

# 3625-30 — Level 3 Advanced Technical Diploma in Health and Care

2018

**Qualification Report** 

# **Contents**

Introduction	3
Qualification Grade Distribution	
Theory Exam	
Grade Boundaries	
Chief Examiner Commentary	
Synoptic Assignment	
Grade Boundaries	
Principal Moderator Commentary	

## Introduction

This document has been prepared by the Chief Examiner and Principal Moderator; it is designed to be used as a feedback tool for centres in order to enhance teaching and preparation for assessment. It is advised that this document is referred to when planning delivery and when preparing candidates for City & Guilds Technical assessments.

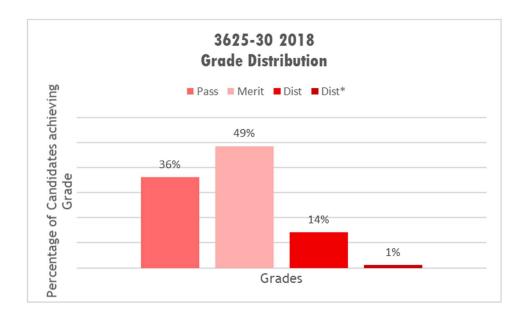
This report provides general commentary on candidate performance in both the synoptic assignment and theory exam. It highlights common themes in relation to the technical aspects explored within the assessment, giving areas of strengths and weakness demonstrated by the cohort of candidates who sat assessments in the 2018 academic year. It will explain aspects which caused difficulty and potentially why the difficulties arose.

The document provides commentary on the following assessments;

- 3625-030/530 Level 3 Advanced Technical Diploma in Health and Care Theory Exam
  - o March 2018 (Spring)
  - o June 2018 (Summer)
- 3625-031 Level 3 Advanced Technical Diploma in Health and Care Synoptic Assignment

# **Qualification Grade Distribution**

The grade distribution for this qualification is shown below;



Please note City & Guilds will only report qualification grades for candidates who have achieved all of the required assessment components, including Employer Involvement, optional units and any other centre assessed components as indicated within the Qualification Handbook. The grade distribution shown above could include performance from previous years.

# **Theory Exam**

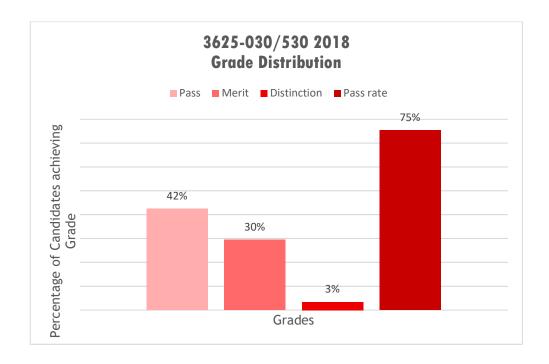
## **Grade Boundaries**

Assessment: 3625-030/530 Series: March 2018 (Spring)

Below identifies the final grade boundaries for this assessment, as agreed by the awarding panel;

Total marks available	60
Pass mark	24
Merit mark	33
Distinction mark	43

The graph below shows the distributions of grades and pass rate for this assessment;

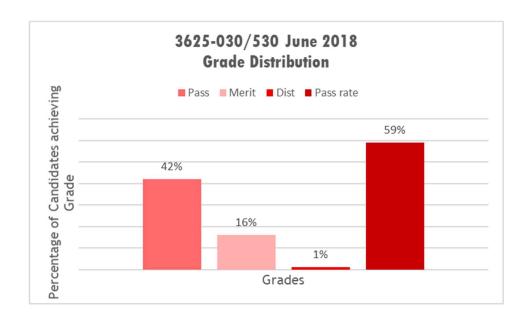


Assessment: 3625-030/530 Series: June 2018 (Summer)

Below identifies the final grade boundaries for this assessment, as agreed by the awarding panel;

Total marks available	60
Pass mark	25
Merit mark	34
Distinction mark	44

The graph below shows the distributions of grades and pass rate for this assessment;



## **Chief Examiner Commentary**

# 3625-030/530 Level 2 Technical Certificate in Healthcare, Care and Childcare - Theory exam

#### Series 1 - March 2018

This examiner report relates to the third cohort of candidates that sat the 3625-030/530 Level 3 Health and Care March 2018 examination.

This is the second year of this qualification where learners have completed an examination to assess specified units from the Level 3 Advanced Diploma in Health and Care. It should be noted that future exams will sample different topics and learning outcomes from the specified units, so this commentary relates to the March 2018 examination only.

It is encouraging to note that candidates in this cohort demonstrated a significant improvement in their responses to the exam command words and gave answers which generally reflected the number of marks awarded to each individual question.

Candidates were not penalised for poor spelling, grammar and punctuation providing the answer given was clear and coherent. A minority of candidates repeated the question as the start of an answer which was unnecessary and gained no marks.

Candidates were clearly prepared to show their knowledge and understanding in the following topic areas:

- The importance of challenging discrimination
- Misinterpreting communication
- Assessing hazards and risks
- Health and Safety legislation
- Safeguarding procedures

Most candidates could recall information, and many could apply it to the scenario presented in the question with a degree of competence. However, some candidates did not secure marks where they had not fully or correctly interpreted the question and therefore did not give a response in sufficient breadth.

Candidates were less well prepared for the examination in the following topic areas:

- Prejudice, discrimination and stereotyping/covert discrimination
- Barriers to equal opportunities/concept of institutionalisation
- Technologies supporting communication
- Health service provision/non-acute health services

Some candidates omitted to answer exam questions on these topics completely or clearly made a guess at a probable answer. Answers to many of these indicate that candidates had not read and understood the focus of the questions correctly or had little knowledge of the concepts. For example, a question in relation to the concept of institutionalisation, many candidates did not secure marks as they gave answers

identifying availability of equipment or factors about the routines followed in residential facilities, rather than the impact on the resident.

Many candidates did not make any reference to current emerging technology used in health and care but relied on giving examples of existing aids to communication to illustrate their answer. They did not include examples to illustrate efficiency in care delivery, enabling support of individuals or the personalisation of services. A minority of candidates gave examples of challenges in using emerging technologies.

Candidates who were reliant on recall to achieve marks were able to achieve grades within the Pass range while the better prepared candidates demonstrated competency in drawing on wider depth of knowledge and applying it when required by the exam question.

#### **Extended Response Question**

Most candidates were able to give a structured, holistic response to the extended response question. This was also a marked improvement in exam skill as they applied knowledge to the scenario in much more depth and breadth than in the previous 2017 exam series with the majority gaining marks for correctly identifying and applying legislation. Some candidates were awarded marks in the higher band as answers included reference to theories and used illustrative examples.

#### Series 2 - June 2018

This examiner report relates to the cohort of candidates who completed 3625-030/530 Level 3 Health and Care June 2018 examination.

The commentary for the June 2018 examination refers specifically to the content of this paper. All future papers will sample different topics and learning outcomes.

Most candidates were able to gain marks for answers requiring recall information and showed their understanding of a range of unit information in descriptive answers. Full marks were often not awarded as the application of information was not included in the answers.

Candidates were not penalised for poor spelling, grammar and punctuation providing the answer given was clear and coherent. A minority of candidates had very poor legibility, therefore it is encouraged that candidates write their responses as clearly as possible.

Candidates were well prepared to demonstrate their knowledge and understanding in the following topic areas:

- The impact of an ageing population
- Cultural competence
- Protected characteristics stated in The Equality Act 2010
- Effects of illness on communication
- Communication barriers
- Risks, hazards, and health and safety legislation

Most candidates demonstrated knowledge in questions demanding recall of information, and many could apply it to the scenario presented in the question with a degree of competence. Some candidates gave explanations which gave correct information on a topic, but this information was irrelevant to the exam question.

Candidates were less well prepared for the examination in the following topic areas:

- Key developments in the history of the welfare state
- Effects of discrimination on groups
- Types of equality and their benefits
- Theories of interpersonal communication and their application
- The relevance of policies and procedures in service provision

Some candidates omitted to answer exam questions on the topics listed above or did not know the correct answer and gave a generalised response. Answers to many of these indicate that candidates had not read and understood the focus of the questions correctly or had little knowledge of the concepts. For example, candidates selected incorrect theorists when asked specifically to include humanist and behaviourist theories, instead describing a psychodynamic application to a given case study.

When candidates were required to recall information regarding protected characteristics stated in The Equality Act 2010 some candidates used incorrect or incomplete terms which were not awarded marks. Some candidates could not identify

the difference between a risk and a hazard giving a response showing a lack of understanding of the relationship between the two concepts.

It is important that candidates understand the difference between 'affect' and 'effect' in exam questions as a misunderstanding of the question led to an incorrect response. Candidates were not awarded further marks for repeat information offered in answers.

Candidates who were reliant on recall to achieve marks were limited in achieving higher marks /grade, while the better prepared candidates demonstrated competency in drawing on wider depth of knowledge and applying it when required by the exam question.

#### **Extended Response Question**

Most candidates were able to give a structured, holistic response to the extended response question. The majority gained marks for correctly identifying the relevance of appropriate legislation. It is reassuring to observe that many candidates correctly used subject specific terminology in their responses and made strong reference to expected professional practice. Some candidates were awarded marks in the higher band as answers included application of theories and legislation.

# **Synoptic Assignment**

## **Grade Boundaries**

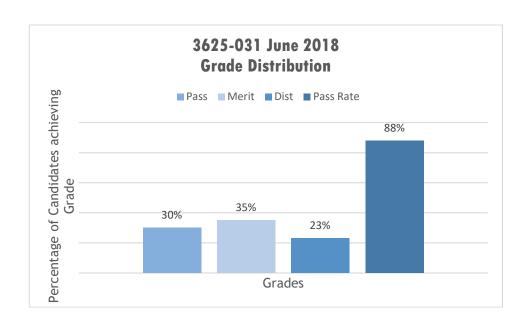
Below identifies the final grade boundaries for this assessment, as agreed by the awarding panel;

Assessment: 3625-031

Series: 2018

Total marks available	60
Pass mark	25
Merit mark	34
Distinction mark	43

The graph below shows the distributions of grades and pass rate for this assessment;



## **Principal Moderator Commentary**

The evidence provided for the synoptic assignment was sufficient, valid and of appropriate quality to support marking and moderation. Where a candidate's work lacked clarity as to its purpose centre staff had generally made comments which provided appropriate justifications and then also reflected these comments in the marking. This is good practice which supports the moderation process.

### Summary of synoptic assignment tasks Case study A

Candidates generally made a good attempt to complete the tasks.

Task 1- This was generally answered well by most of the learners. Many of the marks gained in the higher band showed clear understanding of cognitive impairment and strong links between legislation and holistic practice.

Task 2- Some learners did not achieve marks by not presenting their work as a care plan. Candidates gained marks when they presented the care plan using person-centred approaches with links to health and safety, risk, safeguarding and communication.

Task 3- Candidates gained and lost marks depending upon their focus and attention to the requirements of this task. Some candidates gained marks by including a range of services and by accurately identifying their responsibilities when reporting poor practice.

#### Case study B

All candidates made a good attempt to complete the tasks.

Task 1- Candidates gained marks by providing concise but accurate explanations of safeguarding and abuse. Some candidates could have expanded on how restrictive practices can be used but many candidates provided good explanations of the processes of reporting incidents of abuse.

**Task 2**- The considerations for this case study enabled the candidate to gain marks by clearly identifying the importance of a person-centred approach to reviewing the needs and preferences of the individual. Candidates gained marks by showing that they understood the complexities within the situation and the various people involved. Candidates gained marks when they considered ways to involve the individual to ensure a positive outcome approach.

**Task 3**- Many candidates gained marks by carefully considering the issues raised within the case study and had related these to relevant serious case reviews which highlighted the safeguarding issues. Some candidates did not achieve marks by not developing recommendations.

#### **Professional Discussion**

All candidates made a good attempt to address the topics. The discussions were recorded with accompanying notes and most showed that candidates had prepared well. The process was effectively managed making it easy to moderate. Many candidates gained marks by explaining their knowledge in relation to practice during the discussion. This clearly benefited some candidates as they were able to gain more marks for the whole synoptic. The discussion also enabled the stronger candidates to show they had grasped concepts and principles underpinning care practice, the

importance of reflection and the essence of the values, principles and core care behaviours.

For some candidates the limitations of their placement work had an impact on the completion of reflective accounts in the workbook however this did not seem to impede their responses too much in the discussion. All learners had referenced their work although some provided more detail than others.

#### Commentary on assessment objectives

AO1 – Many candidates had shown recall of legislation and had drawn on knowledge from across the qualification. Candidates lost marks when they did not show linkage between their knowledge and the case study task in sufficient detail. Candidates also lost marks when they provided irrelevant detail showing that they had lost focus. Most learners were well-prepared for the professional discussion and the discussion showed that they had strong recall of the core care behaviours and how they had demonstrated these in their placement. Candidates gained marks when they used terminology correctly and could refer to the wider health and care landscape

**AO2** –Candidates gained marks when they showed causal links in their explanations within the assignment tasks. Candidates lost marks when their responses did not show depth of understanding of some of the concepts and theories relevant to the tasks. They also lost marks when they had clearly misunderstood the remit of the tasks, provided irrelevant detail or lost focus and deviated from the task. Many candidates showed confident responses in the professional discussion and could explain links to care concepts, reflective practice models and the application of legislation to situations observed or practiced within their placement.

Candidates were generally able to use their knowledge of the core care behaviours to evaluate instances of good and poor practice within their placement.

Candidates used a standard referencing framework to record their selection of source material.

AO3 – Candidates generally presented their evidence in a clear format and many were effective in their written tasks showing confident application of written skills. Some candidates were clearly nervous in the professional discussion and initially, for some, their flow was affected by this. In the professional discussion many of the learners were confident in the way they presented their discussion. Weaker candidates needed some prompting but most were able to independently lead the discussion. Most candidates excelled in the discussion when they related the core behaviours to providing care and support. Many of the professional discussions enabled the candidates to show their understanding by self-explanation and it remains a key way for them to gain marks. Markers had provided feedback on poor spelling and grammatical errors in the work and noted where candidates had used a broad range of references.

**AO4** –Candidates who achieved higher marks provided well-rounded responses in the professional discussion and written tasks. These clearly showed links between knowledge and understanding to the task scenarios or situations. Candidates were able to gain marks by showing justifications in their responses. Candidates gained marks when they were able to reflect on the approaches they had taken within their practice in the professional discussion. Candidates gained marks when they showed evaluative skills in their written tasks, especially when they were tackling complex issues.

**AO5** - Candidates lost marks when they wandered off the topic both in written tasks and in the professional discussion. Candidates gained marks when they met the specific

equirements of the task in sufficient detail and expanding discussion points where
appropriate.