

Principal Assessor Report 2002

Assessment Panel:

Care

Qualification area

**Subject(s) and Level(s)
included in this report**

Care Practice: Higher

Statistical information: update

Number of entries in 2001	127
Pre appeal	
Post appeal	

Number of entries in 2002	262
Pre appeal	Not available
Post appeal	Not available

General comments re entry numbers

The entry submission was greater this year with 262 projects being submitted. The number of centres submitting entries increased to 15 and 4 of these were submitting for the first time. One centre did register entries but did not submit any projects.

General comments

The Care Practice Higher has achieved a much greater uptake in its third year and appears to be successful with centres. We expect this Higher will increase again next year.

Grade boundaries at C, B and A for each subject area included in the report

The Grade boundaries were set at 105 for Grade C
125 for Grade B
145 for Grade A

General commentary on grade boundaries

Notional percentage cut-offs for each grade

Question papers and their associated marking schemes are designed to be of the required standard and to meet the assessment specification for the subject/level concerned.

For National courses the examination paper(s) are set in order that a score of approximately 50% of the total marks for all components merits a grade C (based on the grade descriptions for that grade), and similarly a score of 70 % for a grade A. The lowest mark for a grade B is set by the computer software as half way between the C and A grade boundaries.

Comments on grade boundaries for each subject area

The grade boundaries were raised by 5 marks at each grade boundary for C, B and A grades. This decision was taken after close examination of candidates work and the grade descriptions for the course.

Comments on candidate performance

General comments

The overall level of performance from candidates as reflected in the statistical data showed that this year's submission was generally well planned, executed and documented. Candidates in some cases showed that they had been prepared well by their centres and they had adhered to the guidelines and brief.

Experienced markers in the team reflected that there was a "definite improvement in standard" and there was evidence of "some very thorough work".

It was evident from the general level of submission that most candidates were being presented at the right level but two markers felt that the standard of work shown and the interpretation of the brief coupled with poor literacy skills meant that two of the centres presenting were not entering candidates at the appropriate level. Some students should have been presented at Intermediate 2 and not at Higher level. Centres need to evaluate the student's level of ability.

To have a successful performance in the Care Practice Higher, the candidate is dependant on the college tutor and placement supervisor to support and facilitate them. Their input is invaluable in providing the evidence for the candidate. Where students are poorly advised or supported they cannot provide the evidence.

Some candidates were in unsuitable placements for this Project based Higher and their performance and success reflected this. Where placements are difficult to obtain it requires careful guidance and negotiation between the candidate, tutor, and placement supervisor to identify the appropriate brief and activity.

The presentation of the Project also relies upon the guidance of the centre and although many centres were presenting the Care Practice Higher for the first time the evidence was presented very well and according to the guidelines and the brief. However, some centres continue to misinterpret the guidelines which caused their Candidates to be less successful.

Areas of external assessment in which candidates performed well

From the entries submitted in 2002, it is clear that the external assessment allows the candidate to access practical experiences and the Project allowed the candidate to develop skills of Planning, Development, and Evaluation.

Candidates performed well in the Planning stage and there was reasonable evidence that most centres had prepared candidates thoroughly by including Brainstorming, Action Plans and showing links to theory. Most candidates were able to identify their Aims and Objectives and did well on this section of the Project.

The development section of the Project showed more variation and while most of the centres had advised their candidates well some had not anticipated the difficulties candidates may have had in gathering evidence or in being supported within their placement.

The marking team felt that some candidates did too well in parts of the development section, that is, the marking scheme allows high marks for items such as the supervisor checklist and attendance checklist and gives less emphasis to candidate generated work. This did lead in some instances to some candidates doing very well in this section where their other evidence led the marker to believe that they were not achieving at a high level.

The marking scheme needs to be readjusted to more fairly reflect candidate achievement.

Areas of external assessment in which candidates had difficulty

The candidates experienced most difficulty in the Evaluation stage of the Project. The content submitted by most candidates was descriptive rather than evaluative.

Some centres had guided candidates to combine the Activity (Development) with the Evaluation and then add a Conclusion. This appeared to be the evaluation, but was considerably shorter than the 1000 word guideline. This caused immense difficulty for markers in order to credit candidates where possible with evidence. Centres need to be clear about the structure of the Project.

The marking team felt that the evaluation was “narrative and subjective and that any objective evidence was not analysed.” The evaluation should “highlight and underpin knowledge and depth of understanding”. Candidate evidence, with the exception of a few students showed that they were poor at assessing whether they had met their Aims and Objectives, they often showed no links to theory and were unable to assess their own strengths and difficulties.

Candidates appeared to be unable to view the Project as a whole and most candidates evaluated only the Development or activity.

There were a small proportion of candidates who selected the wrong brief and then went on to carry out an inappropriate activity. These were marked as correct by centres.

Some candidates had problems carrying out their plan and therefore submitted a plan for one activity and carried out a different activity; this inevitably affected the grade they achieved.

Candidates who chose to do Brief 1, where an Activity of Daily Living is undertaken three times, seemed to concentrate on the practical task and not relate this to key skills and processes or theory.

Areas of common misunderstanding

The Best Practice Conference in January 2002 appears to have helped in the standardisation of the approaches across presenting centres. Many centres presenting for the first time were using the guidelines and following the brief. However, some centres appear to be unfamiliar with the need for all Transportable evidence to be submitted. (Page 8 of the Care Practice Higher COF 12 document.)

The Project has a Plan, Development, and Evaluation. Each of which should have written evidence submitted. Some centres did not submit a Development section and others did not submit an Evaluation Section.

One centre allowed candidates to word process the plan and evaluation. As these sections have to be completed under centre invigilated conditions this is not acceptable.

The notes which are allowed into the room for the Plan or Evaluation must be written in English, not notes of text-type language or diagrams or shorthand and they must not exceed 200 words. They should also be signed and dated by the invigilator.

All Projects should be marked by the centres; some showed no evidence of having marked any of the work. Comments, which were made, by the tutor or supervisor gave markers invaluable evidence, which benefited some candidates.

There was some evidence of poor practice in placements particularly in relation to Health and Safety, for example candidates operating Moving and Handling equipment alone or ignoring client choice. The marking of these Projects took into account the poor practice and marks were allocated accordingly.

There were centres where candidates had been encouraged to produce lengthy and extensive portfolios. The quality of the work was high but greatly exceeded the word limits in most areas. This did mean that a poorer candidate could achieve a better grade due to the volume of evidence presented and is unfair on candidates and centres that do adhere to the guidelines.

Centres should encourage candidates to adhere to the word limits.

Recommendations

Feedback to centres

1. There is a need for centres to ensure that all candidates are being presented at the appropriate level of examination. Some candidates should have been presented at Intermediate 2 level.
2. The Care Practice Higher requires a good quality appropriate placement for each candidate and care should be taken that the candidate is supported and supervised through-out their activity.
3. The marking scheme in the Development section needs to be readjusted to ensure it reflects more truly the candidate efforts.
4. Centres need to ensure that they submit all Transportable evidence and the Plan, Development and Evaluation should follow the guidelines and brief.
5. The word limit for the Plan and Evaluation should be observed. A candidate who submits insufficient or copious evidence will be penalised.
6. The notes, which are taken into the Plan and Evaluation sessions should be in written form, not diagram, text language or shorthand.
7. An exemplar paper should be circulated for all centres to peruse and mark.
8. The Best Practice Conference helped many. Perhaps it could be repeated again with marking exercises for delegates.