

Level 2 Examiners' Report

Health and Social Care: Principles and Contexts
Level 2

Summer 2026

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Introduction

Our Principal Examiners' report provides valuable feedback on the recent assessment series. It has been written by our Principal Examiners and Principal Moderators after the completion of marking and moderation, and details how candidates have performed in each unit.

This report opens with a summary of candidates' performance, including the assessment objectives/skills/topics/themes being tested, and highlights the characteristics of successful performance and where performance could be improved. It then looks in detail at each unit, pinpointing aspects that proved challenging to some candidates and suggesting some reasons as to why that might be.¹

The information found in this report provides valuable insight for practitioners to support their teaching and learning activity. We would also encourage practitioners to share this document – in its entirety or in part – with their learners to help with exam preparation, to understand how to avoid pitfalls and to add to their revision toolbox.

Further support

Document	Description	Link
Professional Learning / CPD	WJEC offers an extensive programme of online and face-to-face Professional Learning events. Access interactive feedback, review example candidate responses, gain practical ideas for the classroom and put questions to our dedicated team by registering for one of our events here.	https://www.wjec.co.uk/home/professional-learning/
Past papers	Access the bank of past papers for this qualification, including the most recent assessments. Please note that we do not make past papers available on the public website until 12 months after the examination.	Portal by WJEC or on the WJEC subject page
Grade boundary information	Grade boundaries are the minimum number of marks needed to achieve each grade. For unitised specifications grade boundaries are expressed on a Uniform Mark Scale (UMS). UMS grade boundaries remain the same every year as the range of UMS mark percentages allocated to a particular grade does not change. UMS grade boundaries are published at overall subject and unit level. For linear specifications, a single grade is awarded for the subject, rather than for each unit that contributes towards the overall grade. Grade boundaries are published on results day.	For unitised specifications click here: Results, Grade Boundaries and PRS (wjec.co.uk)

¹ Please note that where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

Exam Results Analysis	WJEC provides information to examination centres via the WJEC Portal. This is restricted to centre staff only. Access is granted to centre staff by the Examinations Officer at the centre.	Portal by WJEC
Classroom Resources	Access our extensive range of FREE classroom resources, including blended learning materials, exam walk-throughs and knowledge organisers to support teaching and learning.	https://resources.wjec.co.uk/
Bank of Professional Learning materials	Access our bank of Professional Learning materials from previous events from our secure website and additional pre-recorded materials available in the public domain.	Portal by WJEC or on the WJEC subject page.
Become an examiner with WJEC.	We are always looking to recruit new examiners or moderators. These opportunities can provide you with valuable insight into the assessment process, enhance your skill set, increase your understanding of your subject and inform your teaching.	Become an Examiner WJEC

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Executive Summary

Externally Assessed: Unit 1

Examination performance this year remained stable in relation to previous years with many candidates demonstrating good levels of knowledge and understanding. It was pleasing to see an increase in the numbers of candidates studying this qualification.

As examination practice, centres should encourage candidates to extend their answers through focus on the command verbs and by adding more balance to questions that ask for evaluation, discussion or consideration of a topic. This would allow candidates to access the higher mark bands. Additionally, candidates should be aware of marks attached to each question and extend their answers where appropriate.

Past papers and mark schemes and examination walk throughs can support teaching of examination technique.

Some excellent knowledge and understanding was seen around aids and adaptations, relevant play activities, nutrition and health promotion materials. Areas of focus for teaching should be around the importance of the main Health and Social Care legislation in promoting health and wellbeing and the support that care workers are able to provide to individuals within a range of settings. Application of knowledge to the scenarios in the paper is key to accessing the higher marks.

Questions 1, 4a, 4b,5a and 7a showed high accessibility and were answered well by candidates. Questions 2, 5c and 6b were more challenging and less accessible to candidates and should be areas of focus for teaching.

Internally Assessed: Unit 2

Centres are to be commended on uploading work on time, and most with supporting Documentation although please note that candidates who do not sign to authenticate their work could lose their marks for this unit.

As both assignments take place under controlled conditions, evidence of notes made prior to the assessment and time logs to provide evidence of sector engagement hours should be uploaded with the work. Annotation signposting where candidates had been awarded marks was helpful to aid the moderation process; there was limited annotation on some of the work. As candidates are required to carry out sector engagement within the health and social care sector, those placed in mainstream schools were at a disadvantage when completing some sections of assignment 2. Centres should make every effort to place candidates in settings where health and/or social care professionals can be observed. In mainstream education, this could be school nurses, educational psychologists or school social workers. Teachers and childcare workers do not provide candidates with the relevant breadth of knowledge for this assignment.

Candidates should be made aware of the importance of taking good quality notes as part of their sector engagement as these will support their work when writing the section on reflective practice and personal observation, avoiding generic comments which remain in the lower mark bands.

Areas for improvement

- Examination practice, focussing on command verbs:
<https://healthandcarelearning.wales/resources/> Exam walk throughs and feedback from summer assessments
- Underpinning and developing knowledge and understanding:
<https://healthandcarelearning.wales/resources/> Learning resource

HEALTH AND SOCIAL CARE: PRINCIPLES AND CONTEXTS

Level 2

Summer 2026

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

Overview of the Unit

This unit examines candidates' knowledge and understanding of the key physical, intellectual, emotional and social aspects that affect growth and development across the lifespan. The unit investigates the effect of life factors, life choices and life events on growth, health and well-being, including those that shape self-concept.

This summer, candidates were generally well prepared for the examination, with most scripts clearly presented and responses legible. It was encouraging to see more candidates using the digital entry option confidently and appropriately.

Most candidates understood the command words used, although some marks were lost through misreading questions, limited detail and insufficient use of subject terminology. Centres are encouraged to continue reinforcing learners' knowledge and understanding across all areas of the specification. Learners should also be confident in distinguishing between the areas of development and responding directly to the focus of each question. Factors affecting self-concept, as outlined in section 1.3 of the specification, remained challenging for some candidates. Consistent use of specification terminology will support more accurate responses.

Candidates should also be encouraged to apply legislation directly to the individual and scenario named in the question, rather than providing general descriptions.

Comments on individual questions/sections

Question 1

Candidates made an encouraging start to the paper, with most correctly selecting one box to identify whether each activity supported the development of gross or fine motor skills. However, some candidates incorrectly identified using cutlery as an example of gross motor skill development.

Question 2

Many candidates demonstrated an understanding of the different sectors involved in health and social care. The correct response was Age Cymru, although some candidates selected Public Health instead.

Question 3

- (a) Credit was awarded for clear milestones linked specifically to intellectual development during the adult life stage. Appropriate responses included problem-solving and learning new skills, such as managing household bills.
- (b) Candidates needed to identify aspects of social development in later adulthood. For example, credit was given for recognising that retirement may reduce opportunities for social interaction.

Vague responses and one-word answers, such as “a job”, were not sufficient for credit. Candidates should be encouraged to express their knowledge clearly.

Question 4

- (a) Most candidates correctly identified Taya’s life stage as childhood.
- (b) It was pleasing to see that candidates generally understood the term gender neutral. Popular examples of gender-neutral activities included ball games, role play and painting.
- (c) Many candidates clearly explained that gender-neutral play activities promote inclusion, equality and non-discriminatory practice. Responses in the highest mark band developed these points further by referring to respectful relationships and opportunities to experience activities that may not be available at home, where play may be more influenced by gender stereotypes.
- (d) Responses in the highest mark band recognised that Taya was six years old and used PIES to consider the possible effects on all areas of her development. Stronger responses also presented a balanced discussion by recognising possible positive effects of spending more time at home. For example, Taya’s fine motor skills could develop through completing manipulative activities such as jigsaw puzzles and colouring.

Question 5

- (a) it was pleasing to see a wide range of appropriate equipment identified to support an 80-year-old living alone. Common responses included stairlifts, walking frames and personal alarm systems. Credit was also awarded for a mobile phone.
- (b) responses in the highest mark band justified the importance of daily nutritious meals for both health and well-being. Stronger answers linked meals to the nutritional needs of an older adult, such as supporting the immune system, whilst also recognising that mealtimes should be enjoyable and provide something to look forward to.
- (c) This question required candidates to compare leaflets and social media as methods of promoting health and well-being in later adulthood. Candidates generally performed well, often recognising that leaflets may be more accessible for this age group and are commonly produced by reliable, trusted sources. Stronger responses made a clear comparison between both methods.

Question 6

Candidates were required to provide clear and detailed explanations of three ways care and support workers could support residents. One-word answers and undeveloped bullet points were generally limited to the lower mark band.

- (a) Responses often showed limited understanding of the Well-being of Future Generations (Wales) Act 2015; although many candidates could identify the seven well-being goals, application to the care home residents was often basic.

Stronger responses explained how the Act could promote high expectations for residents, including opportunities to seek employment and participate in their local community.

Question 7

- (a) The majority of candidates outlined social isolation clearly.
- (b) credit was awarded for a range of appropriate causes of social isolation other than bereavement, including long-term illness and bullying.
- (c) This question produced some strong responses about the benefits of talking therapy. Candidates explained how it could help Arwel develop coping strategies, build resilience and understand or challenge negative thoughts and behaviours. Responses that clearly linked talking therapy to both improved resilience and a more positive self-concept were awarded marks in the highest band.

Question 8

- (a) Candidates provided a good range of responses. Those who wrote confidently about the effects of redundancy on different aspects of Nadia's growth, health and well-being accessed the highest mark band. Responses that focused only on stress and loss of income were less developed.
- (b) This required candidates to describe ways Nadia could improve her mental health and well-being and was generally answered well. During examination preparation, candidates should be encouraged to provide detailed explanations and avoid one-word answers, as these limit the marks available.
- (c) Candidates demonstrated a good understanding of the importance of a positive self-concept, most commonly referring to the development of resilience and a growth mindset.

HEALTH AND SOCIAL CARE: PRINCIPLES AND CONTEXTS

Level 2

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

Overview of the Unit

Centres are to be commended for their continued commitment and effort in meeting the submission requirements. All centres submitted their samples for Assignment 1 and Assignment 2 within the required timeframe. Generally, the samples were well presented, with candidate numbers correctly applied in most cases and authentication forms completed appropriately. However, a small number of submissions contained errors or omissions in candidate identification and authentication documentation.

Annotation by assessors varied significantly across centres, from no annotation at all, to detailed, well-justified comments clearly supporting the mark band and grade awarded. Centres are reminded that effective annotation is essential to support the moderation process and to provide transparency in the application of assessment criteria. Centres should ensure that, in accordance with the WJEC specification (page 33), all sector engagement logs are submitted as evidence that candidates have completed the mandatory 60 hours of sector engagement. Compliance with this requirement is essential for the validation of learner achievement.

Generally, the samples submitted were well-organised and annotated to support the external moderation process. Some centres included candidate notes, and provided evidence of the candidate's word count, which is in line with the expectations for controlled assessment conditions. Both Assignment 1 and Assignment 2 are completed under controlled conditions with a word-count limit of 5,000 words, there is an additional allowance given to candidates to provide supporting notes and clear evidence of this process is expected. However, in many cases, there were limited comments, references, or supporting documentation sent by assessors to confirm adherence to these WJEC requirements.

Assignment 2 required candidates to engage in a relevant Health and/or Social Care work placement and to complete 60 hours of sector engagement. While some centres provided this evidence effectively, a few candidates attended primary school and nursery school placements, which placed them at a disadvantage when addressing the assessment requirements. It must be emphasised again this year that mainstream educational placements are not suitable for this specification. Centres are strongly advised to refer to the WJEC guidelines to ensure appropriate placements are selected for this health and social care qualification.

The range of guest speakers and sector engagement activities varied between centres, which in some cases affected the overall quality of candidates' work. Sharing a broader range of sector engagement opportunities is considered good practice. Additionally, centres must ensure that sector logs are uploaded with all submitted work, as required by WJEC guidelines. These logs are essential for verifying sector engagement and supporting the assessment process.

Comments on individual questions/sections

Assessment practices varied across centres. While some assessors provided clear and detailed annotation to justify the marks awarded, others offered little or no commentary, making it difficult to understand the rationale behind the grading decisions. In several instances, marks were awarded in the higher bands despite only partial coverage of the assessment criteria. Additionally, there were occasions when marks appeared to be allocated without reference to the marking scheme or to suggested responses, leading to concerns about the accuracy and consistency of assessment.

In Assignment 2, a few candidates referred to teachers or teaching assistants as the selected job roles from their placement setting. Some assessors incorrectly assessed the work within the top mark band for an inappropriate job role. This type of error may result in an incorrect candidate rank order of candidates, and additional candidate samples may be required.

Centres are reminded of the importance of adhering to the controlled assessment conditions, including the submission of notes, time logs, and clear assessor annotation. These elements are essential to support the moderation process and to ensure fairness and transparency in the awarding of marks. Inconsistent annotation and limited evidence of internal standardisation were noted across centres, which affected the justification of marks awarded.

Assignment 1

Task A

All candidates attempted the task; however, many responses lacked depth and did not fully apply Max-Neef's Fundamental Human Needs classification. Outlines were sometimes very brief, and did not address the set question, which required an outline of how John/Liam had changing needs as a result of their changed health condition. Those candidates who stated most of the needs, with a brief description relevant to the case study individual, achieved the highest marks. Some candidates used subheadings or highlighted the specific needs, which was good practice, and established a clear focus on the set question.

Task B (i)

The majority of candidates identified two of the personal well-being outcomes that John/Liam would like to achieve.

Task B (ii)

Most candidates demonstrated their knowledge and understanding of multi-disciplinary working and provided an appropriate definition. However, a few candidates did not expand their answer to address how specific members of a MDT, such as an occupational therapist or a dietitian, could help John/Liam to achieve the identified well-being outcomes. Many responses were often lacking in depth, with a limited description of the specific roles and contributions of MDT professionals in reference to the case study individual.

Task C

Many candidates used the Gateau mnemonic when explaining potential challenges faced by John/Liam. This format enabled candidates to provide an in-depth explanation, and it was pleasing to see that most candidates were able to achieve within the middle to higher mark bands for this question.

Task D (i)

Many candidates provided sound explanations of the importance of empathy, reliability and patience when helping John/Liam to achieve their personal well-being outcomes. A significant number of candidates just described these elements without specific reference to John/Liam or to their identified personal well-being outcomes. For John, the link to supporting his family relationship was often omitted, and for Liam, it was the link to his friends. A few candidates did not address all three elements, and 'reliability' was often incorrectly defined or explained specifically in reference to John/Liam.

Task D(ii)

The descriptions of the codes of conduct and professional practice were often generically understood. The higher mark band responses identified specific codes of practice representative of John's/Liam's MDT, such as by referring to the specifics of the Nursing and Midwifery Council Code for a nurse.

Task E

This last question required an AO3 discussion about how the principles of the Social Services and Well-being (Wales) Act 2014 aim to support and promote John's/Liam's health and personal well-being.

Most candidates demonstrated a good knowledge and understanding of the principles of the Act. They discussed a range of principles in relation to supporting positive outcomes for John/Liam. Most responses demonstrated appropriate contextualisation and application to the case study. Top mark band responses addressed the AO3 command verb to present a balanced discussion and reached an overall conclusion.

Assignment 2

Task A

Candidates generally provided well-structured role summaries for a range of health and social care professionals. Candidates had to select one professional from their work placement and the second role was from other sector engagement. Candidates placed in inappropriate settings/services were often disadvantaged, and unable to achieve above the lowest mark band. Teachers and Learning Support Assistants are not health and social care professionals. Centres are reminded to refer to the approved list of health and social care professionals on pages 44-45 of the specification. While summaries were often clearly presented, many lacked sufficient detail on the required career pathways for the selected roles, which limited access to the higher mark bands.

Task B (i)

Most candidates demonstrated a strong understanding of person-centred care, clearly defining the concept, and explaining the collaborative role of health and social care services. Well-being outcomes were generally well applied to case studies, with few marks lost in this area. This section was consistently well addressed across centres.

Task B (ii)

Descriptions of the code of conduct and professional practice were generally well-handled. Most candidates had a good knowledge and understanding, with a clear application to the case study individual. The majority of candidates identified and explained at least three benefits of adhering to professional standards, reflecting a sound grasp of expectations within the sector.

Task B (iii)

Explanations of how health and social care workers promote person-centred practice and an outcome-focused approach were satisfactorily addressed by most candidates. Responses demonstrated some application of knowledge and understanding, but further depth and links to practical implementation would strengthen performance in this area,

Task C

Candidates generally provided satisfactory explanations of how two of the principles were promoted and supported within health and social care settings. Most demonstrated an adequate understanding of safeguarding, though some candidates confused it with general health and safety. Understanding of co-production was more limited, particularly among those who completed placements in inappropriate school settings, where application was often unclear or underdeveloped.

Task D

It was encouraging to see that most candidates had completed placements in relevant and appropriate settings, such as residential care homes. Reflections were generally well presented, with the majority identifying personal strengths, weaknesses, and areas for improvement. However, deeper reflection on how work placements and sector engagement enhanced candidates' knowledge and understanding of the health and social care sector was often limited. While most candidates reflected on their experiences, they are encouraged to make fuller use of their reflections within their written responses to strengthen the quality of their work.

Centres are reminded that, in line with WJEC specification requirements, all sector engagement logs must be submitted to confirm that candidates have completed the mandatory 60 hours of sector engagement.

Recommendations:

Assignment 1

- (a) Candidates need to read each examination question very carefully to focus on:
 - Answering the set question. Candidates should be encouraged to highlight or to underline key words in the question to avoid making rubric infringements such as by only answering part of the set question.
 - Addressing the correct command verb in the examination question.
 - Checking the marks awarded for each of the assignment tasks so time is used efficiently.
- (b) Candidates would benefit from regular question practice, so this controlled assessment is potentially less stressful, and not an unfamiliar experience for them. Candidates do need to become more confident addressing different command verbs so they can access and be awarded marks within the top mark bands.
- (c) As stated in the specification, candidates should be encouraged to use sector- specific vocabulary and terminology from their vocational sector engagement.
- (d) **Centres need to remind candidates that the maximum word count for this assessment is 2,500 words.** A significant number of candidates presented reports well over 2,500 words for Assignment 1.

Assignment 2

1. Centres must ensure that administration documents are checked carefully before uploading them onto IAMIS. Occasionally, signatures and key documents were missing. Sometimes, there were clerical errors on the Mark Sheets, and occasionally the marks on candidate work differed from the mark awarded.

Supporting you

Useful contacts and links

Our friendly subject team is on hand to support you between 8.30am and 5.00pm, Monday to Friday.

Tel: 02920 265139

Email: hscpandc@wjec.co.uk

Qualification webpage: [Level 2 Health and Social Care: Principles and Contexts](#)

See other useful contacts here: [Contact us | Health and Care Learning Wales](#)

CPD Training / Professional Learning

Access our popular, free online CPD/PL courses to receive exam feedback and put questions to our subject team, and attend one of our face-to-face events, focused on enhancing teaching and learning, providing practical classroom ideas and developing understanding of marking and assessment.

Please find details for all our courses here: [Upcoming Training and Events | Health and Care Learning Wales](#) <https://www.wjec.co.uk/home/professional-learning/>

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