

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

2018

Examiner Report

Contents

ntroductionntroduction	3
Theory Exam – March 2018	
Grade Boundaries and distribution	
Chief Examiner Commentary	

Introduction

This document has been prepared by the Chief Examiner, it is designed to be used as a feedback tool, for centres to use in order to enhance teaching and preparation for assessment. It is advised that this document be referred to when preparing to teach and then again when candidates are preparing to sit examinations for City & Guilds Technical qualifications.

This report provides general commentary on candidate performance and 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 the March 2018 examination series. It will explain aspects which caused difficulty and potentially why the difficulties arose, whether it was caused by a lack of knowledge, poor examination technique or responses that failed to demonstrate the required depth of understanding.

The document provides commentary on the following assessment; 3625-030/530 Level 3 Health and Care - Theory exam

Theory Exam - March 2018

Grade Boundaries and distribution

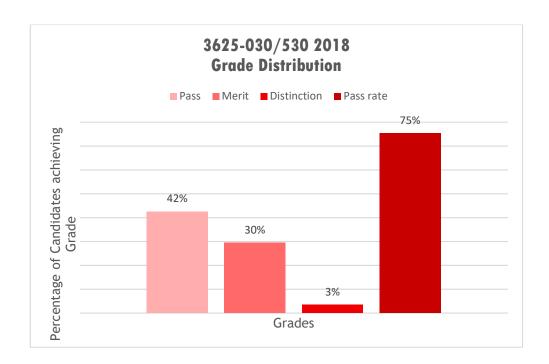
Assessment: 3625-030/530

Series: March 2018

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 distribution of grades and pass rates for this assessment;



Chief Examiner Commentary

General Comments on Candidate Performance

Assessment component: 3625-030/530

Series 1 (March)

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

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

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

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

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

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

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

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

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

Some candidates omitted to answer exam questions on these topics completely or clearly made a guess at a probable answer. Answers to many of these indicate that candidates had not read and understood the focus of the questions correctly or had little knowledge of the concepts. For example, a question in relation to the concept of institutionalisation, many candidates did not secure marks as they gave answers identifying availability of equipment or factors about the routines followed in residential facilities, rather than the impact on the resident.

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

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

Extended Response Question

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