

# Principal Examiner's Report January 2010

GCE

GCE Health & Social Care (6944)  
Unit 7 - Meeting Individual Needs

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## General comments

The GCE Health and Social Care Unit 7 Meeting Individual Needs is a contemporary paper which is particularly relevant to candidates who wish to pursue a practical career in Care.

This is the third time this paper has been taken by candidates and it is also the synoptic paper. It is an A2 paper which consists of 3 questions. Each question has been tiered with longer, cognitively higher questions at the end of each section. The paper totalled 90 marks and candidates were given one and half hours to complete the paper.

All three questions were based around stimulus response material, in particular case studies which had been specifically designed to illicit knowledge or to allow candidates to apply their knowledge and understanding.

Question stems were designed to allow candidates to recall, define, describe, explain, discuss and examine aspects of the unit specification, terms and concepts.

The overall impression given by examiners was that the paper has performed to much the same standard to Jan 2009. The main issues identified included:

- Breadth and depth of knowledge and understanding of the unit specification varied considerably. Some centres had prepared candidates well but in many cases the level of knowledge and understanding was poor particularly regarding organisational culture, quality assurance and the role of government in promoting high quality services.
- Although stimulus response material was provided, many candidates could not apply their knowledge accurately or relevantly. Many candidates had problems in interpreting the question stems accurately, consequently, many candidates gave generic responses particularly in part (e) of each question.
- Candidates had a poor knowledge and understanding of the verb hierarchy and in the longer 8 or 10 mark questions failed to get into mark band 3 as their ability to analyse and evaluate was weak.
- In addition, there was a lack of fluency and structure in their longer answers, many candidates describing and explaining and being repetitive in their answers.

## Question 1

The question was based around a case study of a hospital social worker who is involved in the discharge of patients into the community. Part (a) required an accurate definition of the term 'needs led'. The majority of candidates obtained 1 mark for general description which referred to the care planning process and some managed to obtain two marks with a more in depth description relating to needs of the individual. Candidates demonstrated a good understanding of the care plan process in (b) which was attempted successfully. Candidates were asked to identify and explain 2 benefits of care planning on patient well being in (c), the majority of candidates could accurately identify factors but in some cases the explanation was poor and very weak. Many candidates referred to the increase in physical well being as well as improvement in self confidence in (d), however, responses were generic and little discussion took place in many responses.

Part (e) was very poorly answered - few candidates had a full and accurate understanding of what risk meant. Many candidates commenced with a definition but then proceeded to give examples rather than examine the issue. Whilst the example may be used to focus their thoughts and answers, the responses were limited in content and resulted in any candidates not progressing further than mark band 1 with a few into mark band 2.

### **Question 2**

The question focused on how the hospital promoted good quality care. On the whole, this question was successfully attempted with some good, high calibre answers. Part (a) was successfully attempted by the majority of candidates accurately identifying from the case study ways the hospital promoted a positive care environment. There were some poor answers to (b). Very few candidates could explain what the term 'accountability' actually meant with some giving peculiar answers indicating that it related to finance! In contrast, many candidates then redeemed themselves in (c) by accurately explaining the benefits of effective recruitment and selection. This is a familiar question to many centres and it was obvious they had prepared candidates well for it. Part (e) was disappointing in content. This was a synoptic question in which candidates should have been able to transfer knowledge across from 6940. However, many candidates could not get above mark band 1 with the majority of candidates only able to achieve mark band 2.

### **Question 3**

The question focused on quality assurance procedures - clinical governance, etc. and, in general, was poorly attempted. Although candidates could explain what was meant by the term 'quality assurance', responses to what the term 'clinical governance' meant were particularly poor with a lot of blank spaces. However, once again, candidates did compensate for this in (c), whereby they gave accurate and relevant responses to the benefits of involving patients and the public in quality assurance.

Part (d) was poorly answered with many candidates unable to achieve more than 3-4 marks for discussing the role of central government. Many responses focused on legislation and finance. Part (e) was particularly disappointing - there was a general lack of knowledge and understanding, little balance in answers, brief critiques and a general inability to develop fluent well structured answers.

## Grade Boundaries

### 6944: Meeting Individual Needs

| Grade                 | Max. Mark | A  | B  | C  | D  | E  |
|-----------------------|-----------|----|----|----|----|----|
| Raw boundary mark     | 90        | 52 | 45 | 39 | 33 | 27 |
| Uniform boundary mark | 100       | 80 | 70 | 60 | 50 | 40 |

#### Notes

**Maximum Mark (Raw):** the mark corresponding to the sum total of the marks shown on the mark scheme.

**Boundary mark:** the minimum mark required by a candidate to qualify for a given grade.

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