

*Research and Information Services*

**MONITORING STANDARDS REPORT**



# **HNC Fitness, Health and Exercise (G0RR 15)**

**2005 Report on Monitoring Standards**

# Scottish Qualifications Authority

## 2005 Report on Monitoring Standards in

### HNC Fitness, Health and Exercise (G0RR 15)

Two experienced members of SQA's moderating team and an external specialist in the field judged assessment material and candidate evidence against the standards of Units:

- ◆ **D4VV 04** *First Aid*
- ◆ **D4X0 04** *Leadership and Personal Effectiveness*

Centres were asked to provide evidence for two candidates for each of the above Units. The total number of judgements for assessment instruments and assessment decisions in 2005 was 82. Some detailed comments are provided for each Unit as an appendix to this report.

The scrutiny panel's findings can be summarised as follows:

#### **Quality of collected material**

This showed a mixture of good and bad practice.

Good practice for the First Aid Unit includes:

- ◆ the development of a clear matrix showing cross assessment
- ◆ added value for students by incorporating industry standard first aid at work awards
- ◆ the use of log books to allow students to build up a bank of evidence
- ◆ the development of extensive scenarios and oral questions with sample answers
- ◆ the provision of documentation for tutor feedback (although this was under-utilised)

Bad practice for the First Aid Unit includes:

- ◆ extensive omissions in mark schemes
- ◆ poor reproduction of diagrams and sample accident report forms
- ◆ performance criteria not assessed
- ◆ inappropriate use of checklists

Good practice for the Leadership & Personal Effectiveness Unit includes:

- ◆ clear assessment portfolios which include the assessment instrument used and marking guidelines
- ◆ excellent tutor feedback which encouraged a good ethos for remediation
- ◆ integration across Units and linked to practical activities

Bad practice for the Leadership & Personal Effectiveness Unit includes:

- ◆ the lack of a concise audit trail of documentation — often contained in candidate assessment sheets
- ◆ the use of inappropriate documentation and assessment for Outcome 3 and particularly Outcome 4

The portfolio evidence was variable from ‘below standard’ to ‘merit’. The quality of written presentation varied from indecipherable, almost note taking, to high quality essay type answers. Diagrams showed similar variability in quality.

### **Assessment instruments**

Generally assessment instruments were of an appropriate level. Significant omissions were apparent with marking schemes which caused problems with the interpretation of candidate evidence.

Good practice was seen in both Units in the wide variety of assessment instruments used, eg short answer, oral presentations, essays, case studies and practical assessments.

Merit criteria were applied consistently in some instances across the whole Leadership Unit. Some centres struggled with the interpretation of merit criteria. This was universally the case with the First Aid Unit.

There was no evidence of prior moderation.

### **Evidence of candidate performance**

Centres were asked to provide borderline pass candidate evidence and complied. However, in some cases, candidates did not fulfil the criteria for pass specified in the First Aid Unit. For the Leadership Unit, the candidate performance was generally very high for Outcomes 1 & 2 and reflected a wide range of assessment activities. Candidate performance in Outcome 3 and particularly Outcome 4 did not achieve the standard, generally because the instruments of assessment did not fully cover the Performance Criteria and the range.

### **Assessment decisions**

Where a clear marking scheme was provided, the assessment decisions were clear and unambiguous. Inconsistencies appear in a significant proportion of the sample. The assessment guidance in the Leadership Unit is very broad which has led to the diverse interpretation across centres.

### **Comparing standards over time**

There was no evidence available for the comparator year which for the 2005 monitoring exercise is 2002.

## **General comments**

Leadership and Personal Effectiveness is a core Unit in the current HN framework and it will not form a part of the revised award. Elements of the Unit have been incorporated within other Units of the new framework. First Aid has already been extensively revised and validated for the new award. Many of the inconsistencies found within the monitoring report have already been addressed.

It is encouraging to see some examples of imaginative assessment opportunities, positive and supportive feedback, high standard of work, integration and added value.

## **Conclusions**

A good standard of quality assurance is evident in a large number of centres' presentation of documentation.

## **Recommendations**

SQA should:

- ◆ ensure that the Units selected for the monitoring standards exercise should be recommended by the qualification design team
- ◆ remind centres of the value of SQA prior moderation facility and other support available
- ◆ ensure that the National Governing Body (NGB) award included within the First Aid Unit is the 'Health and Safety Executive First Aid at Work' to enable standardisation of delivery
- ◆ use subject specialists in the development and delivery of Personal and Social Development (PSD) Units

Centres should:

- ◆ ensure that assessment instruments cover all Performance Criteria and the full range
- ◆ that the assessment process provides clarity for assessors, candidates and moderators
- ◆ not overly rely on the use of checklists at the expense of candidate feedback

Report on Monitoring Standards in HNC Fitness, Health & Exercise Units (G0RR 15)

1. Introduction

Unit	Main Purpose	Candidate Profile	Uptake
<p><b>D4VV 04</b> First Aid</p>	<p>To provide skills and knowledge to allow candidates to take charge of and manage a first aid situation effectively. Competences should allow for recognised First Aid at Work awards to be integrated into delivery</p>	<p>HNC/HND level candidates. Course delivered in college as part of Fitness, Health and Exercise group award. D4VV04 is also core in a number of other HN group awards</p>	<p>Core Unit</p>
<p><b>D4X0 04</b> Leadership and Personal Effectiveness</p>	<p>As stated in the Unit Specification, ‘developing skills which enhance personal effectiveness’ utilising ‘appropriate leadership approaches and the interpersonal skills’</p>	<p>HNC/HND Fitness, Health &amp; Exercise — college based</p>	<p>Leadership and Personal Effectiveness (D4X004) is a one credit Unit and has been a part of the Fitness, Health &amp; Exercise HNC/HND for several years. Delivery is well established .It is a Unit steeped in leadership styles and motivational theories. Feedback from tutors and candidates indicates this is a Unit where candidates ‘tend to struggle with’ the theory and the application. The Consortium Group has agreed that leadership and personal effectiveness will not be included in the award post 2006</p>

Report on Monitoring Standards in HNC Fitness, Health & Exercise Units (G0RR 15)

2. Assessment instruments

Unit	Fitness for Purpose/Integration	Quality of Presentation	Level of Demand	Conditions of Assessment	Guidance on Criteria for pass and validity to PCs and range/summary
<p><b>D4VV 04</b> First Aid</p>	<p>Though use of different First Aid at Work awards mean slightly different demands, terminology and acronyms. A variety of assessment types are commonly used encompassing practical, simulation/role play, restricted response, questioning and oral questioning</p> <p><b>Integration</b></p> <p>There are a number of opportunities with this Unit to integrate assessments both with National Governing Body (NGB) First Aid at Work (FAW) qualifications and also with other Units on the HN FHE course. This has been done very effectively in the minority of cases. Different First Aid at Work awards have different demands and use different terminology which means that standards are sometimes difficult to interpret. (This is not helped by variability or non-availability of mark schemes.) Examples of evidence where clearly no attempt to interpret has been made, which does not provide any added value for students: an excellent opportunity missed within this Unit</p>	<p>Assessment papers are presented adequately. Diagrams and accident report forms are generally poorly presented. Checklists vary from excellent with clear guidance on pass to bad photocopies of NGB checklists with bits scored out: the latter was frankly unacceptable!</p>	<p>This again is variable. In general terms the questions asked were of an appropriate level, though in a number of cases, the PCs are not assessed, and in some instances students have been passed despite not fulfilling criteria on marking scheme</p>	<p>A variety of assessment types are in use which are wholly appropriate. Timings for assessment are consistent across the colleges, though quality and level of feedback are variable</p>	<p>Many instances where mark schemes with minimal detail on pass were noted. Requirements were not always clear</p>

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2 Assessment instruments

Unit	Fitness for Purpose/Integration	Quality of Presentation	Level of Demand	Conditions of Assessment	Guidance on Criteria for pass and validity to PCs and range/summary
<p><b>D4X004</b> Leadership and Personal Effectiveness</p>	<p>Assessments are broadly relevant with the exception of Outcomes 3 and 4 where PC criteria and range are not being met fully. This is related to the way practical assessment tasks are carried out and through integration (or the lack of it) with other Units</p> <p><b>Integration</b> Integration was good and this is to be encouraged. However, integration does not mean that it is permissible to substitute the full evidence from the other Units and ignore the full PC and range of the Unit being delivered</p>	<p>Generally, excellent use of various teaching and learning approaches — short answer, assignment, case study, practical, observation. Excellent evidence of strong tutor support to assist remediation</p>	<p>Variable. Evidence of below standard to borderline to excessively highly demand in theoretical evidence towards SCQF level 8 and above</p>	<p>Varied — home based project/assignments, short answer exam conditions. Open book essay, presentations, integration with other Units. This variation leads to differing interpretation of the standards, High degree of concern for Outcomes 3 and, despite the innovating practice (not meeting PCs and range fully)</p>	<p>Good marking guidelines and instruments of assessment for outcomes 1 and 2. Variable for Outcomes 3 and 4 — some assessments had well written standards in Outcome 3, but in Outcome 4 focus was completely lost</p>

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3. Evidence of Candidate Performance (no evidence from the comparator year of 2002 available)

Unit	Accuracy of Assessment Decisions	Consistency of Application of Standards	Examples of Good Assessment Practice/Summary
<p><b>D4VV04</b> First Aid</p>	<p>Where comprehensive mark schemes have been supplied assessments decisions are mostly accurate. Use of checklists with limited detail means that Learning Outcomes 4 and 5 are inconsistently assessed. Where scenarios and case studies are used there was only limited evidence of sample answers</p>	<p>This Unit has been assessed inconsistently across the sample. Reasons have already been addressed in 2.2, 2.5, 2.6 &amp; 3.1. It is noted that some students have ‘passed’ where one element has not been assessed! A common First Aid at Work (FAW) qualification should be used (I suggest HSE in order to aid standardisation.)</p>	<p>These include:</p> <ul style="list-style-type: none"> <li>◆ the development of clear matrix for cross assessment showing how other Units and NGB Awards are used to fulfil the demands of the Unit</li> <li>◆ added value given to students by incorporating industry standard First Aid at Work awards</li> <li>◆ use of a logbook which allows students to build up a bank of evidence</li> <li>◆ the development of extensive lists of scenarios and oral questions with sample answers</li> </ul>

Report on Monitoring Standards in HNC Health, Fitness & Exercise Units (G0RR 15)

3. Evidence of Candidate Performance (no evidence from the comparator year of 2002 available)

Unit	Accuracy of Assessment Decisions	Consistency of Application of Standards	Examples of Good Assessment Practice/Summary
<p><b>D4X004</b> Leadership and Personal Effectiveness</p>	<p>The biggest concern is that candidates are being passed for Outcome 3 and 4 where they have clearly not met the full PC or range. Good standard of consistent accuracy of assessment decisions in Outcomes 1 and 2</p>	<p>There was evidence of good marking guidelines, instruments of assessments and remediation approaches. The application of merit criteria varied considerably from no clear statement or application, to only some assessments and the whole Unit, Monitoring revealed inconsistency in application and judgement. Some evidence provided clear merit statements and the application of this. Lack of evidence of Unit delivery particularly in Outcome 4 with the practical exercises and recording documentation, eg Outcome 4 PC (a) leadership style is <b>selectively effective</b>. This was not evidenced and no justification was evident in candidate folios. Similarly, Outcome 4 PC(c) was not evaluated effectively.</p>	<p>These include:</p> <ul style="list-style-type: none"> <li>◆ well documented assessment instruments and marking guidelines</li> <li>◆ some evidence of applying merit criteria across whole Unit with clear guidelines</li> <li>◆ excellent detailed tutor feedback, responsive and encouraging</li> <li>◆ highlighting areas of remediation with support to achieve this</li> <li>◆ good evidence of ‘bitesize’ chunks of short answer questions/responses to assessment instruments</li> <li>◆ good use of oral questions for remediation</li> <li>◆ one good example of a case study approach to Outcome 3 which revealed excellent folio evidence. Most evidence showed that Outcome 3 is proving problematic.</li> </ul>