CACHE Level 3 Applied General Award in Health and Social Care- 603/2913/0

Assessment Code: AGAHSC

Paper number: P001693

Assessment date: 09/03/2023

This report contains information in relation to the external assessment from the Chief Examiner, with an emphasis on the standard of learner work within this assessment window.

The aim is to highlight where learners generally perform well as well as any areas where further development may be required.

Key points:

- Grade Boundary Information
- Administering the external assessment
- Evidence creation
- Standard of learner work
- Responses of the tasks
- Regulations for the Conduct of External Assessment

It is important to note that learners should not sit the external assessment until they have taken part in the relevant teaching of the full qualification content.

Grade boundary and achievement information

Each learner's external assessment paper is marked by an Examiner and awarded a raw mark. During the awarding process, a combination of statistical analysis and professional judgement is used to establish the raw marks that represent the minimum required standard to achieve each grade. These raw marks are outlined in the table below.

Grade	NYA	Pass	Merit	Distinction
Raw mark grade boundaries	0	33	45	57

Below you will find the percentage of learners that achieved each grade.

Grade	NYA	Pass	Merit	Distinction	Learners	9
% of learners	66.67	22.22	11.11	0.00	**Pass Rate**	33.33

Administering the external assessment

The external assessment is invigilated and must be conducted in line with our Regulations for the Conduct of External Assessment. Learners may require additional pre-release material in order to complete the tasks within the paper. These must be provided to learners in line with our Regulations.

Learners must be given the resources to carry out the tasks and these are highlighted within the Qualification Specific Instructions Document (QSID).

Evidence creation

Learners should use the space provided to answer questions. Where answers are typed or additional pages included, the learners name, centre number, centre name and task number must be clearly visible. The additional paper must then be securely attached to the workbook.

Standard of learner work

The quality of the candidate's work was consistent across most of the candidates. Quality of responses were weak, with most candidates failing to achieve a pass grade.
Most questions were attempted, even when gaps in knowledge were present. The low pass rate being evidence of such gaps in knowledge and depth of knowledge across many questions. Candidates failed to pick up enough AO1 marks, that may have secured a pass grade. Candidates also struggled to engage sufficiently with extended response questions, with the requirement to discuss proving challenging. The engagement and preparation for learners to access AO3 marks needed to be reflected upon.

Responses of the tasks within the sections of the external assessment paper

Question 1a
The question was answered by all candidates, with all gaining marks for the reason why the retired population could increase the need for HSC services. The second mark, for an example of a HSC service linked to the retired population, was usually awarded, but some candidates lacked thought in the relevance of the service chosen, stating for example hospitals.

Question 1b
Candidates often struggled to explain the way the availability of informal care influences the need for HSC services.

Question 1c
Candidates showed gaps in knowledge with most not able to describe the co-production approach. Responses were focused on providers working together rather than providers working with service users.

Question 2a
Another question that presented gaps in knowledge in the understanding of 'needs led provision'. Many responses answering in terms of a person-centred approach, that if expressed appropriately gained a mark, put lacked the extension to gain the further mark.

Question 2b

This was generally answered effectively by candidates. Stating the specific impact on development was occasionally omitted, but the understanding of the positive impact of leisure activities was evident.

Question 3a

Responses to the service a nursing home provides referred to general services that could be offered by other services, such as a care home; answers were therefore not specific.

Question 3b

The service a hospice provides also referred to general services that was not specific to a hospice. Both 3a and 3b were poorly answered by candidates, despite the opportunity to gain the easier AO1 marks.

Question 4

Candidates needed more engagement with the command verb *discuss*, in terms of the benefits of Safia maintaining her independence. Content in this extended response questions tended to offer simplistic points as well as some unrealistic points regarding how independence impacts on Safia's failing health. Responses did not move beyond mark band two due to lack of AO3 content.

Question 5a

Candidates accessed the full marks available for this question and were able to define confidentiality and dignity.

Question 5b

Candidates presented a basic understanding of ways to promote dignity, subsequently the second way did not always gain marks. Answers were often based on respecting dignity when undertaking personal care tasks e.g., ensuring privacy. A lack of knowledge of the scope of dignity was therefore evident, for example, control over decision making, social inclusion and respecting an individual's identity.

Question 6

Candidates expressed a basic understanding of the Mental Capacity Act. Details of the principles of the Act were limited and lacked AO1 detail and coverage. There was a lot of response content that was unrealistic in terms of what the Mental Capacity Act can ensure, for example, it cannot ensure decisions made about care are correct. It is points like this that could have offered points of discussion, but where not made. Subsequently responses often did not go beyond the second mark band.

Question 7a

Candidates did not show an understanding of the role of NICE. A gap in knowledge across all candidates was evident in this question.

Question 7b

A description of how Healthwatch England and health and well-being boards support service users rarely gained marks. Candidate points were general and lacked knowledge on many of the marks available that were focused on provision and services within an area to meet population and service user's needs.

Question 8

Although no mark band three responses seen, this extended response question had some good engagement in terms of what Safia's move into a hospice will mean for George. Points did not always

make explicit links back to George's development and tended to offer a positive view for George rather than considering both pros and cons. Discussion was underdeveloped.

Question 9a
Candidates were unable to explain an intrinsic factor that could support George's transition, incorrectly explaining an extrinsic factor instead.

Question 9b
An extrinsic factor appeared easier to accurately identify and explain than an intrinsic factor from

Question 9a
Family, friends, social support were popular responses.

Question 10a
Most candidates correctly identified the medical model of health.

Question 10b
Candidates generally picked up one and often two of the three marks available for the application of the medical model.

Question 10c
The social model of health was well received by candidates. An understanding of the model was presented. Some candidates did not engage with the stem, in terms of the application of the model in understanding reasons of ill-health in adults with low-income and living in poor-quality housing, referring to Safia and George instead. Responses with the correct focus offered some good engagement, although a more in-depth understanding of the application of the model was required for the higher band marks.

Question 11
Life events were relevant to an infant and to a young child, as per the specification. Candidates answered this question with appropriate knowledge and engagement.

Question 12a
Generally, candidates picked up a mark for a basic understanding of 'conditioning'.

Question 12b
Some muddled understanding of operant conditioning and classical conditioning, resulting in some candidates only picking up one mark for a general response to learning theory in terms of how children acquire language. Other responses offered only a basic link to reinforcement of language and failed to explain the process.

Malpractice

There were no instances of malpractice in this assessment window. The Chief Examiner would like to take this opportunity to advise learners that instances of malpractice (for example, copying of work from another learner) will affect the outcome on the assessment.

Maladministration

No maladministration was reported in this assessment window. The Chief Examiner would like to highlight the importance of adhering to the Regulations for the Conduct of External Assessment document in this respect.

Chief Examiner: Vickie Davis
Date: 11.05.2023