



**Cambridge National**

**Child Development**

Level 1/2 Cambridge National Certificate in Child Development **J818**

**OCR Report to Centres June 2017**

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This report on the examination provides information on the performance of candidates which it is hoped will be useful to teachers in their preparation of candidates for future examinations. It is intended to be constructive and informative and to promote better understanding of the specification content, of the operation of the scheme of assessment and of the application of assessment criteria.

Reports should be read in conjunction with the published question papers and mark schemes for the examination.

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## OCR REPORT TO CENTRES

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## R018 Health and well-being for child development

### General Comments:

This was the first series of the examination unit R018. The majority of candidates answered all the questions and a wide spread of marks was achieved. Marks ranged from candidates achieving Level one through to those gaining over 70 marks.

Time appears to have been used effectively. Longer answer questions were fully attempted suggesting that candidates had enough time to produce their responses. Most candidates were able to complete all of the questions on the examination paper itself with few using the extra pages at the back of the script or requiring additional answer books.

Many candidates had been well prepared for the examination and were able to apply their knowledge to produce appropriate, well-structured, responses correctly using terminology from the specification. For Section A questions, that are context based, many candidates produced quality responses that clearly related to the context provided. This enabled them to achieve high marks.

The candidates achieving higher marks demonstrated an understanding, and familiarity with, the question command verbs combined with appropriate knowledge of the specification content. It was however evident that some candidates seem to lack key knowledge and terminology for aspects such as children's intellectual needs, pain relief when giving birth, delivery methods, reflexes and safety labelling. This knowledge is necessary for the unit and candidates should be familiar with, at the very least, key facts about these topics.

Many candidates did not respond to the command words in the question. Although it was clear that they possessed knowledge some were unable to gain high marks as they did not do what the question asked. Centres need to guide candidates about the command verbs in the questions – identify, describe, explain, analyse etc. For example, producing a list of ways parents can teach a child to cross the road safely, when an 'explanation' of ways has been asked for, will not achieve level 3 marks.

A number of scripts proved challenging to mark due to the poor handwriting. This can be difficult for examiners to decipher and candidates should be encouraged to write as clearly as possible so that they can gain full credit for their responses.

### Comments on Individual Questions:

Question No.

1(a)

There were a large number of incorrect responses which ranged from 2 days to 3 years. Many thought that fertility would return straight away or within a matter of days. A definite gap in candidates' knowledge.

1(b)

Correctly answered by the majority of candidates. A few candidates ticked two boxes and so did not gain the mark.

1(c)

Excellent responses with many candidates gaining full marks. A topic that candidates seemed to be confidently knowledgeable about.

1(d)

A mixed response to this question. Many gave a correct response, for example twins run in the family and bigger than she should be. Incorrect responses included details of when the eggs are released or fertilised, taken from question 1(e).

1(e)

Candidates who knew this answered well gaining 3 or 4 marks. Other answers were muddled, for example cells splitting and sperm splitting into two. There were a number 'no responses' suggesting candidates lacked knowledge of this topic.

2(a)

The majority of candidates gained half marks with answers that suggested familiarisation and having a better idea of what equipment would be used. Many candidates did not develop their answers, for example by saying how it would prevent Kelly being scared, just giving basic statements and not explaining in more detail. This prevented them from gaining full marks as the question command verb is 'explain'.

2(b)

Well answered, with the majority of candidates achieving marks and many gained full marks. Common correct responses were 'take her on a hospital visit', 'let her help pack her case', 'pack her favourite toy/blanket' and 'parents reassure her'. Incorrect answers focussed on when she was actually in hospital, when the question refers to preparation for the hospital stay; and repetition of answers given for part (a).

2(c)

Well answered by candidates who read the question carefully and related their answers to the context provided. These responses gave explanations of what Kelly's parents could do to help meet her intellectual needs during a week's bed rest after her hospital stay. High level responses gave specific examples such as quizzes, jigsaws, drawing and colouring books, along with an explanation of how these activities meet Kelly's intellectual needs. For example mental stimulation, conversation, creativity and imagination.

However, many candidates gave responses that did not link to the context of the question, suggesting walks in the park and outside activities to get fresh air. This type of response did not gain any marks as the activity was not linked to bed rest or to intellectual needs. Other answers that were inappropriate for four year old Kelly included references to completing or catching up with missed school work and doing homework tasks. Some answers referred to meeting social or physical needs such as seeing friends, nutritional meals, medication, bathing etc. when the question required intellectual needs to be met. These responses did not gain any marks.

3(a)

The majority of candidates gave two reasons but explanations were limited and so only gained half marks. These responses were based on the child being used to having sweets from her grandparents, attention seeking and 'does not like to be told no'. Candidates who developed their answer to gain full marks included being 'frustrated as the child cannot have what she wants', and suggesting confusion as grandparents give her sweets and she is not usually refused them.

Some repetition was evident. Some incorrect responses focussed around sugar making children hyperactive and too many sweets being unhealthy.

3(b)

Most candidates gained some marks for this question. Well answered by many who gained full marks. Repetition was evident in weaker responses.

3(c)

Some good suggestions were provided linking to distracting Skye by getting her involved in the shopping, avoiding the sweet aisle and praise linked to reward systems. Also being consistent with no sweet rules, including getting grandparents to do the same. Weaker responses attempted a way but lacked description of how it would work to achieve the intended effect.

3(d)

Many candidates gained 3 marks based around peas and apples linked to part of your 5 a day, milk providing calcium for bones and teeth, and the meal was balanced and meets healthy eating guidelines, with some candidates referring to the eatwell guide.

Some candidates provided too vague a response even though detailed nutritional knowledge was not required, for example, 'healthy', 'vegetables are good', 'a drink is better than fizzy pop' and 'it is a nutritious meal'.

4(a)

Well answered by the majority of candidates. The three most common correct responses included reference to familiar surroundings enabling the mother to be more comfortable and relaxed, she can have as many people present as she wants and less disruptive as the rest of the family can stay with the mother. Some gave links to privacy and a quieter environment. Weaker responses were statements that are too vague such as 'comfortable', 'less busy' and inappropriate ideas that the mother will be able to 'carry on normal life e.g. cooking and Hoovering'.

4(b)

Generally well answered with many candidates gaining 3 or 4 marks.

Vague statements did not gain a mark, such as 'when there are problems' and 'there are more doctors available'.

4(c)

Mixed responses to this question. Some candidates were not familiar with TENS and did not attempt the question, others made what seemed to be a guess. Weak responses were based around less stress, stops all the pain, shock helps labour pains. A few candidates stated that it numbs from the waist down, confusing TENS with an epidural.

There were, however, many good correct answers with candidates stating that there are no side effects for mother or baby, a drug free method, the mother is in control and can move around freely. A small number of candidates provided correct terminology – provides an electrical stimulus that interferes with pain signals to the brain and in consequence relieves pain and helps the body to produce endorphins.

4(d)

Very well answered with the majority of candidates gaining full marks. Common responses were 'baby is in breech position', 'baby is too large', 'severe bleeding', 'cord around baby's neck' and the 'mother is too tired to push'. Vague or incorrect responses surrounded 'premature babies' and 'problems' with mum or baby.

4(e)

The majority of candidates knew the term 'premature' and gained the mark.

4(f)

Some candidates were unfamiliar with reflexes and did not attempt the question, indicating a gap in their knowledge. However a good number of candidates gained full marks with correctly

named reflexes and descriptions. Common incorrect answers included 'falling' which is a repeat of the example given in the question and so gained no marks, and 'eating', 'crying' and 'turning its head'. Some candidates mixed up the 'rooting' and 'sucking' reflexes; a few wrote correct descriptions but were unable to give a name for the reflex.

5(a)

This question was not well answered due to candidates not reading the question carefully, and just listing a number of examples of how to cross the road safely, consequently only a small number gained Level 3 marks. A number of candidates gained Level 1 or a sub max of 3 marks due to limited ways and examples.

In good responses candidates clearly stated parents should 'explain', 'tell', or 'show' children how to use the green cross code, how the green man works, how to use zebra crossings, the importance of wearing bright coloured clothing, and taking them out demonstrating how to use the aforementioned correctly and safely. In addition other ways suggested included showing them aspects of road safety through reading books, playing games and watching DVDs.

5(b)

Reasonably well answered, many candidates achieving 3 marks, often repetition prevented full marks being awarded. Common correct responses included not overloading sockets, using safety covers on sockets, supervision at all times, no damaged or worn cables, and keeping electrical items out of reach.

A number of candidates wrote about 'keeping water away from electrics', and made vague suggestions such as to 'cover all sockets', 'unplug everything' and 'turn off all appliances and switches'.

5(c) i

A majority of candidates did not know the children's nightwear safety label and all possible forms of clothing were suggested.

5(c) ii

Some candidates had a clear understanding that low flammability meant that the garment is at low risk of catching fire and is slow to burn. A number of candidates incorrectly stated the complete opposite, that either the garment cannot set on fire or that it goes into flames quickly.

5(c) iii

Many candidates clearly and correctly stated the label should be permanently and securely fixed into the garment, 'sewn in' was the most common correct answer.

6(a)

There were a number of 'no responses' to this question. This method of delivery seems to be a gap in some candidates' knowledge.

6(b)

Very well answered with most candidates clearly understanding the term post-natal – after the birth. A very small number suggested conception and pregnancy or left it blank not attempting an answer.

6(c)

Most candidates understood appropriate postnatal checks which included; weight, breathing, head size, heartbeat, length, and cleft pallet. Incorrect answers included reference to tests such as eyesight and hearing, height and blood tests.

6(d)

A good number of candidates gave two correct advantages of breast feeding making links to bonding, it being cheaper, helps the mother to lose weight, milk is at the correct temperature, and contains all the nutrients required.

Weaker responses were vague, too brief or incorrect and included 'quicker', 'easier', and 'better than tinned'.



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