

Unpacking the Health subject report 2021 Internal assessment









Presenters

Carolyn Jones

Principal Education Officer

Learning Areas Unit

T 07 3864 0247

E carolyn.jones@qcaa.qld.edu.au

Kay York

Learning Area Manager

T 07 3864 0480

E HPEandTech@qcaa.qld.edu.au

Learning goal

Learn how to use the QCAA Health subject report to inform teaching and assessment practice.

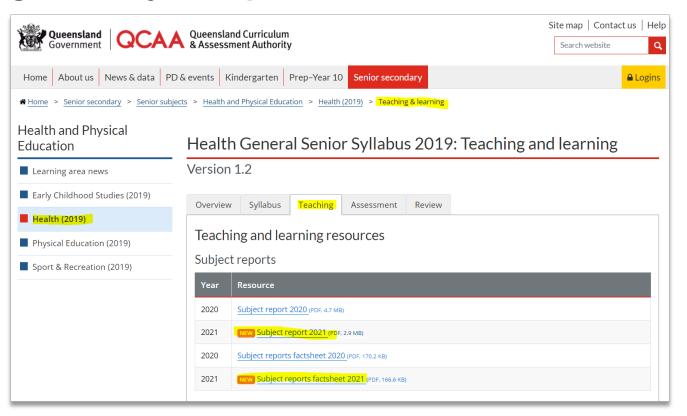
Success criteria

You will know you are successful if you can reflect purposefully on the information provided in the subject report to determine how you can improve your school's internal assessment in Health.





Locating the subject report





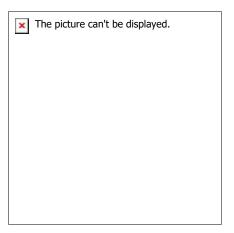
The purpose of the subject report

2021 summative assessment cycle key outcomes:

- Quality assurance: Endorsement and Confirmation
- External assessment results



- Effective practices and practices to strengthen
 - Internal assessment
 - Assessment design (validity, accessibility)
 - Assessment decisions (reliability)
 - External assessment
 - Teaching and learning





Structure







UNPACK



REFLECT



STRENGTHEN



QUESTIONS





Subject data summary

Subject progress

Year	2020	2021
Number of schools offering Health	125	125
Year 12 cohort (-145)	2273	2128
Number of students achieving an A standard (–60)	353	293
Number of students achieving a B standard (+35)	877	912
Number of students achieving a C standard (–54)	893	839

Health had a relatively stable presence as a medium cohort subject and a shift into the B standard in 2021. 2022 data shows significant growth ahead.

Questions for reflection

Have the results for students in your school improved? What strategies have you implemented that support

growth in the subject and student achievement?

Sources: QCAA Heath subject reports 2020 and 2021







Internal assessment

Percentage of instruments endorsed in Application 1

Number of instruments submitted	IA1	IA2	IA3
Total number of instruments	126	126	124
Percentage endorsed in Application 1	46%	34%	73%



Question for reflection

What strategies are being used in schools for quality assuring internal assessment prior to submission for Endorsement?

Number of samples reviewed and percentage agreement

IA	Number of schools	Number of samples requested	Number of additional samples requested	Percentage agreement with provisional marks
1	122	862	374	52.46%
2	122	848	352	54.92%
3	122	864	278	51.64%











Health inquiry model

Pedagogical and conceptual framework for Health

Overarching approaches, frameworks and resources

Define and understand	Plan and act	Evaluate and reflect	
Unit specific approach	Unit specific approach	RE-AIM	

Dis-ease



Personal





Barriers and enablers



Community and social resources



Ease

Question for reflection

What have you have done to strengthen comprehension and use of the Health inquiry model at your school?









Health inquiry model

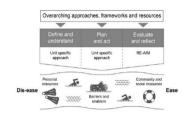




Units 1 and 2

Units 3 and 4

Additional resources



Teaching and learning

Resource	Version
Sample teaching, learning and assessment plan template (DOTX, 58 kB)	
Teaching, learning and assessment plans how-to (PDF, 144 kB)	05/11/2018
Categories of cognitive verbs (PDF, 90 kB)	18/01/2018
Glossary of cognitive verbs (PDF, 144 kB)	18/01/2018
Concurrent delivery.(PDF. 212 kB)	v1.2
Health Inquiry Model resource (PDF. 1.2 mB)	19/05/202
Health Inquiry Model Part 1 – Overarching approaches, frameworks and resources (MP4, 22 mB)	01/04/2022
Health Inquiry Model Part 2 - Unit specific approaches, frameworks and resources – Unit 1 and 2 (MP4, 18 mB)	01/04/2022
Health Inquiry Model Part 3 – Unit specific approaches, frameworks and resources – Unit 3 and 4 (MP4, 21 mB)	01/04/2022
Subject report 2021 (PDF, 5.4 mB)	v1.2
Subject report 2020 (PDF. 4.7 mB)	v1.2
Subject reports factsheet 2021 (PDF, 170 kB)	v1.2
Subject reports factsheet 2020 (PDF, 170 kB)	v1.2



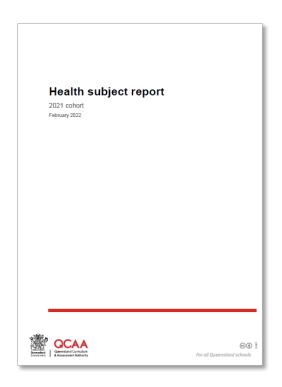






Assessment design





Effective practices

REFLECT

Practices to strengthen







Investigations (IA1 and IA3)

Assessment design: Effective practices

IA1 — Action research

• Featured realistic context statements within a health issue that were accessible and relevant to the students, e.g. despite the implementation of a community-based support program, average days off school in 2020 for Year 12 students was # due to self-reported anxiety.

IA3 — Analytical exposition

 Align with item specifications by providing a sufficiently narrowed scope through the inclusion of local data within the task context statement, e.g. NextStep data identifying post-schooling destinations as evidence of post-schooling transitions.

Question for reflection

What strategies have you employed as a result of the advice provided in the subject report?







Investigations (IA1 and IA3)



Assessment design: Practices to strengthen

IA1 — Action research

 Include local and/or regional data, primary data from previous action research or summary of action within the task context statement.

IA3 — Analytical exposition

Enable unique responses by allowing students to select innovations to evaluate.

IA1 and IA3

• Do not provide too much detail or scaffolding, such as identifying determinants and resources in the task context or instructions. This interferes with students' ability to demonstrate their knowledge and understanding of the relevant criteria and to provide a unique, authentic response.

Question for reflection

What strategies have you employed as a result of the advice provided in the subject report?





IA2 Examination: Assessment design



Effective practices

Stimulus allowed students to

- use the social ecological model within the alternate context for the purpose of distinguishing the determinants that influence health
- evaluate diffusion process variables within the alternate context for the purpose of recommending future action...
- interpret RE-AIM within the alternate innovation

Practices to strengthen

Stimulus recommendations

- use unique and original information within the stimulus that aligns with the ISMG, e.g. data trends (being multiple trends of data across time) tracking the number of students accessing support over the last five years
- provide sufficient scope of information that addresses the Unit 3 Health inquiry model requirements (DPVs and RE-AIM)

Question for reflection

What strategies have you employed as a result of the advice provided in the subject report?







Assessment decisions









Effective practices



Practices to strengthen







Agreement trends between provisional and confirmed marks

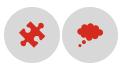
Criterion number	Criterion name	Percentage agreement with provisional	Percentage less than provisional	Percentage greater than provisional	Percentage both less and greater than provisional
1	Recognising and comprehending	72.13%	20.49%	4.1%	3.28%
2	Analysing, critiquing and organising	63.93%	29.51%	4.1%	2.46%
3	Investigating and synthesising	59.84%	32.79%	5.74%	1.64%
4	Communicating	87.7%	2.46%	9.02%	0.82%

Observation and reflection

- The highest mark in a performance level must match all characteristics.
- A deeper understanding of the Health inquiry model supports a better ability to make judgments for all criteria.

Source: QCAA Heath Subject report 2021 (p.12)







Assessment decisions

Effective practices

- the explicit use of more than *one resource, barrier, enabler, and*determinant. The ISMG uses the plural of each of these terms to highlight that high-level responses must have at least two of each
- matching evidence for *C1...* the *explicit use of more than one data trend*. The ISMG uses the plural of data trend to highlight that high-level responses must have at least two data trends relate to primary or secondary data where there will be evidence of a trend over a time period, which can be described through the use of appropriate vocabulary, such as verbs (e.g. 'upward', 'downward', 'stable', 'fluctuate') with adverbs (e.g. 'speed', 'rate') or adjectives (e.g. 'extent') with a noun (e.g. 'drop', 'rise') to provide an accurate description of the trend. Explicit values should be used to support the description of the trend
- matching evidence for C4... the best-fit approach was used where the
 majority of evidence is matched to most of the characteristics in the
 performance-level descriptors for the specified single mark.







Assessment decisions

Practices to strengthen

- matching evidence for C3... evidence matches the discerning, insightful and sophisticated characteristics when students use the relevant areas of the Unit 3 Health inquiry model to develop a sophisticated diffusion action strategy... This related directly to the feasibility of the methodology and resources for the diffusion action strategy and the possibility of it being implemented within the community context. Post-test data collection should be linked to how the student will evaluate the strategy using RE-AIM
- ensuring that responses have identified at least two significant diffusion proves variables — characteristics of the individuals, characteristics of the innovation (relative advantage, compatibility, complexity, trialability, and observability), features of the setting, rate of adoption, and characteristics of change agents.





Analysing, interpreting and critiquing (7–8 marks)

 insightful critique of relevant contextual information using the social ecological model to distinguish the significant determinants that influence the chosen health issue

Investigating and synthesising (7–8 marks)

- discerning investigation and insightful synthesis of information to develop a sophisticated diffusion action strategy for a contextual issue that includes:
- · a target group
- the methodology and resources required to address the needs, barriers and enablers for the target group by strengthening and/or maintaining innovation uptake
- two significant diffusion process variables

Excerpt 1

(Homelessness Australia, n.d.). Homelessness can result in many health outcomes such as exposure to drug/alcohol use, unsafe sexual encounters, co-morbidity and mortality (Homelessness Australia, 2016). Key social determinants such as the lack of affordable housing, political structures, unemployment, and domestic violence, create barriers to the health concern, pushing the population towards disease (AIHW,2020). As well as this, false representation of homelessness within the media result in inaccurate perceptions, social stigma, and ostracising towards the homeless population, causing social isolation for the community. However, charity organisations, education, community and personal resources, and crisis accommodation, act as enablers to encourage social cohesion within the community, pushing the population towards ease.

With the preconceived perceptions resulting in a lack of social cohesion within the homeless population, it is evident that the key health framework, which focuses on the relationship between individual and community levels, the Social Ecological Model (SEM), should be utilised to alter perceptions to enable change within the community. In applying this model, the innovation 'Beyond the Season,' will be diffused into a local high school, targeting the whole school community with a focus on the year 9 cohort. The action strategy will strengthen existing resources within the community to overcome the barrier of perceptions by utilising a salutogenic approach. The innovation will aim to educate participants on the issue, to effectively alter perceptions and ultimately enable behaviour change. To maximise adoption rates, the innovation will be implemented into a school setting, where participants will be in a familiar learning atmosphere, therefore creating a supportive environment for the enhancement of health literacy. 'Beyond the Season' will target each level of influence with various activities, such as a screening of 'Filthy Rich and Homeless,' government letter writing, and education from Brisbane Youth Services. The screening of 'Filthy Rich and Homeless' will allow the development of functional health literacy to potentially alter perceptions. Focusing on the Diffusion of Innovation framework, the diffusion process variables of characteristics of the Innovation, and Characteristics of Change agents will be used to maximise diffusion into the community. Charity organisation Brisbane Youth service will act as change agents to create awareness of the health issue. Year 9 students will be change agents during the letter writing activity, as it may influence the Local Government to facilitate the community in restoring social cohesion. The innovation will be compatible with the current Personal Development program, and the differing ages of the target group, allowing easy adoption rates for the target group. With evaluative pre- and post-implementation data collection, the innovation's effectiveness in altering perceptions will be easily observable





Analysing, interpreting and critiquing (7–8 marks)

 insightful analysis and interpretation of relevant contextual information related to the chosen healthrelated topic and issue using a range of valid primary sources and secondary sources to draw conclusions about local or regional trends (in comparison to other datasets)

Investigating and synthesising (7–8 marks)

investigation and insightful synthesis of information to develop a sophisticated diffusion action strategy for a contextual issue that includes data collection tools

Excerpt 2

Homelessness within Queensland has increased by 14% since 2011, to 21,671 in 2016, revealing the prevalence of homelessness on a local scale (Homelessness Australia, n.d.). Specifically, 10,000 people are experiencing a form of homelessness in Brisbane, with approximately 31 in Coorparoo (ABS,2016) (Stone, 2019). Between 2016-2017, the top three reasons for seeking assistance through Specialist Homelessness Services (SHS) in Queensland were housing crisis, financial difficulties, and housing affordability (AIHW,2017). The increase in support needed from SHS is seen in Appendix 5, which shows this growth from 2015-16, to 2019-20 (AIHW,2020). One factor influencing this growth was the COVID-19 pandemic which saw a spike in SHS requests in 2019-2020, with 3000 females and 3100 males citing COVID-19 as reason to request services (AIHW,2020). SHS assisted 48% of their clients into housing, enabling positive health outcomes and pushing the population to ease. However, Queensland identified having a greater need for assistance from SHS compared to the national average (73% compared to 56%), highlighting the need to encourage social cohesion within Brisbane (AIHW,2017). To strengthen available resources, innovations targeting communities enable positive outcomes when addressing the issue.

Excerpt 3

Post-innovation data collection and evaluation methodology

To determine the impact of the innovation, all RE-AIM components will be considered. The reach will be measured through a survey a week after the innovation was conducted to recognise how many students saw the innovation take place and therefore were able to be directly influenced by the innovation. Effectiveness will be identified through comparing pre-innovation data and post-innovation data which measures how many students at the properties of the survey of









IA2 Examination

Agreement trends between provisional and confirmed marks

Criterion number	Criterion name	Percentage agreement with provisional	Percentage less than provisional	Percentage greater than provisional	Percentage both less and greater than provisional
1	Recognising and comprehending	72.95%	24.59%	1.64%	0.82%
2	Analysing, critiquing and organising	66.39%	30.33%	0.82%	2.46%
3	Evaluating and reflecting	69.67%	24.59%	1.64%	4.1%
4	Communicating	90.98%	0%	8.2%	0.82%

Observation and reflection

- The highest mark in a performance level must match all characteristics.
- A deeper understanding of the Health inquiry model supports a better ability to make judgments for all criteria.









Assessment decisions

Effective practices

Evidence matched the top PL for C1 when...

- contextual information from the stimulus was described accurately and discerningly through the succinct and perceptive use of the Unit 3 Health inquiry model specified approaches, frameworks and resources, social ecological model levels of influence, and diffusion process variables
- students included primary source information from the stimulus, as well as secondary source information from the stimulus or their preauthenticated notes
- data trends (plural) were accurately recognised and discerningly
 described through a relevant theoretical lens to draw conclusions
 about the alternate context; data trends should describe a pattern over
 time and conclusions should be related to a reason for the trend, based
 on existing resource/s, barrier/s or enabler/s from the alternate context.





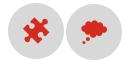


Assessment decisions

Practices to strengthen

Evidence matches the top PL for C3 when ...

- responses explicitly align with at least two steps of RE-AIM
- responses include at least two diffusion process variables.
 Characteristics of the innovation (complexity, compatibility, relative advantage, observability and trialability are all part of one diffusion process variable), characteristics of the individuals, rate of adoption, characteristics of change agents, or features of the setting are the five diffusion process variables that can be selected to meet the requirements of the task
- best-fit approach is used accurately for Criterion 3 where the characteristics (qualifier, cognition and associated element) for the first performance-level descriptor provide opportunities to match more evidence than the second performance-level descriptor







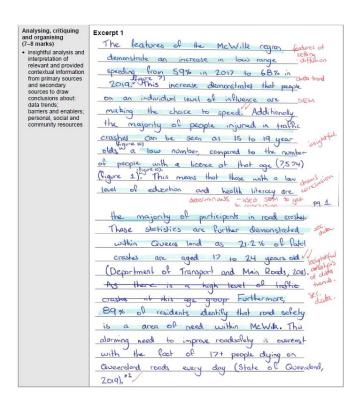
Additional advice

- Schools should ensure that their practices to maintain academic integrity and ensure individual student responses include students producing their own page of notes that is not a scaffolded version of their response. (Schools are required to submit authenticated notes as part of the confirmation upload for selected students.)
- Many tasks uploaded for confirmation exceeded the conditions of the task (800–1000 words).
 Schools should use their school's assessment policy when responses exceed conditions and have it clearly annotated on the ISMG and response to identify the parts of the response that have been used to determine the result. (The QCE and QCIA policy and procedures handbook 8.2.6 Managing response length, after submission notes excluding evidence after the 1000-word limit the limit should be clearly annotated on the response.)
- The ISMG used must be the ISMG for IA2 from the syllabus that forms part of the endorsed task (from the Endorsement application), not a school-developed ISMG.









Observation and reflection

- When done accurately, annotations on assessment tasks and ISMGs that highlight or identify the key parts of the ISMG can make it easy to locate the evidence to support school decisions.
- A deeper understanding of the Health inquiry model supports a better ability to make judgments for all criteria.







Evaluating and reflecting (7–8 marks)

critical evaluation and insightful reflection on the innovation impact, methodology and resources using two relevant steps of RE-

discerning justification a recommendation for future action that mediates, advocate or enables innovation uptake in an alternation community health context using the diffusion of innovations model

The innovations tridebully and observability that it is provided results actionally for the likely peaking import within McWill. The trial conducted in the Carlon region is similar to the McWille region, maning that if a positive import is strong dissemination are and high chancer of institutionalisation are seen, it is likely the some routh unll occurrent innovation the like Italiang school zone signs' innovation within McWille. Additionally as no there is no current innovation the like Italiang school zone signs' innovation within McWille, the innovation has a relative advantage in dissuminating and convertible and region institutional street shows that a relative advantage in dissuminating and convertible and high proportion (22500 out of 24678 heapty).

the last three years and the signs are cheep and easy to mointain maintain, and implement. The success of the innovation is also able to be measured as the innovation feets observable of the process of the setting feetward of the setting feetwar

some community members identified the glare from sonlight some signs were

Observation and reflection

Best-fit approach should be used accurately for Criterion 3 where the characteristics (qualifier, cognition and associated element) for the first performance-level descriptor provide opportunities to match more evidence than the second performance-level descriptor, e.g.

- the first performance-level descriptor is matched at the top performance level (7–8)
- the second performance-level descriptor is matched anywhere lower
- best-fit approach determines the lower mark, i.e. 7.











Agreement trends between provisional and confirmed marks

Criterion number	Criterion name	Percentage agreement with provisional	Percentage less than provisional	Percentage greater than provisional	Percentage both less and greater than provisional
1	Recognising and comprehending	81.15%	17.21%	0.82%	0.82%
2	Analysing, critiquing and organising	68.03%	28.69%	2.46%	0.82%
3	Investigating, synthesising, evaluating and reflecting	66.39%	27.05%	4.1%	2.46%
4	Communicating	82.79%	0.82%	16.39%	0%

Observation and reflection

- The highest mark in a performance level must match all characteristics.
- A deeper understanding of the Health inquiry model supports a better ability to make judgments for all criteria.

Source: QCAA Heath subject report 2021 (p. 26)







Assessment decisions

Effective practices

- evidence matched the top performance level for the Recognising and comprehending criterion and demonstrated accurate and discerning context analysis of the Year 12 cohort, utilising a range of primary and secondary data; in particular, the explicit use of more than one resource, barrier, enabler, data trend and determinant. The ISMG uses the plural of each of these terms. The high-level responses have made discerning choices of two of each of these to ensure the task is achievable in the conditions
- there were explicit links to the life-course perspective as part of the Unit 4 Health inquiry model evident in the response.





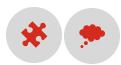


Assessment decisions

Practices to strengthen — top PL for C3

When it is important that responses include...

- discerning investigation of information from primary and secondary sources related to two implemented innovations in the post-schooling transition — respectful relationship innovations can be selected from a setting anywhere in the world, and could include Year 13 or gap year-type programs, university transition programs, school to work programs...
- critical evaluation and insightful reflection on the two respectful relationships-based innovations that have been or are currently implemented in other settings and that both innovations are evaluated using two RE-AIM steps and two diffusion process variables







Assessment decisions

Practices to strengthen — top PL for C3

- insightful qualities through making perceptive choices about the characteristics that enable the development of respectful relationships within the setting where the innovation was implemented
- insightful reflection on information to justify the most appropriate innovation for the Year 12 cohort, based on the impact the innovation could have in their own school setting and the influence on the development of respectful relationships as a general resistance resource for the post-schooling transition
- insightful synthesis of information to develop a diffusion action strategy, including methodology and resources, to enhance innovation uptake (of one of the two innovations) that is most appropriate for the Year 12









Assessment decisions

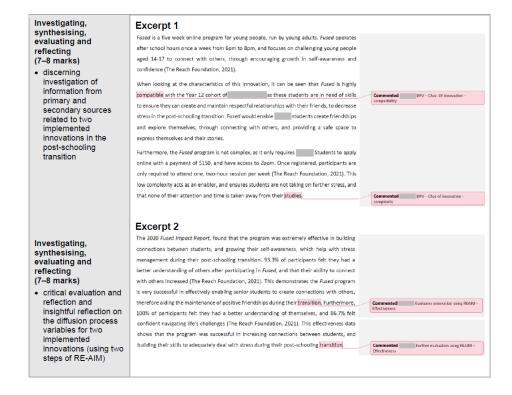
Practices to strengthen — top PL for C3

- innovation uptake that can be enhanced by mediating, advocating or enabling (possibly in the dissemination stage of diffusion where persuasion and communication are important) to improve the uptake/reach (not just focusing on how the innovation can be changed to make it better)
- evidence that the diffusion action strategy methodology and resources are based on two diffusion process variables that address the needs, barriers and enablers for the Year 12 cohort. Students should choose two from characteristics of the innovation (complexity, compatibility, relative advantage, observability and trialability are all one diffusion process variable), characteristics of the individuals, rate of adoption, characteristics of change agents and features of the setting which are the five diffusion process variables.
- Note: data collection tools are not required for IA3 to reduce the scale of the task













Investigating, synthesising, evaluating and reflecting (7–8 marks)

- insightful reflection to recommend and justify the most appropriate innovation for their Year 12 cohort
- develop an action strategy that includes methodology and resources based on two diffusion process variables that addresses the significant needs, barriers and enablers for their Year 12 cohort
- enhances innovation uptake of a respectful relationships resource

Excerpt 3

After evaluating both potential innovations, it can be seen that Fused will be the most compatible innovation to positively impact the development of respectful relationships and therefore reduce stress amongst the Year 12 Cohort, This action strategy will advocate change in the current development of positive relationships, by introducing the Fused program to Year 11s and Year 12s, which will enable them to build connectedness with others. Implementation of the Fused program will occur through providing the innovation to senior students during their forum classes. This method has been chosen as it will increase innovation uptake, because all students will use forum classes as a community resource. Students will have access to the program online for one hour during these classes, enabling them to build the skills needed to create and maintain positive relationships, to in turn reduce stress as they navigate a significant turning point in their life trajectory. A relative advantage to this strategy exists, as currently at there are no targeted programs that aid in addressing the school-related stress senior students endure, or current strategies that advocate for the development of positive relationships. Diffusing the Fused program into will enable an increase of social cohesion and critical health literacy. Furthermore, this

strategy is not complex to implement, as it will be disseminated directly into the forum program. It also does not present any complexity to students, as it will not disrupt their schooling routine or take away time from their studies. The \$150 cost per person of Fused may present as a barrier for some students. To overcome this, forum teachers will be used as a personal, social and community resource, and will be taught how to administer the program face to face to students, rather than the students paying for the online version, allowing students access to the program free of Eharge, Additionally, the Fused program is only currently available to Victoria and New South Wales, meaning that the geographical location of the students access to the program free of the setting, but also a barrier, However, with the forum teachers being able to provide the program, they will act as enablers to overcome this barrier, and equip students to build skills to create positive relationships in their post schooling transition. Therefore, it is recommended that this action strategy is implemented for the 2021 Year 12 cohort as a way to increase innovation uptake. Due to the compatibility of this innovation, it will likely to be successful in increasing respectful relationships as a general resistance resource during the post-schooling transition.



Commented Makes recommendation to increase innovation uptake – implement the action strategy Refers to DPV – char of innovation

Commented Methodology of actions strategy explains how implementation will occur

compatibility with Year 12 cohort









Learning goal

Learn how to use the QCAA Health subject report to inform teaching and assessment practice.

Success criteria

You will know you are successful if you can reflect purposefully on the information provided in the subject report to determine how you can improve your school's internal assessment in Health.



Contact details

Carolyn Jones

Principal Education Officer

Learning Areas Unit

T 07 3864 0247

E carolyn.jones@qcaa.qld.edu.au

Kay York

Learning Area Manager

T 07 3864 0480

E HPEandTech@qcaa.qld.edu.au



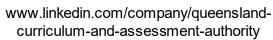














www.instagram.com/myqce/

