

# 8040-02 Level 2 Health and Social Care: Core

## Examiner Report February – July 2023

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## Document revision history

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## 1. Introduction

This document is designed to be used as a feedback tool for centres to enhance teaching and preparation for the 8040-02 Level 2 Health and Social Care: Core. It is advised that this document be referred to when preparing to teach and then again when candidates are preparing to sit the assessment.

This report provides general commentary on pass marks and how candidates perform each of the tests. It highlights common themes in relation to the technical aspects explored within the assessments **between 1<sup>st</sup> February and 31<sup>st</sup> July 2023**.

For this reporting period the cohort sizes are:

Pathway	Number of Candidates
Adult	2427
Children and Young People (CYP)	306
Combined	419

## 2. External Assessments

### 2.1. Pass marks

Pass marks are set at the minimum standard of performance required for a candidate to pass. Angoff is the method used to ensure that pass marks set for multiple choice tests are as secure as possible. It primarily uses the judgement of 'Subject Matter Experts' (SMEs) to predict the ability of minimally competent candidates to correctly answer each question.

Each assessment version has its own pass mark and is an accurate reflection of a range of expert judgement.

Pathway	Range of pass marks	Out of (total marks):
Adult	31-32	45
CYP	33	45
Combined	45-50	65

A regular data review process is undertaken to ensure fairness to all candidates. This includes a:

- review of comparative statistics showing how each assessment performed and
- a review of individual test items that are not performing as expected.

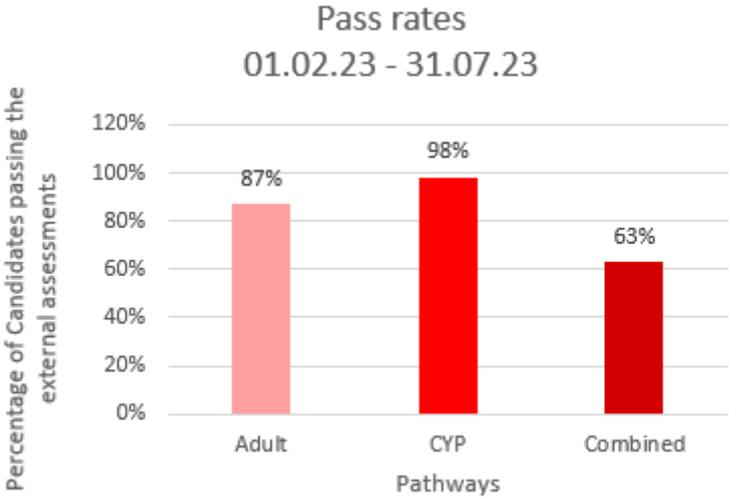
The data review considers the impact of item performance issues or slight differences between assessment versions so that these can be taken into account to ensure that candidates are not potentially disadvantaged.

### 2.2. Pass rates

The pass rate is the number of times a particular assessment has been passed, as a percentage of the total number of times that assessment has been attempted. The figures are affected by candidates resitting assessments and centres should bear this in mind when interpreting them.

The pass rate obtained when a test is first introduced may not truly indicate the difficulty of the test as the number of attempts included in the analysis may not be large enough for true statistical validity. For this reason, any pass rate will be a 'snapshot' of performance based on the data available at the time of calculation.

The pass rates below are accumulative rates across all versions and languages for the reporting period.



*Note: The cohort size for the Combined pathway is very small in comparison to the Adult and CYP.*

### 2.3. Performance of units across the different pathways

The following shows the average accumulative facility value (FV) for each unit across all versions. The facility value is the percentage of candidates answering the questions correctly.

#### 2.3.1. Adult pathway

Unit Title	Number of questions in the test	Average accumulative FV across all versions
001 Principles and values (Adult)	9	82
003 Health and well-being (Adult)	11	84
005 Professional practice	8	74
006 Safeguarding	8	85
007 Health and Safety	9	87

### 2.3.2. CYP pathway

Unit Title	Number of questions in the test	Average accumulative FV across all versions
002 Principles and values (CYP)	9	87
004 Health and well-being (CYP)	11	88
005 Professional practice	8	91
006 Safeguarding	8	85
007 Health and Safety	9	89

### 2.3.3. Combined pathway

Unit Title	Number of questions in the test	Average accumulative FV across all versions
001 Principles and values (Adult)	9	79
002 Principles and values (CYP)	9	78
003 Health and well-being (Adult)	11	78
004 Health and well-being (CYP)	11	80
005 Professional practice	8	76
006 Safeguarding	8	70
007 Health and Safety	9	70

#### 2.3.4. Areas of focus

The following outcomes have been identified as areas where candidates would benefit from additional delivery or revision

- 5.2 Know how to develop and maintain effective partnership working with others in health and social care
- 5.4 Know how to handle information
- 6.2 Understand how to work in ways that safeguard individuals from harm, abuse and neglect
- 6.3 Understand the factors, situations and actions that could lead or contribute to harm, abuse or neglect
- 7.5 Know the main routes to infection and how to prevent the spread of infections in the workplace
- 7.9 Know how to manage stress

### 3. Internal Assessments

The following are outcomes from External Moderation/EQA Sampling of the H&SC Core

#### 3.1. Areas of good practice

Centres continue to prepare learners for the full assessment of the Core qualification. Candidate Matrices are mostly correct and align with certification windows.

EQAs confirm that most information provided by Centres accurately records numbers of learners undergoing different assessment pathways, and when requested provide further clarification.

EQAs confirm that Centres are familiar with the case studies and generally consistently apply the marking criteria. Where marks have been adjusted by IQAs the rationale has been justified.

EQAs noted that the interim sampling approach enables a broader range of internal quality assurance and assessment activities available to plan for external sampling. This provides a more realistic picture of Centre assessment activities. EQAs state that most Centres are responsive to EQA feedback and that positive improvements are made when action plans have been agreed upon.

#### 3.2. Areas for improvement

EQAs have identified a few key areas throughout the year. Many Centres are fully compliant, but this reflects the type of actions linked to QAS/ improvements set by EQAs on sampling reports.

- Submission of Centre updates with information about staff leaving/ joining the assessment teams.
- Evidence to show that Centre staff have the knowledge of the H&SC sector to deliver the qualification.
- Ensuring that registration on the different pathways aligns correctly with the assessment completed by learners.
- Providing learners with detailed summative feedback on the case studies so that marks given are fully justified.
- IQAs feedback to assessors when marks need to be adjusted, should show the reasons for the adjustments to marks, linked to the marking criteria.
- Sampling rationales should underpin all sampling plans.
- Identifying accurate matrices for the different sampling windows (as applicable).
- Providing evidence of standardisation activities linked to the Core.

### 3.3. Points for centres to consider

- To ensure that IQA and assessment records clearly indicate the Case study name and number so that the EQA can record this on the report.
- To ensure that assessor feedback to learners is sufficiently detailed and developmental to justify how marks have been awarded.
- To ensure that IQA feedback to assessors is sufficiently detailed and developmental to justify how IQA decisions have been made and where marks are adjusted, that this is fully justified.
- To ensure that details of new staff members are communicated clearly to the office using the Centre Update form before the new staff member starts to assess. Centres will need to send the EQA CVs and copies of certificates for these new staff members so that they can be approved.
- To ensure that all Centre information is accurate and current.
- It is suggested that centre staff refresh their understanding of the guidance provided in the Core qualification key documents and the Assessment and Quality Assurance Centre Guide available on the website, (specific guidance about best practice is provided in section 1.4).
- To ensure that the assessment and IQA team understand that they should be available for planned activities (in person visits and remote) and may be observed by the EQA carrying out assessment /IQA activities on learners who have not yet completed.
- To understand that all decisions on changing the status of the Centre regarding claiming certificates are made by the Quality office and not by the EQA.