

EXAMINERS' REPORTS

LEVEL 2 HEALTH AND SOCIAL CARE: PRINCIPLES AND CONTEXTS

SUMMER 2022





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Online Results Analysis

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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: PRINCIPLES AND CONTEXTS

Level 2

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UNIT 1: PROMOTING HEALTH AND WELL-BEING THROUGHOUT THE LIFE STAGES

General Comments

It is pleasing to report that there are encouraging numbers of candidates being entered for the qualification.

Candidates appeared to be well prepared for this examination. Their responses indicated that centres had endeavoured to cover the full specification despite the ongoing challenges faced. Candidates attempted most questions with only a few omissions.

The scripts suggested that there was sufficient space allowed for candidates' responses, with few candidates using additional paper and/or continuation booklets. Most candidates who did use continuation booklets clearly indicated that this was the case, which was helpful during the marking process.

Handwriting was legible and spelling and grammar was positive, to a good level 2 standard in most cases.

There was evidence of candidates misreading questions which limited their access to marks.

Candidates generally offered more developed responses to all questions that required more than identification or a statement; brief points or bullet points were not regularly seen. There were very few one-word answers or brief sentences, suggesting candidates were engaging with the questions.

To access higher band marks for the extended response questions, candidates need to apply their response to the scenario – too often, evidence was seen of generic responses that lacked application and subject-specific terminology.

Questions which required consideration of health and well-being did not always address both aspects which restricted the marks that could be awarded.

Comments on individual questions/sections

- **Q.1** Most candidates were able to identify the life stages correctly, as outlined in the specification, which was pleasing.
- Q.2 (a), (b), (c) A range of responses was evident for this question. There was evidence of misreading to be awarded full marks, candidates were required to respond with ways in which each factor influenced the aspect of development named in the question.
 - (d) This question was answered well by most candidates. Marks were awarded for referring to the physical milestones of development of infants only.

- Q.3 (a) Responses demonstrated good knowledge of the positive influences of being employed on well-being, with many candidates referring to Brad being proud of his role as a mental health nurse. Having a regular income was also a popular response.
 - (b) Candidates were able to identify the impact of working shifts and long hours on Brad's development. To be awarded the top mark band, candidates were required to assess the impact. Candidates suggested depression and irritable behaviour as the biggest impact of working shifts, along with being unable to spend quality time with family.

In most responses, the impact of shift working focussed on negative impacts only, giving an unbalanced assessment. Few candidates suggested positive impacts of shift working, such as fitting in with family commitments.

- Q.4 (a) The responses to this question were varied, with many candidates not addressing the fact that the carer was a child or adolescent under the age of eighteen caring for a family member or friend. Candidates who were unable to define the term 'young carer' found difficulty answering the related questions, 4 (b) and (c).
 - (b) A range of responses was given for this question candidates in the low mark band suggested that being a young carer was a choice and good experience for a future career in health and social care, while candidates that were awarded the top mark band correctly addressed the influence on growth, health, and wellbeing.
 - (c) This question was answered well by candidates who explained the support of counselling sessions and support groups for a young carer.
- **Q.5** (a) Candidates were able to identify hygiene habits in most cases. Some candidates lost marks for repeating and using similar answers, for example, 'washing' and 'washing face'.
 - (b) Responses to this question were positive, with most candidates correctly describing signs that indicate a child is ready for toilet training.
- **Q.6** (a) Most candidates accurately identified that finding a new job is an expected life event.
 - (b) A range of responses was seen for this question, with some evidence of misreading of the question. Marks were awarded for responses focused on a lack of self-confidence.
 - (c) This question required candidates to discuss the positive influences of environmental factors and economic status. Overall, candidates' responses were vague, with many candidates not attempting the question. It was clear from the responses that most candidates did not recognise the terms and therefore failed to answer appropriately. (Specification topic area 1.2 refers.)
- Q.7 (a) This question appeared challenging, with only the minority of candidates correctly defining the term 'inclusion' for the full 2 marks. Some candidates gave vague responses about individuals wanting to be included which did not gain any credit. (Specification topic area 1.3 refers.)

- (b) There was evidence of a basic understanding of self-concept; however, some candidates' responses were limited, with some being repetitive and vague. To be awarded the higher mark band, candidates were expected to name the factors as part of their response. Factors affecting self-concept is an important area of the specification and it is recommended that sufficient learning hours are focused on this topic in preparation for future cohorts. (Specification topic area 1.3 refers.)
- (c) There was a variety of responses to this question, with candidates listing the features of the Act, but not the purpose. To award full marks, candidates were required to explain the purpose of the Act. Current legislation is an important topic area that should be addressed for future cohorts.
- Q.8 (a) This question required that candidates explain why this campaign is targeted at the life stage of later adulthood. While some candidates answered the question accurately with detailed explanations, there were some that suggested methods of keeping individuals warm, indicating misreading or lack of understanding of the question.
 - (b) This question asked candidates to discuss the use of television and newspaper advertisements for promoting health and well-being campaigns to individuals in later adulthood. Often responses were limited, with some candidates writing one or two bullet points, lacking detailed discussion. To be awarded top mark bands, candidates were required to discuss positive and negative viewpoints and draw conclusions.

Summary of key points

Candidates should be more careful when reading the questions in order to prevent misinterpretation.

Candidates should be encouraged to develop their ability to address the command verbs 'assess' and 'discuss'.

In questions which require consideration of health and well-being, candidates should ensure they are considering both health *and* well-being to avoid giving only a partial response.

Current health and well-being campaigns and promotions are an important topic area that should be addressed for future cohorts. (Specification topic area 1.4 refers.)

Sample assessment materials, past papers and mark schemes, and exam walkthroughs are available on the website for candidates to see how exam questions are phrased and expected responses. Online resources are also useful source of information and activities related to this specification. For further guidance, CPD materials are available on the secure website.

HEALTH AND SOCIAL CARE: PRINCIPLES AND CONTEXTS

Level 2

Summer 2022

UNIT 2: HEALTH AND SOCIAL CARE TO SUPPORT OUTCOME-FOCUSED PROVISION FOR PERSON-CENTRED CARE

General Comments

Centres had worked extremely hard to understand the process for moderation and submit their samples on time using a system that, to many, would be a new due to the mitigation circumstances of previous years.

All centres submitted samples of work for moderation and candidate declarations were completed.

All candidates completed the assignment but there was no evidence of how the controlled task was monitored within the allotted time of six hours or whether candidates used their own notes.

In some cases where referencing had been used, it would have been beneficial to see if this had been included in the candidates' notes.

As there two case studies for candidates to choose from, there was evidence that candidates had been given this choice as within a centre there would generally be a spread of both *Tegwyn* and *Ifor*.

Candidates were familiar with their case study and most would refer to it throughout their answers. There were a few assignments where the candidates' work was more holistic.

Very few candidates failed to attempt a task completely which indicates the tasks were accessible to the candidates and the allocated time to complete the assignment was sufficient. However, some candidates misread a task or responded partially, quite often omitting information that related to supporting personal outcomes and instead focusing on the key part of the question.

Candidates submitted work in either handwritten or word-processed form. There were no real issues with understanding the assignments but many candidates would benefit from proofreading their work before submission as spelling and grammar could have been better in some areas.

There was clear evidence in many of the samples that candidates understood the command verbs of the criteria and the importance of the marks available as answers tended to follow the 'describe', 'explain' rule. The length of the question and when questions had several elements posed more of an issue than command verbs, which shows learning had taken place around the importance of these.

Higher value questions were answered to varying degrees but all candidates attempted these with full sentences and relevant information.

There were very few questions answered with bullet points or short answers which indicates a good level of understanding of the unit as a whole and how to apply knowledge within the assessment objectives.

Comments on individual questions/sections

- Task (a) All candidates attempted this task, with some excellent examples seen of candidates applying their knowledge of key theorists to fundamental needs and outlining the needs identified within the marking scheme and applying these to their case study. However, there was a large percentage of candidate that answered this question with their own interpretation of changes in needs such as transport, changes in medication. These were credited with marks for 'other responses' but, for future cohorts, candidates across centres would benefit from understanding fundamental needs in line with the Unit 2 specification.
- **Task (b)** (i) The vast majority of candidates answered this question correctly, parroting the identified outcomes in the case study.
 - (ii) Responses to this task varied greatly. Some described the role of multidisciplinary teams (MDTs) generally but failed to discuss how they would help to achieve personal outcomes specifically, whilst others gave excellent descriptions of how each member of an MDT could support a particular outcome. A few candidates achieved the full 9 marks. Use of the command verb was evident, but most candidates did not meet all components of the task or give the expected responses.
- Task (c) There was a very good response to this task. Where candidates answered using GATEAU, they did so extremely well and were able to gain high marks as offering responses based on GATEAU led them to discuss how to access services in the future. For those candidates that did not apply GATEAU and chose to explain their own interpretation of challenges, gaining high value marks was less likely as it was more difficult to apply their answer to accessing health services in the future and how to overcome them.
- **Task (d)** (i) There were some very good responses to this task when candidates approached each element of the question separately and applied it to achieving the personal outcomes one at a time.

A wide range of answers referred to the meaning of 'Equality, inclusion and choice and control' rather than why it is important to promote them. When answered in this format candidates often failed to explain co-production.

Personal outcomes were often discussed generally rather than how each component promotes an individual outcome. Candidates that approached each component separately gained higher value marks.

(ii) Candidates generally understood what the codes of conduct were and how they are applied in Wales, with some excellent responses describing the strengths and weaknesses in supporting their case study. Some candidates were able to discuss the codes of conduct in relation to the relevant professionals and legislation. Task (e) Most candidates attempted this question with varying degrees of knowledge. They understood the link to 'More than just words' but their interpretation of the meaning was varied. For 15 marks, this task required depth of knowledge on the goals of the WSF and the ability to apply that knowledge to the personal outcomes. There were some good examples of this with high value marks awarded but, on the whole, responses were repetitive and focused on receiving services in Welsh and respecting individuals for their Welsh language choices rather than complying with Welsh language measures.

Summary of key points

Command verbs – candidates should be encouraged to familiarise themselves with the definition of the command verbs as, in some cases, marks were deducted due to a response being outlined rather than explained or discussed.

Proofreading – whilst marks are not deducted at Level 2 for spelling, punctuation and grammatical errors, in some cases, proofreading would improve the overall submission of work and allow the candidate to identify if they have covered all the elements of a question.

Resources – centres are encouraged to deliver a range of resources specifically designed for this qualification and available from the Health and Care Learning Wales website to support candidates' understanding of some key elements of the specification such as the range of theorists that discuss fundamental needs, multi-disciplinary teams and their professional roles, and challenges such as GATEAU.

Specification – candidates would benefit from becoming familiar with the specification of this unit and the expectations of the assessments. Understanding assessment outcomes would allow the candidates to plan their work and apply their knowledge to assignments.

Multi-part questions – candidates are encouraged to use the sample assessment materials to gain experience in answering questions and understand how to answer questions in full when there are multiple parts to consider. Considering the marks awarded could enable candidates to focus on each part of the task and respond to each section rather than giving an holistic answer that cannot achieve high marks.



WJEC 245 Western Avenue Cardiff CF5 2YX Tel No 029 2026 5000 Fax 029 2057 5994 E-mail: exams@wjec.co.uk

E-mail: exams@wjec.co.uk website: www.wjec.co.uk