

Examiners' Report/  
Principal Examiner Feedback

January 2013

GCE Health & Social Care (6944)  
Paper 01  
Unit 7 - Meeting Individual Needs

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Publications Code UA034201

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## **Introduction**

This paper consisted of three questions, each of which totalled 30 marks. The paper covered the specification accurately and relevantly. The format of the paper has remained unchanged from the previous series. Each question commenced with a case study scenario which provided a generic setting for the questions asked.

Questions were structured in such a way that straightforward recall knowledge questions were asked at the beginning and then more complex extended writing questions were asked at the end ranging from 8-10 marks. The mark scheme was tiered to provide access for all calibre of candidates therefore making the paper fair and equitable. Consequently, the paper has discriminated well amongst candidates.

## **Strengths**

- Candidates were well prepared for this paper. It would seem that centres have used past papers as a means of preparation and this has worked well in that candidates could provide logical, well-structured responses.
- Level of knowledge and understanding was good and is consistent with the previous series and there were no obvious gaps in knowledge as all questions were attempted
- Ability to accurately interpret question stems and provide an accurate and relevant answer is also consistent with the previous series
- Quality of written communication continues to improve
- More candidates are attempting to provide coherent, structured and accurate answers to those questions which require extended writing

## **Areas for improvement**

- Candidates knowledge of quality issues requires improvements
- Ability to keep responses relevant was not well completed
- Tendency of candidates to write 'all they know' rather than tailor their response still pre-dominates, this was particularly true in question 1 on organisational culture
- Finally, candidates do tend to 'run out of steam' in that by the third question, even if it is one they are familiar with, they tend to provide very vague, weak and limited responses.

## **Question 1**

This question focused on the quality assurance measures used by service providers. The responses in general, to all five questions were disappointing and reflect a general lack of understanding of this area of the specification. Contemporary health and social care is a major area of policy and practice.

Part (a) was a two mark question which asked candidates to identify two quality assurance measures. Generally well answered but some candidates were very vague and provided generic responses such as internal quality methods when centres are required to be specific.

Part (b) was a four mark question with the majority of candidates achieving 2-3 marks. In general the knowledge base is accurate and adequate on this aspect of the specification.

Part (c) was a badly answered question on organisational culture. Candidates wrote all they knew about organisational culture without tailoring their response accurately to the question stem. Questions of this nature tend to be generically written and candidates are not required to know about Charles Handy.

Part (d) saw slightly disappointing responses on staff development which is familiar to candidates. The majority of candidates achieved level 2 (4 marks). They threw a lot of marks through being repetitive, too one sided and not giving a good full discussion.

Part (e) was badly answered overall. The majority of candidates achieved top of level 1 (3 marks) and level 2 (4-5 marks). The main issue is lack of understanding of quality assurance, poorly structured responses and a lack of balance in their evaluation.

## **Question 2**

This question focused on Stonelodge Hospice which is a voluntary organisation. Overall this question was marginally better answered than question 1.

Part (a) saw 3-4 marks mostly achieved. Good knowledge and understanding was demonstrated on the difference between a voluntary and statutory organisation.

Part (b) should have been a relatively straightforward question with candidates achieving at least 3 marks for each explanation however their explanations in some situations were very generic and disappointing particularly on empowerment.

Part (c) was adequately answered with candidates making a good attempt at it. A minority got 'networking' mixed up with computer networking.

Part (d) saw disappointing responses, it has been on the paper before but candidates understanding of the voluntary sector is limited and very generic – run by volunteers, localised within communities etc without referring to the large voluntary organisations who are campaigning and lobbying government through national newspapers. These organisations are instrumental in bringing about policy change e.g. current debate on elderly care.

## **Question 3**

Part (a) saw some good responses with accurate definitions being given.

Part (b) was a synoptic question which allows candidates to carry their knowledge across from other units. Good overall responses were seen reflecting knowledge of the PIES.

Part (c) saw some good responses however they tended to be limited to needs to change medication, her condition may be deteriorate rather than

understanding the theory behind reviews – equal participation, client and carer voice being heard, role of multi-disciplinary practice and involvement etc.

Part (d) based upon team working was adequately answered although responses tended to be generic, lacked firm and coherent discussion and candidates did not achieve any more than level 2 (4 marks).

Part (c) witnessed knowledge of team working being transferred over to this question on multi-disciplinary practice which played to some candidates advantages however their level of evaluation and analysis was weak.

## **Grade Boundaries**

Grade boundaries for this, and all other papers, can be found on the website on this link:

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Order Code UA034201 January 2013

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