



*Rewarding Learning*

**ADVANCED SUBSIDIARY (AS)**

**General Certificate of Education**

**January 2013**

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**Health and Social Care**

**Assessment Unit AS 5**

*assessing*

**Unit 5: Adult Service Users**

**[A3H51]**

**FRIDAY 18 JANUARY, AFTERNOON**

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**MARK  
SCHEME**

**1 (a)** Explain the meaning of the following terms: (AO1)

## Disability

Answers may address some of the following points:

- loss or reduction of functional ability
- the lack or loss of ability to carry out activities or functions
- functional limitations to everyday living
- anatomical, physiological or psychological abnormality
- the social disadvantage faced by those people who have impairments.

All other valid points will be given credit

[1] for key phrase(s), [2] for full explanation

(1 × [2])

[2]

## Empowerment

Answers may address some of the following points:

- enabling a person or a group of people to speak on their behalf
- supporting a person or a group of people to take actions on their own behalf
- sharing relevant knowledge and/or expertise with individuals or groups so that they can make informed decisions
- involvement of service users and carers in the planning and/or decision-making processes regarding the services they use
- to give service users power to be involved in or make decisions which affect them
- the principle of working in total partnership with service users and of sharing or handing over power traditionally held by professionals
- development of needs-led service user-centred services.

Candidates may use examples other than those above – these may be accepted if the candidate shows an understanding of the overall meaning of the terms.

All other valid points will be given credit

[1] for key phrase(s), [2] for full explanation

(1 × [2])

[2]

- (b) Discuss two different ways each of the following professionals may contribute to the care of a patient who is waiting to leave hospital after an operation. (AO1, AO2)

### Social worker

Answers may address any two of the following points:

- identifying and assessing the patient's needs so a care package can be developed
- problem solving, i.e. helping the patient to prioritise problems and work on most urgent
- completing financial assessments and accessing financial support
- identifying plans of care from the assessment, e.g. domiciliary support and accessing support required
- liaising with the multidisciplinary team to agree realistic support and care
- liaising with relevant agencies – inter-agency working, e.g. housing executive to negotiate appropriate housing
- managing care plans, through monitoring and reviews
- writing reports as part of assessment process
- providing the patient with information on the services available
- acting as an advocate for the patient
- liaising with the patient's family with regard to a package of care
- completing risk assessments to allow service users to be protected or supported
- helping service users to access accommodation or temporary respite care
- providing emotional support, e.g. counselling.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion

(2 × [3])

[6]

### Occupational therapist

Answers may address any two of the following points:

- provides needs assessment of the patient, e.g. of their ability to complete independent living tasks such as cooking
- supports and teaches skills needed for maximum independence, e.g. dressing
- assesses patient's home and identifies need for adaptations, e.g. hand rails or chair ramp
- provides aids, e.g. special cutlery, dressing aids
- liaises with multi-disciplinary team
- designs individualised programmes to promote independence, e.g. employability
- contributes to the care planning process
- writes reports and monitors progress.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion

(2 × [3])

[6]

- (c) Effective communication is a key principle of the care value base. Discuss three ways health and social care workers may promote effective communication with service users. (AO1, AO2, AO3)

Answers may address three of the following points:

- provides service users with relevant information to encourage them to be involved in decision-making, e.g. information about treatment choices, joining clubs, which may be in form of leaflets
- uses appropriate communication aids, e.g. picture boards, hearing aids
- provides information in a range of formats, e.g. large print, braille
- learns basic phrases in service user's native language to encourage them to feel listened to and involved
- communicates for service users as an advocate or helps them to attain advocacy support
- uses non-verbal communication skills to encourage trusting and open relationships
- uses the expertise of a speech therapist to aid communication so the service user can convey their thoughts and feelings as independently as possible
- uses a translator where appropriate, so service users can take part in assessments and care plans
- care workers should encourage service users to communicate with one another so they can support each other, e.g. group activities
- uses listening skills to encourage trusting relationships
- avoids jargon when communicating with service users
- encourages service users to communicate with their families.

All other valid points will be given credit

### Level 1 ([1]–[3])

Overall impression: basic understanding

- displays limited knowledge of ways health and social care workers may promote effective communication
- there is limited discussion
- ways may be listed or one may be discussed in detail
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

### Level 2 ([4]–[6])

Overall impression: adequate knowledge and understanding

- displays adequate knowledge of ways health and social care workers may promote effective communication
- there is adequate discussion
- at the top of this mark band candidates should discuss at least **two** ways in detail
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

**Level 3 ([7]–[9])**

Overall impression: competent knowledge and understanding

- displays very good to excellent knowledge of ways health and social care workers may promote effective communication
- at the top of this mark band candidates should discuss at least **three** ways in detail.
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [9]

- (d) Community care is a term used to capture the concept of enabling individuals to live at home for as long as possible. Discuss four advantages of community care for adults with learning disabilities. (AO1, AO2, AO3, AO4)

Answers may address four of the following points:

- individuals can continue to live in their own homes, with their family around them for support and have regular contact with friends and neighbours, with people around them that love and care for them
- they can continue to keep their routines that add value to their lives, e.g. having a cup of tea before they get up in the morning, watching certain programmes or listening to the radio
- attend local clubs such as Gateway that they may have enjoyed for many years
- retain their own privacy, with their favourite furniture and personal possessions around them
- the individual receives services they need to enable them to be as independent as possible, support workers, befrienders
- they can use their benefits as they see fit, e.g. use direct payments to get help to go to the cinema, swimming pool or on holiday
- helps to de-stigmatise learning disability as individuals remain in their local community rather than being cared for in large institutions, so they feel accepted
- teams were formed that included, mental health social workers, CPNs, GPs, OTs, psychiatrists and psychologists all working together to complete multidisciplinary assessments and care plans, leading to more holistic care
- initiated a “one door policy” – social workers became care co-ordinators – commissioning care from providers (buying and organising services people needed) so that service users with learning disabilities could access a much wider range of support to enable them to move from large hospitals to individual or group homes.

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

**Level 1 ([1]–[4])**

Overall impression: basic understanding

- displays limited understanding of the advantages of community care for adults with learning disabilities
- may only list advantages or discuss one in detail
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is lost.

**Level 2 ([5]–[8])**

Overall impression: adequate knowledge

- displays adequate knowledge and understanding of the advantages of community care for adults with learning disabilities
- adequate discussion of four advantages or a competent discussion of at least three advantages to reach the top of this level
- candidates who produce a competent discussion of two advantages can achieve a maximum of [6]
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

**Level 3 ([9]–[12])**

Overall impression: competent knowledge

- displays competent knowledge and understanding of four advantages of community care for adults with learning disabilities
- a highly competent discussion of four advantages at the top of this band
- to achieve at this level, candidates must demonstrate understanding of the service user group
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form of style and writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

[12]

37

**2 (a)** Explain two ways statutory services are funded. (AO1, AO2)

Answers may address two of the following points:

- taxation system/distributed by DHSSPSNI
- National Insurance Contributions
- payments by service users, e.g. for dental treatment, eye tests
- additional contributions from the public or community, e.g. fundraising, donations or sponsorship for hospital equipment.

[1] for key phrase(s), [2] for full explanation

(2 × [2])

[4]

**(b)** People living in rural communities are becoming more dependent on the private sector. Explain three ways the private sector is funded. (AO1, AO2)

Answers may address two of the following points:

- private payment
- private health insurance
- contracts, e.g. with NHS or social services
- business/bank loan
- investors.

[1] for key phrase(s), [2] for full explanation

(3 × [2])

[6]

**(c)** Rural service users are often reliant voluntary services. Discuss two advantages of the voluntary sector providing services to a community. (AO1, AO2, AO3)

Answers may address two of the following points:

- the voluntary sector may increase the choice of services/supports available to service users and their families including services not available from the statutory sector
- these services may be shaped to meet the particular needs of the service users within a community – can be flexible and adjust service provision at short notice
- may be easy access for service users as they can refer themselves and not depend on professionals, who they rarely see to refer them, this may also mean they get the help when they are most in need
- may be staffed by volunteers from the local or surrounding community who have a genuine interest in the service user group or who know the family and want to support them
- services are normally free or at a small charge enabling those who require the service to access it – this is important as many people may lack or have very limited funds
- voluntary organisations raise awareness locally of service provision, advertising through local radio, newspapers, churches so service users learn about the service and understand that it is there to meet their needs



- staff often have a specialist knowledge and interest in the area they work in
- can be cost effective
- local voluntary groups throughout the province may band together to lobby government, ministers, MPs to fight for service provision in outlying communities, e.g. bus services, mobile clinics, clinics at local health centres rather than service users having to travel large distances to large hospitals so improving service provision.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion  
(2 × [3])

[6]

- (d)** Individuals who live within a rural community are often heavily dependent on their family, friends and neighbours to take care of them when they become ill. However, many informal carers can experience a range of pressures in carrying out their responsibilities. Discuss two pressures that informal carers may face in carrying out their role.  
(AO1, AO2, AO3)

Answers may address two of the following:

- may have to give up their job or education due to time commitment of caring
- financial pressures, do not get paid/benefits are very limited/ causing resentment/affecting quality of care
- isolation/no appreciation of stress they are under
- cannot get any support so may feel trapped
- can become exhausted – often it is a 24 hour job; may not get enough sleep
- receive little or no training, e.g. in moving and handling or in terms of awareness of services which may cause them great anxiety
- their own relationships and family life may start to break down due to the responsibilities involved in caring
- their own physical health may deteriorate – they can become ill themselves or harm themselves carrying out physical tasks
- suffer from guilt as they feel they cannot do more, yet feel their loved one is not getting the quality of care or time they need
- their mental health may be affected due to the pressures, e.g. depression
- where the informal carer is a child, he or she may miss out on education and social life and may mature more quickly
- may find it difficult to deliver personal care, but feel they have no choice
- may feel resentful and abuse the person in some way, e.g. verbally
- find it difficult to get time for themselves, e.g. to go on holiday.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion  
(2 × [3])

[6]

22



3 The Care Quality Commission found that there were “unacceptable” failures by hospitals to meet older people’s nutritional and dignity needs.

(a) Identify two physical needs of older people who are in hospital and discuss why it is important they are met.(AO1, AO2)

Physical need

Answers may include:

- medication, nutrition, shelter, warmth, exercise, personal hygiene, safety, mobility.

Importance of being met

Answers may address two of the following points:

- providing medication so the patients returns to good health/ minimise pain
- provision of nutritious meals and regular fluids to help physical strength and reduce risk of dehydration
- meeting shelter/safe environment so they can be treated effectively
- providing a warm environment to prevent deterioration in health or the development of complications during their recovery
- aiding mobility by staff (nursing/physiotherapy) taking patients for regular exercise/provision of mobility aids by OT or physiotherapist
- meeting hygiene needs helps to prevent spread of infection and is important for patient’s self-esteem
- meeting safety needs helps people feel safe and protected.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion  
(2 × [1]) + (2 × [3])

[8]

(b) The Commission also found instances of people being spoken to in an unacceptable manner. Discuss one way emotional needs could be met by hospital staff. (AO1, AO2)

Answers may address one of the following points:

- enabling family to visit more often so they feel cared for and loved by people important to them in their lives
- having named nurses for all patients who take time to get to know the individual patient and their needs/requirements
- encouraging patients to interact with one another to keep their spirits up, e.g. can encourage them to go to the day room
- having regular contact with medical staff who explain their health care needs clearly and in a way they can understand so they can feel they have an understanding and a say in their care plan
- showing respect by using appropriate forms of address can help patients feel valued
- taking time to chat with patients and listen to them

- acting as advocates to promote their wishes
- providing information on progress can help patients feel encouraged and look to the future.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion  
(1 × [3])

[3]

- (c) The purpose of the whistle-blowing policy is to protect patients from abuse. Discuss how this policy may help maintain high standards of care in a hospital setting. (AO1, AO2, AO3, AO4)

Answers may address some of the following points:

- poor care, whether physical, emotional or mental, more likely to be reported by staff as they have been trained in their responsibilities under the policy
- risk of poor practice more likely to be reduced
- as staff can be disciplined under policy it is more likely to encourage them to practice according to CVB
- staff feel empowered to report poor practice therefore improving quality of care offered
- clear and simple procedures in place so staff recognise importance of their responsibility to protect service users so more likely to report so stopping poor care practices
- managers aware of their responsibility to regularly update staff training in whistle blowing and making sure staff comply, so more likely to identify and eradicate poor practice
- recognises role of regulatory/outside bodies can and do play in deterring and detecting serious malpractice so highlighting consequences if poor practice not actioned upon
- providing strong protection for workers who raise concerns internally, so making staff more willing to use policy
- reassuring workers that silence is not the only option, so encouraging and highlighting poor practice
- reinforcing and protecting the right to report concerns to key regulators
- helping to ensure that organisations respond by addressing the message rather than the messenger and resist the temptation to cover up malpractice so protecting service users
- providing some protection for workers who raise concerns internally, so making staff more willing to use policy.

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

### Level 1 ([1]–[2])

Overall impression: basic understanding

- displays limited knowledge of the purpose of the whistle-blowing policy
- little or no evidence of analytical writing.

**Level 2 ([3]–[4])**

Overall impression: adequate knowledge

- displays adequate knowledge of the purpose of the whistle-blowing policy
- some evidence of analytical writing.

**Level 3 ([5]–[6])**

Overall impression: competent knowledge

- displays a very good knowledge of the purpose of the whistle-blowing policy
- clear evidence of analytical writing. [6]

- (d) The Nursing and Midwifery Council code of conduct has clear standards that it requires its members to adhere to if they are to retain their registration and so practice as a nurse. Discuss two ways each of the following standards could be adhered to by nursing professionals. (AO1, AO2, AO3)

Provide a high standard of practice and care at all times

Answers may address two of the following points:

- Use the best available evidence
  - they must deliver care based on the best available evidence or best practice
  - they must ensure any advice given is evidence based if suggesting healthcare products or services
  - they must ensure that the use of complementary or alternative therapies is safe and in the best interests of those in their care. Complementary alternative therapies and homeopathy.
- Keep your skills and knowledge up to date
  - they must have the knowledge and skills for safe and effective practice when working without direct supervision
  - they must recognise and work within the limits of their competence
  - they must keep their knowledge and skills up to date throughout their working life
  - they must take part in appropriate learning and practice activities that maintain and develop their competence and performance.

- Keep clear and accurate records
  - they must keep clear and accurate records of the discussions they have, the assessments they make, the treatment and medicines they give and how effective these have been
  - they must complete records as soon as possible after an event has occurred
  - they must not tamper with original records in any way
  - they must ensure any entries they make in someone's paper records are clearly and legibly signed, dated and timed
  - they must ensure any entries they make in someone's electronic records are clearly attributable to them
  - they must ensure all records are kept securely.

(2 × [3])

[6]

Be open and honest, act with integrity and uphold the reputation of your profession

Answers may address two of the following points:

- Act with integrity
  - they must demonstrate a personal and professional commitment to equality and diversity
  - they must adhere to the laws of the country in which they are practising
  - they must inform the NMC if they have been cautioned, charged or found guilty of a criminal offence
  - they must inform any employers they work for if their fitness to practise is called into question.
- Deal with problems
  - they must give a constructive and honest response to anyone who complains about the care they have received
  - they must not allow someone's complaint to prejudice the care they provide for them
  - they must act immediately to put matters right if someone in their care has suffered harm for any reason
  - they must explain fully and promptly to the person affected what has happened and the likely effects
  - they must cooperate with internal and external investigations.
- Be impartial
  - they must not abuse their privileged position for their own ends
  - they must ensure that their professional judgment is not influenced by any commercial considerations.

- Uphold the reputation of your profession
  - they must not use their professional status to promote causes that are not related to health
  - they must cooperate with the media only when they can confidently protect the confidential information and dignity of those in your care
  - they must uphold the reputation of their profession at all times.

All other valid points will be given credit

[1] for key phrase(s), [2] for explanation, [3] for full discussion

(2 × [3])

[6]

- (e) Considering concerns about the quality of institutional care, many service users now decide to remain in their own home with the support of their families. Discuss how The Carers and Direct Payments Act (Northern Ireland) 2002 enables individuals to remain at home supported by their carers. (AO1, AO2, AO3, AO4)

Answers may address some of the following points:

- carers rights have been recognised within legislation, so strengthening their position to request services and support in their own right
- carers can request services such as respite breaks and other forms of support so they can continue to care, e.g. a sitter to stay with their loved one while they go shopping or to meet friends
- carers have a right to have their own independent assessment completed, to examine their needs
- direct payments allows money to be given to service users to enable them to purchase their own support package following an assessment of their needs
- gives service users more choice of how they want to use payments to buy in their care, i.e. go to course in technical college rather than day centre, fund a course, driving lessons
- allows service users more flexibility, i.e. who they employ, times when employees come to them
- can expect a tailor-made and more responsive service because they are in control.
- gives service users more freedom and convenience, autonomy and empowerment.

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

### Level 1 ([1]–[4])

Overall impression: basic understanding

- displays limited understanding of ways The Carers and Direct Payments Act (Northern Ireland) 2002 enables individuals to remain at home supported by their carers
- may list points or discuss one
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is lost.

### Level 2 ([5]–[8])

Overall impression: adequate knowledge

- displays adequate knowledge and understanding the ways The Carers and Direct Payments Act (Northern Ireland) 2002 enables individuals to remain at home supported by their carers
- discussion is adequate
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

### Level 3 ([9]–[12])

Overall impression: competent knowledge

- displays competent knowledge and understanding of four ways The Carers and Direct Payments Act (Northern Ireland) 2002 enables individuals to remain at home supported by their carers
- competent discussion
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form of style and writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

[12]

**Total**

AVAILABLE  
MARKS

41

**100**