

CAMBRIDGE NATIONALS

Examiners' report



CHILD DEVELOPMENT

J818

R018 January 2019 series

Version 1

Contents

In	troduction	3
R	018 series overview	4
S	ection A overview	5
	Question 1(a)(i)	5
	Question 1(a)(ii)	6
	Question 1(b)	6
	Question 1(c)	7
	Question 2(a)	8
	Question 2(b)	8
	Question 2(c)	9
	Question 3(a)	10
	Question 3(b)	11
	Question 3(c)	12
S	ection B overview	13
	Question 4(a)	13
	Question 4(b)	14
	Question 4(c)	16
	Question 4(d)	16
	Question 5(a)	17
	Question 5(b)	18
	Question 5(c)	19
	Question 5(d)	20
	Question 6(a)	21
	Question 6(b)	21
	Question 6(c)	22
	Question 6(d)	22

Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates. The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report. A full copy of the question paper can be downloaded from OCR.

3

R018 series overview

For the externally assessed Unit R018 the majority of candidates attempted to answer all of the questions and a full range of marks was achieved from below 5 marks up to 80 marks. There was no evidence to suggest that any time constraints had led to any candidates underperforming and the few scripts where there were no responses had large sections of the paper which had not been tackled.

Many excellent responses demonstrated that candidates were well prepared for the examination; they gave well-informed and well-structured answers using appropriate subject specific terminology from the specification. Particularly well answered were questions 3(c), 4(d), and 5(b). Some candidates needed to develop their knowledge of some key areas, for example pre-conception health, physical checks on a new born baby, SIDS and reflexes.

Generally most candidates did not find it necessary to extend their responses on to the extra pages this session. If a candidate needs more lines for their response they should use the extra pages at the end of the answer booklet, clearly labelling their answer with the correct question number and the precise part of the question, for example 3(c) ii. Examiners did find that some candidates had mislabelled questions or identified page numbers rather than question numbers. This is not ideal, candidates should be encouraged to clearly state the correct question number so that they can gain full credit for their answers.

Candidate performance overview

Candidates who did well on this paper generally did the following:

- demonstrated an understanding and familiarity with the different command verbs e.g. identify, describe, explain and discuss
- produced appropriate and detailed, clear and concise responses for Level of Response questions: 2(b) and 5(a)
- recognised and demonstrated the ability to use specialist terminology
- applied knowledge and understanding to Section A questions based on a scenario or set in a particular context.

Candidates who did less well on this paper generally did the following.

- showed a lack of precision in their responses e.g. 2(b), demonstrating limited use of specialist terminology when discussing pre-conception health and limited recognition of specialist terminology in 3(a) and 3(b)
- found it difficult to apply what they had learnt to different scenarios or contexts for questions in Section A
- produced responses that lacked depth, and were often rambling and repetitive or not related to what had been asked, e.g. 1(c), 5(a) and also in 5(c) where ways to meet physical needs were given when emotional needs were asked for.

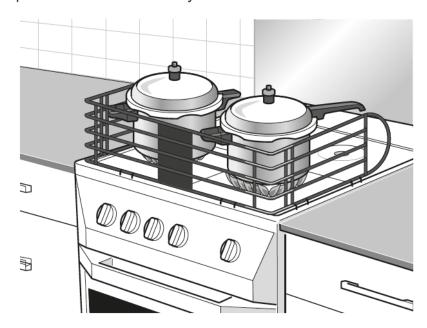
Section A overview

Section A of the paper consists of three questions based in different contexts. For this paper the three scenarios are Priya, Andrew and their son Arjun, Emma and Liam planning a family, Emma's pregnancy. Candidates are required to apply their knowledge of the R018 specification topics to produce answers that are relevant to the scenarios provided.

Question 1(a)(i)

1 (a) Priya and Andrew have a three-year-old son Arjun. As most accidents happen in the home, they are keen to make their home and kitchen as safe as they can.

Below is a picture of the cooker in Priya and Andrew's kitchen.



(i)	Identify the safety feature fitted onto the cooker and give one reason why it is used.	
	Safety feature	[1]
	Reason	
		[1]

Many candidates gave descriptions of what they could see e.g. 'cage', 'bars' or 'fence' as they were unable to identify the cooker guard. Reasons, however did gain marks with reference to preventing a child from touching the pans or pulling them off, for example.

Question 1(a)(ii)

•	
(ii)	Identify four other safety features Priya and Andrew may have in their kitchen.
	1
	2
	3
	4 [4]
-	y of candidates achieved a mark for locks on cupboards and for covers on electric sockets. ety gate was also a common correct response.
	of answers described putting things on high shelves and not leaving sharp knives or objects these did not gain marks as the question asks for a 'safety feature' not an action or a way.
Question	1(b)
(b)	Priya and Andrew are teaching Arjun about road safety. Explain two ways Priya and Andrew could make sure Arjun is safe when walking on the pavement or crossing the road with them.
	1
	2
	[4]
=	on was quite well answered with many candidates able to identify and explain two 'ways'.
romo oond	idatas wars anis to idantity ways hut did not provide appropriate synlenctices

This Some candidates were able to identify ways but did not provide appropriate explanations.

Suggesting watching videos about road safety indicated that candidates had not read the question carefully enough as Priya and Andrew are walking on the pavement and crossing the road – not sitting at home with Arjun. Candidates need to ensure their responses relate to the scenario provided in order to maximise their marks.

Question 1(c)

(c)	Safety is one condition that Arjun needs to successfully grow and develop. Name two other conditions that Arjun needs and state why each one is important for hedevelopment.	nis
	1	
	2	
		41

Candidates who were able to name a condition were generally able to state why it was important for the child's development.

Some candidates did not appear to be familiar with the term 'conditions' which, though widely used in child development textbooks and featured in LO3 of the specification, seems to be a gap in candidates knowledge. A number of candidates simply expanded on the road safety theme from question 1(a), others wrote about stranger danger or online safety.

Exemplar 1

1 ROOD - to helphim arow and
SLLIVIVE:
2 Sheller - Fo ossure he can skay
warm and safe auring his
auvelopment.
[4]

This answer correctly identifies two conditions important for a child's development – 'food' and 'shelter'. Other conditions include: love and security, rest and sleep, need for boundaries, routine for example.

In answer one the importance of food suggested by the candidate is somewhat vague, partly repeating information in the question. Reference to meeting nutritional requirements or having a balanced diet to prevent obesity would have gained the additional mark.

Answer two correctly identifies a condition 'shelter' and gives a correct reason for its importance – keeping him safe and warm, gaining 2 marks.

Question 2(a)

2	Emma	and	Liam	want to	start a	family	together.
---	------	-----	------	---------	---------	--------	-----------

	3
	2
	2
	1
,	
ı)	Identify three factors they should consider before starting a family.

This question was generally answered well with the majority of candidates gaining 2 or 3 marks.

Some candidates gave one word answers that were too vague to gain a mark 'relationship' and 'money' being the most common. A slightly more precise answer such as 'relationship between partners' or financial situation' would have been given a mark.

Question 2(b)

(b)*	Emma and Liam want to make sure that their pre-conception health is the best it can be, before Emma becomes pregnant.
	Explain what they could do to ensure good pre-conception health.

Candidates who had clearly read and understood the question achieved well, producing answers that demonstrated accurate and good use of relevant technical terms.

Many candidates focused their whole response on not smoking, drinking alcohol or taking drugs with only a very basic explanation of why these should not be used and so gained marks in Level 1. References to effects on fertility, increasing the risk of miscarriage or foetal abnormalities, for example, were required to gain more marks. Reasons for having up to date immunisations or taking folic acid were other aspects of pre-conception health rarely mentioned by candidates.

Weaker responses misinterpreted the question and did not focus on pre-conception health but discussed what not to do in pregnancy instead. This limited the marks that could be gained.

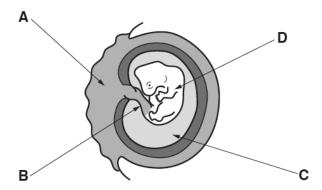


Misconception

Candidates must read the question carefully to determine what their answer should focus on. This question was about 'pre-conception' health NOT health during pregnancy.

Question 2(c)

(c) Emma has missed a period and a home pregnancy test tells her she is 6 weeks pregnant. Below is a diagram of the embryo at 6–7 weeks.



Identify the names for A, B, and C from those given below. D has been done for you.

Amniotic fluid	Uteru	s wall	Embryo
Umbilical o	cord	Place	nta

	Name
А	
В	
С	
D	Embryo

[3]

A considerable number of candidates were able to answer the question successfully, gaining full marks.

The most common incorrect answer was choosing 'uterus wall' instead of 'placenta'.

Question 3(a)

- 3 (a) Now Emma is pregnant she will be supported by a team of health professionals, all with different roles. Some of these health professionals are listed below.
 - Midwife
 - GP (General Practitioner)
 - Gynaecologist
 - Obstetrician
 - Paediatrician

Complete the table, using the list above, by adding the name of the correct health professional to their role.

Role	Health professional
A specialist in the care of pregnant women and child birth who can perform Caesarean sections.	
A doctor who is a specialist in the female reproductive system.	
Usually the first person the pregnant woman will see after a positive home pregnancy test result.	
Looks after the pregnant woman throughout a normal pregnancy and birth who also runs antenatal classes.	

[4]

A well answered question by the vast majority of candidates, demonstrating a clear understanding of the different roles of the health professionals.

Those candidates who did not achieve full marks usually confused obstetrician with gynaecologist.

Question 3(b)

(b)	During Emma's pregnancy, usually around 22 weeks, the baby will become covered in lanugo.
	Describe what lanugo is and what it does.

Many candidates described vernix. Even when lanugo was correctly described a mark was rarely given for the function with vague references to 'keeping baby warm' or 'protecting from infection' being the most common responses.



AfL

Candidates need to develop a clear knowledge and understanding of specialist terms such as vernix and lanugo.

Question 3(c)

(c) When Emma goes into labour she will usually pass through three stages.

The passage below describes the **second** stage of labour.

Complete the passage by adding the most appropriate words from the list below. A word should only be used once.

amniotic fluid	arms	breeching	crowning
dilated	engaged	mucus	pants
pushes	shoulders	uterus	vagina

will slide out easily. [6]
are now eased through the birth canal and the rest of the body
can be cleared from the baby's nose and mouth. The baby's
can be seen this is called
with each contraction to help move the baby down the birth canal. When the baby's head
now form a continuous passage called the birth canal. The mother
at 10 cm and ends when the baby is born. The open cervix and the
The second stage of labour begins when the cervix becomes fully

Well answered by many candidates; many full mark answers were seen.

The most common errors were uterus instead of vagina, amniotic fluid in place of mucus and arms instead of shoulders.

Section B overview

Section B of the paper consists of three questions that are fact and knowledge based. Candidate responses do not have to relate to a particular situation or scenario.

Question 4(a)

4 (a) An ultrasound anomaly scan is usually carried out between 18 and 21 weeks of pregnancy.
Look at the chart below and tick (✓) the name given to the person who carries out this scan.

Name of person carrying out the scan	Tick (✓) correct answer
Paediatrician	
Sonographer	
Nutritionist	

[1]

Generally well answered by the majority, with only a small number of candidates mistakenly identifying paediatrician.

Question 4(b)

(b)	Explain three ways the father/partner can support the mother through pregnancy or birth.
	1
	2
	3
	[6]

A mixed range of responses were seen for this question. Many candidates giving specific ways of helping the mother with practical suggestions including examples of housework tasks, shopping, cooking and cleaning to give the mother the opportunity and time to rest.

There were, however, many vague responses relating to labour such as holding hands, breathing exercises, massaging but these were not developed and so only gained one mark as there was no explanation.

Some candidates correctly identified ways but did not explain how this would support the mother and so only gained a maximum of half marks. Responses that referenced after the birth did not gain marks these included post-natal depression, feeding the baby, changing nappies. These are not relevant as the question refers to pregnancy or birth only.



AfL

To gain higher marks on this type of question candidates need to read the question carefully to be clear about what they have to do. The command verb is 'explain' and an explanation of three ways is required. An 'explanation' is an answer which is developed with a reason, not just an identification of a way. So for this question a way of supporting the mother should also include how it supports her.

Exemplar 1

1 Help around Albre house
He Could help around the house pouse e.g.
Cleaning, washing
2 Attend midwife appointments with the
mother for extra Support
3 help with Shapping
[6
Į o

This exemplar demonstrates some common errors.

Way 1 is correct, but has no explanation of how it supports. To improve this, the candidate could have suggested that this would give the mother time to rest so she does not feel so tired.

Way 2 is also a correct, different way but just repeats the question wording of 'support' without stating what this is. The answer would be improved with the addition of a simple explanation such as 'to enjoy the experience together'.

Way 3 is considered a repeat of way 1. A different way is required, such as 'provide emotional support by being aware of mother's needs/anxiety' or 'support her health needs and motivation by giving up smoking together'.

[2]

Question 4(c)

(c) The picture below shows a form of contraception called an intrauterine device or system (IUD or IUS).



A mixture of correct and vague or incorrect answers was seen. Where candidates had been well prepared, were familiar with the method and had the appropriate knowledge, this was obvious in their specific and accurate responses. Some candidates were obviously unaware of any details about this method and gave no response or gave answers that referred to other methods of contraception or gave really vague responses such as 'it prevents you getting pregnant'.

Question 4(d)

(d)	The intrauterine system and combined pill are two hormonal methods of contraception.
	Name three other hormonal methods of contraception.

1	
2	
3	
	[3]

A well answered question by many; injection, patch and implant were the most frequent correct answers.

Some, however, gave the coil and cap as answers, perhaps indicating a lack of knowledge of 'hormonal methods'. Some candidates gave 'progesterone pill' but were unable to gain a mark because they had omitted the word 'only'. A number of candidates incorrectly suggested condoms.

Question 5(a)

5

 the newborn baby.
Discuss what physical checks are made on the newborn baby and why they are carried out.
11

(a)* After the birth the midwife will carry out some routine physical checks to assess the health of

This is an extended response question where candidates had to discuss physical checks carried out on a newborn baby and why they are carried out

There was evidence in some responses of excellent preparation for this topic with candidates using technical terms and giving a sound discussion of why the checks are carried out.

However knowledge and understanding varied considerably for this question, with many candidates limited to Levels 1 and 2. Many candidates focused on the APGAR test which was generally done well but it led to a lot of repetition, for example as reflexes were then discussed in detail separately. Many who did a good APGAR discussion remained at the sub-max Level 2 as they did not provide any further physical checks or explanations.

Weaker responses just listed checks with no details of why they are carried out, for example length and weight with no reference this being used for continued regular checks of growth, fingers and toes without reference to webbing or club foot. There was limited awareness of why hips were checked. Some candidates described tests that happen much later after the birth.

Question 5(b)

(b) Below is a list of some signs and symptoms of illness in children.

Raised temperature
Breathing difficulties
Reduced appetite
Cough
Vomiting that persists for more than 24 hours
Cannot be woken/unusually drowsy
Flushed or pale complexion
Rash that does not fade when pressed with a glass

Identify four signs or symptoms listed above that indicate a child needs immediate emergency help.
1
2
3
4
[4]

Well answered by the vast majority of candidates. Just a few candidates incorrectly identified 'raised temperature' or 'flushed or pale complexion'.

18

Question 5(c)

(c) Children who are ill need more care than usual.	
---	--

Explain two ways that parents and carers can meet the emotional needs of a child who is ill.
1
2
[4]

Candidates who had read and focused on the question requirement for meeting emotional needs responded with good answers. Good, appropriate examples relate to reassurance, showing love, favourite toy/comfort blanket, and keeping them company so they would feel safe, not alone and feeling better.

However, a number of candidates either misread or misunderstood the question as they gave ways to meet 'physical' and not 'emotional' needs. Common responses were providing regular food and drinks.

Exemplar 1

1. Cudate them at hight - so that they fall asleep	ρ
Knowing yourse you are there for them	
Invited some family round so they can talk to	
other people.	
	••••••
	[4]

This exemplar shows one good response and one that did not achieve any marks.

Answer 1 gives a specific 'way' - that is 'cuddling' and it is explained – so they fall asleep knowing you are there for them.

Answer 2 actually refers to meeting social needs, not emotional, and so does not gain any marks.

Question 5(d)

(d)	Having	to stay in	hospital	can be	frightening	tor	a child.	
-----	--------	------------	----------	--------	-------------	-----	----------	--

[4	
4	
3	
2	
1	
Give four ways that parents and carers can prepare a child for a stay in hospital.	

There were many sound responses relating to: visiting the hospital, meet doctors and nurses, dressing up and role playing, being honest about what will happen and packing own bag, enabling candidates to achieve full marks.

Some candidates did not read the question carefully enough and made suggestions that related to a child who was ill and already in hospital.



AfL

Some candidates need practice in reading questions and being careful to work out what their answer should focus on.

This question required answers relating to parents/carers **preparing** their child for a stay in hospital not what to bring their child when they are in hospital.

Question 6(a)

6	(a)	Children occasionally have accidents, for example falls are very common with young children.
		Identify four other childhood accidents.
		1
		2
		3
		4
		[4]

A good range of different answers were seen, with many candidates gaining full marks and most gaining at least 2 marks.

Marks were lost mainly by repetition for example 'broken arm' and 'broken leg' or repeating 'falls' which is in the question.

Question 6(b)

(b)	SIDS is the unexpected and unexplained death of an apparently healthy baby. What do the letters SIDS stand for?	
		[1]

There were a number of no responses for this question. However more than 60% of candidates did know this and gained the mark.

Question 6(c)

	Babies born before week 37 of pregnancy are usually unable to survive outside the womb without medical help. Give four problems they may suffer from.
	1
	2
	3
	4
	[4]
	quite well answered, many candidates achieved 2 or more marks, with breathing difficulties dice being the most common correct answers.
and jaund	·
and jaund	dice being the most common correct answers. ere missed where candidates gave vague responses marks, for example 'poor temperature',
and jaund	dice being the most common correct answers. ere missed where candidates gave vague responses marks, for example 'poor temperature', oblems', 'organs not fully developed'.
Marks we eating pro	dice being the most common correct answers. ere missed where candidates gave vague responses marks, for example 'poor temperature', oblems', 'organs not fully developed'.
Marks we eating pro	dice being the most common correct answers. ere missed where candidates gave vague responses marks, for example 'poor temperature', oblems', 'organs not fully developed'. on 6(d)

Many candidates knew the names of reflexes, but not necessarily this one.

22

© OCR 2019

Supporting you

For further details of this qualification please visit the subject webpage.

Review of results

If any of your students' results are not as expected, you may wish to consider one of our review of results services. For full information about the options available visit the <u>OCR website</u>. If university places are at stake you may wish to consider priority service 2 reviews of marking which have an earlier deadline to ensure your reviews are processed in time for university applications.

activeresults

Active Results offers a unique perspective on results data and greater opportunities to understand students' performance.

It allows you to:

- Review reports on the **performance of individual candidates**, cohorts of students and whole centres
- Analyse results at question and/or topic level
- **Compare your centre** with OCR national averages or similar OCR centres.
- Identify areas of the curriculum where students excel or struggle and help pinpoint strengths and weaknesses of students and teaching departments.

http://www.ocr.org.uk/administration/support-and-tools/active-results/



Attend one of our popular CPD courses to hear exam feedback directly from a senior assessor or drop in to an online Q&A session.

https://www.cpdhub.ocr.org.uk





We'd like to know your view on the resources we produce. By clicking on the 'Like' or 'Dislike' button you can help us to ensure that our resources work for you. When the email template pops up please add additional comments if you wish and then just click 'Send'. Thank you.

Whether you already offer OCR qualifications, are new to OCR, or are considering switching from your current provider/awarding organisation, you can request more information by completing the Expression of Interest form which can be found here: www.ocr.org.uk/expression-of-interest

OCR Resources: the small print

OCR's resources are provided to support the delivery of OCR qualifications, but in no way constitute an endorsed teaching method that is required by OCR. Whilst every effort is made to ensure the accuracy of the content, OCR cannot be held responsible for any errors or omissions within these resources. We update our resources on a regular basis, so please check the OCR website to ensure you have the most up to date version.

This resource may be freely copied and distributed, as long as the OCR logo and this small print remain intact and OCR is acknowledged as the originator of this work.

Our documents are updated over time. Whilst every effort is made to check all documents, there may be contradictions between published support and the specification, therefore please use the information on the latest specification at all times. Where changes are made to specifications these will be indicated within the document, there will be a new version number indicated, and a summary of the changes. If you do notice a discrepancy between the specification and a resource please contact us at: resources.feedback@ocr.org.uk.

OCR acknowledges the use of the following content: Square down and Square up: alexwhite/Shutterstock.com

Please get in touch if you want to discuss the accessibility of resources we offer to support delivery of our qualifications: resources.feedback@ocr.org.uk

Looking for a resource?

There is now a quick and easy search tool to help find **free** resources for your qualification:

www.ocr.org.uk/i-want-to/find-resources/

www.ocr.org.uk

OCR Customer Support Centre

Vocational qualifications

Telephone 02476 851509 Facsimile 02476 851633

Email vocational.qualifications@ocr.org.uk

OCR is part of Cambridge Assessment, a department of the University of Cambridge. For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored.

© **OCR 2019** Oxford Cambridge and RSA Examinations is a Company Limited by Guarantee. Registered in England. Registered office The Triangle Building, Shaftesbury Road, Cambridge, CB2 8EA. Registered company number 3484466. OCR is an exempt charity.



