



GCE EXAMINERS' REPORTS

**GCE (NEW)
HEALTH AND SOCIAL CARE AND
CHILDCARE
AS/Advanced**

SUMMER 2022



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Annual Statistical Report

The annual Statistical Report (issued in the second half of the Autumn Term) gives overall outcomes of all examinations administered by WJEC.

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HEALTH AND SOCIAL CARE AND CHILDCARE

General Certificate of Education (New)

Summer 2022

Advanced Subsidiary/Advanced

UNIT 1: PROMOTING HEALTH AND WELL-BEING

General Comments

It has been a challenging time for centres and their candidates over the past two years; therefore, it was encouraging to see that most candidates completed the examination paper and answered all eight questions within the allotted time. This first examination paper for the new GCE qualification assessed candidates effectively across each section of the specification.

Centres had prepared their candidates well for this first examination, ensuring coverage of the appropriate sections in the specification. Most candidates showed a good knowledge and understanding of this vocational sector and made regular use of specific sector terminology.

Comments on individual questions/sections

- Q.1** This was an accessible AO1 first question on the examination paper. Some candidates achieved Band 4 marks by demonstrating thorough knowledge and understanding of the principles of this Act with a confident grasp of key concepts such as the role of public bodies and the specific identification of the seven well-being goals. However, only a small number of candidates were aware of the role of the Future Generations Commissioner. Band 1 responses tended to be more generic or incomplete, lacking specific details or examples.
- Q.2** (a) Most candidates provided an accurate definition of holistic health. Band 3 responses showed a detailed knowledge of the factors contributing towards holistic health and well-being to include physical, intellectual, emotional, social and spiritual.
- (b) Most candidates were aware that this model looks at the interaction between biological, psychological and social factors. Band 3 responses addressed the command verb by providing a detailed discussion of the main features of this model in relation to health, well-being and disability. Band 1 responses were usually very brief and provided little information about the model.
- Q.3** Some candidates did not answer the question – they outlined the importance of education and family/community support, but not necessarily for ‘preventative measures’ such as vaccination and screening programmes and were therefore assessed at Band 1. The candidates achieving within Band 4 provided confident and detailed consideration of at least two preventative measures. They provided informed judgements based on examples showing how education and family/community support can improve the effectiveness of the measures.

Q.4 Most candidates provided some accurate details about this initiative, for example, by providing general health and lifestyle advice. At Band 4, some candidates referred to the given case study of Joe and provided an excellent explanation of how this initiative can contribute to older people's health, well-being and resilience. However, a number of candidates did not refer to resilience and were unable to achieve marks above Band 2.

Q.5 A large number of candidates achieved full marks on this question. They were aware of the methods stated in the specification and provided appropriate reasons for each of their three identified methods.

A few candidates incorrectly referred to educationalists or advocates; these are people and not the methods, as stated in the specification. Also, some candidates mentioned 'promotional events' which was an error since this method was provided in the question stem and the question required 'other methods'.

Q.6 (a) Most candidates referred to mental health data and often mentioned depression, anxiety and behaviour disorders. Candidates achieving at Band 4 often provided specific data, outlining trends or patterns and potentially influential factors such as family conflict, substance misuse and poverty.

Some candidates only provided very short, basic responses at Band 1.

(b) Most candidates were familiar with the work undertaken by educational workers and provided some good examples of work being done within their own school/college. However, the focus of the question was on benefits *and* limitations, so some candidates were restricted to Band 2 if only the benefits *or* the limitations were addressed. Band 4 responses addressed the command verb 'assess' and provided clear and detailed judgements about a range of benefits and limitations of the roles undertaken by educational workers in promoting health, well-being and resilience of children and young people in Wales.

Q.7 A few candidates made an error by referring to high cholesterol which was already given in the question stem.

Most candidates selected appropriate modifiable risk factors such as smoking, obesity, unsafe sex and substance misuse. A few candidates referred to other multi-factorial inherited disease risk factors such as high blood pressure, type 2 diabetes and heart disease. Candidates who did not explain the effects on resilience could only achieve at Band 2. A number of candidates achieved at Band 4 by demonstrating detailed knowledge and understanding of two appropriate factors and a confident grasp of a range of ways in which they could impact on an individual's health, well-being and resilience.

Q.8 This question focussed on the two assessment objectives, AO1 and AO3. Overall written communication, including spelling, punctuation and grammar, was also assessed within assessment objective AO3.

Some candidates presented short, very limited responses, or none at all. Candidates produced better responses for the AO1 first part of the question and described how living and working conditions may affect health and well-being to achieve at Band 3. However, many candidates did not address the second part of the question for AO3 in reference to inequalities in outcome-focused care. If candidates did not refer to both living and working conditions, they could only achieve up to Band 2. Candidates achieving at Band 4 provided clear, well-constructed responses, giving informed judgements based on exemplar evidence, justifying how living and working conditions may contribute towards inequalities in outcome-focused care.

Summary of key points

1. Candidates need to read and carefully focus on the question to note:

- marks allocated (to support time management)
- key words/content focus
- command verb to address

Candidates could be encouraged to highlight or underline key words and the command verbs in each question to avoid making rubric errors.

2. Candidates would benefit from regular examination question practice so that the final examination is potentially less stressful and not an unpleasant surprise. Examination questions could be included within curriculum teaching and delivery of the specification. Candidates could be encouraged to self- and peer-mark examination questions as a way to familiarise themselves with mark schemes and as an effective learning tool. Full mock examination practice also gives candidates the opportunity to learn and improve their examination techniques, enabling them, for example, to improve time management skills and to avoid making rubric errors, as mentioned in point 1 above.

3. Time management skills should ensure that candidates can complete the examination paper within the allotted 2 hours. This examination paper carries 80 marks which equates to approximately 1.5 minutes per allocated mark.

4. Centres should ensure that their candidates are fully aware and have a good knowledge and understanding of all of the Unit 1 content in the specification which will be assessed over future examinations. Candidates should have a good knowledge and understanding of sector-specific vocabulary and terminology as stated in the specification.

Centres should be aware of and refer to the range of materials being regularly updated and made available on the Health and Care Learning Wales, WJEC and secure websites to support both teachers and candidates. Resources include CPD training opportunities, sample assessment materials (SAMs), past papers and mark schemes and examiners' reports.

HEALTH AND SOCIAL CARE AND CHILDCARE

General Certificate of Education (New)

Summer 2022

Advanced Subsidiary/Advanced

UNIT 2: SUPPORTING HEALTH, WELL-BEING AND RESILIENCE IN WALES

General Comments

Declaration forms need to be completed and signed by both the candidates and the teacher, and this also applies to forms uploaded onto WJEC's internal assessment mark input system (IAMIS). It is beneficial to include comments on declaration forms in order to justify marks awarded and where marks have been split.

Work should be labelled with centre and candidate number on the front mark sheet/candidate declaration and in a header or footer on the work. Annotations on work and on inclusion of mark sheets, highlighting where marks had been awarded, assisted with moderation to justify marks awarded.

Accurate assessment by most centres was seen, although it should be noted that, in order to achieve higher mark bands, candidates must provide evidence in more detail that meets the assessment objectives and command words.

Comments on individual questions/sections

Task 1

The sections of the task were in order and completed in the appropriate format of a report. Candidates chose appropriate job roles from the health and social care sectors. It is important that candidates understand the roles within the health, social care and childcare sectors prior to deciding on the two job roles. Job roles within public services are not suitable.

Section (a) – Content 2.2.3 (c)

Research was relevant and applied appropriately but candidates must ensure that the report is completed in their own words and, where candidates have used research and resources, these must be referenced.

In order to achieve a higher mark band, content of 2.2.3 (c) needs to be linked to assessment criteria more specifically; in particular, linking employment opportunities and pathways to opportunities for promotion or progression, every area of specialism and/or geographical locations/settings.

Section (b) – Content 2.2.2 (a), (d), 2.2.4 (a)

Centres should remember that section (b) does not need to be linked to job roles.

In order to achieve a higher mark band, the content needs to be linked to assessment criteria more specifically; in particular, the discussion about the impact of the legislation, regulations and initiatives on sustainable care services and high-quality care.

Section (c) (i) – Content AO2, 2.2.2 (c)

To achieve a higher mark band, the content needs to be linked to assessment criteria more specifically; in particular, candidates need to ensure that the skills and techniques are applied to working practices in order to promote outcome-focused care.

To be awarded higher marks, the content needs to be applied to the chosen practitioner, with more explanation of how the practitioner may apply the skills in order to promote outcome-focused care.

Section (c) (ii) – Content AO2, 2.2.2 (b), 2.2.2 (e)

To be awarded higher marks, the content needs to be linked to assessment criteria more specifically; in particular, principles of care need to be show more application to the chosen practitioner.

Before awarding higher marks, centres should ensure that the content is covered in detail and that candidates cover multi-disciplinary team and partnership working to the same level as the principles of care. Principles of care need to be explained in relation to how they help ensure high quality person-/child-centred care. Candidates should explain how multi-disciplinary and partnership working supports the individual to identify and achieve personal outcomes.

Task 2

Task 2 was completed in the appropriate format of presentation, blog, infographic. The majority of candidates produced a presentation. Some also included PowerPoint notes. Candidates should be encouraged to include as much information in the presentation as possible. The work should follow the structure of the assessment (sections (a), (b), (c), etc) and these sections should be used as titles, which would then produce work of a coherent nature.

Section (a) – Content AO2, 2.2.1 (c)

Candidates must ensure that they cover the needs (Physical, Intellectual, Emotional, Social and Language) of the individual. In order to achieve a higher mark band, more depth and detail is required in the coverage of how those needs could be assessed to identify and achieve personal outcomes.

Section (b) – Content AO1, AO2, 2.2.1 (a), 2.2.1 (b)

The assessment criteria were covered well in outlining the individuals' personal outcomes and strengths, and the strategies that the individual can use to identify strengths and personal outcomes. In order to achieve a higher mark band, the content needs to have more depth and detail, outlining how practitioners can support the individual to identify personal outcomes, identify strengths to help and achieve personal outcomes and identify and build their resilience.

Section (c) – Content AO3, 2.2.1 (d)

This content was covered well and linked to the individuals in depth. Candidates need to ensure that they examine a broad range of ways in which the chosen individual can be supported to measure their progress against personal outcomes.

Section (d) – Content AO1, AO3, 2.2.3 (a), 2.2.3 (d)

Candidates should be encouraged to link the content to their individual. In order to achieve a higher mark band, the content needs to have more depth and detail; in particular, consideration of how relevant services in Wales contrast to those elsewhere in the UK.

Section (e) – Content AO2, 2.2.3 (b)

In order to achieve a higher mark band, the content needs to be covered in full. Candidates demonstrated good knowledge of the quadruple aim of a healthier Wales.

Summary of key points

Candidates' work needs to adhere to awarding body assessment objectives and ensure that there is full coverage of these before awarding in the higher mark bands. This information can be found in the specification.

Evidence of research conducted prior to NEA starting was well documented and referenced after each section. Candidates should ensure that work is referenced as stated in the specification.

The use of headings (Section (a), Section (b), Section (c), etc) is encouraged to support candidates in the presentation of their work.

Resources to support delivery can be found on the Health and Care Learning Wales website.

HEALTH AND SOCIAL CARE AND CHILDCARE

General Certificate of Education (New)

Summer 2022

Advanced Subsidiary/Advanced

UNIT 3: THEORETICAL PERSPECTIVES OF CHILDREN AND YOUNG PEOPLE'S DEVELOPMENT

General Comments

The overall standard of candidates' responses to the paper was good, with few responses not achieving any marks and few questions not attempted. Candidates on the whole demonstrated a good understanding of what the questions were asking, with few examples of candidates giving responses where they had not understood the question.

This is the first year of this qualification being awarded so there are no previous papers for comparison. The majority of candidates attempted to answer all the questions and the full range of marks was achieved for each question. There was no evidence that the time allowed for the paper had led to a candidate under-performing and the responses evidenced that candidates had the opportunity to fully demonstrate their knowledge and understanding of the specification for this unit through the paper. Many candidates gave excellent responses that demonstrated they were well prepared for the examination – these were well-informed and well-structured, using appropriate health and social care and childcare specific terminology from the specification. Others needed to develop their knowledge of key terms and concepts, for example: playwork; attachment; strategies promoting positive behaviour; the purpose of play.

Candidates who did well on this paper generally did the following:

- applied knowledge and understanding to questions set in a childcare context within the case study for section A;
- showed clear knowledge and understanding of how to apply the theories of child development to a childcare context;
- demonstrated good knowledge of the specification including the purpose of play and different stages and types of play and strategies to support positive behaviour.

Candidates who did less well on this paper generally did the following:

- lacked precision in their responses, for example, gave generalised responses on child development related to PILES without answering the question;
- found it difficult to apply what they had learnt to childcare or early years contexts;
- produced responses that lacked depth, and were often rambling and peripheral to what had been asked, sometimes simply repeating information provided in the case study rather than answering the question in section A and question 5;
- lacked knowledge of the specification content.

Comments on individual questions/sections

- Q.1**
- (a) This was attempted by the majority of candidates who were able to describe the factors influencing behaviour correctly from the case study, with many candidates achieving full marks for this question. Less successful candidates identified the factor but did not describe how this influenced Elen's behaviour – they repeated the information given in the case study, for example, 'Factor is divorce this is due to Elen's parents splitting up when she was 4 yrs old.'
 - (b) The majority of the candidates had a good knowledge of Bandura's social learning theory and were able to apply it successfully to the case study. Candidates showed a good understanding of the influence of role models and how children imitate the behaviour of others, some extending their responses, referring to observation of reward or lack of punishment influencing behaviour.
 - (c) Many candidates demonstrated a good knowledge of a range of strategies used to promote positive behaviour. Less successful candidates only referred to one or two strategies and were unsure of how these were promoting positive behaviour.
- Q.2**
- (a) Most candidates demonstrated understanding and knowledge of Bowlby's theories. Some gave excellent detailed responses showing a depth and breadth of understanding of how this theory related to the case study.
 - (b) The majority of candidates responded well to this question, demonstrating a good understanding of the purpose of play, and could relate how imaginative play would have a positive impact on social and language development. Less successful candidates included other types of play in their responses or talked about physical benefits rather than social and language. A few gave very basic responses on the purpose of play, for example, 'Helps children develop their PILES'.
- Q.3**
- (a) This question was well answered by candidates, with mostly good or very good responses showing a good knowledge and understanding of the theory of emotional intelligence. The most successful candidates gave responses that covered the breadth of social benefits of emotional intelligence.
 - (b) Responses to this question were, on the whole, very pleasing and candidates demonstrated good knowledge and understanding of how learning disabilities can affect development. The responses indicated excellent teaching and learning provided by centres for this area of the specification. The majority of candidates performed extremely well on this question. The candidates who performed less well referred to physical disabilities rather than learning disabilities in their responses.
 - (c) Responses showed candidates had a good knowledge and understanding of creative play. Those who achieved the higher bands were able to relate creative play to cognitive development effectively. Candidates who were less successful referred primarily to physical development or were unable to relate the type of play to development and simply listed aspects of creative play.

- Q.4** (a) The standard of responses for the majority of candidates was good, demonstrating knowledge and understanding of both the Foundation Phase Framework and how environmental play benefits development. Candidates who were the most successful referred to a range of benefits for children's development and showed both depth and breadth within their responses.
- (b) Candidates demonstrated a good knowledge and understanding of Piaget's theories which indicated high quality teaching and learning from centres in this area. Candidates in the main were able to demonstrate an understanding of how Piaget's theory supports the assessment of children's development. Less successful candidates stated the main points of the theory but did not refer to assessment in responses.
- (c) Candidates gave mostly good responses on playwork. Less successful candidates confused the role of the playworker with the role of a keyworker/ person or childcare practitioner.
- Q.5** The majority of candidates showed a depth of knowledge of the role of the keyworker and related this well to the case study. The strategies used were covered in detail in the majority of responses. Grammar, punctuation and terminology were of a pleasing standard for many candidates.

Summary of key points

1. The majority of candidates gave responses of a good standard, showing knowledge and understanding of the content of the specification which demonstrates effective teaching of this new qualification within centres.
2. Candidates showed understanding of the case study and the ability to relate the development and behaviour of the children in the case study to their learning of the content of the unit effectively, which shows effective teaching and learning strategies have been employed by centres.
3. Candidates who were less successful had often not fully answered the question, with responses only partly covering the content being assessed, for example, stating the stages and key points of Piagetian theory but not relating it to assessment practices in early years settings in question 4 (b).
4. In general, candidates' knowledge and understanding of play and aspects of the specification relating to play was the weakest section of the specification assessed. The strongest area was theories of development, with candidates demonstrating a particularly strong knowledge and understanding of Piaget, Bowlby and Bandura, though application to children's development and behaviour was not as strong as the knowledge of the theories themselves.

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General Certificate of Education (New)

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Advanced Subsidiary/Advanced

UNIT 4: SUPPORTING THE DEVELOPMENT, HEALTH, WELL-BEING AND RESILIENCE OF CHILDREN AND YOUNG PEOPLE

General Comments

It was pleasing to see that most candidates made a full attempt at each question. Although some candidates' work was not presented as presentation and report, most linked to the childcare sector in Wales, and some candidates were able to give some very good contemporary examples linking directly to Wales.

Comments on individual questions/sections

Task 1

- (a) The majority of candidates were able to give a useful definition of child-centred care and the importance of child-centred care in meeting needs of children and young people. Some candidates did not give any possible effects if these needs were not met. Some were able to demonstrate a confident grasp of how child-centred care can be applied in order to meet the holistic needs of children and young people within key stages of development; however, some did not always make clear what needs were being explained. It would be useful if candidates separated their answers into physical, intellectual/cognitive, language, emotional, and social needs and make clear the ways in which child-centred care can be applied in meeting these specific needs. For candidates to reach Band 3, they must show a confident grasp of how child-centred care can be applied in meeting the holistic needs.
- (b) (i) Not many candidates were able to score maximum marks for this question because they did not address the key features of the question – they were required to describe the different types of transitions, life experiences and life changes that a child or young person may experience but, instead, gave the benefits and drawbacks of these transitions, etc, which was not what was being assessed.
- The work here does not have to be detailed, but to give a brief account of what these transitions, life experiences and life changes are, and why these may happen to a child or young person. It is about preparing for someone planning a future career in the childcare sector.
- (ii) *In accordance with WJEC adaptations, Task 1 (b) (ii) was not completed.*

- (c) The majority of candidates were able to explain the types and purpose of assessment used in the setting of their choice; however, some candidates listed assessments without explaining why this assessment would be used to meet the specific needs of children and young people at the setting. Candidates must reference the setting within the work. Some candidates did not address the five elements of assessments and the responsibilities of the local authority. Also, the principles of assessment should be made clear.

Candidates should separate this question into two key parts:

1. focusing on the specified setting – types and purpose used at that setting – ensuring they consider how it may meet specific needs and provide appropriate timely and ongoing support; and
2. focusing on social care in general, such as explaining the five elements of assessment and the responsibilities of the local authority and considering the principles of assessments.

It is important that candidates do not just list their points – there should be some explanation.

- (d) The majority of candidates were able to list the barriers in accessing care and support that may be experienced by children and young people. However, the key was ‘outlining’, linking care and support. Candidates who developed their answers used explicit examples from their settings and also considered a range of barriers. In order to develop their points, candidates should use the PEE formula: **point** = barrier, **explanation** = outline the barrier (provide a brief description of the barrier); and **example** = give examples from the setting and how it may or has impacted their care and support.
- (e) (i) *In accordance with WJEC adaptations, Task 1 (e) (i) was not completed.*
- (ii) Not many candidates achieved maximum marks for this question as they failed to address the key command words of understood/responded to within the setting of choice. It is important that candidates consider that, when individuals with complex needs enter that setting, how would this setting understand these needs and then how would they respond to them? It is therefore important to differentiate between understanding and responding to. Candidates should also expand their explanation by making it clear how understanding and responding to these complex needs benefit the children or young people in achieving their personal outcomes.

Task 2

- (a) The majority of candidates examined the different social policies and included the Well-being of Future Generations (Wales) Act 2015 and also A Healthier Wales, etc, but some did not say how they affected childcare provision in Wales. More direct links to how the childcare sector is affected would have developed the content of the candidates’ presentations.

- (b) Candidates generally explained the changes in childcare provision in Wales but not how they impacted on the roles of practitioners in the sector. Some did not explain the changes, for example, some candidates explained the role of Flying Start provision without explaining how this has increased in Wales. For candidates to achieve 'excellent' they need to clearly explain the four key changes in childcare provision.
- (c) (i) Candidates did not always give a core definition of safeguarding and, in particular, the importance of why safeguarding is necessary in relation to protecting children and young people from harm and abuse. Some answers were too generalised and could be applied to any life stage, resulting in candidates only showing some grasp of why safeguarding was necessary. Some incorrectly understood the term 'safeguarding' as being after a child or young person has been abused or neglected. Candidates who developed their answers were able to consider why avoiding specific types of abuse, for example, physical, emotional/psychological, sexual, financial and neglect, was necessary in terms of protecting children.
- (ii) Many candidates attempted to describe the responsibilities of individuals but did not always consider the responsibilities of organisations. Some candidates did not describe how these responsibilities influenced practice. It would be useful for candidates to split their answer into two sections: (1) the responsibilities of individuals; and (2) the responsibilities of organisations.
- (iii) The majority of candidates discussed the aims and roles of the specified legislation, Children Act 2004, but some did not discuss how it improves the care and support of children and young people. A few candidates did discuss different pieces of legislation, but this was not being assessed.
- (d) The majority of candidates were able to consider the changing nature of society; however, some candidates did not directly refer to Wales. Some candidates were able to give objective research regarding the changing nature of society but did not make any judgement in terms of how this would impact upon the childcare sector. It is important that candidates use research within this section as this would develop their examples and enable candidates to make an informed judgement.

Summary of key points

1. For Task 1 (a), separate work into physical, intellectual/cognitive, language, emotional and social needs of children and young people, including the possible effects if these needs are not met. Separate work into five different sections, showing how child-centred care can be applied in meeting physical, intellectual/cognitive, language, emotional and social needs within key stages of development. This will enable candidates to be able to reach Band 3.
2. For Task 1 (c) (i), in order to be able to reach Band 4, candidates should separate their work into two sections: (1) focusing on the specified setting – types and purpose used at that setting – ensuring they consider how it may meet specific needs and provide appropriate timely and ongoing support; and (2) focusing on social care in general, such as explaining the five elements of assessment and the responsibilities of the local authority and considering the principles of assessments.

3. For Task 1 (e) (ii), answers could be separated into understanding complex needs and responding to complex needs. A useful layout plan could be as follows:

Understanding complex care needs:

Through either IDP/IBP, care/support plans, observations, additional support – how these would benefit children and young people.

How settings may respond to complex care needs:

Explanation of these – allocation of key workers, differentiation, use of aids /adaptations – how these would benefit children/young people.

4. For Task 2 (c) (ii), candidates could separate their answer into two sections: (1) responsibilities of individuals; and (2) responsibilities of organisations.

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UNIT 5: THEORETICAL PERSPECTIVES OF ADULT BEHAVIOUR

General Comments

It was pleasing to see that the majority of candidates attempted all questions, most gaining credit for their responses, being able to demonstrate their knowledge and understanding of psychological theory. Candidates had made effective use of the pre-release case study (which related to Section A of the paper), along with the Advanced Information, to inform their revision. Time management did not appear to affect performance, which would suggest the candidates had made use of the 'Examination Walk Through' resource to prepare.

Candidate responses generally showed appropriate written communication skills for GCE. Subject-specific terminology was used by most to good effect across the paper. Illegible handwriting was rarely seen.

Candidates should be mindful to focus on the command words of the questions from the beginning of their responses. If the command word is not being addressed thoroughly, then only minimal credit can be given. Responses generally addressed question requirements, although some did not offer the level of engagement necessary to attain the higher mark bands.

Some responses to questions suggested that candidates were not reading the question rider information fully and therefore omitting important aspects from their responses; for example, in question 3 (b), where some responses did not credit a learning disability as being a factor that may have affected Nia's behaviour; and question 4 (d) where some candidates failed to link Josef's age (84) with him being in the later adulthood stage of development. It is important that candidates prepare by looking at different case studies and making full use of resource materials provided to support this unit.

Comments on individual questions/sections

Section A

This relates to the information provided in the pre-release case study.

- Q.1** Overall performance for this question was good, with most marks being in the mid to high teens. Variability in the quality of responses rather than lack of knowledge accounted for lost marks.
- (a) Candidates were able to show a good knowledge and understanding of psychological factors.
 - (b) Responses showed a generally secure grasp of the concept of resilience which candidates were able to use to describe the positive effects of being resilient.

- (c) A secure knowledge and understanding of Skinner's theory was evident in most responses. This was used to good effect to explain why loan had not developed an alcohol dependency.

- Q.2**
- (a) This question related directly to 2.3 (a) of the specification. Most responses provided a basic analysis, with generally valid interpretation of how positive and proactive approaches could support an adult with an alcohol dependency, but some lacked detail about the principles of person-centred care which form the basis of positive and proactive approaches.
 - (b) This question combined two assessment objectives (AO1 and AO3), requiring candidates to describe and discuss. The majority were able to provide a good description of Eysenck's biological theory, showing some grasp of the key features, and a good discussion, with generally valid interpretations of how this theory could be used to account for Paula's alcohol dependency. The majority of candidates were aware that genetics and inheritance played a role, with some also showing depth of knowledge by detailing Eysenck's proposed theory about personality types and their role in addictive behaviour.

Section B

- Q.3**
- (a) There was a good response to this question, with the majority of candidates able to provide a description of Active Support.
 - (b) Most candidates were able to provide a good explanation, showing some grasp of factors that impacted on Nia's recent behaviour, and some knowledge and understanding; however, some candidates failed to mention Nia's learning disability.
 - (c) Candidates gave a mixed response to this question, the majority showing a straightforward engagement with the concept of Positive Behaviour Support Plans. Candidates who achieved the higher mark bands were able to provide good examinations, showing perceptive and informed judgments of how Positive Behaviour Support Plans may enable individuals to develop positive behaviour. These responses included examples of Positive Behaviour Support Plans and referred to how they could help Nia to develop positive behaviour.
- Q.4**
- (a) Candidates were able to show a good knowledge and understanding of sociological factors.
 - (b) Responses showed a generally secure grasp of cognitive theory which candidates were able to effectively use to explain why Josef thinks positively about his life. It was pleasing to see some candidates citing the theories of different cognitive theorists (Piaget, Vygotsky, Bruner) to illustrate a thorough knowledge and understanding.
 - (c) A generally secure knowledge and understanding of talking therapy was demonstrated by most candidates, but only some were able to describe how talking therapy could support adults with memory loss and used the example of Josef attending a reminiscence group to illustrate their answer.

- (d) Responses generally identified that Josef is in the later adulthood stage of development. A minority of candidates were able to engage with all key areas of development (physical, intellectual, emotional, and social) in their responses and were able to provide perceptive and informed judgements about how they would impact on Josef's behaviour, which was necessary to reach the higher mark bands. Some candidates referred to Erikson's 8 stages of development and were credited for this.

Q.5 This question combined two assessment objectives (AO1 and AO3), requiring candidates to describe and assess. Responses were also assessed for spelling, punctuation, grammar, and use of subject specific terminology.

Most candidates were able to show a generally secure knowledge and understanding of Egan's Skilled Helper model and were able to describe the key features of each key stage. Higher-achieving candidates provided more in-depth descriptions of stage 3, Action, including that plans were monitored and reviewed regularly, and adjustments made, as necessary.

The majority of responses were clearly expressed and showed a reasoned interpretation of how Egan's Skilled Helper model supports the principles of person-centred care. Most candidates used accurate spelling, punctuation, and grammar. Writing was mainly well-structured. Subject-specific terminology was used accurately by the majority of candidates. It was pleasing to see some excellent assessments, with some candidates achieving mark band 4.

Summary of key points

- Candidates should be mindful to focus on the command words of the questions from the beginning of their responses. If the command word is not being addressed thoroughly, then only minimal credit can be given.
- Reading the information that is in the question rider is important in providing a context for the candidate response. Candidates should be familiar with examining case study material in preparation.
- Use of the 'Examination Walk Through' resource is recommended to prepare candidates for the demands of this examination.
- A more thorough knowledge and understanding of the principles of person-centred care and how they form the basis of positive and proactive approaches is required for candidates to be able to achieve the higher mark bands.

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UNIT 6: SUPPORTING ADULTS TO MAINTAIN HEALTH, WELL-BEING AND RESILIENCE

General Comments

Non-examination assessment (NEA) work was well presented, with centres choosing between uploading work and sending hard copies. Centre annotation on the work varied in depth – in some cases, more detailed annotation would help to support the moderation process. Candidates accessed both tasks well. Task 1 was submitted in PowerPoint form in most cases; where additional notes were given to explain each assessment criteria, centres were able to clearly justify their marks. Sound evidence was seen of research into an interesting range of adult health and social care settings in most cases, and it was pleasing to see clear links to candidates' chosen settings throughout the first task. Many candidates wrote clearly and comprehensively to construct a detailed report for someone planning a career in the adult health and care sector. Nearly all centres submitted work which was representative of the recommended 40-hour guideline.

Comments on individual questions/sections

Task 1

Most candidates chose an appropriate setting for this task, many researching local provision and referring to this throughout. Encouraging candidates to summarise their choice of setting at the start of Task 1 allows them to focus and refer to the setting throughout the task, which is essential for candidates accessing the higher mark bands, particularly for assessment criteria (b) (ii), (c), (d) and (e) (ii).

In (b) (ii), some candidates' work lacked detail when explaining life transitions, life experiences and changes, which may be because of the setting chosen. Candidates can write generically to support their work in this section, particularly when accessing the higher mark bands, if their setting restricts them.

In section (c), most candidates demonstrated a good understanding of assessment and many included care plans, although some higher band candidates omitted to write about the five elements of assessment. Again, this element of section (c) may be generic. In general, knowledge and understanding of assessment was clearly shown.

Section (d) was completed well, with many candidates showing a thorough understanding of a range of barriers when accessing care and support, and most applying these accurately to their setting of choice.

Task 2

Candidates showed evidence of detailed research into social policy in Wales.

In section (b), most candidates showed a good understanding, although some did not focus on the changes in practitioner roles because of the developments in health and social care provision. For higher band candidates, a confident grasp of the implication on practitioner roles, including newly created roles, should be demonstrated.

Most candidates were able to discuss the importance of safeguarding, some writing in detail about the range of harm and abuse that practitioner should be aware of when working with adults in health and social care. This level of detail is not necessary for section (c) (i). Candidates should, however, be encouraged to write more analytically in section (c) (ii). There was generally a lack of analysis and evaluative content in this section, and this was an area within which candidates lost marks.

Candidates were able to discuss the role of the Disclosure and Barring Service (DBS) in some detail, although some candidates' work lacked detail in this section. Please note that the specified piece of legislation changes annually. Some candidates had written about DBS in section (c) (i). Centre annotation of work to signpost this would be helpful in these cases.

Many candidates successfully identified relevant changes in society, and most were able to make some judgements about the impact of these changes on adult health and social care. Again, encouragement of more analytical writing would help those candidates to access the higher mark bands.

Summary of key points

- Candidates should be encouraged to discuss their chosen setting at the start of Task 1 to allow focus on the setting throughout.
- Centres should ensure that work is annotated and uploaded in the correct order. Page numbers, headers and footers would help to ensure no incomplete work is submitted, particularly when scanning and uploading.
- Work with candidates could be undertaken on analytical and evaluative writing to allow the higher mark bands to be accessed.
- Well-presented, detailed and interesting tasks were submitted, and it is hoped this will continue with future cohorts.



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