates successfully explained the two-way flow of information about the individual between care workers in this section.

How the services were obtained and the identification of potential barriers tended to be covered appropriately. It is not necessary for candidates to attempt to cover all the potential barriers named in the specification. Only those which apply to the chosen individual should be included. There is no credit for generic explanations of potential barriers.

There were few misinterpretations and inappropriate evaluations of how the client's needs are met. The requirement is for evidence that matches service provision to the individual's needs and not how well the services deliver care for the individual. Candidates need only consider what the services provide and how these meet the client's needs. The client's

perspective of his or her care or the opinion of the candidate on the quality of care provided, is not the focus. Generally candidates who consider the individual's needs in detail and link these to service provision are able to access higher marks. It is intended that this section is a major quality differentiator in the assignment and candidates should focus their efforts accordingly.

Assignment 2

Candidates may use care worker roles from the services of Assignment 1 or they may choose three completely different care worker roles or any combination of the two. Informal care roles are not appropriate and candidates are advised to focus on providers of care rather than support staff for their selections. Some candidates offered information on more than three roles, but this can gain no additional credit.

There were some very good descriptions of the roles and skills of the care workers. Some candidates, however, had downloaded information from the Internet and offered it, either as a verbatim account or as a “cosmetically” altered, part-verbatim account. Such work cannot be credited as the candidate's own work and could be viewed as plagiarism.

There were some good descriptions of the skills that the care workers need, including communication. Generally, where the work included the more technical skills used by the different care workers as well as the more general skills, then higher marks were gained, e.g. diagnostic skills required by GPs as well as the communication skills. A bullet point list of skills, without further explanation, is of little value.

The work for the third bullet point was incomplete in some cases, e.g. lacking coverage of the specific codes of practice and/or not covering all of the principles of care. The focus of the work in this bullet point is best met when candidates explain how the principles of care underpin specific care actions delivered by the care workers. As the principles of care cover both codes of practice and care value base elements, it is probably easiest to approach this work in terms of the bullet points listed in the specification. Candidates are then able to write about each in turn and include examples from the three care worker roles. To work through the principles and codes for each care role in turn tends to become repetitive and very lengthy and seems to demotivate candidates so that quality is not maintained. Candidates should adopt a positive focus in this work, i.e. what is expected of the carers, rather than a negative focus, on what the carers should not do. When applying the principles of care to the three roles, a persistent common and basic error was to suggest that care workers do not discriminate against their service users if they treat everyone the same. Evidence on the other principles however, was generally more secure in the work of most candidates.

Grade boundaries

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