

## **Health and Social Care**

Advanced GCE A2 H503/H703

Advanced Subsidiary GCE AS H103/H303

### **Mark Schemes for the Units**

---

**June 2008**

**H103/H303/MS/R/08**

OCR (Oxford, Cambridge and RSA Examinations) is a unitary awarding body, established by the University of Cambridge Local Examinations Syndicate and the RSA Examinations Board in January 1998. OCR provides a full range of GCSE, A level, GNVQ, Key Skills and other qualifications for schools and colleges in the United Kingdom, including those previously provided by MEG and OCEAC. It is also responsible for developing new syllabuses to meet national requirements and the needs of students and teachers.

This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by Examiners. It does not indicate the details of the discussions which took place at an Examiners' meeting before marking commenced.

All Examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the Report on the Examination.

OCR will not enter into any discussion or correspondence in connection with this mark scheme.

© OCR 2008

Any enquiries about publications should be addressed to:

OCR Publications  
PO Box 5050  
Annesley  
NOTTINGHAM  
NG15 0DL

Telephone: 0870 770 6622  
Facsimile: 01223 552610  
E-mail: [publications@ocr.org.uk](mailto:publications@ocr.org.uk)

## CONTENTS

**Advanced GCE Health and Social Care (Double Award) (H703)**

**Advanced GCE Health and Social Care (H503)**

**Advanced Subsidiary GCE Health and Social Care (Double Award) (H303)**

**Advanced Subsidiary GCE Health and Social Care (H103)**

### MARK SCHEMES FOR THE UNITS

<b>Unit/Content</b>	<b>Page</b>
F910 Promoting quality care	1
F913 Health and safety in care settings	13
F918 Caring for older people	25
F920 Understanding human behaviour	40
F921 Anatomy & physiology in practice	51
F924 Social trends	66
Grade Thresholds	76

## F910 Promoting quality care

Question	Expected Answer	Mark	Total														
1 (a) (i)	<p><b>One</b> mark for correct identification.  <b>One</b> mark for correct example.</p> <p>Type – Mental illness/health/direct/disability/disability</p> <p>Example – presuming that because he has mental illness he will be 'dangerous' and 'not capable' / unsuitable.</p>	1x1 1x1	[2]														
(ii)	<p><b>One</b> mark for each identification, FOUR required from</p> <ul style="list-style-type: none"> <li>• upset/sad/unhappy</li> <li>• angry / annoyed</li> <li>• frustrated</li> <li>• withdrawn / isolated</li> <li>• humiliated</li> <li>• embarrassed</li> <li>• low self-esteem/self worth/worthless</li> <li>• low self confidence</li> <li>• not apply for other jobs</li> <li>• unemployed</li> <li>• financial problems</li> <li>• devalued</li> <li>• depressed</li> <li>• disempowered</li> </ul> <p>Any other suitable effect</p>	4x1	[4]														
(b)	<p><b>One</b> mark for identifying each correct agency, TWO required.  <b>One</b> mark for each description, TWO required from</p> <table border="0"> <tr> <td><b>Agencies:</b></td> <td><b>Description</b></td> </tr> <tr> <td><b>Family/Primary</b></td> <td>attitudes learnt from the home/role models/copy behaviour</td> </tr> <tr> <td><b>Media/Secondary</b></td> <td>stereotypical portrayal in soaps/news giving a narrow viewpoint of people with MHN. Positive information portrayed this way</td> </tr> <tr> <td><b>Peers/Secondary</b></td> <td>imitating peer groups views/taunting people who are 'different'. Peer pressure</td> </tr> <tr> <td><b>Education/Secondary</b></td> <td>learning about MHN at school, perhaps more positive portrayal</td> </tr> <tr> <td><b>Religion/Secondary</b></td> <td>could be taught it is an 'Act of God' / religious values</td> </tr> <tr> <td><b>Workplace/Secondary</b></td> <td>employees/employers may have a negative view of such people working.</td> </tr> </table> <p><i>Secondary can only be awarded once.  NB accept positive answers as well.</i></p>	<b>Agencies:</b>	<b>Description</b>	<b>Family/Primary</b>	attitudes learnt from the home/role models/copy behaviour	<b>Media/Secondary</b>	stereotypical portrayal in soaps/news giving a narrow viewpoint of people with MHN. Positive information portrayed this way	<b>Peers/Secondary</b>	imitating peer groups views/taunting people who are 'different'. Peer pressure	<b>Education/Secondary</b>	learning about MHN at school, perhaps more positive portrayal	<b>Religion/Secondary</b>	could be taught it is an 'Act of God' / religious values	<b>Workplace/Secondary</b>	employees/employers may have a negative view of such people working.	2x1 2x1	[4]
<b>Agencies:</b>	<b>Description</b>																
<b>Family/Primary</b>	attitudes learnt from the home/role models/copy behaviour																
<b>Media/Secondary</b>	stereotypical portrayal in soaps/news giving a narrow viewpoint of people with MHN. Positive information portrayed this way																
<b>Peers/Secondary</b>	imitating peer groups views/taunting people who are 'different'. Peer pressure																
<b>Education/Secondary</b>	learning about MHN at school, perhaps more positive portrayal																
<b>Religion/Secondary</b>	could be taught it is an 'Act of God' / religious values																
<b>Workplace/Secondary</b>	employees/employers may have a negative view of such people working.																

Question	Expected Answer	Mark	Total														
1 (c)	<p><b>Three</b> for identifying barriers, THREE required  <b>Three</b> for examples, THREE required from</p> <table border="0"> <thead> <tr> <th style="text-align: left;">Barriers</th> <th style="text-align: left;">Examples</th> </tr> </thead> <tbody> <tr> <td><b>PS psychological</b></td> <td>not know they are ill. Fear / social phobia / stigma. Not wanting to go because of treatment. How society treats others</td> </tr> <tr> <td><b>F financial</b></td> <td>may be unemployed/lack transport. Find it hard to get employment due to discrimination</td> </tr> <tr> <td><b>C cultural</b></td> <td>values about illness</td> </tr> <tr> <td><b>L communication/language</b></td> <td>may find it difficult to do so with others</td> </tr> <tr> <td><b>G location/geographical</b></td> <td>postcode lottery, poor services</td> </tr> <tr> <td><b>P physical</b></td> <td>side effects of drugs / illness on ability to work / drive / socialise / use transport</td> </tr> </tbody> </table>	Barriers	Examples	<b>PS psychological</b>	not know they are ill. Fear / social phobia / stigma. Not wanting to go because of treatment. How society treats others	<b>F financial</b>	may be unemployed/lack transport. Find it hard to get employment due to discrimination	<b>C cultural</b>	values about illness	<b>L communication/language</b>	may find it difficult to do so with others	<b>G location/geographical</b>	postcode lottery, poor services	<b>P physical</b>	side effects of drugs / illness on ability to work / drive / socialise / use transport	3x1 3x1	[6]
Barriers	Examples																
<b>PS psychological</b>	not know they are ill. Fear / social phobia / stigma. Not wanting to go because of treatment. How society treats others																
<b>F financial</b>	may be unemployed/lack transport. Find it hard to get employment due to discrimination																
<b>C cultural</b>	values about illness																
<b>L communication/language</b>	may find it difficult to do so with others																
<b>G location/geographical</b>	postcode lottery, poor services																
<b>P physical</b>	side effects of drugs / illness on ability to work / drive / socialise / use transport																
(d)	<p><b>One</b> mark for each identification TWO required  <b>One</b> mark for each explanation, TWO required from</p> <p>a <b>advertise in a wide range of areas</b> to ensure fair access and opportunities for all  b <b>use an EOP logo</b> – this shows that they are an EO employer and promotes confidence in the organisation  c <b>analyse monitoring forms</b> to ensure they are receiving applications from a wide range of groups  d <b>do not use any discriminatory language</b> which may be off putting to certain groups  e <b>use positive statements</b> to encourage minority ethnic groups to apply  f <b>range of formats/languages</b> available to allow accessibility to all</p>	2x1 2x1	[4]														

Question	Expected Answer	Mark	Total
2 (a)	<p><b>One</b> mark for each correct identification, FOUR required  <b>One</b> mark for each appropriate example, FOUR required from</p> <p>a <b>making the welfare of the child paramount/important</b>  – <i>having a child centred approach. Children’s rights views are listened to</i></p> <p>b <b>keeping the children safe and maintaining a healthy environment</b> – <i>safety procedure/ID/locked gates</i></p> <p>c <b>working in partnership with parents/families</b> – <i>involving parents and families, inviting them in, parents evening, daily book to take home</i></p> <p>d <b>making sure children are offered a range of experiences and activities that support all aspects of their development</b> – <i>a well planned curriculum, adhering to policies, ensure all areas/resources are fully accessible</i></p> <p>e <b>valuing diversity</b> – <i>displays/toys/resources reflect equal opportunities/festivals</i></p> <p>f <b>equality of opportunity and anti-discriminatory practice</b> – <i>training, good practice, being strong role models</i></p> <p>g <b>maintaining confidentiality</b> – <i>need to know basis, have information about children is kept in a secure place</i></p> <p>h <b>working with others</b> – <i>working with other agencies that support children</i></p> <p>i <b>reflective practitioners</b> – <i>staff training, feedback, staff meetings to share ideas and reflect on how things have been</i></p> <p>Any other practical examples of how these can be applied.  Examples can be interchangeable</p>	4x1 4x1	<b>[8]</b>
(b)	<p><b>One</b> mark for ONE correct policy identified from</p> <ul style="list-style-type: none"> <li>• Equal Opportunities</li> <li>• Harassment</li> <li>• Bullying</li> <li>• Confidentiality</li> <li>• Child Protection</li> <li>• Health and Safety</li> </ul> <p><i>Any other suitable policy</i>  <i>Do not accept legislation</i></p>	1x1	<b>[1]</b>

Question	Expected Answer	Mark	Total
2 (c)	<p><b>One</b> mark for each identification, THREE required  <b>One</b> mark for each explanation, THREE required from</p> <p><b>Provide training</b> for staff on policy/legislation/care values so they follow correct procedures</p> <p><b>Mentoring</b> system to help staff and give them advice/support</p> <p><b>Monitor/appraise/observe/inspect/review</b> their staffs' performance so they can reflect and improve</p> <p><b>Provide appropriate resources/equipment</b> so they can do the job correctly</p> <p><b>Staff meetings</b> to share concerns/communicate service users needs/share good practice</p> <p><b>Good handover procedures</b> to ensure consistency in care and good standards</p> <p><b>Feedback (questionnaires, interviews, comment boxes)</b> getting opinions of staff and service users to help improve services</p> <p><b>Provide policies/care values/Code of Practice</b> to enable staff to work within the guidelines and give guidance</p>	<p>3x1 3x1</p>	<p>[6]</p>

Question	Expected Answer	Mark	Total																
3 (a)	<p><b>One</b> mark for each correct identification, THREE required  <b>One</b> mark for each appropriate example, THREE required from</p> <table border="0"> <thead> <tr> <th data-bbox="336 360 743 394">Identify</th> <th data-bbox="751 360 1182 394">Examples</th> </tr> </thead> <tbody> <tr> <td data-bbox="336 427 743 461"><b>P</b> physical</td> <td data-bbox="751 427 1182 461">discrimination due to race</td> </tr> <tr> <td data-bbox="336 461 743 495"><b>PS</b> psychological</td> <td data-bbox="751 461 1182 495">fear/stigma/ stereotypes</td> </tr> <tr> <td data-bbox="336 495 743 528"><b>C</b> cultural</td> <td data-bbox="751 495 1182 528">people misrepresent behaviours/customs</td> </tr> <tr> <td data-bbox="336 528 743 562"></td> <td data-bbox="751 528 1182 562">Qualifications not recognised</td> </tr> <tr> <td data-bbox="336 562 743 595"><b>L</b> language/communication</td> <td data-bbox="751 562 1182 595">English may not be their first language</td> </tr> <tr> <td data-bbox="336 595 743 629"><b>F</b> financial</td> <td data-bbox="751 595 1182 629">May receive less pay due to discrimination. Postcode lottery</td> </tr> <tr> <td data-bbox="336 629 743 663"><b>G</b> geographical/Location</td> <td data-bbox="751 629 1182 663">poor areas, inverse care law, deprivation and lack of decent services. Postcode lottery</td> </tr> </tbody> </table>	Identify	Examples	<b>P</b> physical	discrimination due to race	<b>PS</b> psychological	fear/stigma/ stereotypes	<b>C</b> cultural	people misrepresent behaviours/customs		Qualifications not recognised	<b>L</b> language/communication	English may not be their first language	<b>F</b> financial	May receive less pay due to discrimination. Postcode lottery	<b>G</b> geographical/Location	poor areas, inverse care law, deprivation and lack of decent services. Postcode lottery	3x1 3x1	<b>[6]</b>
Identify	Examples																		
<b>P</b> physical	discrimination due to race																		
<b>PS</b> psychological	fear/stigma/ stereotypes																		
<b>C</b> cultural	people misrepresent behaviours/customs																		
	Qualifications not recognised																		
<b>L</b> language/communication	English may not be their first language																		
<b>F</b> financial	May receive less pay due to discrimination. Postcode lottery																		
<b>G</b> geographical/Location	poor areas, inverse care law, deprivation and lack of decent services. Postcode lottery																		
(b)	<p><b>One</b> mark for each correct identification, THREE required from</p> <ul style="list-style-type: none"> <li>• employment</li> <li>• housing</li> <li>• education</li> <li>• goods and services</li> </ul>	3x1	<b>[3]</b>																



Question	Expected Answer	Mark	Total
3 (c)	<p><b>Level 3 Response: 5-6 marks</b> Candidates can give a detailed analysis of at least two weaknesses of the Act. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 Response: 3-4 marks</b> Candidates can give a basic analysis of one or two weaknesses of the Act. Answers will be factually correct but still need developing. There will be some noticeable errors of grammar, punctuation and spelling. Sub max 3 for one weakness done well.</p> <p><b>Level 1 Response: 0-2 marks</b> Candidates can give evidence of one weakness of the Act. List like answers should be placed within this band. Answers are likely to be muddled and lack technical details. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>a cases are difficult to prove and are costly, time consuming and emotionally draining</li> <li>b hard to change people's attitudes; these laws do not prevent people holding negative and discriminating attitudes towards 'racial' and ethnic groups</li> <li>c racism has not reduced that much since 1976 – look at high profile cases in the media e.g. Stephen Lawrence/Taylor/Liverpool killing</li> <li>d institutional racism still exists in the Police, education</li> <li>e still much more to be done / discrimination still exists</li> <li>f fear of victimisation may prevent people from making a complaint as the situation may become worse</li> <li>g hard to police – unless an actual complaint is made the behaviour can continue</li> <li>h don't know/understand rights – hard to know what to do if you are discriminated against</li> </ul>		[6]

Question	Expected Answer	Mark	Total
4 (a) (i)	<p><b>Two</b> from</p> <ul style="list-style-type: none"> <li>• contact supervisor / head / teacher</li> <li>• record what happened</li> <li>• contact other professional</li> <li>• refer to policies/procedures</li> <li>• tell James she has to break his confidence</li> <li>• talk to parents/carers</li> </ul>	2x1	<b>[2]</b>
(ii)	<p><b>One</b> mark for each correct identification, <b>TWO</b> from</p> <ul style="list-style-type: none"> <li>• not want to go to school/nursery</li> <li>• frightened</li> <li>• upset/sad</li> <li>• depressed</li> <li>• low self esteem/worth</li> <li>• low self confidence</li> <li>• angry</li> <li>• isolated / withdrawn</li> <li>• humiliated</li> <li>• physical injury</li> <li>• devalued</li> <li>• stressed</li> </ul> <p><i>Any other suitable effect</i></p>	2x1	<b>[2]</b>
(b)	<p><b>One</b> mark for each correct response, <b>THREE</b> from</p> <ul style="list-style-type: none"> <li>• risk of Harming others</li> <li>• risk of Harming themselves</li> <li>• risk of Being hurt (abuse)</li> <li>• risk of a serious offence being carried out</li> </ul>	3x1	<b>[3]</b>

Question	Expected Answer	Mark	Total
4 (c)	<p><b>Level 3 Response: 7-8 marks</b>  There will be a detailed discussion of at least two benefits to the service users and care workers, both groups will be discussed and answers more balanced. These will be developed logically and there will be evidence of synthesis within the work. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 Response: 4-6 marks</b>  They will include a brief discussion of one or two benefits of the policy to service users and care workers. Candidates that discuss both groups should be placed at the top of this band. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. Sub max 4 for one group done well.</p> <p><b>Level 1 Response: 0-3 marks</b>  There may be evidence of one or two benefits of the policy to service users and/or care workers. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>Service users</b></p> <p>Sa helps to prevent bullying  Sb ensures that they are treated fairly  Sc promotes opportunity  Sd develops high self-esteem / self-confidence  Se helps them feel safe and secure  Sf system of redress / guidance  Sg gives them their rights</p> <p><b>Care worker</b></p> <p>Ca helps them do their job effectively / guidance  Cb guides them about good practice  Cc helps to protect them from being bullied / accused  Cd helps them promote quality care  Ce gives the organisation a better reputation  Cf system of redress / guidance  Cg gives them their rights</p>		[8]

Question	Expected Answer	Mark	Total
5 (a)	<p><b>Level 3 Response: 6-7 marks</b> There will be a detailed explanation of at least two ways the primary socialisation process within the family could influence a child's attitudes towards racism. Answers will be developed logically and use technical language. Answers will be factually accurate and they will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 Response: 4-5 marks</b> There will be a brief explanation of one or two ways the primary socialisation process within the family could influence a child's attitudes towards racism. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. Sub max 4 if one done well.</p> <p><b>Level 1 Response: 0-3 marks</b> There may be evidence of at least one way the primary socialisation process within the family could influence a child's attitude towards racism. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive. List like answers should be placed within this level.</p> <p><b>Knowledge:</b></p> <ul style="list-style-type: none"> <li>a listening to how parents talk about other cultures/races</li> <li>b copying family if they make racist comments / language / behaviour. Parents act as role models.</li> <li>c children learn most of their attitudes during these formative years – can set up their views for life</li> <li>d may rebel against their parents attitudes</li> <li>e may experience racism as a family and therefore this affects their viewpoint</li> <li>f educating your child to value diversity – food / toys / etc</li> </ul> <p><i>NB accept positives</i></p>		[7]

Question	Expected Answer	Mark	Total
5 (b)	<p><b>Level 3 Response: 7-8 marks</b>  There will be a detailed explanation of at least two ways an early-years setting could ensure its resources promote a multi cultural society. These will be developed logically and there will be evidence of synthesis within the work. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling. Must be linked to how it promotes multiculturalism</p> <p><b>Level 2 Response: 4-6 marks</b>  They will include a brief explanation of one or two ways an early-years setting could ensure its resources promote a multi cultural society. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. Sub max 4 if one done well.</p> <p><b>Level 1 Response: 0-3 marks</b>  There may be evidence of one or two ways an early-years setting could ensure its resources promote a multi cultural society. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>a images in books/videos/DVDs focussing on other cultures  b multicultural displays/posters  c dressing up/food to learn about other cultures/provide food from other cultures  d dolls/toys/games from different cultures  e music/instruments from around the world  f staff from different cultures  g facilities e.g. prayer room / dietary needs  h scheme of work to reflect diversity</p>		[8]

Question	Expected Answer	Mark	Total
6 (a)	<p><b>Level 3 Response: 7-8 marks</b> There will be a detailed analysis of at least two strengths of the SDA. These will be developed logically and there will be evidence of synthesis within the work. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 Response: 4-6 marks</b> They will include a brief analysis of one or two strengths of the SDA. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. Sub max 4 if one done well.</p> <p><b>Level 1 Response: 0-3 marks</b> There may be evidence of one or two strengths of the SDA. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive. Sub max 3 if just content of Act.</p> <p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>a helps raise awareness</li> <li>b gives people more rights / system of redress</li> <li>c more opportunities for women and men in society</li> <li>d closed pay differentials to an extent / equal pay</li> <li>e more equality in terms of job opportunities</li> <li>f high profile cases have been won and made employees think differently</li> <li>g school curriculum more equality and encouragement to partake in range of subjects. Girls now outperform boys in every subject</li> <li>h reduced discrimination</li> </ul>		[8]

Question	Expected Answer	Mark	Total
6 (b)	<p><b>Level 3 Response: 9-12 marks</b> A detailed discussion of at least two reasons why the SDA has not necessarily reduced the amount of sex discrimination in society. This will be developed logically and there will be evidence of synthesis within the work. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 Response: 5-8 marks</b> A brief discussion of one or two reasons why the SDA has not necessarily reduced the amount of sex discrimination in society. There will be noticeable errors of grammar, punctuation and spelling. <b>Sub-max</b> 6 for one reason done well.</p> <p><b>Level 1 Response: 0-4 marks</b> A very basic outline of why the SDA has not necessarily reduced the amount of sex discrimination in society. List like answers should be placed within this level. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>a legislation alone does not reduce discrimination – need to work harder at changing attitudes b more emphasis within education, advertising, media etc to improve role models and reduce stereotypes c difficult to police the amount of discrimination occurring / hard to prove indirect discrimination d still big differences in pay between men and women e top positions in business and politics still held by men f gender stereotyping still very influential e.g. influence of the family/media g cost/emotional stress and time to take cases to court h many people unaware of their rights i victimisation j glass ceiling still exists / drawbridge effect</p>		[12]

## F913 Health and safety in care settings

Question	Expected Answer	Mark	Total
1 (a) (i)	<p><b>One</b> mark for</p> <ul style="list-style-type: none"> <li>Control of Substances Hazardous to Health (1994)</li> </ul> <p><i>Date not required. Accept COSHH.</i></p>	1x1	[1]
(ii)	<p><b>One</b> mark for type of substance (or specific named one), THREE required</p> <p><b>One</b> mark for how to store it, THREE required from</p> <ul style="list-style-type: none"> <li>bleaching agent – store in clearly marked (original) container in <b>locked</b> cupboard out of reach of children, must stress unobtainable</li> <li>oxidising agent – store in sealed container away from flammable substances</li> <li>flammable chemicals – store in <b>fire resistant</b> locked cupboard away from sparks etc</li> <li>poisons – store in <b>locked</b> cupboard with clear instructions for dealing with accidents and limited staff access</li> <li>caustic agents (most cleaning materials) – store in locked cupboards in original containers with clear safety warnings</li> <li>glue – store <b>locked</b> away from young children/ unauthorised people, must stress unobtainable</li> </ul>	3x1 3x1	[6]
1 (b) (i)	<p><b>One</b> mark for</p> <p>Health and Safety Executive or HSE</p>	1x1	[1]
(ii)	<p><b>One</b> mark for correct function, ONE required from</p> <ul style="list-style-type: none"> <li>providing leaflets/information</li> <li>providing advice/training</li> </ul>	1x1	[1]
1 (c) (i)	<p><b>One</b> mark for equipment, ONE required from</p> <ul style="list-style-type: none"> <li>hoist</li> <li>slide board/transfer board</li> <li>wheelchair</li> </ul> <p><i>(Other reasonable alternatives may be accepted if given)</i></p>	1x1	[1]
(ii)	<p><b>One</b> mark for</p> <p>Manual Handling Operations Regulations (<b>should be in full</b>) <i>(1992) date not required</i></p> <p><b>OR</b> Lifting Operations and Lifting Equipment Regulations <i>(1998) date not required – accept <b>LOLER</b></i></p>	1x1	[1]
(c) (iii)	<p><b>One</b> mark for each step described, FOUR required from</p> <ul style="list-style-type: none"> <li>talk to service user to explain the procedure</li> </ul>	4x1	[4]



Question	Expected Answer	Mark	Total
	<ul style="list-style-type: none"> <li>• reassure them</li> <li>• check that all necessary equipment is ready and in place</li> <li>• check that you know/understand the procedure/read instructions/are trained</li> <li>• have another member of staff to assist</li> <li>• make sure that there is adequate room to avoid accidents</li> <li>• check that service user is correctly positioned before beginning</li> <li>• carry out risk assessment/fill in checklist sheet</li> <li>• ensure client is ready before begin</li> <li>• ensure equipment is safe/not damaged/will hold service users weight</li> <li>• wear correct clothes/shoes</li> </ul>		

Question	Expected Answer	Mark	Total
2 (a)	<p><b>One</b> mark for correct identification of sign, THREE required</p> <p><b>One</b> mark for saying where it is likely to be found, THREE required</p> <p><b>One</b> mark for explanation of how risk is reduced, THREE required</p> <p><b>A Slippery/wet floor</b></p> <ul style="list-style-type: none"> <li>• likely to be found where spillage has occurred/where cleaning is taking place/near entrance on wet day</li> <li>• warns people to take extra care to avoid slipping/take another route/avoid area</li> </ul> <p><b>B Biohazard (or biological agent or hazard or risk)</b></p> <ul style="list-style-type: none"> <li>• likely to be found on containers (laundry bags) with soiled clothes, bedding or dressings/on sharps containers</li> <li>• warns people to avoid direct contact or to wear gloves to avoid risk of contamination/warns about appropriate disposal separately</li> </ul> <p><b>C No smoking</b></p> <ul style="list-style-type: none"> <li>• likely to be found in public areas/places or where vulnerable people are, or in staff rooms where there is a no smoking policy/near flammable substances such as gas canisters</li> <li>• warns people to avoid smoking to reduce fire risk or for public health and comfort</li> </ul>	<p>3x1</p> <p>3x1</p> <p>3x1</p>	<b>[9]</b>

Question	Expected Answer	Total	
<b>(b)</b>	<p><b>Level 3 response: (5-6 marks)</b> Candidates describe in detail the likely impact of RIDDOR on health and safety policy in a care setting. <i>Answers will be developed logically and show evidence of application of knowledge skills. There will be few errors of grammar punctuation and spelling.</i></p> <p><b>Level 2 response: (3-4 marks)</b> Candidates describe soundly some possible impacts of RIDDOR on health and safety policy in a care setting. <i>Answers will show some evidence of application of knowledge. There will be noticeable errors of grammar punctuation and spelling.</i></p> <p><b>Level 1 response (0-2 marks)</b> Candidates may attempt to describe the effects of RIDDOR on health and safety policy in a care setting. They may simply list some of the provisions of RIDDOR. <i>Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling will be noticeable and intrusive.</i></p> <p>(a) accident reporting system should be in place to ensure RIDDOR is complied with – ensures setting complies with legal requirements and has records in case of investigation/legal action  (b) provision for service users/care workers to be sent home if have notifiable disease – setting showing duty of care to its workers and service users  (c) should ensure accidents caused by system failings are not repeated since investigation will follow any serious incident  (d) staff are likely to be more aware/better trained due to organisation incorporating RIDDOR requirements into policy  (e) managers aware of supervising authority and therefore where to obtain support/guidance</p> <p><i>Any other reasonable points to be allowed.</i></p>	<b>[6]</b>	
<b>3 (a)</b>	<p><b>One</b> mark for each stage given in the correct order</p> <ol style="list-style-type: none"> <li>1 look for hazards (<i>accept risks</i>)</li> <li>2 assess who may be harmed</li> <li>3 (consider the risks) are precautions adequate</li> <li>4 document the findings</li> <li>5 review the assessment and revise it if necessary</li> </ol>	5x1	<b>[5]</b>
<b>3 (b)</b>	<p><b>Level 3 response: 12-15 marks</b> Candidates make detailed and well argued judgements showing clear links between the hazards, the service users and/or care workers and indicate sound consideration of precautions that are already in place. <i>Answers will be developed logically and show evidence of application of knowledge skills. There will be few errors of grammar punctuation and spelling.</i></p> <p><b>Level 2 response : 6-11 marks</b> Candidates identify hazards and make sound links between</p>		<b>[15]</b>

Question	Expected Answer	Total
	<p>the service users (and possibly care workers) and the risks. They will show some consideration of precautions already in place. Answers will show some evidence of application of knowledge. There will be noticeable errors of grammar punctuation and spelling.</p> <p><b>Level 1 response : 0-5 marks</b> Candidates identify hazards but make limited links between the service users and the specific risks. The work may consist of a simple list of hazards with little awareness shown of the precautions already in place. Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling will be noticeable and intrusive.</p> <p>(a) exits – main, rear and one in kitchen – probably inadequate for full scale evacuation in case of fire – elderly residents likely to be quite slow – may need additional fire doors</p> <p>(b) stairs internally (and out to garden) – trip hazard for elderly residents/those with poor sight/those who are unsteady – consider ramps/handrails/warning markings on step edges</p> <p>(c) kitchen access to dining room – via corridor including steps – risk of falls etc to staff carrying food – consider ramp/door between kitchen and dining room/change lounge and dining room functions</p> <p>(d) Residents accessing kitchen may be a danger if confused. Any sensible reference to excluding such service users should be credited</p> <p>(e) bathrooms and WC near front door – risk that confused residents may wander off – are there any security features on doors? – if not, there should be. Also consideration of security to safeguard against intruders could be considered.</p> <p>(f) fire extinguisher – only 1 in office – risk to everyone – should be more – at least one in kitchen (or fire blanket) as most likely place for fire to break out</p> <p>(g) first Aid box – only 1 in office – risk to all – should be more – especially kitchen to safeguard staff</p> <p>(h) stairs to upper floor – fall risk to elderly frail residents especially – no indication of lift – consider installing lift – assessment of which residents could safely be housed upstairs? – constantly changing</p> <p><b>Any other reasonable hazard should be allowed.</b> <i>Any specific mention of reviewing the assessment should be given credit, but will not score highly since this is the first risk assessment as far as these candidates are aware.</i></p>	

Question	Expected Answer	Mark	Total
4 (a)	<p><b>One</b> mark for</p> <p><b>Transfer</b> of infection/bacterium/pathogen <b>from one</b> individual <b>to another</b></p> <p><i>Accept transfer from one surface to another</i></p>	1	[1]
(b)	<p><b>One</b> mark for each piece of protective clothing identified, THREE required</p> <p><b>One</b> mark for each description of <b>how</b> protection from cross contamination is achieved, THREE required</p> <p><b>Gloves</b> - will protect patient from contamination by care worker or previous patient as <b>gloves will be disposed</b> of between patients so preventing carriage of bacteria etc to next patient – no transfer of bodily fluids between service users</p> <p><b>Apron</b> – prevents fluids etc on care workers' clothing, so not carried to other patients if apron <b>changed between service users</b></p> <p><b>Mask</b> – prevents from inhaling infectious agents from infected person and therefore cannot 're-breathe' agent onto next service user (prevents care worker's own infection from being passed to patient)</p> <p><b>Allow overshoes</b> –reducing contamination brought in on workers shoes – reduces risk to patient e.g. in operating theatre – reduces risk of serious disease outbreak in setting – prevents infection from patient in theatre being spread outside that area</p>	3x1 3x1	[6]

Question	Expected Answer	Mark	Total
4 (c)	<p><b>One</b> mark for identification of ways of reducing risk, TWO required</p> <p><b>One</b> mark for description of how this occurs, TWO required</p> <ul style="list-style-type: none"> <li>• wear disposable gloves – prevent contamination of hands by microbes from waste</li> <li>• wear disposable apron – prevent contamination of clothes by microbes from waste</li> <li>• keep waste in sealed, labelled containers – prevents accidental exposure by opening bag in error</li> <li>• dispose of soiled waste in correctly coloured/labelled containers – prevents accidental contamination since labelling cannot be missed</li> <li>• fluid spillages cleaned with disinfectant plus absorbent material – prevents spread further/prevents airborne spread</li> <li>• wearing face masks if dealing with serious infection that is air-borne – prevents accidental inhalation</li> <li>• sharps placed immediately after use in suitable bin – prevents accidental injury to care worker</li> <li>• ask advice/follow instructions relating to specific contaminants which hold particular risks – follow best practice &amp; reduce infection risk</li> </ul> <p><i>Allow: Protective clothing for one point, provided no other specific examples are given</i></p>	2x1	<b>[4]</b>
		2x1	

Question	Expected Answer	Total
4 (d)	<p><b>Level 3 response: 8-9 marks</b> Candidates will evaluate two or more standard precautions and made judgements of their usefulness/importance that relate clearly to a low-risk environment such as a nursery. <i>Their answer will show logical connections being made. Answers will be developed logically and show evidence of application of knowledge skills. There will be few errors of grammar punctuation and spelling.</i></p> <p><b>Level 2 response: 5-7 marks</b> Candidates will consider two or more standard precautions but may simply describe how they would be used in a low-risk setting. There may be limited judgements formed as to their usefulness in that setting. <i>Answers will show some evidence of application of knowledge. There will be noticeable errors of grammar punctuation and spelling.</i></p> <p><b>Level 1 response: 0-4 marks</b> Candidates are likely to simply state standard precautions with limited reference to the setting under consideration. There is unlikely to be any judgement involved in the answer. <i>Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling will be noticeable and intrusive.</i></p> <ul style="list-style-type: none"> <li>(a) hand hygiene – one of most important precautions to prevent cross contamination</li> <li>(b) staff responsible for hand hygiene of children – they are likely to forget to wash hands after toilet visits or before eating – staff supervision crucial</li> <li>(c) control of environment – also very important since children tend to use hands indiscriminately moving from one activity to another – wiping and disinfecting of surfaces, changing mat, toilet areas is a high priority – vacuuming carpets</li> <li>(d) ensure cleanliness of toys – frequent wiping and disinfecting</li> <li>(e) Manage blood and body fluid spillages – maybe quite important if children have accidents (toilet or cuts etc) – may not know health status of children, so should be routine disinfection</li> <li>(f) prevent exposure to infection – cover cuts with plaster just as would at home as no great risk in this setting</li> <li>(g) safely manage linen/nappies – may be important to store clothes etc if children have toilet accidents – generally policy for children to have spare clothes in case of emergency – soiled clothes sealed in plastic bags for parents to launder, nappies disposed of in a separate container</li> <li>(h) provide care in most appropriate place – unwell children should not be at nursery – policy to send children home if unwell etc</li> <li>(i) safe disposal of waste – not generally relevant except for accidents (see spillages)</li> <li>(j) care equipment – unlikely to be relevant in this setting unless have child(ren) with specific needs</li> <li>(k) food preparation area disinfected – to prevent cross contamination</li> <li>(l) Weaknesses of standard precautions – do not prevent spread of airborne infections</li> </ul>	[9]

Question	Expected Answer	Mark	Total
5 (a)	<p><b>One</b> mark for identification of way, THREE required</p> <p><b>One</b> mark for related explanation, THREE required</p> <ul style="list-style-type: none"> <li>• smoke alarm – give early warning of smouldering <b>before</b> fire starts</li> <li>• no smoking – reduces likelihood of fire outbreak</li> <li>• flammable substances stored appropriately – reduces risk of spontaneous outbreak</li> <li>• no storage in corridors, stairwells etc of flammable materials – reduces fire risk in communal areas</li> <li>• sprinkler system – will put out smouldering (not a fire) very early and prevent serious outbreak</li> <li>• regular checking of electrics – reduces risk of short circuits and sparks/spontaneous fires</li> <li>• fire resistant furniture/curtains etc – reduces risk of spontaneous outbreak from cigarette smouldering etc.</li> <li>• restricted access to kitchen etc. – residents may not use stoves etc safely</li> </ul>	<p>3x1</p> <p>3x1</p>	<b>[6]</b>

Question	Expected Answer	Mark	Total
5 (b)	<p><b>Level 3 response: 8-9marks</b> Candidates can give a detailed discussion of the benefits of holding regular fire drills. The benefits will apply to both service users and care workers. Answers will be developed logically and show evidence of application of knowledge skills. There will be few errors of grammar punctuation and spelling.</p> <p><b>Level 2 response: 5-7 marks</b> Candidates can give a basic description of the benefits of regular fire drills. The benefits may be generic and not well related to either service users or care workers clearly, or may just relate to one group. Answers will show some evidence of application of knowledge. There will be noticeable errors of grammar punctuation and spelling. <i>Sub max of 5 if discussion only deals with service users or care workers.</i></p> <p><b>Level 1 response: 0-4 marks</b> Candidates may simply list why fire drills are good without any logical argument. There may be no relating of this information to care setting, service users or care workers. They may simply state what should happen during a fire drill. Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling will be noticeable and intrusive.</p>		[9]



Question	Expected Answer	Mark	Total
5 (b)	<p data-bbox="331 262 1160 327"><i>Some benefits may vary from those given depending on the specific care setting being described</i></p> <p data-bbox="331 360 528 392"><b>Care Workers</b></p> <ul data-bbox="331 398 1150 741" style="list-style-type: none"> <li>• staff will know clearly what to do in an emergency – increased competence and confidence</li> <li>• staff have opportunity to find out specific problems with individual service users and to write alterations into plan</li> <li>• staff can make knowledge semi-automatic – so don't hesitate if real thing happens</li> <li>• allows for new staff/temporary staff to learn drill – increases safety for residents</li> <li>• by staff being aware frequently of escape routes, means they are less likely to leave obstacles on evacuation routes</li> </ul> <p data-bbox="331 775 528 806"><b>Service users</b></p> <ul data-bbox="331 813 1150 1323" style="list-style-type: none"> <li>• if confused (residential home) – frequent practice may aid retention of system in memory</li> <li>• frequent practice means service users less likely to panic in case of real fire (quite likely with young children or the elderly – reduces risk in case of real emergency)</li> <li>• knowledge of drills increases confidence on part of service users and their relatives/parents (as appropriate)</li> <li>• individuals have opportunity to identify particular problems they have eg inability to hear fire alarm/difficulty moving down steps (and so on) – gives chance to amend procedure to suit individuals – gives opportunity to allocate named workers to assist those with difficulties</li> <li>• reduce risk of death – applicable to all</li> <li>• frequent drills means that alarm system is tested regularly – benefits everyone – increased confidence in system</li> </ul>		

Question	Expected Answer	Mark	Total
6 (a)	<p><b>One</b> mark for piece of information, FOUR required  <b>One</b> mark for reason, FOUR required</p> <ul style="list-style-type: none"> <li>• first aid box must be available – <i>so people have access to appropriate supplies</i></li> <li>• sign/information about location of first aid box – <i>so no time wasted looking for help</i></li> <li>• named first aider (if necessary/required – <i>to give correct and appropriate aid</i></li> <li>• sign/information about location of first aider – <i>so no time wasted looking for help</i></li> <li>• location of accident book – <i>so people know how to report incident</i></li> <li>• name of person to take control in emergency situation – <i>to ensure correct procedures</i></li> <li>• location of first aid room in a large setting – <i>to get the injured person to the appropriate place quickly/to prevent injury worsening</i></li> </ul>	4x1 4x1	<b>[8]</b>

Question	Expected Answer	Mark	Total
6 (b)	<p><b>Level 3 response: (6-7 marks)</b> Candidates give a detailed discussion of benefits (at least two) to care workers. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 response: (3-5 marks)</b> Candidates outline benefits that are sensible. There will be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 response: (0-2 marks)</b> Candidates identify the value of First Aid. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>Care workers</b></p> <ul style="list-style-type: none"> <li>• will benefit from having prompt attention in case of accident</li> <li>• likely to reduce severity of problem</li> <li>• may reduce time off work</li> <li>• expert advice on when further help is needed</li> <li>• feel valued as an employee</li> <li>• confident that employer is looking after workers</li> <li>• prompt attention reduces chance of serious injury</li> <li>• increases confidence in care setting's ability to look after service users</li> </ul> <p><b>Service users</b></p> <ul style="list-style-type: none"> <li>• service users feel happier / more confident</li> <li>• trust increases between first aider &amp; users</li> </ul> <p><i>Actual examples given may vary depending on the care setting(s) used</i></p>		



Question	Answer	Mark	Total
	<ul style="list-style-type: none"> <li>• <b>lack of energy</b> – so gets tired easily</li> <li>• <b>afraid/insecurity</b> – prefers to be in his own home</li> <li>• <b>poor eyesight</b> – could make it difficult to join in activities</li> <li>• <b>poor hearing</b> – could make it difficult to take part in conversations</li> <li>• <b>lack of social skills</b> – will not be able to interact with others/spent time caring for wife</li> <li>• <b>he has not been there before</b> - does not know anyone</li> <li>• <b>blame himself/ feel guilty for his wife's death</b> – embarrassed by reactions of others</li> <li>• <b>used to his own company</b> – lack of friends</li> <li>• <b>unsure of how to get there</b> - concerned about transport problems/ unable to drive</li> <li>• <b>fear of being rejected</b> – he will not fit in/get on with the people there</li> <li>• <b>worried about meeting new people/shy</b> – feel he might forget her by mixing with others</li> <li>• <b>not used to care workers</b> – worried about how he will be treated</li> <li>• <b>lack of motivation</b> – because of loss of wife</li> <li>• <b>in a new environment</b> – unfamiliar with surroundings/risk of accidents</li> </ul>		

Question	Answer	Mark	Total
2 (a)	<p data-bbox="325 259 858 293"><b>One mark for each, FOUR required from</b></p> <ul style="list-style-type: none"> <li data-bbox="325 331 1034 365">• no income from work/depend on husband's income</li> <li data-bbox="325 367 596 400">• less/more income</li> <li data-bbox="325 403 564 436">• rely on pension</li> <li data-bbox="325 439 783 472">• savings plan matures/lump sum</li> <li data-bbox="325 474 683 508">• have to budget carefully</li> <li data-bbox="325 510 584 544">• may get benefits</li> <li data-bbox="325 546 596 580">• mortgage paid off</li> <li data-bbox="325 582 576 616">• less/more debts</li> <li data-bbox="325 618 975 651">• may not/may be able to afford to go on holiday</li> <li data-bbox="325 654 932 687">• may use retirement money to go on holiday</li> <li data-bbox="325 689 916 723">• less money for luxuries/can afford luxuries</li> <li data-bbox="325 725 943 759">• may need to buy economy foods/poorer diet</li> <li data-bbox="325 761 959 795">• may be able to/not able to treat grandchildren</li> <li data-bbox="325 797 756 831">• less/more money for presents</li> <li data-bbox="325 833 767 866">• no travelling expenses to work</li> <li data-bbox="325 869 683 902">• not pay for prescriptions</li> <li data-bbox="325 904 624 938">• bus pass/free travel</li> <li data-bbox="325 940 603 974">• downsizing house</li> </ul>	4x1	[4]

Question	Answer	Mark	Total
2 (b )	<p><b>Level 3 [6-7 marks]</b> Candidates will clearly analyse at least <b>two</b> ways Fawzia's retirement could affect her roles within the family. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [4-5 marks]</b> Candidates will basically analyse at least <b>two</b> ways Fawzia's retirement could affect her roles within family. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. (Submax 4 marks if only one way analysed very well)</p> <p><b>Level 1 [0-3 marks]</b> Candidates will identify ways Fawzia's retirement could affect her roles within the family. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>(a) care for/look after grandchildren (b) become dependent on children to care for her (c) provide support for children (d) give financial support to children/grandchildren (e) rely on her family for financial support (f) more freedom to spend time with her family (g) time to visit her son in Australia (h) less motivation so she could isolate herself from her family (i) full time housewife/looking after her husband</p>		[7]

Question	Answer	Mark	Total
2 (c )	<p><b>One</b> mark for identification, TWO required</p> <p><b>One</b> mark for explanation of how each could affect her, TWO required</p> <ul style="list-style-type: none"> <li>• <b>no longer employee</b> – raised/lowered self-esteem/self worth</li> <li>• <b>pensioner</b> – raised/lowered confidence/happy/unhappy</li> <li>• <b>voluntary worker</b> – feel needed/wanted/improved motivation/doing things because she wants to</li> <li>• <b>role in the community</b> – feel valued/proud to be doing things for others/make new friends/give her responsibility</li> </ul>	<p><b>2x1</b></p> <p><b>2x1</b></p>	<b>[4]</b>



Question	Answer	Mark	Total
3 (a)	<p>One mark for ONE from</p> <ul style="list-style-type: none"> <li>• irritable bowel syndrome/IBS</li> <li>• ulcerative colitis</li> <li>• Crohn's Disease</li> <li>• chronic constipation</li> <li>• cancer of the bowel/stomach</li> </ul>	1x1	[1]
(b)	<p>One mark for each, FOUR required from</p> <ul style="list-style-type: none"> <li>• weaker stomach muscles</li> <li>• weak muscles in digestive tract</li> <li>• dehydration</li> <li>• weak muscles in the rectum</li> <li>• diarrhoea</li> <li>• tiredness/lack of energy</li> <li>• piles</li> <li>• loss of weight</li> <li>• loss of appetite</li> <li>• anaemia</li> <li>• lack of essential nutrients/poor digestion of food</li> <li>• pain in digestive system/cramps</li> <li>• bloating</li> <li>• excessive wind</li> <li>• blood in stools</li> <li>• gastric ulcer</li> </ul>	4x1	[4]

Question	Answer	Mark	Total
3 (c)	<p><b>One mark for identification of THREE social effects</b>  <b>One mark for each explanation of the effects identified, THREE required from</b></p> <ul style="list-style-type: none"> <li>• <b>not go out socialising</b> - afraid to be too far from a toilet/risk of accidents</li> <li>• <b>lack of visitors</b> – find the smell offensive</li> <li>• <b>lose friends</b> – because they do not want to be around her</li> <li>• <b>not see family</b> – embarrassed by strange noises/smells</li> <li>• <b>going out to eat can be a problem</b> - cannot eat a normal diet</li> <li>• <b>less leisure activities</b> – due to effects of the condition</li> <li>• <b>join a support group</b> – make new friends/share experiences/increase confidence</li> <li>• <b>see more health care professionals</b> – for regular appointments</li> <li>• <b>become isolated/lonely</b> – because people cannot cope with the condition</li> </ul>	<p><b>3x1</b>  <b>3x1</b></p>	<b>[6]</b>



Question	Answer	Mark	Total
3 (d)	<p><b>Level 3 [8-9 marks]</b> Candidates will clearly explain at least <b>two</b> ways two different community services could support a person with a disorder of the digestive system. Conclusions will be drawn for the top mark in this band. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [5-7 marks]</b> Candidates will describe at least <b>two</b> ways two different community services could support a person with a disorder of the digestive system. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. <i>(Submax 5 marks for only <b>one</b> community service/<b>one</b> way for each discussed very well )</i></p> <p><b>Level 1 [0-4 marks]</b> Candidates will identify <b>one</b> or <b>two</b> community care services that could support a person with a disorder of the digestive system. There will be little if any attempt made to suggest ways the services could support. OR candidates describe way(s) community care services could support without identifying a specific community care service. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p>		[9]
	<ul style="list-style-type: none"> <li>• health-care services eg GP, Community Nurse <i>Prescribe medication, monitor health, give advice/guidance</i></li> <li>• social-care services eg social worker, care manager <i>Assess needs, provide specialist aids/adaptations, ensure needs are met</i></li> <li>• day care services eg day centre, respite care <i>Provide social support, encourage her to go out, provide activities</i></li> <li>• domiciliary services eg home care assistant <i>Support with daily living tasks, support with personal hygiene</i></li> <li>• private services eg equipment suppliers <i>Provide specialist continence aids/equipment</i></li> <li>• voluntary services eg support groups, transport <i>Give her advice/guidance, meet others in similar situation, share experiences, take her to hospital appointments/shopping</i></li> </ul>		

Question	Answer	Mark	Total
4 (a)	<p><b>One</b> mark for ONE from</p> <ul style="list-style-type: none"> <li>• heart attack</li> <li>• heart disease</li> <li>• heart dysfunction</li> <li>• sclerosis</li> </ul>	1x1	[1]
(b)	<p><b>One</b> mark for each, FOUR required</p> <ul style="list-style-type: none"> <li>• poor mobility</li> <li>• pain in the chest/ left arm</li> <li>• decreased energy levels</li> <li>• suffers from breathlessness</li> <li>• cold/blue lips/fingers/toes</li> <li>• dependent on others</li> <li>• increased health needs</li> <li>• increased care needs</li> <li>• emotional effects</li> <li>• social effects</li> <li>• lack of exercising</li> <li>• high/low blood pressure</li> </ul>	4x1	[4]

Question	Answer	Mark	Total
4 (c)	<p><b>Level 3 [8-10 marks]</b> Candidates will clearly analyse how the staff in the residential home should apply at least <b>two</b> of the <b>three</b> aspects of the care values when supporting George. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [5-7 marks]</b> Candidates will basically analyse how the staff in the residential home should apply at least <b>two</b> of the <b>three</b> aspects of the care values when supporting George. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. <i>(Submax 5 marks for <b>one</b> aspect analysed very well)</i></p> <p><b>Level 1 [0-4 marks]</b> Candidates will identify ways the staff in the residential home should apply the care values in their day-to-day tasks. Candidates may give minimal description and show limited understanding of different aspects of the care values. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>Maintain confidentiality:</b> c1 respect George's wishes for information to be kept private c2 do not talk about his care to those who do not need to know c3 do not leave notes lying around for others to read c4 ask permission to share information c5 explain who will have access to his information c6 do not give information over the telephone unless identity of caller can be proven c7 not leaving personal notes on the computer screen so that others can read them c8 having a password to access computer records c9 not talking about George by name at home so that he can be identified c10 keep personal records/information in a locked filing cabinet/cupboard</p> <p><b>Promote equality and diversity:</b> e1 never stereotype individuals e2 identify and fight their own prejudices e3 use language that George can understand e4 provide care according to his needs e5 challenge others who may discriminate against him e6 check George has understood what is said e7 listen carefully to George</p>		[10]

Question	Answer	Mark	Total
	<p>e8 use appropriate body language  e9 not labelling people  e10 respecting George's sexuality  e11 not verbally abusing George  e12 not physically abusing George  e13 providing information in chosen language  e14 providing meals according to his preferences  e15 not having favourites</p> <p><b>Promote individual rights and beliefs:</b>  r1 encourage George to be independent  r2 allow George to have choices about his care and treatment  r3 ask George what he needs and wishes  r4 provide equipment so that George can do more for himself  r5 make sure all care is carried out safely  r6 provide a safe environment  r7 treat George with dignity and respect  r8 recognise George's beliefs/practice religion  r9 enable George to maintain his identity  r10 encourage George to express his preferences  r11 raise awareness of how to complain  r12 being aware of George's cultural needs  r13 addressing George correctly/calling him by the name he prefers</p>		

Question	Answer	Mark	Total
5 (a)	<p>One mark for each, THREE required</p> <ul style="list-style-type: none"> <li>• more dependent on others</li> <li>• able to do less for herself</li> <li>• need reassurance</li> <li>• may find it hard to adjust</li> <li>• decreased confidence</li> <li>• decreased self-esteem</li> <li>• have difficulty communicating</li> <li>• increased likelihood of potential dangers</li> <li>• possibility of learned helplessness</li> <li>• may need more formal support</li> <li>• help with daily living tasks</li> <li>• rely on aids and adaptations (accept examples)</li> </ul>	3x1	[3]
(b)	<p>One mark for identification, TWO required            One mark for explanation, TWO required  <i>Answers must link directly.</i></p> <ul style="list-style-type: none"> <li>• <b>have an assessment of her needs by an occupational therapist/social services</b> – to ensure she remains independent/safe/receives the care she is entitled to</li> <li>• <b>use aids/adaptations</b> – to enable her to remain independent</li> <li>• <b>have a guide/hearing/disability assist dog</b> – to enable her to go out</li> <li>• <b>keep things in certain places</b> – so they are easy to find when she needs them</li> <li>• <b>join a support group</b> – to share experiences with others/raise her confidence/self-esteem</li> <li>• <b>have an alarm system installed</b> – so that she can get help in an emergency</li> <li>• <b>have meals-on-wheels</b> – to ensure she has nutritious meals/safety</li> <li>• <b>talk to medical professionals</b> – to gather advice and guidance which she can follow</li> <li>• <b>research her condition</b> – so that she understands how it will progress/can be prepared for future development</li> <li>• <b>learn sign language</b> – to help her communicate with others</li> </ul>	2x1 2x1	[4]

Question	Answer	Mark	Total
5 (c)	<p><b>Level 3 [7-8 marks]</b> Candidates will clearly analyse at least <b>two</b> ways the NHS and Community Care Act would ensure Sheree's needs are met at this time. There will be evidence of synthesis within the answers. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [4-6 marks]</b> Candidates will basically analyse at least <b>two</b> different ways the NHS and Community Care Act would ensure Sheree's needs are met at this time. There will be evidence of coherence within the answers. Answers will be factually accurate. There will be noticeable errors of grammar, punctuation and spelling. (Submax 4 marks for <b>one</b> analysed very well)</p> <p><b>Level 1 [0-3 marks]</b> Candidates will identify <b>one</b> or <b>two</b> ways the NHS and Community Care Act would ensure Sheree's needs are met at this time. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>(a) the right to have her needs assessed (b) right to have services provided in accordance with published criteria (c) enables her to stay in her own home for as long as possible (d) she has the right to complain if the service is not provided (e) care plan will be written to make sure her needs are met (f) multi-disciplinary team will care for her individual needs (g) professionals work together to provide care (h) information given about services available (i) allow her to have maximum independence (j) consistent approach will be given by all her carers (k) Sheree fully involved in the assessment of her needs (l) choices will be offered (m) health and social services working together (n) services delivered in a seamless manner (o) high standards of care</p>		[8]
6 (a)	<p><b>Level 3 [8-10 marks]</b> Candidates will thoroughly evaluate at least <b>two</b> effects on Peter of his wife's death taking into consideration a range of Peter's particular care needs. An understanding of both positive and negative factors relating to Peter will be demonstrated. <b>A conclusion will be drawn for full marks.</b> Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [5-7 marks]</b> Candidates will basically evaluate at least <b>two</b> effects on Peter of his wife's death taking into consideration his particular care needs. Some understanding of both positive and negative factors will be demonstrated for higher marks in this band. There will be evidence of coherence within the answers. Answers will be factually accurate. There will be noticeable errors of grammar, punctuation and spelling. (Submax 5 marks for <i>only positive or negative responses/ one effect</i></p>		[10]



Question	Answer	Mark	Total
	<p><i>evaluated well)</i></p> <p><b>Level 1 [0-4 marks]</b> Candidates will identify <b>one</b> or <b>two</b> effects on Peter of his wife's death. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>Negative effects on Peter:</b></p> <ul style="list-style-type: none"> <li>n1 lost his lifetime partner</li> <li>n2 feel angry that she has gone</li> <li>n3 lonely/isolated/withdrawn</li> <li>n4 stress/depression</li> <li>n5 may feel confused</li> <li>n6 no one to share experiences with</li> <li>n7 may feel guilty it was not him that died</li> <li>n8 feel bereaved/sad/unhappy</li> <li>n9 his health get worse</li> <li>n10 could pine for her</li> <li>n11 low self-esteem/feel worthless</li> <li>n12 lack of confidence</li> <li>n13 could give up on life/become suicidal</li> <li>n14 may not bother to cook for himself/poorer diet</li> <li>n15 dependent on others</li> <li>n16 poor social life</li> </ul> <p><b>Positive effects on Peter:</b></p> <ul style="list-style-type: none"> <li>p1 feel relieved she is not suffering any more</li> <li>p2 able to concentrate on looking after himself</li> <li>p3 feel reassured he did everything he could to help her</li> <li>p4 take up new hobbies/interests</li> <li>p5 spend more time with friends</li> <li>p6 visit his family more</li> <li>p7 able to go on holiday</li> <li>p8 less stress/pressure</li> <li>p9 more freedom/can enjoy doing the things he wants to</li> </ul>		

Question	Answer	Mark	Total
6 (b)	<p><b>Level 3 [8-10 marks]</b> Candidates will thoroughly discuss at least <b>two</b> ways the Health Act 1999 has affected provision of services for older people. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling.</p> <p><b>Level 2 [5-7 marks]</b> Candidates will make a limited discussion of at least <b>two</b> ways the Health Act 1999 has affected provision of services for older people. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 [0-4 marks]</b> Candidates will identify ways the Health Act 1999 has affected provision of services for older people. Understanding will be superficial. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>(a) established Primary Care Trusts (b) improved quality of care (c) established commission for Health Improvement (d) improved co-operation within the NHS (e) improved co-operation between the NHS and health related services (f) improved flexibility between the NHS and health related services (g) improved monitoring of the quality of health care (h) increased flexibility of provision (i) seamless provision of care (j) single provider can deliver both health and local authority services (k) packages of care can be developed to suit individual's needs (l) improved access to services</p>		[10]

## F920 Understanding human behaviour

Question	Expected Answer	Mark	Total
1 (a)	<p><b>One</b> mark for each correct response, FIVE required from</p> <ul style="list-style-type: none"> <li>• Freud/Erikson</li> <li>• Maslow/Rogers</li> <li>• Piaget/Vygotsky</li> <li>• Pavlov/Skinner</li> <li>• Tajfel/Latane/Bandura</li> </ul> <p><i>Accept any other appropriate theorist</i></p>	5x1	[5]
(b)	<p><b>Level 3 response: 8-10 marks</b> Candidates can give a detailed outline of the theory indicating a clear understanding across broad aspects of the theory. <i>The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. Sentences and paragraphs are for the most part relevant, with the material presented in a balanced, logical and coherent manner. There may be occasional errors of grammar, punctuation and spelling.</i></p> <p><b>Level 2 response: 4-7 marks</b> Candidates can give a brief outline of the theory. The candidate has shown limited ability to organise the relevant material, <i>using some appropriate health, social care and early year's terminology. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Level 1 response: 0-3 marks</b> Candidates identify one or two aspects of the theory. <i>The candidate has used little, if any, appropriate health, social care and early years terminology. Sentences and paragraphs have limited coherence and structure, often being of doubtful relevance to the main focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><b>Eysenck/Cattell</b></p> <ul style="list-style-type: none"> <li>✓ identified traits – may name</li> <li>✓ born with/cannot change/genes</li> <li>✓ can be measured with personality tests, etc</li> <li>✓ predict future behaviours of people – basis for psychometric testing</li> </ul> <p><i>Accept any other appropriate theorist</i></p>		[10]

Question	Expected Answer	Mark	Total
2 (a)	<p><b>Level 3: 5 marks</b>            Accurately named condition and a full explanation of impact on physical <b>and</b> intellectual development which clearly indicates a high level of understanding. <i>The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. Sentences and paragraphs are for the most part relevant, with the material presented in a balanced, logical and coherent manner. There may be occasional errors of grammar, punctuation and spelling.</i></p> <p><b>Level 2: 3-4 marks</b>            Named condition showing some understanding. Links made to both physical and intellectual effects identified, but lacking in detail. <i>The candidate has shown limited ability to organise the relevant material, using some appropriate health, social care and early year's terminology. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Level 1: 0-2 marks</b>            Identify either physical or intellectual effects. Basic comments made lacks clarity and coherence. <i>The candidate has used little if any appropriate health, social care and early years terminology. Sentences and paragraphs have limited coherence and structure, often being of doubtful relevance to the main focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><b>P – Physical</b>            p unable to take part in physical activity            p appearance eg those specific to condition            p visual/hearing impairment            p physical tics            p coughing/breathing difficulties            p any other suitable response</p> <p><b>I – Intellectual</b>            i missing school            i literacy/numeracy problems            i SEN            i inability to concentrate            i employment issues            i any other suitable response</p>		[5]

Question	Expected Answer	Mark	Total
2 (b)	<p><b>Level 3: 12-15 marks</b> Candidate clearly assesses (both positive and negative) <b>at least two</b> environmental and socio-economic factors in a planned and logical sequence using appropriate health, social care and early terminology accurately. Clear links to physical and intellectual development. <i>Sentences and paragraphs are for the most part relevant, with the material presented in a balanced and coherent manner which addresses the question. There may be occasional errors of grammar, punctuation and spelling.</i></p> <p><b>Level 2 response: 7-11 marks</b> Candidate describes <b>at least two</b> socio-economic and environmental factors and attempts to assess their effects on physical and intellectual development. <i>Answer is organised and uses some appropriate terminology. Sentences and paragraphs may contain irrelevancies. There may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Note:</b> sub-max of 8 for one factor assessed well <b>or only</b> physical or intellectual <b>or only</b> positive or negative.</p> <p><b>Level 1 response: 0-6 marks</b> Candidate has identified <b>at least one</b> way in which one or more factors could effect physical and/or intellectual development <i>using little, if any, appropriate terminology. Sentences and paragraphs have limited coherence and structure, with limited relevance to the main focus of question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><i>Use positive (+) and negative (-) annotations, along with the appropriate letter.</i></p> <p><b>Water pollution</b> w may mention rivers and canals polluted by chemicals etc w impact could include physical health w impact on physical development may be knock on effects of being ill and missing school therefore intellectual</p> <p><b>Air pollution</b> a motor vehicles, factories, chimneys eg asthma/ respiratory infections and consequences on physical development a ill health and premature death a positive factors – good environment – playing out in clean, safe community – physical development</p> <p><b>Noise pollution</b> n concentration n intellectual n emotional strain etc n may link to inside the home or external noises</p>		[15]

Question	Expected Answer	Mark	Total
	<p><b>Family/socialisation</b>  f can develop any area of skill through teaching, opportunities acting as role models etc eg swimming lessons etc</p> <p><b>Education</b>  e EPPE – effective provision of pre school education  e allows for development of physical/intellectual skills, wider range of resources, trained practitioners etc</p> <p><b>Housing</b>  h space for development, damp affecting health, cramped conditions  h in poor area affect playing outside – affecting physical skills  h study areas</p> <p><b>Culture</b>  c beliefs would become their own thus affecting skills due to participation in sports, academic focus and achievements etc</p> <p><b>Access to Health</b>  s preventative measures to impact on physical development  s health promotion to impact on mainly physical development</p> <p><b>Diet/nutrition</b>  d links to good diet and physical health, growth and development also aids concentration</p> <p><b>Income</b>  i family income to impact on resources to aid physical development/intellectual  i could be associated to social class – expectations and achievements</p> <p><i>Accept any other suitable response.  Annotate P – Physical, I - Intellectual</i></p>		

Question	Expected Answer	Mark	Total
3 (a)	<p><b>One</b> mark for each, FIVE required from</p> <ul style="list-style-type: none"> <li>✓ children are influenced by their environment such as type of parenting</li> <li>✓ culture and ethnicity such as traditions and beliefs</li> <li>✓ children are initially influenced by primary socialisation</li> <li>✓ the way in which people react to us influences our self concept (self fulfilling prophecy)</li> <li>✓ by comparing ourselves to others</li> <li>✓ education – interactions with others and feedback from others</li> <li>✓ awareness of own physical appearance/attributes – age, gender, body image, etc</li> <li>✓ as we get older our self concept becomes more complex and so is influenced by a wider variety of factors – beliefs, likes and dislikes, relationships etc</li> <li>✓ influenced by role models</li> </ul> <p><i>Accept any other suitable response</i></p>	5x1	<b>[5]</b>

Question	Expected Answer	Mark	Total
3 (b)	<p><b>Level 3: 12-15 marks</b> Candidate assesses impact on the individual showing a detailed understanding of self-concept. Impact on <b>at least three</b> areas of PIES clearly identified and developed. <i>Sentences and paragraphs are for the most part relevant, with the material presented in a balanced and coherent manner which addresses the question. There may be occasional errors of spelling, punctuation and grammar.</i></p> <p><b>Level 2: 7-11 marks</b> Candidate describes impact of a negative self concept on the individual; these effects show some understanding and consider <b>at least two</b> areas of PIES. <i>Answer is organised and uses some appropriate terminology. Sentences and paragraphs may contain some irrelevancies there may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Level 1: 0-6 marks</b> Candidate has identified <b>at least one</b> way in which one or more influences could impact on the individual using little, if any, appropriate terminology. <i>Sentences and paragraphs have limited coherence and structure, with limited relevance to main focus of question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><b>Physical</b> p self harming p poor posture p over reliance on make up/hairstyle/lack of self interest/ poor hygiene p avoiding eye contact p any other suitable response</p> <p><b>Intellectual</b> i not contribute in class i fear of failure i not trying i not wanting to stand out i any other suitable response</p> <p><b>Emotional</b> e sad, depressed, withdrawn, tearful, upset, bullied/bullying others e any other suitable response</p> <p><b>Social</b> s not mixing s no friends s withdrawn s not liked s any other suitable response</p>		[10]



Question	Expected Answer	Mark	Total
4 (a)	<p><b>Level 3: 8-10 marks</b>            Accurately named and detailed outline of the theory which clearly indicates high level of understanding. <i>Sentences and paragraphs are for the most part relevant, with the material presented in a balanced and coherent manner which addresses the question. There may be occasional errors of spelling, punctuation and grammar.</i></p> <p><b>Level 2: 5-7 marks</b>            Basic outline of theory. <i>Answer is organised and uses some appropriate terminology. Sentences and paragraphs may contain some irrelevancies there may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Level 1: 0-4 marks</b>            Basic comments which lack clarity and coherence. Likely to appear list like and muddled. <i>Sentences and paragraphs have limited coherence and structure, with limited relevance to main focus of question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><b>Freud</b></p> <ul style="list-style-type: none"> <li>✓ founder of modern psycho analytical theory - a mix of biological and some learning motivating social and emotional development/personality</li> <li>✓ psycho sexual - early years follows 3 phases, often overlapping - oral, anal and phallic. followed by latency and genital</li> <li>✓ mind consisted of conscious, pre conscious and unconscious</li> <li>✓ emotions and behaviour driven by id, ego and super ego – biological drives to be influenced/balanced by social pressures</li> <li>✓ early experiences within first 4 years of family life greatly influence personality development</li> <li>✓ as basic needs are satisfied (influence of carer) pleasure occurs and so becomes basic principle of life</li> <li>✓ suppression/too much focus can be dangerous to healthy development of personality</li> <li>✓ may explain any of following terms –</li> <li>✓ repression – forcing unpleasant memories into subconscious</li> <li>✓ regressions – reverting to earlier times when faced with threat</li> <li>✓ denial – refusing to accept reality</li> <li>✓ displacement – redirecting feelings to substitute object/person</li> <li>✓ projection – attributing own unacceptable feelings to someone else</li> <li>✓ sublimation – positive way of redirecting feelings/behaviours</li> <li>✓ rationalisation – justifying guilty feelings</li> </ul>		[10]

Question	Expected Answer	Mark	Total																											
	<p><b>Erikson</b></p> <ul style="list-style-type: none"> <li>✓ social and personality development but less emphasis on sexual drives more focus on psycho social</li> <li>✓ must take on and resolve stages/crises/dilemmas which are linked to changing social demands</li> <li>✓ may describe any of following stages:-</li> </ul> <table border="1"> <thead> <tr> <th>AGE</th> <th>CRISIS &amp; OUTCOMES</th> <th>INFLUENCES</th> </tr> </thead> <tbody> <tr> <td>0-1</td> <td>Trust v mistrust Hope v insecurity</td> <td>Main carer</td> </tr> <tr> <td>1-2</td> <td>Autonomy v shame/doubt Willpower/self esteem v shame/ doubt</td> <td>Parents</td> </tr> <tr> <td>3-5</td> <td>Initiative v guilt Sense of purpose v guilt over feelings</td> <td>Family</td> </tr> <tr> <td>6 - puberty</td> <td>Industry v inferiority Confidence/competence v inadequacy</td> <td>Neighbourhood/ school</td> </tr> <tr> <td>Adolescence - 18</td> <td>Identity v role confusion Trustworthy/reliable v insecure/suspicious</td> <td>Peers</td> </tr> <tr> <td>20's</td> <td>Intimacy v isolation Feeling loved v loneliness</td> <td>Sexual partners</td> </tr> <tr> <td>20-50's</td> <td>Generativity v stagnation Care/compassion v boredom/ self obsess</td> <td>Household/ society</td> </tr> <tr> <td>50+</td> <td>Integrity v despair wisdom/ satisfaction/ acceptance of death v regret/fear of death</td> <td>Mankind</td> </tr> </tbody> </table>	AGE	CRISIS & OUTCOMES	INFLUENCES	0-1	Trust v mistrust Hope v insecurity	Main carer	1-2	Autonomy v shame/doubt Willpower/self esteem v shame/ doubt	Parents	3-5	Initiative v guilt Sense of purpose v guilt over feelings	Family	6 - puberty	Industry v inferiority Confidence/competence v inadequacy	Neighbourhood/ school	Adolescence - 18	Identity v role confusion Trustworthy/reliable v insecure/suspicious	Peers	20's	Intimacy v isolation Feeling loved v loneliness	Sexual partners	20-50's	Generativity v stagnation Care/compassion v boredom/ self obsess	Household/ society	50+	Integrity v despair wisdom/ satisfaction/ acceptance of death v regret/fear of death	Mankind		
AGE	CRISIS & OUTCOMES	INFLUENCES																												
0-1	Trust v mistrust Hope v insecurity	Main carer																												
1-2	Autonomy v shame/doubt Willpower/self esteem v shame/ doubt	Parents																												
3-5	Initiative v guilt Sense of purpose v guilt over feelings	Family																												
6 - puberty	Industry v inferiority Confidence/competence v inadequacy	Neighbourhood/ school																												
Adolescence - 18	Identity v role confusion Trustworthy/reliable v insecure/suspicious	Peers																												
20's	Intimacy v isolation Feeling loved v loneliness	Sexual partners																												
20-50's	Generativity v stagnation Care/compassion v boredom/ self obsess	Household/ society																												
50+	Integrity v despair wisdom/ satisfaction/ acceptance of death v regret/fear of death	Mankind																												

Question	Expected Answer	Mark	Total
4 (b)	<p><b>Level 3: 8-10 marks</b> Candidates give a detailed explanation of aspects of the theory which <b>relate</b> to feelings of despair in older people. <i>The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. Sentences and paragraphs are for the most part relevant, with the material presented in a balanced and coherent manner which addresses the question. There may be occasional errors of spelling, punctuation and grammar.</i></p> <p><b>Level 2: 5-7 marks</b> Candidates give a description of aspects of the theory which attempts to <b>relate</b> to feelings of despair in older people. <i>The candidate has shown limited ability to organise the relevant material, using some appropriate health, social care and early years terminology. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</i></p> <p><b>Level 1: 0-4 marks</b> Candidates identify aspects of the theory which may or may not relate to feelings of despair in older people. <i>Has used limited, if any, appropriate health, social care and early years terminology. Sentences and paragraphs have limited coherence and structure, with limited relevance to main focus of question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</i></p> <p><b>Freud</b></p> <ul style="list-style-type: none"> <li>✓ fixation in early years</li> <li>✓ feelings of unhappy childhood re-emerge as people are again dependent on others, leading to feelings of despair/depression</li> <li>✓ defence mechanism</li> </ul> <p><b>Erikson</b></p> <ul style="list-style-type: none"> <li>✓ dissatisfaction with life</li> <li>✓ not achieved what they wanted, hence despair</li> <li>✓ links with childhood and coming through stages/dilemmas with a negative approach that affects later life</li> </ul> <p><i>Accept any other suitable response</i></p>		<b>[10]</b>

Question	Expected Answer	Mark	Total
5	<p><b>Level 4: 20-25 marks</b> Candidates give a clear outline of a relevant theory. Detailed evaluation with positive and negative application of the theory, clearly linked to the focus of the question. Conclusion will be drawn for full marks. <i>The answer has a clearly defined structure, using appropriate health, social care and early years terminology confidently and accurately. Sentences and paragraphs, consistently relevant, are well structured in a way that addresses the question. There will be few, if any, errors of grammar, punctuation and spelling.</i></p> <p><b>Level 3: 14-19 marks</b> Candidates give a clear outline of theory with some evaluation, including positive and negative application of the theory. <i>The answer is relevant in a well-planned and logical sequence, using some appropriate health, social care and early years terminology accurately. Sentences and paragraphs are used to address the question. There may be occasional errors of spelling, punctuation and grammar.</i></p> <p><b>Level 2: 7-13 marks</b> A brief outline of an appropriate theory. Identification of either positive and/or negative applications of the theory. <i>There is a limited ability to organise relevant material, using some appropriate health, social care and early years terminology. Sentences and paragraphs are not always relevant, with the material presented in a way that does not fully address the question. There may be noticeable errors of grammar, punctuation and spelling.</i> <b>Note:</b> sub-max of <b>10</b> for theory only.</p> <p><b>Level 1: 0-6 marks</b> A brief outline of a relevant theory. Little, if any, attempt to apply or link theory to practice. Positive and/or negative applications of theory may be attempted, <i>using some appropriate health, social care and early years terminology. May not have related it to the question. Sentences and paragraphs have limited coherence and structure often being doubtful in relevance to the main focus of question. There may be noticeable errors of grammar, punctuation and spelling.</i></p>		

Question	Expected Answer	Mark	Total
	<p><b>Tajfel</b></p> <ul style="list-style-type: none"> <li>✓ may mention observation linked to group identity – the impact of the early years workers as members of the primary GROUP</li> <li>✓ may discuss the fact that parents will be members of primary GROUP and so importance of working with parents to raise their awareness of issues</li> <li>✓ when identifying with this group the child is likely to be influenced by the actions of those within the group and so their personal identity will be influenced by ‘observing’ group behaviours. Examples should be linked to social norms associated to groups eg gender roles – example may be copying the skills of the primary carer which may be influenced by their gender or if belonging to a ‘social class’ may be restricted to expectations associated with the social norms of this class</li> <li>✓ may discuss importance of grouping children so will have positive identities to associate with</li> </ul> <p><b>Latane</b></p> <ul style="list-style-type: none"> <li>✓ humans often copy others – therefore discuss importance of ensuring all role models are behaving acceptably (including parents and siblings)</li> <li>✓ children wishing to conform to fit expectations of primary carer – any example of any skill to develop to please/fit expectation of carer. how carer can therefore influence development of desired skills/behaviours. could discuss relevant play activities which allows carers to demonstrate desired positive behaviours</li> <li>✓ moral values are usually learnt in this way</li> </ul> <p><b>Bandura</b></p> <ul style="list-style-type: none"> <li>✓ role model - they will be a more effective role model if the child sees them as <ul style="list-style-type: none"> <li>- someone with similar values</li> <li>- more powerful</li> <li>- warm and loving</li> <li>- liked and respected</li> </ul> </li> <li>✓ The child is then more likely to copy behaviours which - <ul style="list-style-type: none"> <li>- are rewarded</li> <li>- are noticeable</li> <li>- can be easily copied</li> </ul> </li> <li>✓ therefore would expect candidates to suggest ways in which the likely role models are demonstrating positive behaviours and values - important that these can be easily noticed and copied</li> <li>✓ ways to ensure children experience noticeable rewards</li> </ul> <p><i>Accept any other suitable response</i>  <i>Annotate + positive and - negative</i></p>		

## F921 Anatomy & physiology in practice

Question	Expected Answer	Mark	Total
1 (a)	<p><b>One</b> mark for each identification and <b>one</b> mark for function</p> <p>1 Urethra</p> <ul style="list-style-type: none"> <li>• Conveys ejaculate in the reproduction process</li> <li>• Structure through which urine passes</li> </ul> <p>2 Penis</p> <ul style="list-style-type: none"> <li>• Carries the urethra to allow urine to exit the body</li> <li>• Used in copulation to transfer sperm/ejaculate</li> </ul> <p>3 Testicle</p> <ul style="list-style-type: none"> <li>• Production of sperm</li> <li>• Produce hormones</li> <li>• Produce fluid to transport sperm</li> <li>• Storage of sperm</li> </ul> <p>4 Seminal vesicle / Accessory gland</p> <ul style="list-style-type: none"> <li>• Secrete a solution used to neutralise acids that might kill sperm. It is also a nutrient fluid.</li> </ul> <p>5 Prostate</p> <ul style="list-style-type: none"> <li>• Provides a nutrient fluid for sperm (which they use in energy production)</li> <li>• Production of prostaglandin</li> </ul> <p>6 Vas Deferens</p> <ul style="list-style-type: none"> <li>• Stores sperm</li> <li>• Conveys sperm to the epididymis</li> </ul> <p>7 Epididymis</p> <ul style="list-style-type: none"> <li>• Helps to improve sperm motility</li> <li>• Used for storage of up to a month</li> <li>• Maturation of sperm</li> </ul>	7x1 7x1	[14]
(b)	<p><b>One</b> mark for either of</p> <ul style="list-style-type: none"> <li>• sperm have to remain cool to survive</li> <li>• internal body temperature too high for sperm to survive</li> </ul>	1x1	[1]

Question	Expected Answer	Mark	Total
2 (a)	<p><b>One mark for each difference, THREE required</b></p> <ul style="list-style-type: none"> <li>• veins are low pressure vessels, arteries are high pressure</li> <li>• veins carry deoxygenated blood, arteries carry oxygenated blood</li> <li>• veins have valves, arteries do not</li> <li>• wall of a vein is two layers of tissue, arteries have three layers</li> <li>• veins carry blood back to the heart, arteries carry blood away</li> <li>• Arteries can be deeper and not superficial</li> <li>• Arteries have a pulse, veins do not</li> </ul>	3x1	<b>[3]</b>
(b)	<p><b>Level 3 [10-12 marks]</b> Candidates will describe the possible causes of the dysfunction and explain how the effects may be reduced. They will demonstrate the ability to present their answer in a planned and logical sequence using appropriate and accurate terminology. Sentences and paragraphs are for the most part relevant and material will be presented in a balanced, logical and coherent manner that addresses the question. There may be occasional errors in the use of grammar, punctuation and spelling.</p> <p><b>Level 2 [5-9 marks]</b> Candidates will describe the possible causes of the dysfunction and describe how the effects may be reduced. They will demonstrate limited ability to organise their answer, using some appropriate terminology. Sentences and paragraphs will not always be relevant and material will be presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 [0-4 marks]</b> Candidates will identify the possible causes of the dysfunction and explain how the effects may be reduced. The description will be limited with little evidence of the use of appropriate terminology. Sentences and paragraphs have limited coherence and structure, with little relevance to the main focus of the question. Errors in the use of grammar, punctuation and spelling may be noticeable and obtrusive.</p> <p><b>Dysfunctions:</b></p> <ul style="list-style-type: none"> <li>• heart attacks</li> <li>• high blood pressure (hypertension)</li> <li>• CAD</li> <li>• hereditary conditions</li> </ul>	12	<b>[12]</b>

Question	Expected Answer	Mark	Total
	<p><b>Causes of the Dysfunctions:</b></p> <ul style="list-style-type: none"> <li>• alcohol</li> <li>• smoking</li> <li>• poor diet</li> <li>• lack of exercise</li> <li>• stress</li> <li>• hypertension</li> <li>• hereditary causes</li> <li>• plaque formation</li> <li>• recreational drugs</li> </ul> <p><b>Hypertension (preventative measures)</b></p> <p>(a) every adult near or past middle age should 'know their height, weight, blood pressure and cholesterol levels</p> <p>(b) and have regular blood pressure tests if there is a family tendency for hypertension</p> <p>(c) this way, treatment can be started before any complications arise</p> <p><i>Change their lifestyle:</i></p> <ul style="list-style-type: none"> <li>• stop smoking</li> <li>• lose weight</li> <li>• exercise regularly</li> <li>• cut down on alcohol</li> <li>• eat a varied diet e.g. five a day, omega 3 rich foods, more fibre, low fat (LDL)</li> <li>• reduce stress by trying different relaxation techniques, or by avoiding stressful situations.</li> </ul> <p><b>CAD</b></p> <p>(a) don't smoke - nicotine raises the blood pressure because it causes the body to release adrenaline</p> <p>(b) which makes your blood vessels constrict and your heart beat faster and blood thickens</p> <p>(c) after 2 or 3 years of not smoking the risk of CHD will be as low as the risk of a person who never smoked</p> <p><b>Control blood pressure</b></p> <p>(a) exercise - regular exercise can make the heart stronger and reduce the risk of heart disease</p> <p>(b) exercise can also help high blood pressure</p> <p>(c) exercise at least 4 to 6 times a week for at least 30 minutes each time</p> <p>(d) low dose of aspirin each day</p> <p>(e) aspirin helps prevent CHD by thinning the blood</p> <p>(f) vitamin supplements - some studies have shown that vitamin E may lower a person's risk of having a heart attack - other vitamins may also help protect against CHD</p> <p>(g) eat a healthy diet - add foods to your diet that are low in cholesterol and saturated fats, because the body turns saturated fats into cholesterol</p>		



Question	Expected Answer	Mark	Total
	<p><b>Hereditary conditions</b>            (a) regular health checks            (b) genetic screening            (c) all of the above mentioned prevention methods</p> <p><b>Drinking</b>            (a) reduce intake to an acceptable level 21/28 units            (b) avoid binge drinking            (c) drink products with antioxidants in them eg red wine</p> <p><b>Smoking</b>            (a) reduce/give up            (b) avoid smoky confined places            (c) regular health checks</p> <p>Surgical Interventions to reduce</p> <ul style="list-style-type: none"> <li>• CABG</li> <li>• Stenting</li> <li>• Coronary artery dilatation</li> <li>• Pace maker (if applicable)</li> </ul> <p>Drug therapy            Aspirin            Statins            Thrombolytic drugs            Warfrin (anti-coagulants)</p> <p><i>Some of the above actions will be interchangeable.</i></p>		

Question	Expected Answer	Mark	Total
3 (a)	<p>One mark for each, FIVE required</p> <ol style="list-style-type: none"> <li>1 liver</li> <li>2 gall bladder</li> <li>3 appendix/vermiform appendix</li> <li>4 stomach</li> <li>5 pancreas / pancreatic duct</li> </ol>	5x1	[5]
(b)	<p>Candidate will describe the process of digestion in the stomach and the first third of the small bowel.</p> <p><i>Level 2 [4-5 marks]</i> Candidates will provide a fully developed description that includes accurate terminology. Description of effects will be accurate.</p> <p><i>Level 1 [0-3 marks]</i> Candidate will provide a simple description. Their use of appropriate terminology will be limited. Description of effects may be limited.</p> <p><b>Process</b></p> <p>Stomach:</p> <ol style="list-style-type: none"> <li>(a) stomach fluid is very acidic this stops the action of salivary amylase</li> <li>(b) and is harmful to bacteria reducing the chance of infection</li> <li>(c) food remains in stomach for 1-4 hours constant rhythmic contractions of the muscles in the stomach wall continually churns the food and mixes it with gastric juice. This is produced by the gastric glands of the stomach wall</li> </ol> <p>Gastric juice comprises:</p> <ul style="list-style-type: none"> <li>• water</li> <li>• hydrochloric acid proteases (which can work in the low pH)</li> <li>• mucus</li> </ul> <ul style="list-style-type: none"> <li>• the resulting mixture of partially digested foods in an acidic fluid is called chime.</li> <li>• note that the mucus provides a protective layer over the wall of the stomach reducing the amount of damage to the wall as a result of the peptidases and the acid.</li> <li>• however the cells lining the wall of the stomach have a very high turnover rate</li> </ul>	5x1	[5]

Question	Expected Answer	Mark	Total
	<p><b>Duodenum and Ileum:</b></p> <ul style="list-style-type: none"> <li>• the small intestine is divided into the duodenum and ileum these are the site of the remainder of chemical digestion and the beginning of absorption</li> <li>• the duodenum receives secretions from the liver and the pancreas</li> <li>• the liver produces bile</li> <li>• this is an alkaline solution (so neutralises the stomach acid) containing bile salts</li> <li>• bile salts emulsify lipids (break large lipid droplets into many smaller ones) increasing the surface area for digestion</li> <li>• bile is stored in the gall bladder until it is required.</li> <li>•</li> <li>• the pancreas produces pancreatic juice</li> <li>• this is an alkaline solution of enzymes: amylase and peptidases and lipases</li> <li>• bile and pancreatic juice and both released into the bile duct which leads to the pancreas</li> <li>• the results of the action of pancreatic juice and bile are: <ul style="list-style-type: none"> <li>- fatty acids and glycerol, amino acids, disaccharides</li> </ul> </li> <li>• the disaccharides are then converted to monosaccharides by enzymes embedded in the wall of the small intestine.</li> </ul> <p><i>Candidates will use any of the above to form an accurate response of physical and chemical processes.</i></p>		

Question	Expected Answer	Mark	Total
3 (c)	<p><b>One mark for identifying ONE dysfunction from:</b></p> <p><i>Level 2 [3-4 marks]</i> Candidates will provide a fully developed description of appropriate treatment that includes accurate terminology. Description of effects will be accurate.</p> <p><i>Level 1 [0-2 marks]</i> Candidate will provide a simple description. Their use of appropriate terminology will be limited. Description of effects may be limited.</p> <ul style="list-style-type: none"> <li>• IBS</li> <li>• stomach ulcers</li> <li>• gall stones</li> <li>• coeliac disease</li> <li>• cancer</li> </ul> <p><b>Treatment</b></p>	1x1 4x1	<b>[5]</b>
	<p><b>IBS</b></p> <p>(a) people whose main symptom is diarrhoea should avoid potential irritants such as tea, coffee, alcohol, spicy food and the artificial sweetener sorbitol, often found in sugar-free gum. For people with constipation, it is important to eat plenty of fibre, such as fruit and vegetables. If bloating or wind is a problem, cutting out gas-producing foods such as beans can help</p> <p>(b) to find out if any foods are triggers for IBS, it may help to cut out certain foods to see if symptoms improve, then reintroduce them one at a time, to see if symptoms return</p> <p>(c) it's important to drink sufficient fluids, (around six to eight glasses of water a day or so that your urine is no darker than straw coloured). For people with constipation this helps the fibre to work; for people with diarrhoea it replaces lost fluids</p> <p>(d) taking regular, moderate exercise helps maintain bowel habit</p> <p>(e) some people find complementary treatments such as acupuncture help, although there is little scientific proof of their effectiveness</p> <p>(f) if stress triggers IBS, psychological treatment or learning stress management techniques may be beneficial. It may help to keep a diary comparing symptoms with life events. If certain events are identified as triggers, it may be easier to deal with the stress of them. Regular exercise may also help reduce stress</p> <p>(g) for people with diarrhoea, using anti-diarrhoea medicines such as loperamide (eg Imodium) may help in the short term. They should be taken as needed, not on a regular basis</p> <p>(h) for constipation, a bulk-forming laxative, such as bran or ispaghula husk (eg Fybogel), can be helpful if it is hard to get enough fibre. Lactulose is an alternative to bulk-forming agents. It increases the amount of water absorbed in the large bowel. Laxatives that stimulate the bowels (eg senna) should not be used for more than a</p>		

	<p>week at a time, because they can cause constipation in the long term</p> <p>(i) antispasmodic medicines, such as mebeverine hydrochloride (eg Colofac) and peppermint oil capsules, may help with pain and wind</p> <p><b>Stomach Ulcers</b></p> <p>(a) a number of lifestyle changes may reduce the symptoms of a peptic ulcer, and speed up healing.</p> <p>(b) avoid food and drink that seems to cause more severe symptoms such as spicy foods, coffee and possibly alcohol</p> <p>(c) stop smoking</p> <p>(d) lose excess weight if overweight</p> <p>(e) stop taking NSAIDs and use paracetamol instead. If this is not possible, contact your GP for advice. For people with ulcers, a type of NSAID called a cyclo-oxygenase-2 selective inhibitor (cox-2-inhibitor, eg rofecoxib) may cause less stomach irritation</p> <p>(f) in addition to recommending lifestyle changes, if applicable, your doctor may prescribe a course of tablets to reduce the amount of acid produced by the stomach</p> <p>(g) two main groups of medicine are available to do this. The first of these are called H<sub>2</sub>-antagonists. Examples include ranitidine (eg Zantac) and cimetidine (eg Tagamet). The second group are known as proton pump inhibitors, and tend to have a more powerful effect in reducing the production of stomach acid. Examples include omeprazole (eg Losec) and lansoprazole (Zoton)</p> <p>(h) finally surgery as a last resort in the form of partial gastrectomy</p> <p><b>Gall Stones</b></p> <p>(a) conventional treatment of gallstones is dependant on the size, associated symptoms, and likelihood of developing complications</p> <p>(b) if individuals are asymptomatic, then no treatment is recommended</p> <p>(c) if the individual is experiencing symptoms, then surgery is the likely recommendation, especially if complications have the possibility of developing</p> <p>(d) laparoscopic cholecystectomy has become a very common and routine medical procedure</p> <p>(e) to avoid surgery, bile acids can be prescribed</p> <p>(f) treatment with bile acids has been shown to reduce or dissolve the stones if administered for long periods of time, though side effects are present</p> <p>(g) past treatment option, such as shock wave lithotripsy and methyl-tert-butyl ether, are not utilised as often due to the use of laparoscopic surgery</p> <p><i>Any other appropriate treatment.</i></p>	
--	--	--

Question	Expected Answer	Mark	Total
4 (a)	<p>One mark for each, FOUR required</p> <p>1 kidney 2 ureter 3 urethra 4 bladder</p>	4x1	[4]
(b)	<p><i>Level 2 [4-5 marks]</i> Candidates will provide a detailed outline of the process of urine production in the kidney that includes accurate terminology. Responses are likely to be well developed and follow a logical process.</p> <p><i>Level 1 [0-3 marks]</i> Candidate will provide an accurate outline at the upper end, with a more basic outline at the lower end. Their use of appropriate terminology will be limited, with responses tending to be muddled.</p> <p>(a) high pressure blood enters the kidney (b) where it is filtered under pressure in the nephrons (c) it then enters the renal tubule (1) and the loop of Henle (d) where useful substances are absorbed (e) and other waste is secreted (f) into it by a network of blood vessels (g) excess water is absorbed at this point (h) about 99% percent of the filtrate is absorbed in this way (i) the remainder drains into the pelvis of the kidney (j) and exits via the ureter</p>		[6]

Question	Expected Answer	Mark	Total
4 (c)	<p><b>Level 3 [11-15 marks]</b> Candidates will identify one dysfunction of the renal system and describe in detail how the dysfunction could be diagnosed and treated. They will demonstrate the ability to present their answer in a planned and logical sequence using appropriate and accurate terminology. Sentences and paragraphs are for the most part relevant and material will be presented in a balanced, logical and coherent manner that addresses the question. There may be occasional errors in the use of grammar, punctuation and spelling.</p> <p><b>Level 2 [6-10 marks]</b> Candidates will identify one dysfunction of the renal system and give a basic outline of how the dysfunction could be diagnosed and/or treated. They will demonstrate limited ability to organise their answer, using some appropriate terminology. Sentences and paragraphs will not always be relevant and material will be presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 [0-5 marks]</b> Candidates will identify one dysfunction of the renal system and identify how the dysfunction could be diagnosed and/or treated. The description will be limited with little evidence of the use of appropriate terminology. Sentences and paragraphs have limited coherence and structure, with little relevance to the main focus of the question. Errors in the use of grammar, punctuation and spelling may be noticeable and obtrusive.</p> <p><b>Dysfunctions:</b></p> <ul style="list-style-type: none"> <li>• renal failure or impaired function due to external influences or neoplasm</li> <li>• renal infection/urinary infection</li> <li>• renal calculi/stones</li> <li>• prostate dysfunction</li> <li>• poly-cystic kidney disease</li> </ul> <p><b>Diagnosis (candidate will provide a description of):</b></p> <ul style="list-style-type: none"> <li>• physical examination</li> <li>• plain x-rays</li> <li>• IVP/IVU</li> <li>• renal biopsy</li> <li>• ultrasound</li> <li>• CAT scan</li> <li>• MRI scan</li> <li>• nuclear med scan</li> <li>• blood test</li> <li>• urine test</li> <li>• uroscopy</li> </ul> <p>Candidate will provide a basic description of how the test works.</p>		[15]

Question	Expected Answer	Mark	Total
	<p><b>Treatment</b></p> <p><b>Renal Transplant</b></p> <ul style="list-style-type: none"> <li>(a) the operation lasts about four hours</li> <li>(b) and is carried out under a general anaesthetic</li> <li>(c) a donor kidney that has been cross match for acceptability is removed from the donor</li> <li>(d) the surgeon will make an incision in the abdomen either on the right or left side depending on where to insert the kidney</li> <li>(e) they do not usually remove failed kidneys unless they are causing problems</li> <li>(f) the new kidney will be placed above the pelvic brim and connected to the iliac vessels so that the kidney is supplied with blood</li> <li>(g) the ureter is then connected to the bladder so that urine can drain away</li> <li>(h) a stent (plastic tube) may be inserted to stop the ureter blocking</li> <li>(i) the kidney usually starts functioning immediately</li> <li>(j) anti rejection drugs are taken by the patient to reduce the risk of rejection</li> </ul> <p><b>Dialysis (haemodialysis and peritoneal)</b></p> <p><b>Hemodialysis</b></p> <ul style="list-style-type: none"> <li>(a) in a patient suffering from temporary or permanent kidney failure, cleansing of the blood can be done with an artificial kidney machine; this is known as haemodialysis</li> <li>(b) two plastic tubes, one connected to an artery and one to a vein, are implanted in the patient's arm or leg</li> <li>(c) during dialysis, which can take three to five hours per treatment, blood from the artery tube enters the machine and comes into contact with a thin membrane</li> <li>(d) wastes from the blood pass through the membrane into circulating fluid on the other side of the membrane</li> <li>(e) the blood cells themselves cannot cross the membrane</li> <li>(f) the cleaned blood is then piped back into the patient through the vein tube</li> </ul> <p><b>Peritoneal Dialysis</b></p> <ul style="list-style-type: none"> <li>(a) in peritoneal dialysis, the patient's own peritoneum (lining of the abdominal cavity) is used as the dialysis membrane</li> <li>(b) a sterile plastic catheter (tube) is passed into the abdominal cavity, and a solution of glucose (a form of sugar) and mineral salts is periodically injected into and withdrawn from the cavity</li> <li>(c) the fluid comes into contact with delicate blood vessels in the peritoneum</li> <li>(d) because of the different in concentration of certain chemical elements in the blood and the dialysis solution, wastes from the blood are forced through the membrane of the peritoneal wall</li> </ul>		



Question	Expected Answer	Mark	Total
	<p>(e) the dialysis liquid is periodically withdrawn and replaced with a fresh solution</p> <p><b>Lithotripsy</b></p> <p>(a) the use of sound waves to destroy renal calculi</p> <p>(b) can be done by immersing the patient in a tank of water as the acoustic couple</p> <p>(c) surgically an ultrasound probe is used to blast the calculi in situ</p> <p>(d) uroscopic removal off stones is done by using a snare or basket in theatre and under anaesthetic</p> <p>(e) surgical removal of stones under x-ray or ultrasound control either using a fibre optic laparoscope</p> <p>(f) diet and fluids can be controlled; reducing protein helps reduce the problems in renal failure as does reducing fluids</p> <p>(g) increasing fluids can help in the flushing out of small renal calculi</p> <p>(h) drugs, diuretics antibiotics, anti inflammatory drugs to:</p> <ul style="list-style-type: none"> <li>- increase urine production to move stones</li> </ul> <p>(i) treat infections</p> <p>(j) reduce inflammation.</p> <p><i>Any other appropriate treatment.</i></p>		

Question	Expected Answer	Mark	Total
5	<p><b>Level 4 [24-30 marks]</b> Candidates will evaluate at least three from the <b>physical, intellectual, emotional and social</b> effects of a cardiac procedure or surgery on the health and well being of the recipient. They will demonstrate the ability to present their answer in a well-planned and logical manner, with a clearly defined structure. They will use appropriate terminology confidently and accurately. Sentences and paragraphs will directly address the question in a consistent, relevant and well-structured way. There will be few, if any, errors in the use of grammar, punctuation and spelling.</p> <p><b>Level 3 [16-23 marks]</b> Candidates will evaluate at least two from the <b>physical, intellectual, emotional and social</b> effects of a cardiac procedure or surgery on the health and well being of the recipient.. They will demonstrate the ability to present their answer in a planned and logical sequence using appropriate and accurate terminology. Sentences and paragraphs are for the most part relevant and material will be presented in a balanced, logical and coherent manner that addresses the question. There may be occasional errors in the use of grammar, punctuation and spelling.</p> <p><b>Level 2 [8-15 marks]</b> Candidates will explain/describe at least two from the <b>physical, intellectual, emotional and social</b> effects of a cardiac procedure or surgery on the health and well being of the recipient. They will demonstrate limited ability to organise their answer, using some appropriate terminology. Sentences and paragraphs will not always be relevant and material will be presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 [0-7 marks]</b> Candidates will <b>identify/describe effects</b> of a cardiac procedure or surgery on the health and well being of the recipient. The description will be limited with little evidence of the use of appropriate terminology. Sentences and paragraphs have limited coherence and structure, with little relevance to the main focus of the question. Errors in the use of grammar, punctuation and spelling may be noticeable and obtrusive.</p>	30	30

Question	Expected Answer	Mark	Total
	<p><b>Physical Effects</b></p> <p>p1 excessive perspiration, especially at night, may be experienced</p> <p>p2 blurring of vision may be experienced whilst in hospital</p> <p>p3 a combination of surgery, medication, loss of appetite and decreased mobility may cause constipation</p> <p>p4 loss of appetite is often experienced following surgery and, in the early stages of recovery, nausea commonly relates to the side effects of anaesthetic agents and medications</p> <p>p5 for one or two weeks following surgery, probably be more aware of heart beat</p> <p>p6 in valvular surgery, this awareness may be more prominent in regards to the clicking mechanism of the valve</p> <p>p7 some patients experience palpitations in the early phase post-cardiac surgery</p> <p>p8 generally such occurrences are treated with medication</p> <p>p9 mini strokes are also possible</p> <p>p10 in angiography, a bruise may form under the skin where the catheter was inserted, wound becomes infected, short angina-type pain during angiography</p> <p>p11 if dye is used to get x-ray pictures (angiogram) a hot, flushing feeling when the dye is injected, a warm feeling in the groin when the dye is injected – as if they have “wet themselves”</p> <p>p12 rarely an allergic reaction to the dye. A heart attack occurring during the procedure</p> <p>p13 the catheter may damage a coronary artery. If this occurs, the artery may be repaired by emergency heart surgery</p> <p>p14 a stroke is another rare complication</p> <p>p15 rarely some people (about 1 in 500) die during the procedure as a consequence of one of these serious complications</p> <p>p16 Improvements to mobility / physical performance</p> <p>p17 Improved immune system</p> <p>p18 Improved sex drive</p> <p><b>Intellectual Effects</b></p> <p>i1 after surgery concentration span is reduced it is a common occurrence following heart surgery and it usually will resolve within six weeks</p> <p>i2 occasional loss of memory</p> <p>i3 general lack of understanding of procedure, events and severity</p> <p>i4 improved ability to access education / long term concentration</p> <p><b>Emotional Effects</b></p> <p>e1 major surgery causes worry, stress, high emotions, physical tiredness and sometimes loss of confidence</p> <p>e2 mild depression is very common following discharge</p>		

Question	Expected Answer	Mark	Total
	<p>home and may occur quite unexpectedly</p> <p>e3 strange or disturbing dreams whilst in hospital and after discharge are also possible</p> <p>e4 feels that the transplant does not belong to them</p> <p>e5 feeling devalued</p> <p>e6 loss of self esteem / self worth / self concept</p> <p>e7 frustration</p> <p>e8 isolated</p> <p>e9 disempowered</p> <p>e10 long term improvements to the above</p> <p><b>Social Effects</b></p> <p>s1 improved and increased socialisation</p> <p>s2 ability to become more active</p> <p>s3 will be able to return to a more normal social life style</p> <p>s4 resume working activities without feeling inadequate</p> <p>Above comments can often be positively or negatively reflected over the short or long term.</p> <p><i>Accept any other reasonable response.</i></p>		

## F924 Social trends

Question	Expected Answer	Mark	Total
1 (a)	<p><b>One</b> mark for correct trend for marriage only. TWO required from</p> <ul style="list-style-type: none"> <li>• similar pattern for all marriages and first marriages – slight increase until early 1970's then steep decline with slight increase recently – do not award both</li> <li>• increase in remarriages until early 1970's since then the trend has been fairly stable</li> <li>• the number of first marriages and remarriages has become much more equal</li> <li>• overall decline in marriage rates throughout the period</li> <li>• overall decline in all marriages following an increase between 1950 and 1970</li> <li>• increase in remarriages particularly after 1970 but a levelling off since 1980</li> <li>• large decrease in first marriages since the late 1960's following a slight increase between 1950 and the mid 1960's</li> </ul>	2x1	[2]
(b)	<p><b>One</b> mark for correct identification and <b>one</b> mark for explanation. TWO required from</p> <ul style="list-style-type: none"> <li>• <b>does not include separations</b> – some of which may not lead to divorce but represent relationship breakdown</li> <li>• <b>does not include empty shell marriages or marriages where the relationship is no longer close or intimate</b> – difficult to measure such a qualitative aspect</li> <li>• <b>does not include breakdowns in cohabiting relationships</b> – increasingly important due to the rise in the number of people cohabitating</li> <li>• <b>only represents the official registered number of breakdowns</b> – unofficial numbers just as significant</li> <li>• <b>does not include the quality of relationships in marriage</b> – again a qualitative measurement difficulty</li> <li>• <b>may reflect higher expectations of marriage and not an increase in breakdown of relationships</b>- evidence of higher expectations today than in the past</li> </ul>	2x1 2x1	[4]

Question	Expected Answer	Mark	Total
1 (c)	<p><b>Level 3 response: 7 – 9 marks</b> Candidates will <b>explain at least one</b> reason in addition to legislation which link to the increase in divorce. They will address the issue of extent by indicating that legislation tends to follow from changes within society and not lead those changes. They will be able to present relevant material in a planned and logical sequence using appropriate terminology. Sentences and paragraphs are relevant with the material presented in a balanced and logical manner which addresses the question. There may be occasional errors of spelling, punctuation and grammar.</p> <p><b>Level 2 response: 4 - 6 marks</b> Candidates will <b>describe at least one</b> reason in addition to legislation which links closely to the increase in divorce, or they will describe in depth the relevant legislation. At the upper end they will show an awareness that legislation offers the opportunity to divorce rather than be the cause of the rise. There will be limited ability to organise relevant material using some appropriate terminology. Sentences and paragraphs are not always relevant with the material presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 response: 0 – 3 marks</b> Candidates are likely to <b>identify</b> divorce in general terms without focusing upon the question. The answer is likely to read as a list form and is unlikely to be structured towards the specific question. Sentences and paragraphs have limited coherence and structure often being of doubtful relevance to the question. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <ul style="list-style-type: none"> <li>• reference to some of the following points is required to place alongside the changes in divorce legislation</li> <li>• secularisation of marriage: A</li> <li>• changes in the economic status of women: B</li> <li>• changes in women’s expectations of marriage: C</li> <li>• social acceptance of divorce: D</li> <li>• longer life expectancy means couples have more time to grow apart: E</li> <li>• the rise of individualism: F</li> <li>• the decline of the extended family leads to isolation and less emotional support from the wider family: G</li> </ul>		[9]

Question	Expected Answer	Mark	Total
2 (a)	<p>One mark for identification and one mark for explanation, TWO required</p> <ul style="list-style-type: none"> <li>• <b>children are more likely to be placed by courts with divorced mother than father-</b> thus leading to higher numbers</li> <li>• <b>society expects women to have more responsibility for their children than their ex partner</b> – pressure from society norms</li> <li>• <b>women’s employment is likely to be more flexible so that children can be placed with them-</b> women work more part time and in jobs which fit in around childcare arrangements</li> <li>• <b>men are less likely to be willing or able to take full responsibility for their children in a relationship breakdown</b> – male socialisation has led to this situation</li> </ul>	2x2	<b>[4]</b>
(b)	<p>One mark for correct answer</p> <p>Accept reconstituted or re – ordered family or blended</p>	1x1	<b>[1]</b>

Question	Expected Answer	Mark	Total
2 (c)	<p><b>Level 3 response 8 – 10 marks</b> Candidates will <b>outline at least two</b> advantages <b>and</b> disadvantages in depth. Candidates will suggest that the situation is likely to be linked to the age of the children and their relationship with the parent they are moving from. They will be able to present material in a planned and logical sequence using appropriate terminology. Sentences and paragraphs will be presented in a balanced and logical manner which addresses the question. There may be occasional errors of grammar, punctuation and spelling.</p> <p><b>Level 2 response 5 – 7 marks</b> Candidates will <b>outline at least one</b> advantage <b>and</b> disadvantage but there is likely to be an imbalance. There will be limited ability to organise relevant material using some appropriate terminology. Sentences and paragraphs are not always relevant with the material presented in a way that does not always address the question. There may be noticeable errors of punctuation, grammar and spelling.</p> <p><b>Level 1 response 0 – 4 marks</b> Candidates are likely to <b>describe</b> step-families without directly referring to the question or they may identify one or two points but not specifically refer to advantages and disadvantages. Sentences and paragraphs will have limited coherence and structure, often being of doubtful relevance to the question. Errors of punctuation, grammar and spelling may be noticeable and intrusive.</p> <p><b>Advantages:</b> p1 a more stable environment to develop in p2 possibly a move away from a relationship based upon mistrust and unhappiness p3 with a more contented parent who is in a happier relationship p4 opportunity to develop new relationships with other children and other step relatives p5 greater potential for cultural diversity and experiences p6 may have escaped an abusive relationship – physical and/or psychological p7 possible materialistic advantages – 2 x Christmas presents etc p8 2 role models rather than single parent role model</p> <p><b>Disadvantages:</b> n1 may be pulled in two directions n2 may be tense relationships with step parent n3 may be complicated if the new couple decide to have children of their own n4 complications may arise with the new family of their other natural parent n5 children may have to move to a new geographical location n6 settling in to a new school</p>		[10]



Question	Expected Answer	Mark	Total
3 (a)	<p>One mark for each pattern, TWO required</p> <ul style="list-style-type: none"> <li>• male unemployment rates highest among Black Caribbeans</li> <li>• rates for men in Black African, Bangladeshi and mixed ethnic groups are almost three times the rate for white British</li> <li>• Indian men have the lowest rate for non white ethnic groups</li> <li>• unemployment rates for women from the Black African, and mixed ethnic groups are around three times the rate for white women</li> </ul> <p><i>Accept any response which shows a pattern linked to ethnicity and/or gender.</i></p>	2x1	[2]
(b)	<p>One mark for identification and one mark for explanation, TWO required:</p> <ul style="list-style-type: none"> <li>• <b>people may not be registered as unemployed</b> – may be a student, homeless illegal immigrants etc</li> <li>• <b>people may be moving between jobs</b> – more likely now with grater workforce mobility</li> <li>• <b>many women are not registered because they are housewives or looking after children</b> – hides a lot of actual unrecognised unemployment</li> <li>• <b>the basis for calculating the figures has frequently changed</b> – political interference in the calculations</li> <li>• <b>some people who claim unemployment benefits may be working</b> – part of the black economy</li> <li>• <b>Fails to look at the reasons why people are unemployed-lacks qualitative data</b></li> </ul>	2x1 2x1	[4]
(c)	<p>Level 1: 0-3 Identifies in a list format at least one characteristic Level 2: 4 – 6 Basic outline of at least two characteristics Level 3: 7 – 8 Clear outline which shows a clear understanding of at least two characteristics</p> <p>The following characteristics are likely to be outlined:</p> <ul style="list-style-type: none"> <li>• identifying aims/hypotheses</li> <li>• defining concepts and terms</li> <li>• choosing an appropriate sample</li> <li>• piloting</li> <li>• response rates</li> <li>• administering the survey</li> <li>• analysing the data/interpretation</li> <li>• type of questions</li> <li>• access</li> <li>• sample size</li> <li>• Ethics</li> </ul>		[8]

Question	Expected Answer	Mark	Total
3 (d)	<p><b>Level 3 response 11 – 14 marks</b> Candidates will <b>discuss all four issues</b> and explicit reference will be made to research into the impact of unemployment upon the family. Candidates will present the material in a well planned and logical sequence with a clearly defined structure using appropriate terminology confidently and accurately. Sentences and paragraphs consistently relevant and well structured in a way that directly addresses the question. There will be few if any errors of grammar, punctuation and spelling.</p> <p><b>Level 2 response 6 – 10 marks</b> Candidates will <b>discuss at least three</b> of the issues and the points made at the higher end of the band (8-10) must be explicitly related to unemployment and the family. Ability to present relevant material in a planned and logical sequence, using appropriate and logical terminology accurately. Sentences and paragraphs, for the most part relevant, with the material presented in a balanced, logical and coherent manner which addresses the question. There may be occasional errors of grammar, punctuation and spelling.</p> <p><b>Level 1 response 0 – 5 marks</b> Candidates will <b>present one or two points</b> relating to the issues but the answer may read like a series of bullet points that do not relate to research into unemployment and the family. Sentences and paragraphs have limited coherence and structure often being of doubtful relevance to the main focus of the question. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>(a) research is likely to be high in reliability – can replicate the research and get similar results  (b) can produce statistical data which can be used to present graphical presentation on unemployment on a large scale  (c) tendency to be low in validity – superficial responses lacking qualitative insight  (d) will not provide a real understanding of the impact of unemployment on individual family life  (e) bias can be a problem in the phrasing of the questions and in the administration of the research – this is true for all research  (f) ethical issues are involved in all research – likely to make reference to confidentiality, anonymity, informed consent, right to withdraw, access to the results  (g) strong candidates will refer to the best research is one involving a range of primary and secondary methods – triangulation</p>		[14]

Question	Expected Answer	Mark	Total
4 (a)	Accept 6,129,000 or 6,129 thousand	1x1	[1]
(b) (i)	Under 16	1x1	[1]
(ii)	<p><b>One mark for identification and one mark for explanation, TWO required</b></p> <ul style="list-style-type: none"> <li>• <b>women's control of fertility</b> – use of birth control and wider availability/acceptance</li> <li>• <b>cost of children</b> – increase in length of childhood and longer dependency</li> <li>• <b>change in women's attitudes towards work and education</b> – more women working full time and not having large families</li> <li>• <b>changes in fashion</b> – small families the norm today compared with Victorian society</li> <li>• <b>societies acceptance of smaller families</b>- no stigma against small families and childless women</li> <li>• <b>increase in terminations</b> – legalisation and social acceptance of abortion</li> <li>• <b>People starting serious relationships later</b> – leads to a smaller family size</li> </ul>	2x2	[4]
(c)	<p><b>One mark for identification and one mark for explanation, TWO required</b></p> <ul style="list-style-type: none"> <li>• <b>more women drinking excessively at younger age</b>- linked to gender equality</li> <li>• <b>more women working in stressful occupations</b> – more women working full time in professional jobs</li> <li>• <b>more women not eating healthily and suffering eating disorders, anorexia, bulimia etc</b>- linked to media pressure on young women</li> <li>• <b>all projections for population figures are provisional</b> – based upon current trends which are vulnerable to change</li> <li>• accept any explanation linked to possible changes in lifestyle and the difficulty of making population predictions</li> </ul>	2x1 2x1	[4]

Question	Expected Answer	Mark	Total
4 (d)	<p><b>Level 3 response 8 – 10 marks</b> Candidates will be able to <b>assess at least two</b> ways the statutory services will need to adapt. They will explicitly show an understanding of what is meant by statutory and show in depth that a reallocation of services will be required and the impact this may have on other services and the tax payer. Discussion will be developed logically and there will be evidence of synthesis within the work. There will be few errors of spelling, punctuation and grammar.</p> <p><b>Level 2 response 5 – 7 marks</b> Candidates will be able to <b>describe at least two</b> ways the services will need to adapt but there is unlikely to be very much assessment. Discussion will be developed coherently. There will be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level 1 response 0 – 4 marks</b> Candidates will <b>identify at least one way</b> services will need to adapt but there is likely to be confusion as to what statutory means. The answer is likely to read as a common sense answer possibly in a bullet point format. There will be no attempt to put the answer in a wider context. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p>(a) redirection of resources and services from early years to late adulthood (b) consideration of retirement ages (c) expansion of Social Services towards late adulthood – home care, occupational therapy, nursing care etc (d) government action required on taxation policy and the impact of a relatively declining work force (e) resources required to look after the large increase in the 75+ population particularly males (f) significant decline in the 16 – 24 age group will release resources from education to health and social care (g) state pension policy will need reviewing in the light of the data</p>		[10]

Question	Expected Answer	Mark	Total
5 (a)	<p><b>One</b> mark for each, TWO required</p> <ul style="list-style-type: none"> <li>• students</li> <li>• divorced men/women</li> <li>• career minded women</li> <li>• widows/widowers</li> <li>• <b>singletons by choice</b></li> </ul>	2x1	<b>[2]</b>
(b)	<p><b>One</b> mark for each, TWO required</p> <ul style="list-style-type: none"> <li>• decline in average household size</li> <li>• increase in one person households until 2001 and then levelling off</li> <li>• increase in all households until 2001 and then levelling off</li> </ul> <p><i>Accept any accurate trend linked to size of household and dates</i></p>	2x1	<b>[2]</b>
(c)	<p><b>One</b> mark for each, TWO required</p> <ul style="list-style-type: none"> <li>• more women than men living alone</li> <li>• overall increase in numbers living alone</li> <li>• more elderly than young living alone</li> <li>• decline in the number of 65 – 74 living alone</li> <li>• large increase in 25 – 44 living alone</li> <li>• any accurate pattern comparing the two years for any age group or gender</li> </ul>	2x1	<b>[2]</b>
(d) (i)	<p><b>One</b> mark for each function, one mark for explanation, TWO required</p> <ul style="list-style-type: none"> <li>• they offer help directly to people who need it eg special needs groups</li> <li>• they raise public awareness of groups with particular needs eg the homeless</li> <li>• they offer help to welfare state institutions for example hospitals and schools</li> <li>• they fill gaps in welfare provision eg less popular issues</li> <li>• they provide help for services which do not get political support or are seen as less essential</li> <li>• work opportunities for the elderly</li> <li>• Fund raising to support service provision</li> </ul> <p><i>The explanation may be linked to specific examples of voluntary help eg voluntary work in hospitals</i></p>	2x1 2x1	<b>[4]</b>

Question	Expected Answer	Mark	Total
5 (d) (ii)	<p><b>Level Three response 8 – 10 marks</b> Candidates will <b>refer to at least two</b> examples of voluntary support and will <b>analyse the ways their support</b> can be directed specifically towards the increase in the number of people living alone. A conclusion will be drawn. The answer will be planned and logical using appropriate terminology. Sentences and paragraphs will be presented in a balanced and logical manner which addresses the question. There may be occasional errors of grammar, punctuation and spelling.</p> <p><b>Level two response 5 – 7 marks</b> Candidates will <b>refer to at least two examples</b> of voluntary support but may <b>not specifically direct</b> their answer to the context of the question. <b>Limited analysis</b> will be evident at the lower end. There will be limited ability to organise material using some appropriate terminology. Sentences and paragraphs are not always relevant with the material presented in a way that does not always address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p><b>Level One response 0 – 4 marks</b> Candidates will <b>describe the role of at least one</b> voluntary group but it is unlikely to be linked to the question. The answer is likely to be generic and in a list format. Sentences and paragraphs have limited coherence and structure. Errors of punctuation, grammar and spelling will be noticeable and intrusive.</p> <p>Candidates are likely to refer examples such as (a) Relate (b) Age Concern (c) the Samaritans (d) Mencap (e) Shelter (f) <i>reward any relevant national or local examples</i></p> <p><i>Or candidates will use PIES to address the work of the voluntary services</i> <i>At least two for level 3 in depth</i> <i>At least two outlined for level 2</i> <i>Identify one for level 1</i></p> <p>Candidates: ✓ show an understanding of the work of the organisations as they apply to people living alone or independently and how they can direct their resources to the potential problems of these groups such as isolation, loneliness, depression, emotional difficulties ✓ also reference should be made as to how the groups can exert pressure upon both local and national governments in order to raise the profile of the people they represent</p>		[10]

# Grade Thresholds

Advanced GCE (Subject) (Aggregation Code(s))  
June 2008 Examination Series

## Unit Threshold Marks

Unit		Maximum Mark	A	B	C	D	E	U
F910	Raw	100	82	72	62	52	43	0
	UMS	100	80	70	60	50	40	0
F911	Raw	50	41	36	31	26	22s	0
	UMS	100	80	70	60	50	40	0
F912	Raw	50	41	36	31	26	22	0
	UMS	100	80	70	60	50	40	0
F913	Raw	100	77	67	57	47	37	0
	UMS	100	80	70	60	50	40	0
F914	Raw	50	41	36	31	26	22	0
	UMS	100	80	70	60	50	40	0
F915	Raw	50	42	37	32	27	22	0
	UMS	100	80	70	60	50	40	0
F916	Raw	50	41	36	31	26	22	0
	UMS	100	80	70	60	50	40	0
F917	Raw	50	41	36	31	26	21	0
	UMS	100	80	70	60	50	40	0
F918	Raw	100	82	73	64	56	48	0
	UMS	100	80	70	60	50	40	0
F919	Raw	50	42	37	32	27	22	0
	UMS	100	80	70	60	50	40	0
F920	Raw	100	80	71	62	53	44	0
	UMS	100	80	70	60	50	40	0
F921	Raw	100	81	70	60	50	40	0
	UMS	100	80	70	60	50	40	0
F922	Raw	50	42	37	32	27	22	0
	UMS	100	80	70	60	50	40	0
F923	Raw	50	42	37	32	27	22	0
	UMS	100	80	70	60	50	40	0
F924	Raw	100	80	71	62	53	44	0
	UMS	100	80	70	60	50	40	0
F925	Raw	50	42	37	32	27	22	0
	UMS	100	80	70	60	50	40	0

## Specification Aggregation Results

Overall threshold marks in UMS (ie after conversion of raw marks to uniform marks)

### AS Single Award (H103)

	Maximum Mark	A	B	C	D	E	U
<b>H103</b>	300	240	210	180	150	120	0
<b>% in grade</b>		9.0	25.7	49.1	70.6	86.4	100

3005 candidates aggregated this series

### AS Double Award (H303)

H303	AA	AB	BB	BC	CC	CD	DD	DE	EE
<b>UMS (max 600)</b>	480	450	420	390	360	330	300	270	240
<b>% in grade</b>	4.6	11.0	19.8	32.0	44.6	57.1	71.4	82.3	90.5

1449 candidates aggregated this series

### GCE Single Award (H503)

	Maximum Mark	A	B	C	D	E	U
<b>H503</b>	600	480	420	360	300	240	0
<b>% in grade</b>		7.7	29.4	57.6	80.9	96.1	100

2150 candidates aggregated this series

### GCE Double Award (H703)

H703	AA	AB	BB	BC	CC	CD	DD	DE	EE	U
Max 1200	960	900	840	780	720	660	600	540	480	0
<b>% in grade</b>	5.1	10.6	18.8	34.0	49.0	63.6	77.2	89.0	96.4	100

1451 candidates aggregated this series

For a description of how UMS marks are calculated see:

[http://www.ocr.org.uk/learners/ums\\_results.html](http://www.ocr.org.uk/learners/ums_results.html)

Statistics are correct at the time of publication.



**OCR (Oxford Cambridge and RSA Examinations)**  
**1 Hills Road**  
**Cambridge**  
**CB1 2EU**

**OCR Customer Contact Centre**

**14 – 19 Qualifications (General)**

Telephone: 01223 553998

Facsimile: 01223 552627

Email: [general.qualifications@ocr.org.uk](mailto:general.qualifications@ocr.org.uk)

**[www.ocr.org.uk](http://www.ocr.org.uk)**

For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored

**Oxford Cambridge and RSA Examinations**  
**is a Company Limited by Guarantee**  
**Registered in England**  
**Registered Office; 1 Hills Road, Cambridge, CB1 2EU**  
**Registered Company Number: 3484466**  
**OCR is an exempt Charity**

**OCR (Oxford Cambridge and RSA Examinations)**  
**Head office**  
**Telephone: 01223 552552**  
**Facsimile: 01223 552553**

© OCR 2008

