



3625-30/31 Level 3 Advanced Technical/Extended Diploma in Health and Care (540/1080)

2023

Qualification Report

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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 2023 academic year. It will explain aspects which caused difficulty and potentially why the difficulties arose.

The document provides commentary on the following assessments:

Year 1

- Pathway 1
 - 3625-530/030 Level 3 Advanced Technical Diploma in Health and Care – Theory Exam
 - March 2023 (Spring)
 - June 2023 (Summer)
 - 3625-031 Level 3 Advanced Technical Diploma in Health and Care – Synoptic Assignment

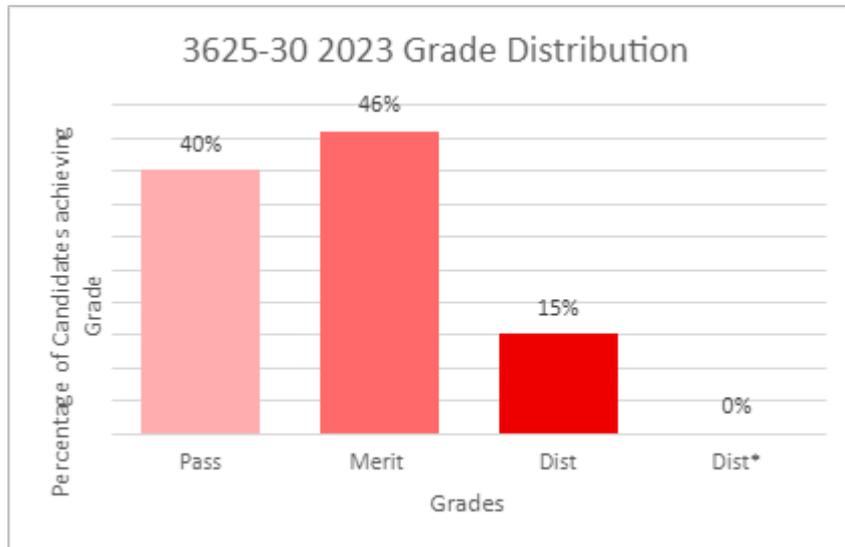
Year 2

- Pathway 1 (Health)
 - 3625-032/532 Level 3 Advanced Technical Extended Diploma in Health and Care – Theory Exam
 - March 2023 (Spring)
 - June 2023 (Summer)
 - 3625-033 Level 3 Advanced Technical Diploma in Health and Care – Synoptic Assignment
- Pathway 2 (Care)
 - 3625-034/534 Level 3 Advanced Technical Extended Diploma in Health and Care – Theory Exam
 - Assessment No. and Title – Theory exam
 - March 2023 (Spring)
 - June 2023 (Summer)
 - 3625-033 Level 3 Advanced Technical Diploma in Health and Care – Synoptic Assignment

Qualification Grade Distribution

3625-30 Level 3 Advanced Technical Diploma in Health and Care (540)

The grade distribution for this qualification is shown below:



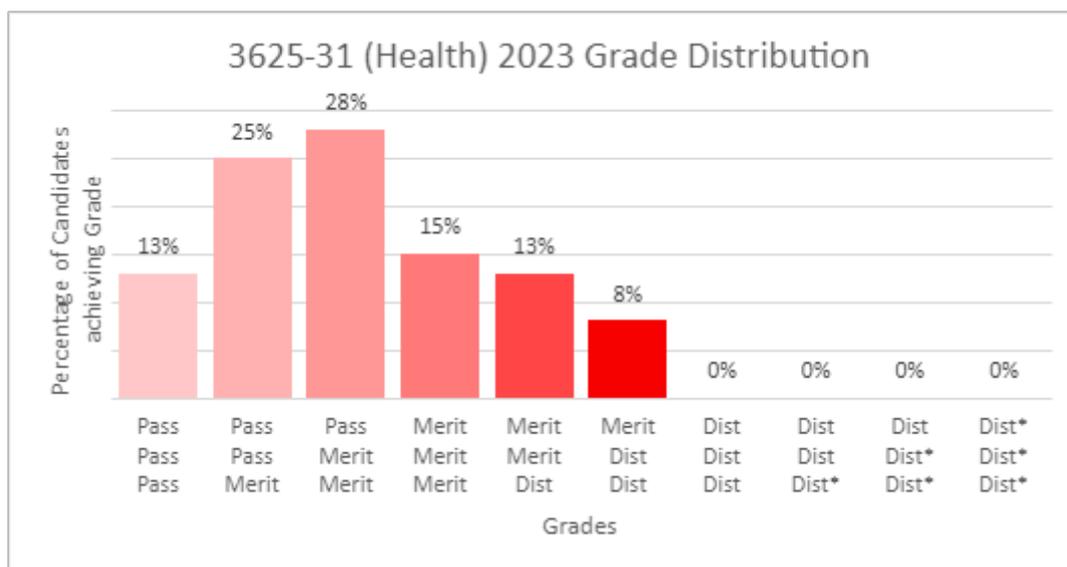
This data is based on the distribution as of **15 August 2023**.

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.

Qualification Grade Distribution

3625-31 Level 3 Advanced Technical Extended Diploma in Health and Care (1080) (Health)

The grade distribution for this qualification is shown below:



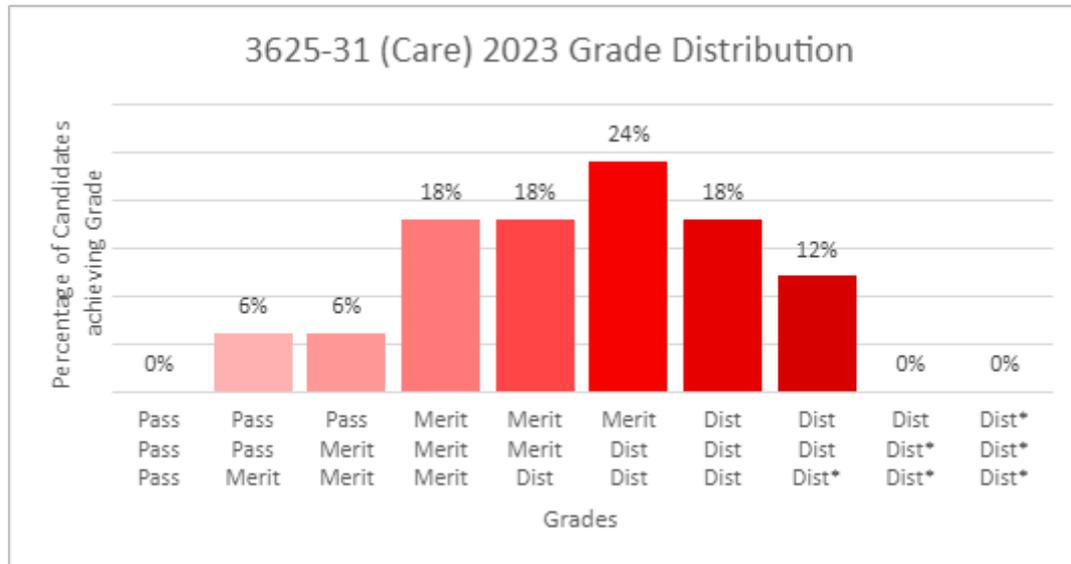
This data is based on the distribution as of **15 August 2023**.

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.

Qualification Grade Distribution

3625-31 Level 3 Advanced Technical Extended Diploma in Health and Care (1080) (Care)

The grade distribution for this qualification is shown below:



This data is based on the distribution as of **15 August 2023**.

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 Exams – Year 1

3625-30 Level 3 Advanced Technical Diploma in Health and Care (540)

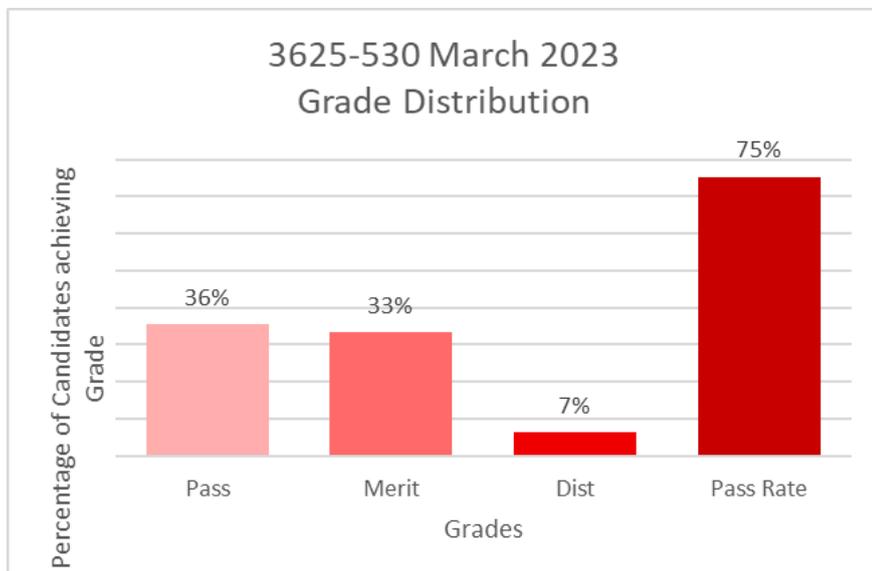
Grade Boundaries

Assessment: 3625-530/030
Series: March 2023 (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

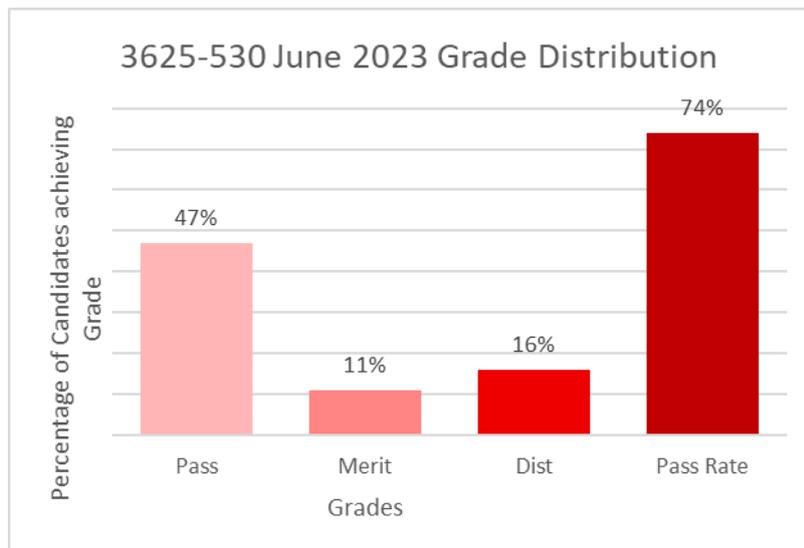
The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Below identifies the final grade boundaries for this assessment.

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

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Chief Examiner Commentary

3625-530/030 Level 3 Health and Care - Theory exam

Series 1 – March 2023

The examination paper covered a wide range of learning outcomes and was similar to previous exam series in terms of challenge for recall, knowledge, understanding and application of information. Many candidates responded appropriately to the command verbs, structuring their responses to meet the marks available. Most errors occurred where candidates either misinterpreted the focus of the question or did not recognise the subject specific term used, leading to an incorrect response.

Candidates demonstrated a good level of knowledge and understanding in the following topic areas:

- understand health and care provision
- understand strategies to promote equality in a health and/or care setting.
- understand how to challenge discriminatory practice
understand how legislation and standards support the promotion of equality, citizenship and inclusivity
- understand how legislation, policies and procedures should keep everyone safe and healthy
- understand how to move and handle people and objects safely
- apply communication skills and strategies to interpersonal care in work practice

Many candidates responded well to questions in these areas, often using examples as part of the answer to illustrate or expand upon a point. Most candidates demonstrated particularly accurate knowledge on questions relating to legislation and its impact. Moving and handling people and objects safely was also a well-answered element with candidates demonstrating clear knowledge of a range of safety considerations.

Many candidates did not demonstrate a good level of knowledge and understanding in the following areas:

- understand discrimination and anti-discriminatory practice
- understand interpersonal communication and interaction

Questions which required knowledge of subject specific terms were often challenging for candidates to achieve marks. This applied to both recall and application of knowledge questions. The impact of this was that candidates were unable to offer correct responses, thus missing the opportunity to gain marks.

Extended Response Question

The cohort responses to the Extended Response Question were generally limited in breadth and depth of information across all units being examined. Candidates who could correctly apply their knowledge from a wider range of unit content, offering breadth in answers and drew on the application of information from the unit range, achieved higher marks.

Candidates are encouraged to practice examination techniques, especially in identifying a breadth of considerations, taking content from all the units being examined. This will support them to offer a more balanced answer to the Extended Response Question.

Candidates should be prepared to offer accurate recall of knowledge on all terminology and be prepared to read exam questions carefully so they may construct answers accordingly.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/-/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-030_and_530_technical_exam_document_2018_v2-1-pdf.ashx

Series 2 – June 2023

The examination paper included a range of question styles for both recall and knowledge (AO1) and understanding (AO2) questions. A wide range of topic areas from the units were assessed. The more challenging questions helped to differentiate between higher and lower achieving candidates. Candidates were awarded marks where terms or names were misspelt however, gave a clear indication of what was meant. They were also awarded marks for giving correct examples where subject specific terms were not used. Most errors occurred where candidates either misinterpreted the focus of the question or did not respond in full to the command verb.

Candidates demonstrated a good level of knowledge and understanding in the following topic areas:

- Understand health and care provision
- Understand how legislation and standards support the promotion of equality, citizenship and inclusivity
- Understand factors that influence interpersonal communication and interaction
Understand interpersonal communication and interaction
- Understand how legislation, policies and procedures should keep everyone safe and healthy

Many candidates responded well to questions in these areas, often using examples as part of the answer to illustrate or expand upon a point. Most candidates demonstrated particularly accurate knowledge on questions relating to legislation and its impact on equality, diversity, citizenship and inclusion. Some marks on questions relating to applying safety and security measures were gained by most candidates. Candidates also answered well on the topic of non-verbal communication.

Many candidates did not demonstrate a good level of knowledge and understanding in the following topic areas:

- Understand health and care provision
- Know the effects of discrimination on individuals in receipt of health and care services
Understand discrimination and anti-discriminatory practice
- Understand interpersonal communication and interaction

In these topic areas, candidates often misinterpreted the focus of the question or did not understand the subject specific term used and so gave an incorrect response. Some candidates offered no response at all and missed the opportunity to gain marks.

Questions which demanded a knowledge of subject specific terms were often challenging for candidates to achieve marks. This applied to both recall (AO1) and application (AO2) questions. The examination paper included AO1 questions which were structured in a way to offer scope for a range of potential answers each worth a single mark. Candidates could therefore achieve marks by being able to demonstrate their breadth of knowledge. AO2 questions required expansion of points to achieve full marks but candidates were awarded some marks for making relevant points.

Candidates should be encouraged to develop strategies to identify the question requirements and interpret the command verb to enable them to form an accurate response.

Extended Response Question

The cohort responses to the Extended Response question were generally limited in breadth and depth. Those who could correctly apply their knowledge from a wider range of unit content, offering breadth and depth in answers, were able to achieve higher marks.

Candidates are encouraged to practice examination techniques, especially in identifying a breadth of considerations, taking content from all the units being examined. This will support them to offer a more balanced answer to the Extended Response Question.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/-/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-030_and_530_technical_exam_document_2018_v2-1-pdf.ashx

Theory Exams – Year 2

3625-31 Level 3 Advanced Technical Extended Diploma in Health and Care (1080) (Health)

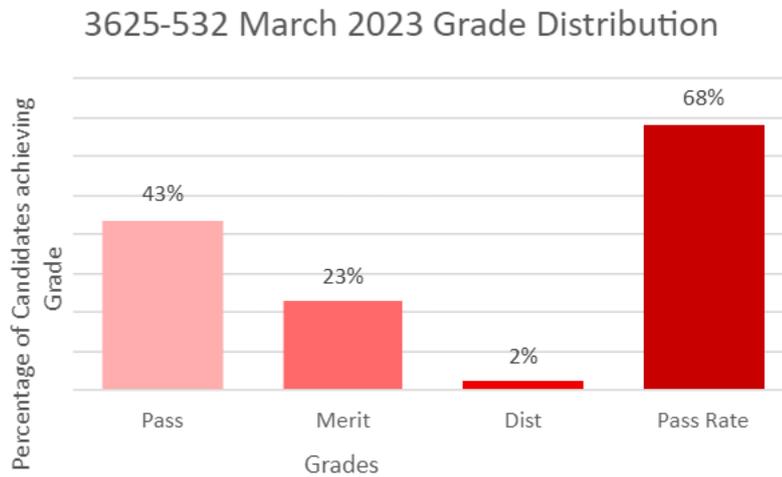
Grade Boundaries

Assessment: 3625-532/032
Series: March 2023 (Spring)

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

Total marks available	60
Pass mark	23
Merit mark	32
Distinction mark	42

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:

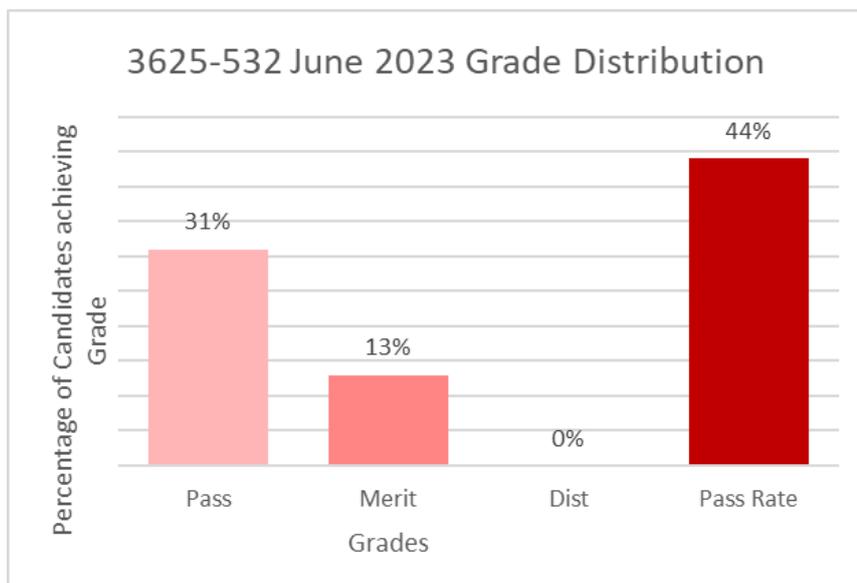


Assessment: 3625-532/032
Series: June 2023 (Summer)

Below identifies the final grade boundaries for this assessment.

Total marks available	60
Pass mark	23
Merit mark	32
Distinction mark	42

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Chief Examiner Commentary

3625-532/032 Level 3 Health and Care - Theory exam

Series 1 – March 2023

Most candidates demonstrated an ability to interpret the question command verb correctly and construct answers accordingly. A few candidates gave responses which clearly indicated their knowledge across a range of topics and were able to apply this knowledge where required. Some candidates lacked the knowledge to answer questions requiring recall which often limited the overall mark achieved. Some candidates repeated the question in their answer giving limited information which could then achieve marks. Those candidates who applied theoretical application in the Extended Response Question were often able to achieve higher marks.

Candidates demonstrated a good level of knowledge and understanding in the following topic areas:

- Understand the structure, functions and interdependency of the human body systems
- Understand the relationship between health and wellbeing
- Understand the principles of the biomedical model
- Understand the principles of the psychological model
- Understand basic science in health and care
- Understand the science behind health promotion used to support health and wellbeing

In these topics candidates demonstrated accurate recall responses using either correct terms or examples. They were also able to apply their knowledge in the more challenging (AO1) and higher mark (AO2) questions. Some candidates missed the opportunity to gain full marks available on these higher mark questions by limiting their application where the overall answer was correct.

Many candidates did not demonstrate a good level of knowledge and understanding in the following topic areas:

- Understand the structure, functions and interdependency of the human body systems
- Understand the principles of the sociological model
- Understand basic science in health and care
- Understand the impact of genetics on health and wellbeing

In these areas of the examination candidates lacked knowledge and many were unable to achieve marks on both recall and application questions. Many candidates responded accurately to the command verbs, however, where candidates were asked to compare, answers given did not address this, thus restricted the marks awarded. Some candidates offered lengthy responses to recall questions, therefore candidates would benefit from noting the mark allocation which determines the depth of the required response.

Extended Response Question

Many candidates understood the disease presented to them within the scenario of the question and its potential impact. However, generally the question was not answered with sufficient breadth of knowledge or application of theoretical perspectives by many candidates. Candidates should be encouraged to practice structuring a response to an extended question to reflect content across all units being examined.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/-/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-032-technical_exam-guidance_2018_v1-1-pdf.ashx

Series 2 – June 2023

Most candidates demonstrated an ability to interpret the question command verb correctly and construct answers accordingly. Some candidates lacked the knowledge to answer questions requiring recall which often limited the overall mark achieved. Candidates who used subject specific terminology in responses were able to gain marks.

Some candidates did not demonstrate knowledge of subject specific terms so could not interpret the question correctly or construct an appropriate answer. Where candidates misinterpreted questions based on a given scenario, an opportunity to gain marks was missed as the subsequent answer was then incorrect.

Candidates demonstrated a good level of knowledge and understanding in the following topic areas:

- Understand the organisation of the human living cell, from its simplest level to the most complex level found in the human body
- Know diagnostic tests used in healthcare environments
- Understand basic science in healthcare

In these topics candidates demonstrated accurate recall responses using either correct terms or examples. They correctly applied knowledge in the more challenging and higher mark (AO2) questions. Some candidates missed the opportunity to gain full marks by limiting the range of points covered or repeating points in their answers.

Many candidates did not demonstrate a good level of knowledge and understanding in the following topic areas:

- Understand the structure, functions and interdependency of the human body systems
- Understand the principles of the psychological model
- Understand the principles of the biomedical model
- Understand the science behind health promotion used to support health and well being

In these areas of the examination, candidates lacked knowledge, and many were unable to achieve marks on both recall and application questions. Some revision of basic terms and theoretical principles would support candidates to gain marks, particularly on (AO1) recall questions.

Extended Response Question

The Extended Response Question requires an integrated response drawing on knowledge and understanding across the units of study. A few candidates included a knowledge of theory in their responses but did not fully apply this to the given scenario which limited the marks awarded. Candidates generally did not answer with sufficient breadth of knowledge or application of theoretical perspectives. These must be applied and show relevance to the scenario given. Candidates should be encouraged to practice structuring a response to an extended response question to reflect content across all units being examined.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/-/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-032-technical_exam-guidance_2018_v1-1-pdf.ashx

3625-31 Level 3 Advanced Technical Extended Diploma in Health and Care (1080) (Care)

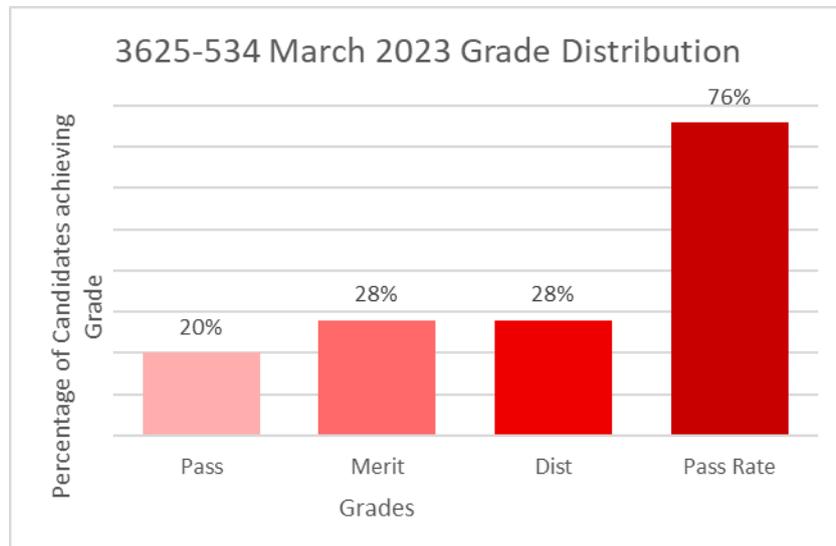
Grade Boundaries

Assessment: 3625-534/034
Series: March 2023 (Spring)

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

Total marks available	60
Pass mark	23
Merit mark	32
Distinction mark	42

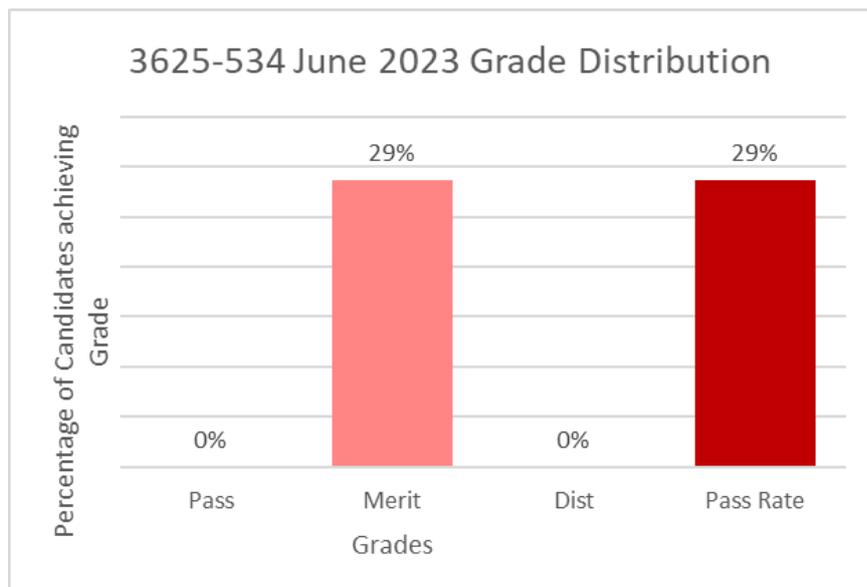
The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Below identifies the final grade boundaries for this assessment.

Total marks available	60
Pass mark	23
Merit mark	32
Distinction mark	42

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Chief Examiner Commentary

3625-534-034 Level 3 Health and Care - Theory exam

Series 1 – March 2023

Many candidates gained marks across the paper demonstrating their competence in responding to questions across the units. A few candidates demonstrated excellent application of theoretical knowledge and use of subject specific terminology, particularly in their answers to the Extended Response Question, thus gaining higher marks. However, some candidates did not respond accurately to recall (AO1) questions or gave no response at all. Some candidates gave repetitive answers to knowledge and application questions which limited the marks awarded.

Candidates demonstrated a good level of knowledge and understanding in the following areas:

- Understand the structure, functions and interdependency of the human body systems
- Understand psychological theories of human development
- Apply psychological theories of development to health and care practice
- Understand key theoretical concepts and sociological perspectives
- Know factors relating to health, social inequality and diversity

Most candidates interpreted the command word in the questions accurately and gave correct responses, often supported by examples. These types of responses supported candidates to achieve most or full marks for questions. Candidates who used and applied subject specific terms in responses across the whole paper were able to achieve higher marks.

Many candidates did not demonstrate a good level of knowledge and understanding in the following areas:

- Structures found in body systems
- Knowledge of sociological terminology
- Knowledge of theoretical concepts from sociological perspectives

Questions focussing on these areas were not answered well in both recall and application. Some candidates misinterpreted the question, and a few demonstrated some confusion between the disciplines of psychology and sociology in their responses. Therefore, several candidates were unable to gain marks from questions in these areas.

Extended Response Question

This was answered exceptionally well by few candidates who gained marks through a robust application of theoretical knowledge across disciplines. Answers were well constructed and well-reasoned. Most candidates applied some theoretical concepts to the scenario but in many responses, there was a stronger psychological than sociological focus.

Centres are advised to pay close attention to all aspects of the specification requirements to prepare candidates for examination. Concepts associated with sociological theory and their relationship to health, care and well-being should be thoroughly examined. This will support candidates to correctly interpret questions and provide answers which demonstrate knowledge and application. Candidates would benefit from practising examination techniques for both knowledge and recall and in the construction of the answer to the Extended Response Question.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-034-technical_exam-guidance_2018_v1-1-pdf.ashx

Series 2 – June 2023

The examination paper covered a range of learning outcomes from the three units assessed. The expected knowledge and understanding required to answer the questions were of similar challenge and difficulty to previous series.

Some candidates gained marks from questions across the whole paper. Candidates who were able to demonstrate both recall and application of knowledge gained the most marks. Marks were also gained where responses used subject specific terminology which demonstrated candidates' understanding of specific topics covered in the questions.

Some candidates struggled to correctly respond to recall (AO1) questions or gave no response. Some candidates gave repetitive answers to knowledge and application (AO2) questions which limited the marks awarded. Candidates were able to gain marks where they demonstrated accurate recall of subject specific terms.

Several candidates missed opportunities to apply theoretical perspectives in their answer to the Extended Response Question. However, some candidates gained a few marks by identifying key issues from the scenario which needed to be considered. Where a breadth and depth of knowledge was demonstrated, candidates achieved higher marks.

Candidates demonstrated a good level of knowledge and understanding in the following topic areas:

- Understand the structure, functions and interdependency of the human body systems
- Apply psychological theories of development to health and care practice.
- Understand psychological factors that influence human development
- Know factors relating to health, social inequality and diversity

Most candidates interpreted the command word in the questions accurately and gave appropriate responses. Examples were often used to illustrate points and supported candidates to achieve some marks for questions. Candidates who used and applied subject specific terms in responses across the whole paper were able to achieve high marks.

Many candidates did not demonstrate a good level of knowledge and understanding in the following areas:

- Understand the organisation of the human living cell, from its simplest level to the most complex level found in the human body
- Understand psychological theories of human development
- Understand key theoretical concepts and sociological perspectives

Responses from questions which focused on these topic areas showed limited accuracy in both recall and application requirements. Some candidates misinterpreted the question, and a few demonstrated some confusion between the disciplines of psychology and sociology in their responses.

Extended Response Question

The Extended Response Question generated some marks for all candidates. Many responses missed the opportunity to apply both psychosocial and sociological theory to the scenario. Marks were gained by identifying some key points to be addressed and the practicalities of doing so. Where theory was applied, there was a stronger psychological than sociological focus.

Centres are advised to pay close attention to all aspects of the specification requirements to prepare candidates for examination. Concepts and terms associated with sociological theory and their relationship to health, care and well-being should be thoroughly examined. This will support candidates to correctly interpret questions and provide answers which demonstrate knowledge and application. Candidates would benefit from practising answering examination techniques for both knowledge and recall and in the construction of the answer to Extended Response Question.

Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here

https://www.cityandguilds.com/media/productdocuments/health_and_social_care/care/3625/3625_level_3/assessment_materials/3625-034-technical_exam-guidance_2018_v1-1-pdf.ashx

Synoptic Assignments – Year 1

3625-30 Level 3 Advanced Technical Diploma in Health and Care (540)

Grade Boundaries

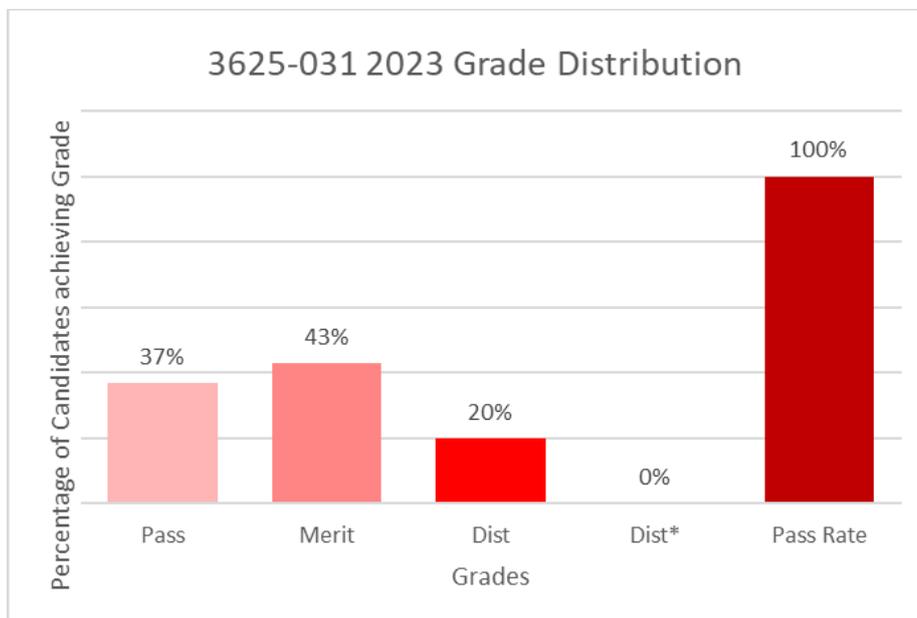
Below identifies the final grade boundaries for this assessment.

Assessment: 3625-031

Series: 2023

Total marks available	60
Pass mark	24
Merit mark	34
Distinction mark	44

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Principal Moderator Commentary

The evidence provided for the synoptic assignment was sufficient, valid and of appropriate quality. Centres successfully uploaded candidate evidence onto the portal in a timely manner and in most cases, there was a clear audit trail showing how assessors had justified their marking decisions. Audio files were presented in a suitable format and accompanying scripts were mostly clearly documented with time stamping. Recordings were mostly easy to download, audible and generally lasted a suitable length of time to cover the discussion points. Once again, for this qualification, the professional discussion gave many candidates opportunities to expand on their knowledge and understanding and provide examples from their placements of its application.

Summary of synoptic assignment tasks

The synoptic tasks provided the candidates with opportunities to showcase what they had learned about health and social care principles and how person centred approaches can be applied in practice. Candidates gained marks when they provided well-rounded detailed responses to the case-study questions within the synoptic tasks. It continues to be the case that when the candidates show breadth and depth of understanding across the tasks, they gain higher marks.

Case Study A

Task 1 – Candidates gained marks for fully completing the task and providing accurate and concise information relating to the issues raised within the scenario. Responses ranged from basic to an excellent level of knowledge and understanding and most candidates were able to show how they would apply their knowledge to the health and care needs of the family in crisis in their support plans. Many candidates used subject-specific terminology correctly and referred to legislation and theoretical approaches applicable to the scenario. However, candidates lost marks when they addressed a limited range of factors, provided basic explanations, or repeated the same points. Candidates who provided a focused support plan which covered the initial 48 hours of care and support, showing breadth and depth across the issues raised gained marks. Most plans were written in an account format however, there were very good attempts from some candidates to produce a care plan as would be found in a care setting/service.

Task 2 – Candidates gained marks when they produced a report detailing the rationale behind their plan including links with theoretical approaches/models, legislation, regulation, policies, and practices relevant to the case. Explanations of the skills, values, and behaviours required to support the family showed a clear understanding of the issues arising within the scenario, justifying any rationale for suggestions made. Higher marks were awarded to those candidates who were able to view the issues within the wider context of health and care service provision. Candidates gained marks when they provided well-rounded detailed responses showing breadth and depth across the task. However, candidates did not gain marks when they addressed a very limited range of factors, lost focus, did not attempt to explain the relevance of the points they were trying to make, or repeated themselves.

Task 3 – Candidates gained marks for this task when their accounts showed evidence of research into two relevant safeguarding reviews. The quality and depth of the rationale for referencing these reviews and linking them to the scenario gained the candidate marks. However, a few candidates only produced one Serious Case Review and others missed the focus of the task completely and wrote about the scenario in relation to safeguarding.

Case Study B

Task 1 – Candidates completing the account for this task gained marks when they provided in-depth explanations of the issues raised about cognitive impairment within this case study, especially in relation to the wider provision of services for individuals with dementia.

Candidates who used subject-specific terminology, knowledge of relevant legislation and key theoretical approaches when providing person-centred care gained marks.

Candidates who lost marks did not sufficiently explore the range of health and care professionals, services and charities that may provide support in the longer term. Most candidates showed they understood the skills, values, and behaviours needed to support the individual and a few candidates provided an explanation of the role of the advocate within this scenario. The case study provided the candidate with different layers of health and care considerations varying in complexity and many candidates managed to cover these aspects within their account. Candidates who did not gain many marks tended to only focus on a limited range of factors, provided basic explanations, or repeated the same points.

Task 1 – Candidates gained marks when they made clear links between knowledge, understanding of the importance of accurate record keeping and justified their thinking and linking this to legislation and core skills and behaviours. Many candidates gained marks by carefully considering how they would support their colleague, making positive suggestions to help improve their skills, whilst still acknowledging the importance of effective record keeping and report writing. Candidates gained marks when they explained the different types of reports, records and audits required by quality regulators for care provision and ways these may be presented

In general, marks were gained when candidates identified, reflected upon, and summarised different challenges to providing support to a colleague. Most candidates referred to legislation and the principles of working practices for report writing. Candidates did not gain marks when they addressed a very limited range of factors in this task, lost focus, or did not fully explore and explain the relevance of the points they were trying to make or repeated themselves.

Professional Discussion

Many candidates showed evidence of reflective practice in the discussion. They could describe placement aims and objectives and went on to use examples of observing effective practice which they evaluated needing improvement. Recordings were mostly easy to download, audible and lasted a suitable length of time to cover the discussion points. However, in some cases, the interviews lasted 10-15 minutes which does not give the candidate sufficient time to explain and explore issues raised in the discussion.

Many candidates had accompanying notes and had clearly prepared well by completing the Reflective Practice workbook which they referred to in the discussion. The discussion flowed best when the candidate did not read from their notes, which happened in a few cases. When markers provided accompanying time-stamped notes alongside the recording, these were well received by moderators as they showed how/where marks had been allocated to the different AOs. Moderators noted when the notes were difficult to decipher on the feedback. In a few instances the candidates needed quite a lot of prompting, in these scenarios, moderators would ask markers to adhere to the prompting brief so as not to lead the weaker candidate.

Overall, the professional discussion enabled the lower achieving candidate to expand on their descriptions of placement experience and for the higher achieving candidate, it enabled them to really show integration of knowledge and understanding and the application to practice. The professional discussion remains a key determinant of the final banding outcomes and enabled some candidates to improve their marks especially when their written work lacked the required detail.

Commentary on assessment objectives

AO1 – Recall of knowledge

Many candidates were able to demonstrate a sound recall of knowledge across both the written case studies and the professional discussion. This included citing relevant legislation, theoretical approaches to health and care, and knowledge of terminology as relevant to the case study scenarios. In the professional discussion, candidates were able to recall relevant knowledge, used this to provide breadth and depth for their explanations of issues being discussed. Sometimes this was in response to some prompting from their interviewer, especially when they were very nervous. However, as the interview progressed, many of the candidates gained confidence, their responses flowed, and they stopped reading from their notes. Candidates did not gain marks when their knowledge was incomplete, inaccurate or not relevant to the task requirements.

AO2 – Understanding concepts, theories and processes

This AO provides the candidate with the opportunity to show causal links for their explanations for issues arising across the synoptic tasks, thus responding to the questions in a focused way. Candidates achieved higher marks when they gave full well-rounded responses within their case studies and the professional discussion. Candidates gained marks when they were able to demonstrate breadth and depth of understanding in their responses. Some candidates showed they had a very clear understanding of how relevant legislation; principles of care; care behaviours and theories underpinned practice. Other candidates did not gain marks when their understanding was incomplete or inaccurate or they kept repeating the same point in different words. Sometimes candidates did not specifically address the topics raised in the case studies, or gave irrelevant details thus unable to gain marks. In the professional discussion, candidates did not gain marks when they lost concentration or only discussed a limited range of considerations, despite prompting.

Many candidates gained marks in the discussion when they responded to questions which required them to reflect on and explain their understanding, especially about effective and poor practice. Some responses showed real insight, and this has been noted this year. Candidates who did not gain marks were unable to give these responses and showed minimal understanding of key concepts.

AO3 – Application of practical/technical skills

Many candidates presented their written tasks in a clear format showing a confident application of written skills. For those candidates where this was not the case, their written work was often limited in scope, very descriptive with considerable inaccuracies. Points were often repeated or rephrased thus not gaining them marks for this AO. Many candidates referenced sources of information they had used in their task preparation. There were no incidents of suspected plagiarism but centres are reminded to ensure that all candidates understand the importance of avoiding plagiarism in any work submitted for assessment.

AO4 – Bringing it all together

This AO is about the candidate's ability to integrate their knowledge and understanding of health and care principles, legislation, and theory. This integration should link to practice and the provision of care and support across a range of different issues identified in both the case studies, and from their reflections on their placement practice. All the synoptic tasks provide the candidate with opportunities to address issues relevant to health and care practice with different layers of complexity. Candidates whose responses were limited did not gain many marks, although the professional discussion often provided the candidate with weaker written skills to shine in this area. Key to this was the candidate's ability to apply their knowledge and

understanding and provide examples from their reflections on practice; especially in relation to explanations of effective practice and that which needed improvement. Candidates who could evaluate their learning from their reflections gained marks. Candidates also gained marks when they showed some evaluative skills when completing the case studies especially when addressing some of the more complex issues.

AO5 – Attending to detail/perfecting

Candidates gained marks for this AO when they kept to the task requirements and did not deviate from the topics being discussed. This enabled them to really show breadth and depth in their responses. Candidates didn't gain marks for this AO when they did not meet the question command verbs, or provided very limited or inaccurate responses in both the case studies and in their responses within the discussion.

Synoptic Assignments – Year 2

3625-31 Level 3 Advanced Technical Extended Diploma in Health and Care (1080)

Grade Boundaries

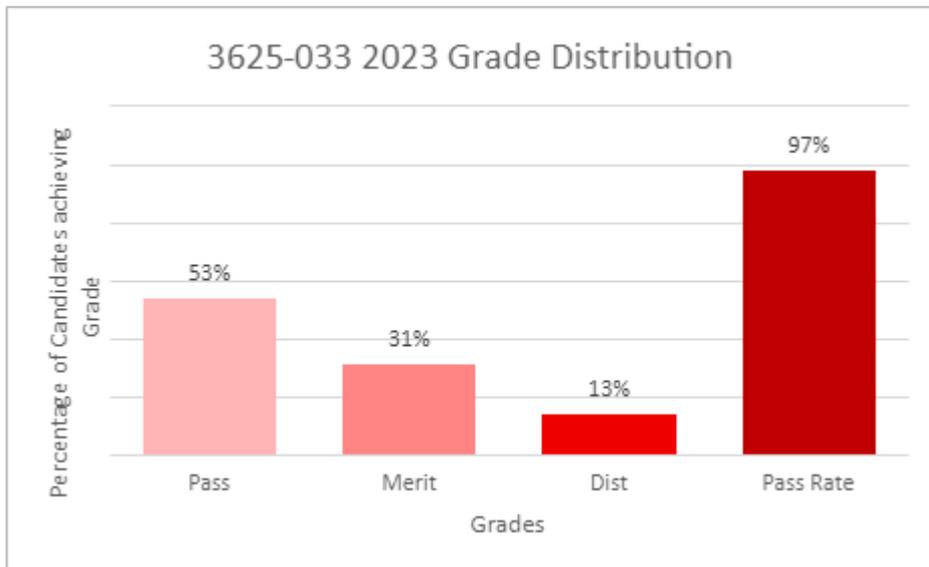
Below identifies the final grade boundaries for this assessment.

Assessment: 3625-033

Series: 2023

Total marks available	60
Pass mark	24
Merit mark	34
Distinction mark	45

The graph below shows the approximate distributions of grades and pass rate for this assessment using the above boundary marks:



Principal Moderator Commentary

The evidence provided for the synoptic assignment was sufficient, valid and of appropriate quality. Centres successfully uploaded candidate evidence onto the portal in a timely manner and in most cases, there was a clear audit trail showing how assessors had justified their marking decisions. Audio files were presented in a suitable format and accompanying scripts were mostly clearly documented with time stamping. Recordings were mostly easy to download, audible and lasted a suitable length of time to cover the discussion points. Once again, for this qualification, the professional discussion gave many candidates opportunities to expand on their knowledge and understanding and provide examples from their placements of its application.

Summary of synoptic assignment tasks

The synoptic tasks provided the candidates with opportunities to showcase what they had learned about health and social care principles and the importance of research and social policy in the design of services. Candidates gained marks when they provided well-rounded, detailed responses to the research and social policy assignment tasks. It continues to be the case that when the candidates show breadth and depth of understanding across the synoptic tasks, they gain higher marks. Most candidates referred to relevant research principles and theoretical approaches underpinning social policy approaches relevant to the written tasks.

Assignment A:

Task 1 – Candidates gained marks when their account for this task clearly focused on the various topics for discussion as outlined in the brief. Candidates who were able to explain how both primary and secondary research informs and develops evidence-based practice in health and care and, could provide a rationale for different research methods, gained marks. Some candidates were able to showcase their understanding of the difference between ‘analysis’ and ‘evaluation’ of research findings and the importance of gaining consent in health and care research. Candidates did not gain marks when they did not cover the task brief or were unable to explore and explain the various aspects, such as the influence of ethical principles and considerations.

Task 2 – Candidates who applied their knowledge of their chosen research study and justified any rationale for suggestions made, gained marks in this task. Higher marks were awarded to those candidates who viewed the issues for their chosen topic within the wider context of health and care service provision providing greater depth and breadth in their responses. This task is designed so that candidates can show their knowledge and understanding of the principles underpinning research into health and care practice relevant to a specific aspect, and in many cases, this was well considered. However, candidates were unable to gain marks when they did not explain their findings from the comparative literature review in any depth. Most candidates provided references for their literature review, although some were broader than others. Candidates gained marks where they could provide responses showing depth and breadth of understanding using the information they gained from their investigation.

Task 3 – This task enables the candidates to formulate a key research proposal, based on their learning from the previous tasks. Candidates gained marks when they clearly explained links between the aims and objectives of their research proposal to the chosen research methodology. These candidates made clear links to research information gained and could identify how their proposal would link to a rights-based approach to the provision of health, care and support services in a wider context. However, for some candidates this task was challenging, and they

were unable to gain marks for considering a very limited range of information or not arriving at a clear proposal.

Assignment B:

Task 1 – Candidates gained marks for this task when they produced a written account which showed their evaluative considerations of individual and societal factors relating to gender dysphoria and the impact of these for a specific group. Candidates, who had prepared themselves well by reading about the topic of gender dysphoria, were able to explain the impact of this on the health and wellbeing of developing children. Consideration of external influences such as the media and identifying key services to support children and those involved, gained marks. Candidates gained partial marks when their considerations remained limited or did not explore issues such as the potential risk of harm and the challenges in providing effective practical solutions when supporting children and families. Candidates' marks were also limited when they did not include relevant subject-specific terminology, links to legislation, and key theoretical approaches to providing person-centred services. Most candidates explained the knowledge, skills, and behaviours of the worker in supporting children and families and teachers.

Task 2 – Many candidates completed the requirements of this task confidently, gaining marks for explaining the impact of bereavement on children's mental health, physical health and well-being, and their support needs. Candidates who were able to provide in-depth explanations of the issues of childhood bereavement, especially in relation to the wider provision of services for individuals gained higher marks. These candidates also made links to relevant legislation, and key theoretical approaches to providing bereavement support. Candidates were unable to gain marks when they addressed a limited range of factors, provided basic explanations, or repeated the same points. Sometimes marks were not gained when candidates did not include relevant subject-specific terminology. Higher marks were awarded when the candidate produced insightful comments which provided a rationale for the practical application of support services.

Professional Discussion

In the professional discussion, candidates who were able to justify their responses, and provide examples from their work placements on how they fostered a rights-based approach and contributed to effective teamwork, gained marks. Their responses in the discussion showed an integration of their knowledge and understanding into their work practice. In general, marks were gained when candidates identified, reflected upon, and summarised different challenges to providing a rights-based approach. Insights into fostering person-centred values were well considered by many candidates. Marks were gained and lost by the candidate's ability to explore and explain issues and challenges they faced when observing practice which required improvement. Many candidates had accompanying notes and had clearly prepared well by completing notes which they referred to in the discussion. The discussion tended to flow best when the candidate did not read from their notes. When markers provided accompanying time-stamped notes alongside the recording, these were well received by moderators as they showed how/where marks had been allocated to the different AOs. On some occasions it was difficult to decipher marker notes on the discussion points. In a few instances the candidates needed quite a lot of prompting, in these scenarios, moderators would ask markers to adhere to the prompting brief so as not to lead the weaker candidate.

Overall, the professional discussion enabled the lower achieving candidate to expand on their descriptions of placement experience and for the higher achieving candidate it enabled them to really show integration of knowledge and understanding and the application to practice. The professional discussion remains a key determinant of the final banding outcomes and enabled

some candidates to improve their marks especially when their written work lacked the required detail.

Commentary on assessment objectives

AO1 – Recall of knowledge

Many candidates were able to demonstrate a sound recall of knowledge across both the written tasks and the professional discussion. This included citing relevant legislation, research terminology; social policy, and theoretical approaches to health and care. Knowledge of terminology as relevant to the written tasks was particularly important. In the professional discussion, many candidates were able to recall relevant knowledge. They used this to effectively provide breadth and depth for their explanations of issues being discussed relevant to their placement experience, or for some candidates, when they used the case study provided. Sometimes this was in response to some prompting from their interviewer, especially when they were very nervous. However, in most cases, as the interview progressed, these candidates gained confidence, their responses flowed, and they stopped reading from their notes. Candidates did not gain marks when their knowledge was incomplete, inaccurate, or not relevant to the task requirements.

AO2 – Understanding concepts, theories and processes

This AO provides the candidate with the opportunity to show causal links for their explanations for issues arising across the synoptic tasks, thus responding to the questions in a focused way. Candidates achieved higher marks when they gave full well-rounded responses within their written tasks and the professional discussion. Candidates gained marks when they were able to demonstrate breadth and depth of understanding in their responses. Some candidates showed they had a very clear understanding of how research and social policy were underpinned by factors such as legislation and theoretical approaches and this was reflected in their responses. Other candidates did not gain marks when their understanding was incomplete or inaccurate or they kept repeating the same point in different words and did not expand on the issues as required by the tasks. Sometimes candidates did not focus on the issues raised in the social policy task or did not expand on the findings of the research-based tasks. Some candidates did not gain marks when they gave irrelevant details or were distracted by one aspect of their discussion.

In the professional discussion, candidates did not gain marks when they only discussed a limited range of considerations, despite prompting.

Many candidates gained marks in the discussion when they responded to questions which required them to explain their understanding, especially about the importance of a rights-based culture practice. Some responses showed real insight, and this has been noted this year. Candidates who gained limited marks were unable to give these responses and showed minimal understanding of key concepts.

AO3 – Application of practical/technical skills

Many candidates presented their written tasks in a clear format showing a confident application of written skills. For those candidates where this was not the case, their written work was often limited in scope, very descriptive with considerable inaccuracies. Points were often repeated or rephrased. Many candidates referenced sources of information they had used in their task preparation and applied this effectively across the synoptic tasks. There were no incidents of suspected plagiarism but centres are reminded to ensure that all candidates understand the importance of avoiding plagiarism in any work submitted for assessment.

AO4 – Bringing it all together

This AO is about the candidate's ability to integrate their knowledge and understanding of health and care principles, legislation, and theory. This integration should link to practice and the provision of care and support across a range of different issues identified across the synoptic tasks and from summaries and analysis of their work placement practice. All the synoptic tasks provide the candidate with opportunities to address issues relevant to health and care practice with different layers of complexity. Candidates whose responses were limited gained minimal marks, although the professional discussion often provided the candidate with weaker written skills to shine in this area. Key to this was the candidate's ability to apply their knowledge and understanding and provide examples, especially in relation to explanations of promotion of a rights-based culture and effective teamwork. Candidates who could evaluate their learning and express this in the discussion gained marks. Candidates also gained marks when they showed some evaluative skills when completing the written tasks, especially when addressing some of the more complex issues.

AO5 – Attention to detail

Candidates gained marks for this AO when they kept to the task requirements and did not deviate from the topics being discussed. This enabled them to really show breadth and depth in their responses. Candidates did not gain marks for this AO when they did not meet the task questions command verbs, or provided very limited or inaccurate responses in both the written tasks and in their responses within the discussion. Candidates who had provided a structured literature search and detailed their project proposal clearly gained higher marks.