



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

**2024**

**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 Level 3 Advanced Technical Diploma in Health and Care – Theory Exam
    - March 2024 (Spring)
    - June 2024 (Summer)
  - 3625-031 Level 3 Advanced Technical Diploma in Health and Care – Synoptic Assignment

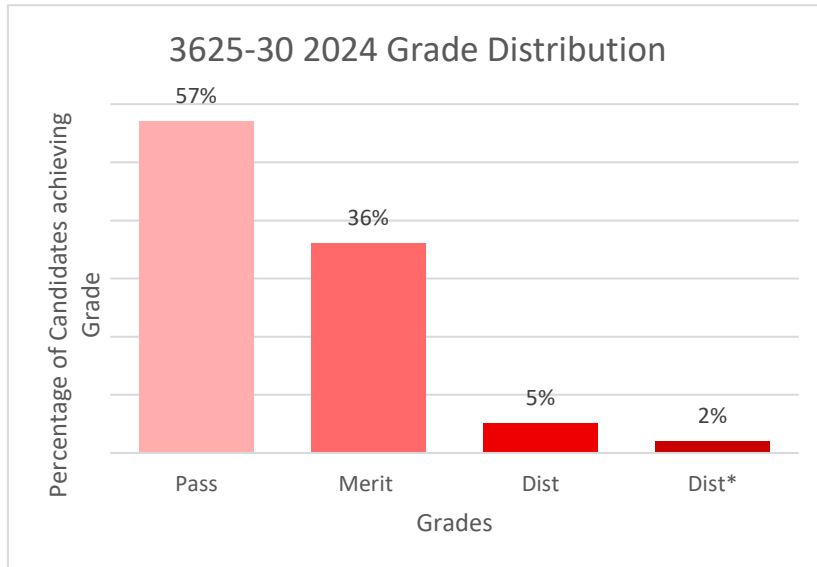
## Year 2

- Pathway 1 (Health)
  - 3625-532 Level 3 Advanced Technical Extended Diploma in Health and Care – Theory Exam
    - March 2024 (Spring)
    - June 2024 (Summer)
  - 3625-033 Level 3 Advanced Technical Diploma in Health and Care – Synoptic Assignment
  
- Pathway 2 (Care)
  - 3625-534 Level 3 Advanced Technical Extended Diploma in Health and Care – Theory Exam
  - Assessment No. and Title – Theory exam
    - March 2024 (Spring)
    - June 2024 (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:



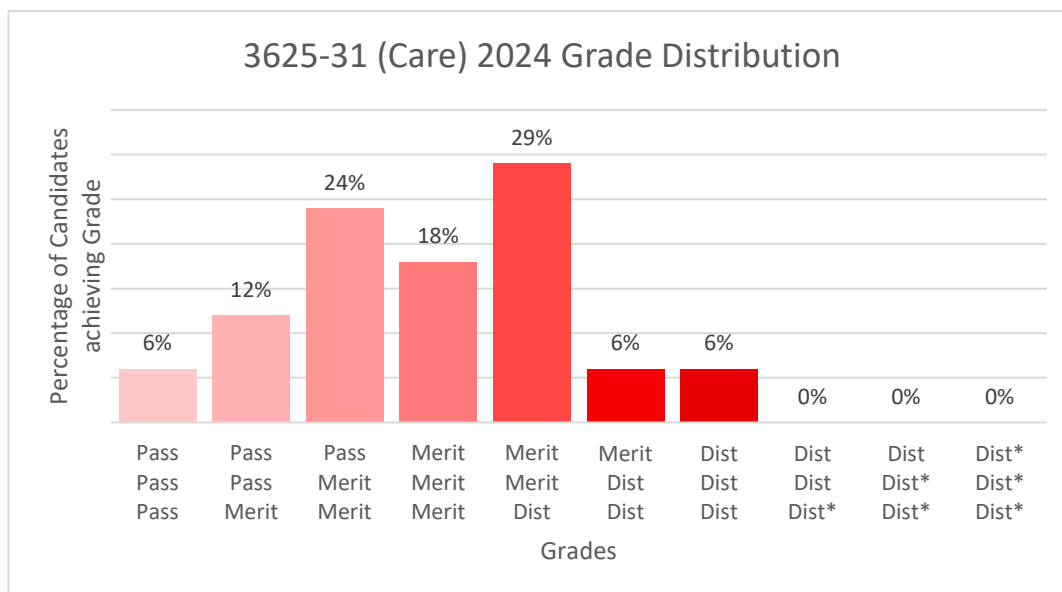
This data is based on the distribution as of **13 August 2024**.

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:



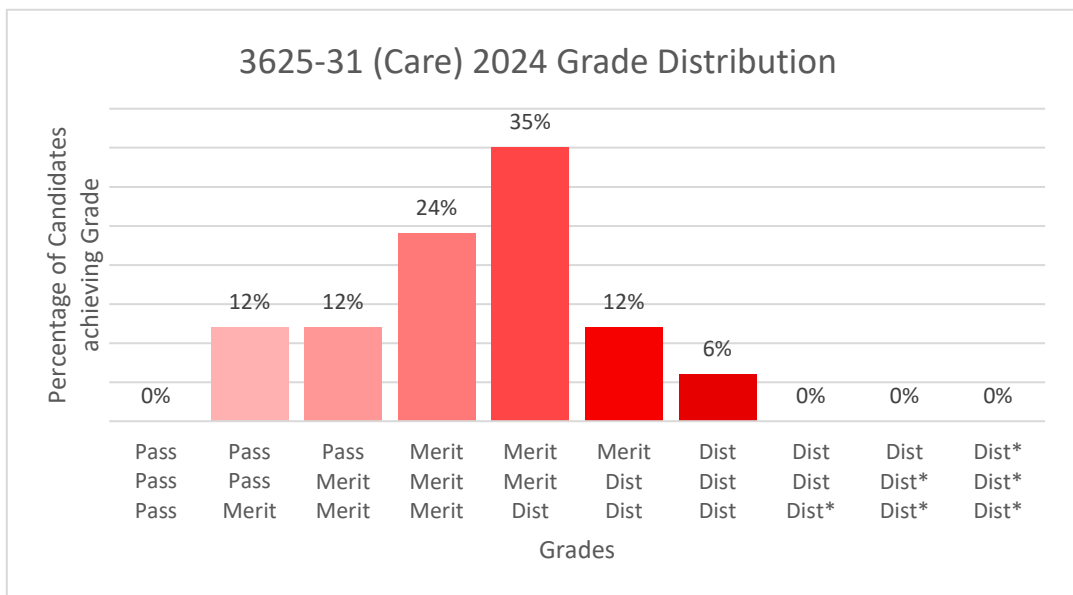
This data is based on the distribution as of **13 August 2024**.

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 **13 August 2024**.

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

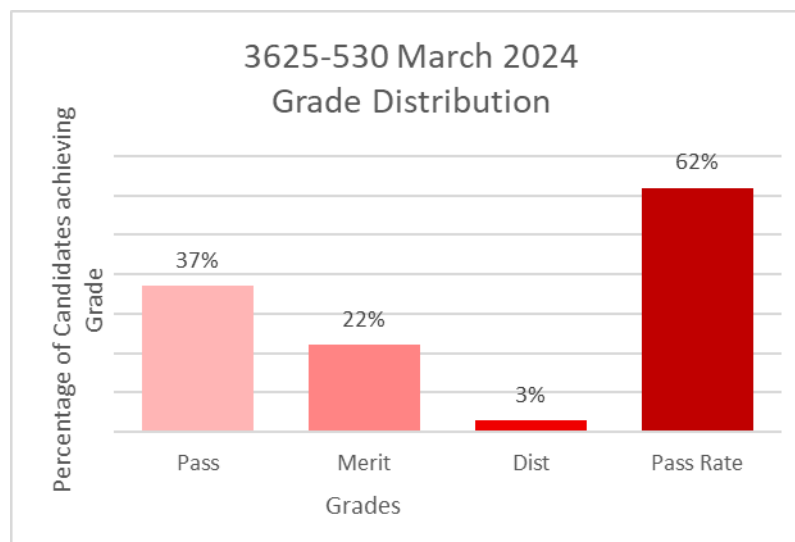
Assessment: **3625-530**

Series: **March 2024 (Spring)**

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

<b>Total marks available</b>	<b>60</b>
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:

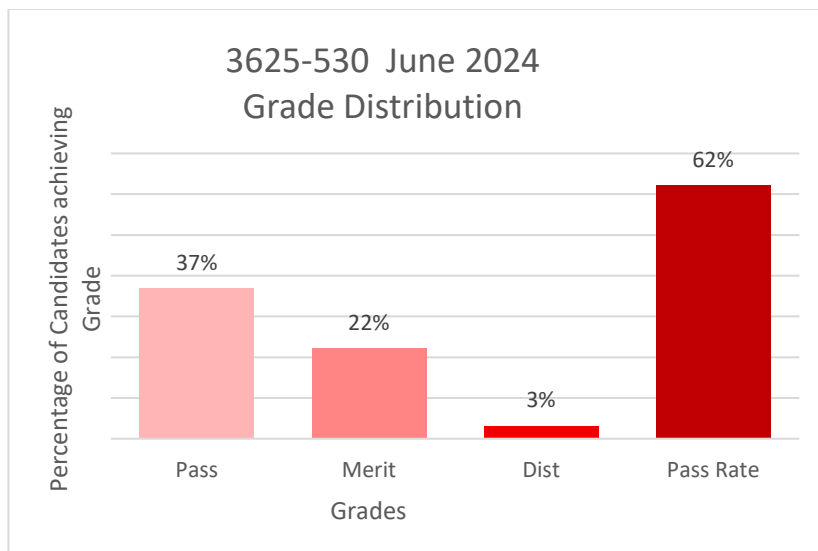


Assessment: **3625-530**  
Series: **June 2024 (Summer)**

Below identifies the final grade boundaries for this assessment.

<b>Total marks available</b>	<b>60</b>
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 2024

The examination paper covered a range of learning outcomes for both recall and knowledge (AO1) and understanding (AO2) questions. Candidates, on the whole, gave a reasonable performance, however, there was a reduction in performance compared to March 2023.

Most inaccuracies occurred where candidates did not respond in full to the command verb. Some candidates did not attempt to offer a response at all which applied to both AO1 and AO2 questions. The responses to the Extended Response Question were generally limited in breadth of knowledge and depth of information. A few candidates drew on the application of information from across all units and achieved a higher mark.

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

- Apply communication skills and strategies to interpersonal care in work practice
- Understand interpersonal communication and interaction
- Understand how to apply infection control measures in health and care environments
- Understand how to apply security measures

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 relating to cultural differences and the impact on the professional care relationship. Candidates responded well to questions relating to infection control measures and how to apply security measures where marks were gained by most candidates. Candidates also answered well on the topic of communication skills and strategies used to support individuals in receipt of care.

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

- Know the effects of discrimination on individuals in receipt of health and care services
- Understand health and care provision
- Understand how legislation and standards support the promotion of equality, citizenship and inclusivity
- Understand how to challenge discriminatory practice
- Understand how to apply infection control measures in health and care environments

In these topics, questions that required knowledge of subject-specific terms were often challenging for candidates to achieve marks. This applied to both recall of knowledge and understanding questions. The impact of this was that candidates were unable to offer correct responses, with some candidates offering no response at all, thus missing the opportunity to gain marks.

Candidates should be prepared to offer accurate recall of knowledge on all terminology. Candidates should also be encouraged to develop strategies to identify the question requirements and be prepared to read exam questions carefully. This will assist candidates to interpret the command verb accurately and construct their answers accordingly.

### **Extended Response Question**

The scenario required candidates to identify the key issues raised and discuss their significance. Candidates were required to explain how these issues may be addressed by professionals with reference to the application of professional care values and communication strategies.

Higher-performing candidates offered a detailed discussion of a wide range of key issues raised in the scenario, paying attention to all individuals involved. They made accurate references to professional care values and communication strategies that were relevant to the scenario. This type of holistic response, drawing on breadth and depth of knowledge and understanding from across the qualification, enabled these higher-performing candidates to construct a detailed answer that was well-reasoned and justified.

Lower-performing candidates gave responses that concentrated on the basic identification of the needs for the individuals in the scenario. Often, this identification of needs was expanded upon by describing a physiological theory without application or justification. Candidates missed opportunities to show the relevance of professional care values or to make any links to communication strategies, legislation, or codes of practice when addressing key points from the scenario.

Candidates are encouraged to spend time in the examination identifying where unit content is applicable to support them in constructing their responses.

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

[3625-030 and 530 technical exam document 2018 v2-1-pdf.ashx \(cityandguilds.com\)](https://www.cityandguilds.com/~/media/2018/03/3625-030_and_530_technical_exam_document_2018_v2-1-pdf.ashx)

## Series 2 – June 2024

The 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-scoring candidates. Marks were awarded where terms or names were misspelt however, gave a clear indication of what was meant. Marks were also awarded for giving appropriate examples where subject-specific terms were not used. Most errors occurred when candidates did not respond in full to the command verb. Some candidates did not attempt to offer a response at all which applied to both AO1 and AO2 questions. Most responses to the Extended Response question were generally limited in breadth and depth. A few candidates drew on the application of information from across all units and achieved a higher mark. The exam paper was balanced with a range of question types presented.

Candidates demonstrated 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 strategies to promote equality in a health and/or care setting
- Understand discrimination and anti-discriminatory practice
- 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
- Understand how to move and handle people and objects safely

Many candidates gave correct full or partial responses in these areas. They often used examples as part of the answer to illustrate or expand upon a point. Most candidates demonstrated particularly accurate knowledge of the effects of discrimination on individuals and specialist equipment and technologies which assist individuals with communication needs. Some marks on questions relating to groups requiring health and care support, working with hazardous substances and safe moving and handling were gained by most candidates.

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

- Understand health and care provision
- Understand strategies to promote equality in a health and/or care setting
- Understand interpersonal communication and interaction
- Understand how to apply infection control measures in health and care environments

In these topics, candidates did not accurately respond to the focus of the question or did not understand the subject-specific terms used. This was particularly noticeable in responses to a question on the role of different models of service which many candidates in this cohort did not know. In addition, the key theme of a question relating to the contribution of theory to understanding interpersonal communication was not addressed. Some candidates offered no response at all and therefore missed the opportunity to gain marks.

## **Extended Response Question**

The Extended Response Question scenario required candidates to identify the key issues raised and discuss their significance. Candidates were required to explain why individuals are vulnerable and how they might benefit from support. Reference to the application of professional care values by professionals, models of service and communication strategies should be discussed. Relevant legislation and/or regulations should be identified with some explanation of their importance to the case study.

Higher performing candidates offered a detailed discussion of a wide range of key issues raised in the scenario, paying attention to all parties involved. They made accurate references to care values, appropriate support services and communication strategies which were relevant to the scenario. These candidates also applied and justified the relevance of codes of practice, legislation and regulations which were pertinent to the scenario. This type of holistic response, drawing on breadth and depth of knowledge and understanding from across the qualification, enabled these higher-performing candidates to construct a detailed answer that was well-reasoned and justified.

Candidates who scored in the lower bands gave responses which concentrated on basic identification of needs for the individuals in the scenario. Often this identification of needs was expanded upon by describing Maslow's theory but without application or justification. Candidates missed opportunities to show the relevance of professional care values or to make any links to communication strategies, legislation or codes of practice when addressing key points from the scenario.

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

[3625-030 and 530 technical exam document 2018 v2-1-pdf.ashx \(cityandguilds.com\)](https://www.cityandguilds.com/~/media/2018/03/3625-030_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

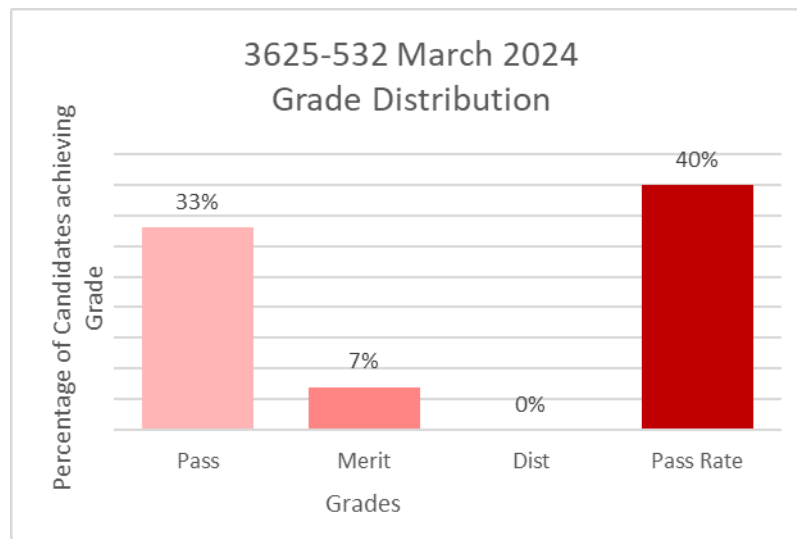
Assessment: **3625-532**

Series: **March 2024 (Spring)**

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

<b>Total marks available</b>	<b>60</b>
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:

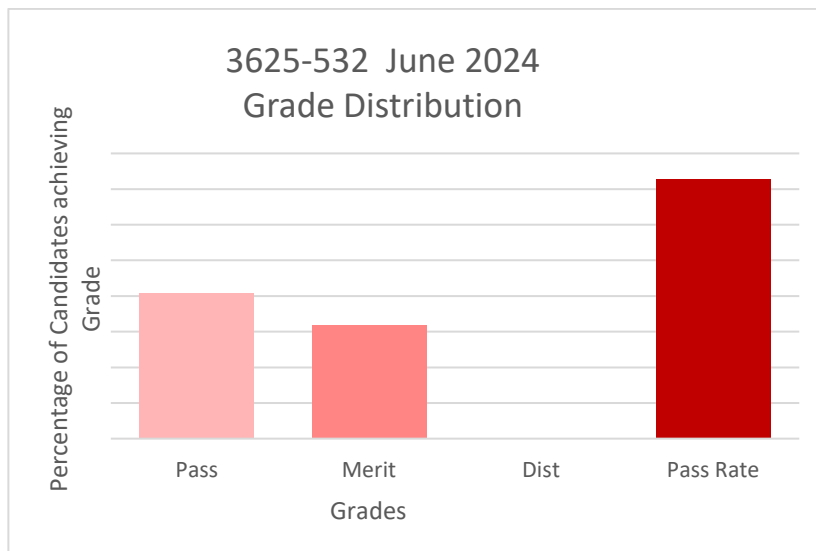


Assessment: **3625-532**  
Series: **June 2024 (Summer)**

Below identifies the final grade boundaries for this assessment.

<b>Total marks available</b>	<b>60</b>
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 Level 3 Health and Care - Theory exam

### Series 1 – March 2024

The cohort consisted of some candidates achieving higher marks with well-structured responses and accurate interpretation of the questions. A few candidates demonstrated accurate knowledge and application of topics across the whole paper, particularly in the Extended Response Question where they gave a holistic response, thus gaining higher marks.

However, many candidates in this cohort were unable to gain marks for AO1 recall questions, as they were either unable to provide correct answers to questions or omitted to answer questions completely. Some candidates were unable to show basic knowledge of subject-specific terms relating to the units of study being examined. Overall, candidate performance in the March 2024 paper was weaker than in the March 2023 paper.

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

- Understand the structure, functions and interdependency of the human body system
- Know diagnostic tests used in healthcare environments
- Understand the impact of genetics on health and wellbeing
- Understand the relationship between health and wellbeing
- Understand the principles of the sociological model

In these areas of the examination, many candidates achieved marks by responding correctly and demonstrating their knowledge in AO1 (recall) questions or by giving appropriate examples to illustrate or expand upon their points in AO2 (understanding) questions. Candidates who offered expansion points which were not repetitive and showed correct application of information, achieved higher marks.

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 system
- Understand the organisation of the human living cell, from its simplest level to the most complex level found in the human body.
- Understand the principles of the psychological model
- Understand the principles of the sociological model
- Understand basic science in health and care

In these areas of the examination, questions that 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, therefore missing the opportunity to gain marks.

Candidates should be encouraged to develop strategies to respond to the question fully and respond to the command verb accurately to enable them to form an appropriate response. Candidates should also note the mark allocation for each question to interpret the depth of response required. Closer inspection of the specification requirements may support revision and preparation, particularly in the Sociology of health, care and well-being (320) unit.

### **Extended Response Question**

The cohort responses to the Extended Response Question were generally limited in breadth of knowledge and depth of information across all units being examined. Candidates were required to identify and explore the significance of factors relating to the health and wellbeing of the individuals in the given scenario. They needed to consider relevant diagnostic tests, potential genetic links, and the impact of the health condition on the individual and their family.

Candidates who achieved low-scoring marks tended to focus on describing practical issues raised in the scenario and gave responses that were generic rather than subject-specific. The health condition was not fully explored with only minimal or no description of its genetic links and diagnostic tests which may be used. Supporting care services and organisations were not considered. Responses made limited or no reference to theoretical perspectives and models which were not applied to the scenario. These candidates missed the opportunity to offer a holistic response reflecting knowledge and understanding from the range of units being examined.

Candidates 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.

To access marks in the higher band, candidates would need to show breadth and depth of knowledge of the health condition, its progressive nature and the relationship between health and wellbeing. Candidates would also need to accurately apply sociological theory related to the scenario and explore the holistic approach and impact of the psychosocial model. A holistic response, drawing on breadth and depth of knowledge and understanding from across the qualification, would enable candidates to construct a detailed, factually accurate, well-reasoned and justified response.

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**  
[3625-032-technical\\_exam-guidance\\_2018\\_v1-1-pdf.ashx \(cityandguilds.com\)](https://www.cityandguilds.com/~/media/032-technical_exam-guidance_2018_v1-1-pdf.ashx)



## Series 2 – June 2024

The question paper presented questions with a mixture of recall and application of information. Some candidates in this cohort gained higher marks with well-structured responses and accurate interpretation of the questions. Most candidates attempted all questions, but some omitted to answer or did not appear to have read the whole question and therefore gave an inaccurate response.

Some candidates missed the opportunity to gain marks on AO1 recall questions with a straightforward structure. They were unable to show basic knowledge of subject-specific terms relating to the units of study being examined. A few candidates demonstrated accurate knowledge and application of topics across the whole paper, particularly in the Extended Response Question where they gave a holistic response, thus gaining higher marks. Where the candidate gave correct answers, they were awarded marks and were not penalised for spelling and grammar errors. The question paper had a balance of questions to allow candidates to achieve a grade proportionate to their knowledge and preparation.

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

- Understand the structure, functions and interdependency of human body systems
- Understand the relationship between health and wellbeing
- Understand the principles of the sociological model\*
- Understand the holistic approach and impact of the biopsychosocial model
- Understand basic science in health and care
- Know diagnostic tests used in healthcare environments

Many candidates achieved marks in the above topics by giving correct responses or appropriate examples to illustrate or expand upon their points. Candidates who offered expansion points which were not repetitive and showed correct application of information achieved higher marks.

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

- Understand the structure, functions and interdependency of human body systems
- Understand the organisation of the human living cell, from its simplest level to the most complex level found in the human body
- Understand the principles of the sociological\*
- Understand the impact of genetics on health and wellbeing

In these areas of the examination, responses indicate that some candidates were unprepared and did not respond accurately to the question. Questions that required knowledge of subject-specific terms were often challenging for candidates to achieve marks. This applied to both recall and application of knowledge questions. Some candidates did not attempt questions on these topics which had both recall and application questions.

Candidates should be encouraged to develop strategies to respond to the question fully and respond to the command verb accurately to enable them to form an appropriate response. Candidates should also note the mark allocation for each question to interpret the depth of response required.

\*The candidates showed varied levels of knowledge in this topic depending on the learning outcome covered.

### **Extended Response Question**

For the Extended Response Question candidates were required to identify and explore the significance of factors relating to the health and wellbeing of the individual in the given scenario. They needed to consider relevant diagnostic tests, potential genetic links, and the impact of the health condition on the individual. Relevant professional involvement and support strategies should have been explored. The contribution of theoretical perspectives to the scenario should have been included in the response with some justification for their application.

To access the higher band, candidates needed to show breadth and depth of knowledge of the health condition, its progressive nature and the relationship between health and wellbeing. Candidates should also accurately apply sociological theory related to the scenario and explore the holistic approach and impact of the psychosocial model. A holistic response, drawing on breadth and depth of knowledge and understanding from across the qualification, would enable candidates to construct a detailed, factually accurate, well-reasoned and justified response.

Candidates who scored in the lower bands gave responses which were generic rather than subject-specific. The health condition was not fully explored with only minimal or no description of its genetic links and diagnostic tests which may be used. Supporting care services and organisations were not considered. Responses made limited or no reference to theoretical perspectives and models which were not applied to the scenario. These candidates missed the opportunity to offer a holistic response reflecting knowledge and understanding from the range of units being examined.

**Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here**  
[3625-032-technical\\_exam-guidance\\_2018\\_v1-1-pdf.ashx \(cityandguilds.com\)](https://www.cityandguilds.com/~/media/2018/03/3625-032-technical_exam-guidance_2018_v1-1-pdf.ashx)

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

## Grade Boundaries

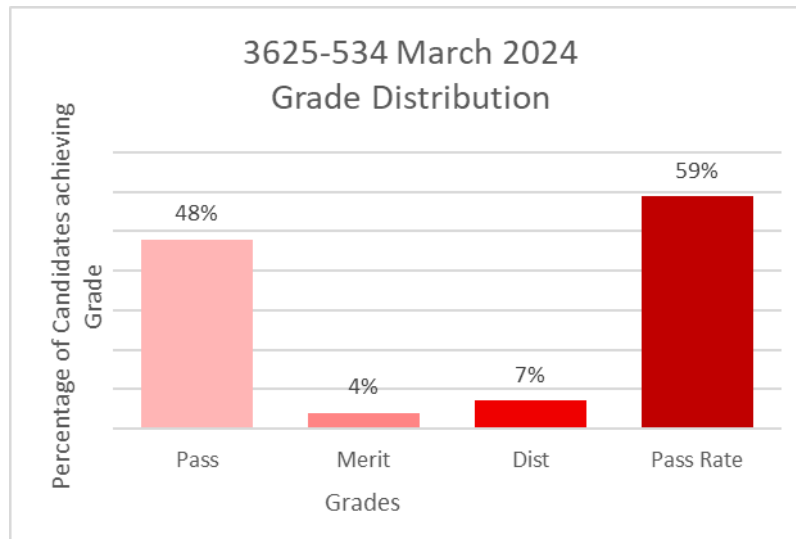
Assessment: **3625-534**

Series: **March 2024 (Spring)**

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

<b>Total marks available</b>	<b>60</b>
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:

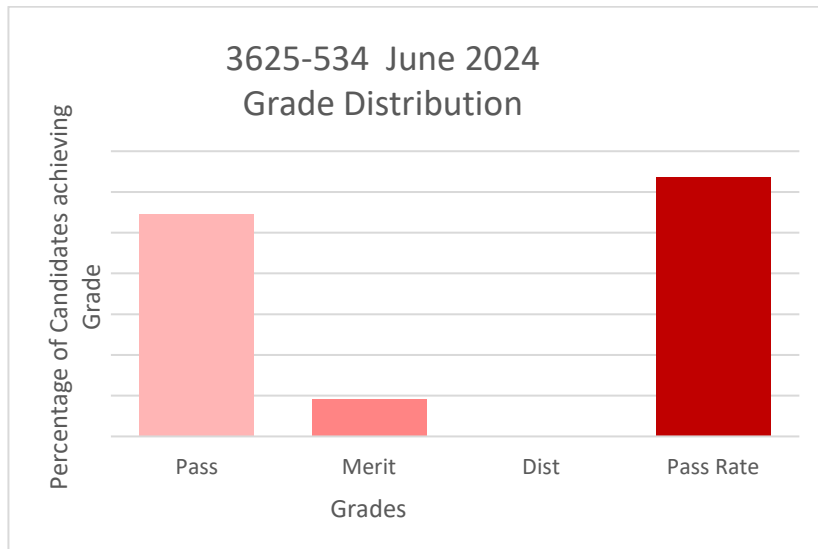


Assessment: **3625-534**  
Series: **June 2024 (Summer)**

Below identifies the final grade boundaries for this assessment.

<b>Total marks available</b>	<b>60</b>
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 Level 3 Health and Care - Theory exam

### Series 1 – March 2024

Overall, the cohort responses ranged from candidates achieving high marks with well-structured responses, accurately interpreting the questions, to candidates who only partially answered questions or completely omitted them. A few candidates demonstrated accurate recall of knowledge (AO1) and understanding (AO2) of topics across the whole paper. This was particularly seen in the Extended Response Question where they gave a holistic response, thus gaining higher marks. Candidates who did well demonstrating their recall of knowledge were able to achieve grades within the Pass range. Higher-scoring candidates demonstrated competency in drawing on wider knowledge and applying it when required by the exam question and could access the higher marks. However, overall, candidate performance in the March 2024 exam series was weaker than the March 2023 exam series.

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

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

Many candidates achieved marks in the above topics by offering correct responses or by giving appropriate examples to illustrate or expand upon their points. They demonstrated knowledge of a psychological perspective by using appropriate subject-specific terminology to express ideas and by correctly applying theoretical information to a given scenario.

A few candidates responded accurately to command verbs used in all questions. The higher marks achieved by these candidates included responses which demonstrated detailed subject-specific knowledge and application of information across the whole paper.

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 system
- Understand key theoretical concepts and sociological perspectives

In these areas of the examination, some candidates were unable to gain marks on both recall (AO1) and understanding (AO2) questions. Candidates gave lengthy answers describing a concept but did not gain marks as it was an incorrect response to the question. Candidates were awarded marks for the use of correct examples to illustrate points, but many did not follow the command verb accurately or give sufficient information to be awarded full marks. Some candidates offered a correct response but repeated the same information in their explanation which limited the marks awarded.

Candidates should note the mark allocation for each question to interpret the depth of response required. Closer inspection of the specification requirements may also support revision and preparation, particularly in the Sociology of health, care and well-being (320) unit.

Candidates awarded the highest marks gave answers with greater breadth and accuracy of application. Candidates should be encouraged to develop strategies to identify the question requirements and interpret the command verb accurately to enable them to form an appropriate response.

### **Extended Response Question**

Candidates were required to identify and explore factors to be addressed by professionals when supporting the health and wellbeing of individuals in the given scenario.

They needed to identify functions of the body system affected and explain potential links to the issues outlined in the scenario. A range of psychological and sociological theories should have been applied to the scenario with justification for their application. Relevant professional involvement and referral to appropriate services should have been explored.

Higher-scoring candidates offered a holistic response, drawing on breadth and depth of knowledge and understanding from across the units being examined. This enabled them to construct a detailed, factually accurate, well-reasoned and justified response.

Candidates showed breadth and depth of knowledge of the relevant body system and how its functioning could be affected by the issues raised in the scenario. They also applied a range of psychological and sociological theories, relating them to the scenario, with justification for their importance and relevance. They included references to a wide range of health and care services that may have been used to support the individuals.

Lower-scoring candidates gave responses which were generic rather than subject-specific. The health and wellbeing of the individuals were not fully explored, with only minimal reference to how the functions of the body system could be impacted by the issues raised in the scenario. Some responses made limited reference to psychological theories, but most candidates did not refer to sociological theories. Where theory was discussed, it was often incorrectly applied with little or no justification. These candidates missed the opportunity to offer a holistic response reflecting knowledge and understanding from the range of units being examined.

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 [3625-034-technical exam-guidance 2018 v1-1-pdf.ashx \(cityandguilds.com\)](https://www.cityandguilds.com/034-technical-exam-guidance-2018-v1-1-pdf.ashx)**

## Series 2 – June 2024

The overall cohort responses showed candidates gaining marks on AO1 questions but giving incomplete answers to AO2 questions affecting their opportunity to gain full marks on those questions. Some candidates misinterpreted the command verb or gave an incorrect response which clearly had a negative effect on the overall grade achieved.

Few candidates demonstrated accurate knowledge and application of sociological concepts and perspectives and often omitted questions relating to these topics. Questions relating to the units psychology of human behaviours and structure, organisation and function of the human body were answered with more accuracy.

The Extended Response Question required candidates to give a holistic response, drawing on all the units being examined. Candidates in this cohort gave descriptive responses which generally lacked structure and omitted to apply psychological and sociological theories to the scenario.

Where the candidate gave correct answers or examples to illustrate points, they were awarded marks. The question paper had a balance of questions to allow candidates to achieve a grade proportionate to their knowledge and preparation.

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

- Understand the structure, functions and interdependency of human body systems
- Understand psychological factors that influence human development
- Knowledge and application of named psychological theorists from a given perspective.

Many candidates gave responses to questions on the structure and function of body systems and gained partial or full marks on these questions. They were awarded marks for examples to illustrate or expand upon their point. They demonstrated knowledge of psychological perspectives and terms by using appropriate subject-specific terminology to express ideas and by correctly applying theoretical information to a given scenario. Candidates in this cohort were knowledgeable on the effects of an improved diet with most gaining marks on this question. Most candidates responded accurately to the command words used. Candidates in this cohort who achieved higher marks gave responses which demonstrated subject-specific knowledge on all topics in the examination and their ability to correctly apply sociological and psychological theory.

Many candidates did not demonstrate 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
- Understand key theoretical concepts and sociological perspectives

In these areas of the examination, responses indicate that candidates struggled with both recall and application. Some candidates gave answers describing the terms or concepts used in questions but gave incorrect or only partial responses. Closer inspection of the specification requirements may also support revision and preparation, particularly in the Sociology of health, care and wellbeing unit.

## **Extended Response Question**

Responses to the Extended Response Question were generally limited to the lower mark band. Higher marks in this band were achieved by candidates who could apply some knowledge from the wider range of unit content. They needed to identify the functions of the body system affected and explain potential links to the issues outlined in the scenario. Candidates were also required to identify and discuss a range of both psychological and sociological theories which should have been applied to the scenario with justification for their application.

Higher band responses are required to evidence breadth and depth of knowledge from all the units being examined and the construction of a detailed, factually accurate, well-reasoned and justified response.

Candidates who scored in the lower bands gave responses which were generic rather than subject-specific. The issues posed in the scenario were not fully explored, with only minimal reference to how the functions of the body system could be impacted by the issues raised in the scenario. Some responses made limited reference to psychological theories, but most candidates did not refer to sociological theories. Where theory was discussed, it was often incorrectly applied with little or no justification. These candidates missed the opportunity to offer a holistic response reflecting knowledge and understanding from the range of units being examined.

**Centres are reminded of the City & Guilds Technicals 'Exam Guides' available here [3625-034-technical\\_exam-guidance\\_2018\\_v1-1-pdf.ashx](https://www.cityandguilds.com/~/media/2018/04/3625-034-technical_exam-guidance_2018_v1-1-pdf.ashx) ([cityandguilds.com](http://cityandguilds.com))**



# Synoptic Assignments – Year 1

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

### Grade Boundaries

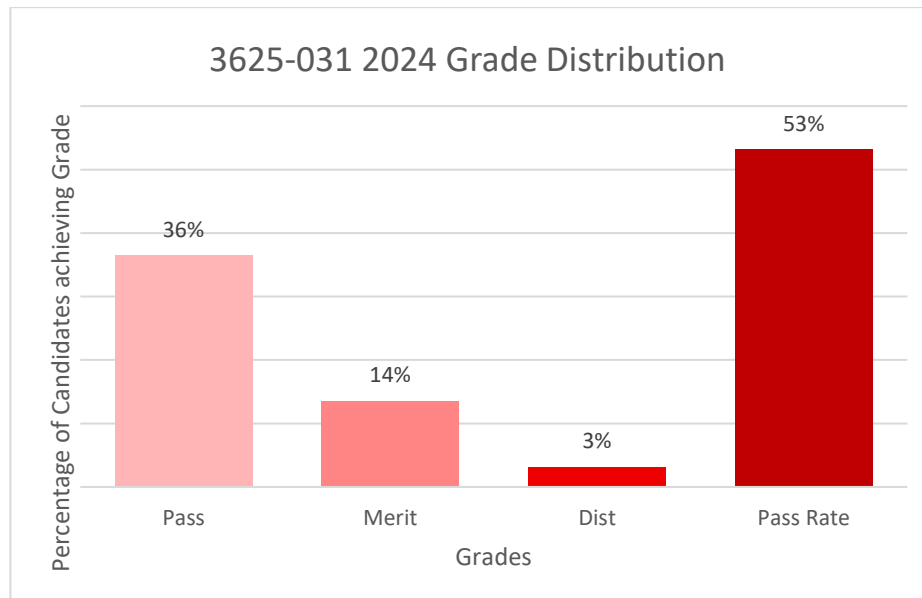
Below identifies the final grade boundaries for this assessment.

Assessment: **3625-031**

Series: **2024**

<b>Total marks available</b>	<b>60</b>
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

There was a clear audit trail showing how assessors had justified their marking decisions for the synoptic assignments for this series. Most were successfully uploaded onto the portal in a timely manner and generally, there was a clear audit trail showing how assessors justified marking decisions. Some markers in some Centres had over-marked the assessment tasks and moderators advised careful matching of marks to the band descriptors for each AO. This has resulted in marks being adjusted where this is the case.

Audio files were presented in a suitable format, audible and the accompanying scripts were mostly clearly documented with time stamping. Recordings generally lasted a suitable length of time to cover the discussion points for the professional discussion. This gave many candidates opportunities to expand on their knowledge and understanding, providing examples of application from work-placements.

### Summary of synoptic assignment tasks

The synoptic tasks gave candidates opportunities to showcase what they had learned about health and social care principles and the application of person-centred approaches. 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, with many candidates applying their knowledge to the health and care needs of the scenario subjects detailed within the tasks. Candidates gained marks when they 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 (especially legislation), provided basic explanations, or repeated points. Candidates who provided focused in-depth support and care plans, specific to the people concerned, gained marks.

Most plans were written in an account format however, there were some attempts from several 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 underpinning their plans; and justifying links to theoretical approaches/models; legislation, regulation, policies, and practices relevant to the case. Higher marks were awarded where explanations of the skills, values, and behaviours required to support the family showed breadth of understanding of the issues arising within the scenario and considered the wider context of health and care service provision. Candidates did not gain marks when they addressed a limited range of factors, did not attempt to explain the relevance of the points made, or repeated themselves.

**Task 3** – Candidates gained marks for this task when their accounts showed evidence of research into two relevant safeguarding reviews, linking them to the scenario. The quality and depth of the rationale for the reviews gained the candidate marks.

A few candidates only produced one Serious Case Review and others wrote about the scenario in relation to safeguarding, this limited marks awarded and the subsequent banding.

## **Case Study B**

**Task 1** – Candidates completing the written account for this task gained marks when they provided in-depth explanations of the issues raised by the scenario. This was especially relevant to consideration of the wider provision of planning services for individuals with complex needs making lifestyle choices.

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

Candidates who did not sufficiently consider and explore the range of health and care issues; including limited awareness of the role of professionals, services and charities able to contribute to providing support, gained limited marks. Most candidates showed they understood the skills, values, and behaviours needed to support the individuals within this scenario.

The case study provided the candidate with different levels of 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 2** – Candidates gained marks when they made clear links between knowledge, understanding, justifying links to legislation and core skills and behaviours. Many candidates gained marks by carefully considering how they would provide support and making positive suggestions to the different challenges within the scenario. Most candidates referred to legislation and the principles of safe working practices and positive risk-taking.

Candidates gained minimal marks when they addressed a very limited range of the above factors (especially related legislation) or did not fully explore and explain the relevance of the points made or repeated themselves.

## **Professional Discussion**

Many candidates showed evidence of reflective practice in the discussion. They described placement aims and objectives; and gave examples of effective practices which they felt needed improvement.

Recordings were mostly easy to download, audible and lasted the required time to cover the discussion points. Some candidates had prepared accompanying notes and had completed the Reflective Practice workbook which they referred to in the discussion.

The discussion flowed best when the candidate gave spontaneous responses, and this generally happened once the candidate gained confidence. 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 one case where tutor notes were difficult to decipher, but this does not detract from the candidate mark awarded. In a few instances, the candidates needed quite a lot of prompting, in these scenarios, moderators remind markers to adhere to the prompting brief so as not to lead the lower-scoring candidate.

Overall, the professional discussion enabled the lower-achieving candidates to expand on their descriptions of placement experience and for the higher-achieving candidates, it enabled them to show an 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 recall of knowledge across the written tasks 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 recalled relevant knowledge and used this to show breadth of knowledge in their explanations of issues.

Sometimes this was in response to some prompting from their interviewer, especially when they were very nervous. However, as the interview progressed, candidates gained confidence. Candidates did not gain marks when their knowledge was incomplete, inaccurate or not relevant to the task. In several cases, there was a lack of knowledge relating to relevant legislation and theory.

### **AO2 – Understanding concepts, theories and processes**

This AO provides the candidate with the opportunity to provide a rationale and show causal links for their explanations.

Responses which were focused, specific, and detailed, showed breadth and depth of understanding, enabling candidates to achieve higher marks. 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 gained minimal 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 reflect on and explain their understanding, especially about effective and poor practice. Some responses showed real insight, and this was noted by moderators. 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 showing a confident application of written skills. For those candidates where this was not the case, their written work was often limited in scope, and descriptive with considerable inaccuracies. Points were often repeated or rephrased thus not gaining marks for this AO. Many candidates referenced sources of information they had used in their task preparation. 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**

For the higher-marked candidates, there was a demonstration of integrated knowledge and understanding of health and care principles, legislation, and theory. This integration was linked to the different issues identified in the case studies, and from the discussion.

The synoptic tasks provide different layers of complexity and for the higher-marked candidate, this was ably met. Candidates whose responses were limited did not gain as many marks, although the professional discussion was an opportunity to gain more marks for those who had limited written skills. Where the candidate provided examples of reflection on practice, and evaluative skills within the written tasks, marks were gained.

### **AO5 – Attending to detail/perfecting**

Candidates gained marks for this AO when they met task requirements and did not deviate from the topics being discussed. This enabled them to 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

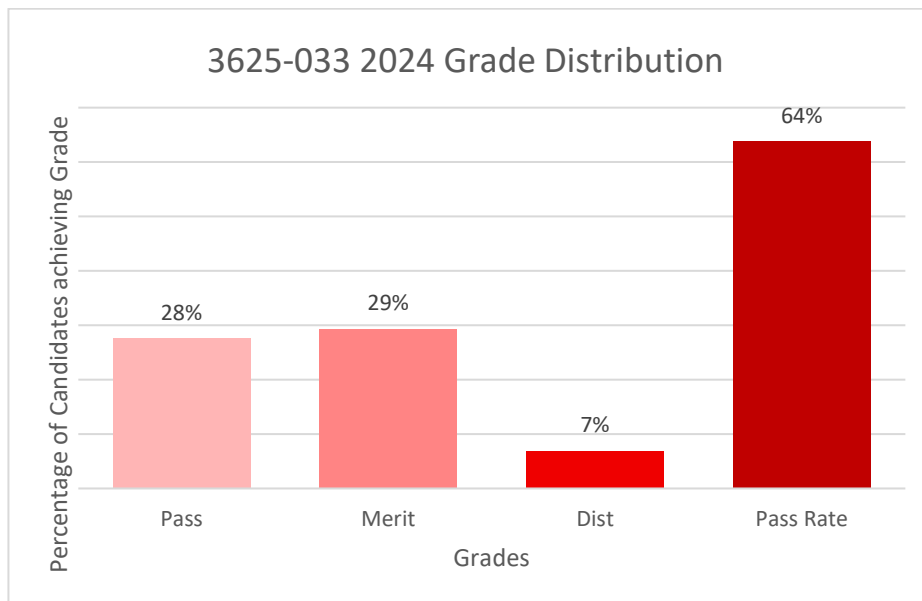
Below identifies the final grade boundaries for this assessment.

Assessment: **3625-033**

Series: **2024**

<b>Total marks available</b>	<b>60</b>
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

Centres provided an audit trail showing how assessors had justified their marking decisions and Centre evidence was mostly uploaded in a timely manner. Audio files were presented in a suitable format and accompanying scripts were mostly clearly documented with time stamping. Recordings were easy to download, audible and lasted a suitable length of time to cover the discussion points. The professional discussion gave many candidates opportunities to expand on their knowledge and understanding and application of skills in examples from their placements.

### Summary of synoptic assignment tasks

Many candidates were able to showcase what they had learned about health and social care principles; the importance of research and social policy in the design of services, within the written tasks. Candidates gained marks when they provided well-rounded, detailed responses to the research and social policy assignment tasks; referring to relevant research principles and theoretical approaches underpinning social policy 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 explained how both primary and secondary research informs and develops evidence-based practice in health and care and, who provided a clear rationale for different research methods, gained marks.

Some higher-marked candidates demonstrated an understanding of ‘analyses and ‘evaluation’ of research findings; ethical considerations; and 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 these various 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 considered their chosen topic within the wider context of health and care service provision and thought ‘outside the box’.

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 several cases, this was thoughtfully presented. However, candidates were unable to gain marks when they did not consider the scope of their topic or evaluate findings from the comparative literature review. Most candidates provided references for their literature review, although some were more in depth 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 identified a research proposal; explained links between the aims and objectives of this and their chosen research methodology; and summarised and evaluated their learning, thus gaining marks. These candidates made clear links to a rights-based approach to the provision of health, care and support services in a wider context.

For some candidates, this task remains challenging, and they gained minimal marks for considering limited information or not arriving at a clear proposal.

## **Assignment B:**

**Task 1** – Candidates gained marks for this task when their written account shows their evaluative considerations of individual and societal factors relating to the task detail. Candidates, who have prepared in advance by wider reading about the topic gain marks by explaining the impact on the biopsychosocial impact on health and wellbeing. Consideration of external influences and identifying key services for those involved, also gained marks.

Candidates were unable to gain marks when their considerations remained limited or did not explore issues such as the potential risk of harm and the challenges to providing services. Candidates' marks were 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 individuals and others involved teachers.

**Task 2** – Many candidates completed the requirements of this task confidently, gaining marks for explaining support needs and the impact on mental health, physical health and well-being. Candidates who provided in-depth explanations of the issues raised within the task specification, 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 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 justified their responses, and provided examples of fostering a rights-based approach and contributing to effective teamwork gained marks. Their responses in the discussion showed the integration of knowledge and understanding into their working 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, however, most discussions flowed best without notes. When markers provided accompanying timestamping alongside the recording, these were well received by moderators as they showed how/where marks had been allocated to the different AOs.

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 lower-scoring 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 the 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. Marks were gained by 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, using this effectively to show breadth and depth for issues being discussed. This was either relevant to their placement experience, or for some candidates, the case study provided. Sometimes some prompting was evident from their interviewer, however, in most cases, as the interview progressed, candidate 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, showing they had a very clear understanding of how research and social policy were underpinned by factors such as legislation and theoretical approaches.

Other candidates did not gain marks when their understanding was incomplete, 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 or expand on the issues raised in the social policy task or the research-based tasks. These candidates did not gain marks when they gave irrelevant details or were distracted by one aspect of their discussion.

In the professional discussion, candidates were unable to 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 by moderators. 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 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. 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. However, the professional discussion often provides the candidate with limited written skills to gain marks. 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. Candidates who had provided a structured literature search and detailed their project proposal clearly gained higher marks.

This enabled them to show breadth and depth in their responses. Candidates did not gain marks for this AO when they did not meet the task command verbs or provided very limited or inaccurate responses in both the written tasks and in their responses within the discussion.