

Moderators' Report/ Principal Moderator Feedback

Summer 2014

Pearson Edexcel GCSE in Health and Social Care (5HS02) Unit 2 Exploring Health and Social Care & Early Years



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# **Grade Boundaries**

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It was pleasing to see that most centres met the submission deadline this series and candidates had authenticated their work. Centre administration was generally good with few errors noted.

The unit is assessed through the production of a portfolio of evidence based on Controlled Assessment Material (CAM). The requirements of the CAM change each year and give the candidates the choice of two service user groups on which to base their assignment. For June 2014 the two service user groups were in the categories of Early Years and Health Care. The majority of candidates chose Early Years as their service user group and, for the most part, completed the tasks quite well. Despite choosing Early Years, many candidates focussed on children who had specific needs. Whilst this was quite acceptable it was not required and candidates should have considered how service providers meet general needs rather than specific needs. Those candidates who focussed on Health for the most part made the tasks far more difficult than was required by considering a very large service provider such as a whole hospital rather than focussing in on one department or looking at their own GP practice which might have been easier for them to gain relevant information. Nursing homes would also have been appropriate service providers to consider.

As has been seen in past years, assessment was once again either very accurate or very lenient with some Centres still struggling to interpret the requirements of the Assessment Objectives. However, generally, centres are taking a much more holistic approach to assessment which was pleasing to see. Centres might find the following useful for future series.

The assignment for 2014 comprised five tasks which provided evidence for the variety of contexts. The tasks covered the main elements of the syllabus.

Candidates would benefit from going out on placement and basing their report on their experience within the placement but this is not a requirement and centres can use visiting speakers and case studies for the candidates to base their assignments on. One issue with the use of case studies is that it makes it more difficult for candidates to obtain evidence from primary research, a requirement of Task 3 and an aid to gaining marks in the higher mark bands for AO2(i).

The CAM required the candidates to complete five tasks under Controlled conditions within a suggested time frame of 22.5 hours. Centres should note that the 22.5 hours is only a guideline and refers to the time allowed to write up the portfolio. Research time may be in addition to the 22.5 hours. However, centres should note that any data obtained during research must not be analysed outside the controlled environment and only raw data should be taken in to the environment.

The assessment requirement is to provide evidence of knowledge and understanding, planning and research, application, analysis and evaluation of information. As mentioned above, the various tasks, if undertaken correctly, will provide evidence for all four assessment objectives and therefore assessment should be holistic and not based on a task per assessment objective method. It was clear from portfolios sampled that assessors are finding this easier as the qualification becomes more established.

#### **Assessment Objective 1**

This assessment objective assesses knowledge and understanding and evidence should be found throughout the portfolio and particularly within Tasks 1, 2, 3 and 4. In general candidates were able to discuss the needs of the individual service user for Task 1, the services provided by the service provider for Task 2 and the roles of workers for Task 3 quite well. Evidence of an understanding of the National Framework was less well evidenced. Centres should note that for Early Years the National Framework is the Early Years Foundation Stage and it is this that should be discussed. For Health the NHS has a range of frameworks which could have been referred to, however, they are generally more difficult to identify and therefore the structure of the department from the Government down to the local provision would suffice although candidates should identify where their chosen service provider fits in to this framework. Candidates were also expected to demonstrate knowledge and understanding of other agencies who work in partnership with the service provider to provide care for the service user. This element was not well done by a large percentage of candidates. Many had identified inappropriate examples including external catering companies and waste disposal companies as examples. External agencies should be those that have some involvement in the planning of care for the service user. Examples might be the Health Service providing School Nurses, Health Visitors, Speech Therapists and so on, Children's Services (Social Services) providing Social Workers and the Education Department providing Educational Psychologists for Early Years. In terms of a Health Care Provider external agencies might be Social Services, Education and voluntary organisations. Examples might include Alcoholics Anonymous, Frank, MacMillan and the NSPCC. The focus here should be on care planning. Finally, Candidates were expected to demonstrate an understanding of the difference between universal and targeted services. This was not well demonstrated across a significant number of entries.

### Assessment Objective 2(i)

This assessment objective assesses the candidates' ability to plan their work and undertake both primary and secondary research. Marks are also awarded for independent work. It was disappointing to see that there was minimal reference made by assessors to the amount of help required by the individual candidates and hence it was not clear how much independent work had been completed. Planning was evidenced in some portfolios by the inclusion of an action plan for completion of the portfolio and this is considered good practice although completion of all elements of all five tasks was accepted as evidence of implicit planning. In the majority of cases, however, elements of some of the tasks had been omitted. This was most apparent in Task 2 where a discussion of the role of multi-agency working and the difference between universal and targeted services was not seen. There was some very good evidence of both primary and secondary research seen in many portfolios with candidates providing comprehensive bibliographies as evidence of secondary research and questionnaires or transcripts of interviews for primary research.

#### Assessment Objective 2(ii)

This assessment objective assesses the candidates' ability to apply the knowledge shown in AO1 and as in previous series this was weak in the majority of portfolios and had been over assessed. There are multiple opportunities throughout all the tasks for learner to demonstrate their ability to apply knowledge but many had been missed. A discussion of how the service provider works with external agencies to provide care for the service user, the method of referral used and the barriers specific to the service user are all examples. Many candidates had included Maslow's hierarchy of needs in their evidence for Task 1 but a significant percentage had merely included the diagram with no evidence of application of the hierarchy to the service user. Evidence for this AO is also provided through discussion and application of Care Values. Once again, in the majority of portfolios seen the Care Values were discussed very briefly showing limited understanding and application was not well evidenced. For future series. candidates wishing to achieve marks in the top two mark bands need to discuss all Care Values in detail and then provide clear examples of how the workers implement the Care Values to evidence an ability to apply knowledge and understanding. The Quality of Written Communication (QWC) should also be assessed in this AO and there was limited evidence seen that assessors had taken QWC into account when awarding marks

#### **Assessment Objective 3**

This final AO assesses the candidates' ability to analyse and evaluate information and once again this was not well done and for the most part had been leniently assessed. Analysis can be clearly evidenced through interpretation of data obtained from primary and secondary research and yet in too many cases whilst it was clear that candidates had used questionnaires or undertaken interviews there was limited, if any, evidence of conclusions drawn from the information gained. Many candidates had just included the questionnaires and not commented on the information at all.

Evaluation skills were not well evidenced in the main with the majority of candidates merely providing descriptive comments and not evaluative statements. Whilst it is understood that this is a difficult skill for candidates of this age, it is important that assessors do assess this element accurately and ensure that where marks are awarded in the top two bands, candidates have considered how effective the service user is at meeting the needs of the service user. This should be done by discussing the strengths and weaknesses of the service provision and, most importantly, relevant conclusions should be drawn. Candidates had attempted to make suggestions for improvement but these were limited and not fully justified. Again, the QWC is assessed in this AO and for the most part this does not appear to have been taken into account.

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