

Moderators' Report/ Principal Moderator Feedback

Summer 2015

Pearson Edexcel GCE in Helath & Social Care (6945/01)

Unit 8: Promoting Health & Well-being

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General Introduction

There was a noticeable improvement in the general administration by centres this series with fewer addition and transfer errors seen. Nevertheless, centres should note that errors such as these may affect the final grade awarded to learners and care must be taken to ensure that all marks submitted are accurate.

In the main candidates had chosen appropriate topics on which to base their campaigns although there was a significant number of social issues seen this series. Centres should note that this unit focusses on health Promotion and so social issues are not wholly relevant in this context. There was also a small but significant number of learners who chose topics where there were serious ethical implications which had not been addressed by the learner or commented on by the assessor.

Assessment Objectives

Assessment Objective 1 requires the learner to undertake comprehensive background research into a chosen health topic on which they will base a small scale health promotion activity. The background research should help to provide a rationale for the chosen target group. Although the majority of learners had undertaken relevant background research there was a significant number who failed to make the link between this research and the rationale for the choice of topic or target group. The choice of topic and target group should be based on need, normative or felt, and should be as a result of significant research into an appropriate topic for a promotion. A significant number of learners had provided minimal background research into a wide range of topics. Whilst this might help determine an appropriate topic, the superficial research undertaken into the wide range of potential topics means that learners struggle to base their choice on a normative or felt need. Learners should limit their research to two or three suitable topics.

There continues to be a heavy reliance on internet sources with little appreciation of where the statistics come from. Once again, a significant number of learners had used international statistics with a large percentage being US based. Whilst not really recommended as it is easier for learners to draw relevant conclusions from UK statistics, it is not an issue providing the learner highlights the relevance of these and the fact that care should be taken when drawing conclusions. Statistics such as these present the learner with ideal material for evaluation in AO4; however, once again, few learners referred back to their research and therefore missed this opportunity for detailed evaluation.

Assessment Objective 2 requires the learner to identify the aims and objectives of their health promotion, to identify the model of health promotion they will use, to produce a plan of action and to discuss how they will evaluate the success of their health promotion. It was disappointing to see that despite the fact that clear examples of appropriate objectives have been provided in both centre reports and the annual report since the start of the qualification in 2009, there remains a degree of confusion around what constitutes an aim and what constitutes an objective. Centres should note that objectives should be SMART. A significant number of learners are still using examples such as 'to produce a leaflet or a PowerPoint presentation' as an objective. Centres should note that this is not an objective but a method to achieve the aim. An example of an objective would be 'the target audience will be able to give five examples of smoking induced illnesses by the end of my promotion'. This is Specific, Measurable, Achievable, Realistic and Time limited.

The majority of learners were able to describe the various models of Health Promotion but in a significant number of cases the description was basic and did not show a comprehensive understanding. A good portfolio should discuss all methods and then provide a rationale for the one or two chosen. It was disappointing to see a general lack of understanding of some of the models, in particular the medical model, with many learners stating that they would use this model in their promotion. Similarly, a large number of learners stated that they would use the Behaviour Change model with no apparent understanding that they would be unable to measure whether their promotion had been successful as behaviour change is long term. Some learners stated that behaviour had changed by the end of their 45 minute promotion - a somewhat unrealistic conclusion. Plans were included and it was pleasing to see that learners had included a discussion of individual roles where promotions had been undertaken as a group. The discussion of evaluation methods was somewhat limited again this series. A significant number of learners appear to misunderstand the requirements here and do not see this as the pre-cursor to the production of data for analysis in AO3. More focus must be given to the methods of evaluation and the production of data for future series to enable a clear analysis in AO3

Assessment Objective 3 requires the learner to provide evidence of implementation of their health promotion, produce appropriate media and materials and provide an analysis of the results. It was pleasing to see that more explicit evidence of implementation was provided this series although the use of witness testimonies, whilst recommended, were of limited value again in terms of providing useful evidence for evaluation in AO4. Materials and media were either very good or poor with very little in between. Learners who had related their materials and media to the method of Health Promotion chosen were again, few and far between. Analysis of data in most cases was weak and could not reach the higher mark bands because it was rare to find a learner who had gathered extensive data. Most learners presented their findings in the form of graphs and charts but, as in previous series, there were too many incidences of limited discussion of conclusions drawn from the data. Centres should note that analysis of secondary research in AO1 can be credited towards this criterion to help the learner provide 'extensive' data as required by MB3.

Assessment Objective 4 requires the learner to evaluate the health promotion campaign with reference to their initial aims and objectives. Evidence of evaluation was again improved this series with a significant number of learners considering most, if not all aspects of their promotion. However, in many cases the evaluation was a narrative account of what they had done with little on the strengths and weaknesses of the individual components. A few strong learners demonstrated excellent evaluative skills and drew on all the evidence they could. Witness testimonies continue to merely confirm that the presentation had taken place and would therefore be better placed in AO3. The ideal would be for these to include information which would be useful for the learner to use in their evaluation. Whilst there has been a clear improvement in evaluation skills, it continues to remain a weak area and needs to be strengthened for future submissions.

Grade Boundaries

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