

Health and Social Care

Advanced Subsidiary GCE (Double Award) **AS H303**

Advanced Subsidiary GCE **AS H103**

Combined Mark Schemes And Report on the Units

January 2006

H103/H303/MS/R/06J

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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.

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**Mark Scheme F910
January 2006**

Question	Answer	Mark	Total																
1(a)(i)	<p>One from:</p> <ul style="list-style-type: none"> Race/racism/direct/racial <p><i>Example: Not given interview when she used her real name/Sineta Patel/presume she is not British/different ethnicity</i></p>	1x1 1x1	[2]																
1(a)(ii)	<p>Two from:</p> <ul style="list-style-type: none"> Upset/hurt Withdrawn/Isolated Angry Not want to apply for other jobs Lack confidence Lack self-esteem/self-worth Devalued Frustrated Depressed 	2x1	[2]																
1(b)(i)	<p>One from:</p> <ul style="list-style-type: none"> Race Relations Act 1976/2000 (<i>Do not require date</i>) 	1x1	[1]																
1(b)(ii)	<p>Three from:</p> <ul style="list-style-type: none"> Housing Employment Access to goods and services Training Education Public bodies <p>(does not have to be technical term)</p>	3x1	[3]																
1(b)(iii)	Commission for Racial Equality	1x1	[1]																
1(c)	<table border="0"> <tr> <td>Three from:</td> <td>Three from:</td> </tr> <tr> <td>Identify</td> <td>Example</td> </tr> <tr> <td>Physical barriers (P)</td> <td>lack of transport, access</td> </tr> <tr> <td>Psychological barriers (PS)</td> <td>embarrassment/fear/ stigma/ stereotypes/discrimination</td> </tr> <tr> <td>Cultural barriers (C)</td> <td>employers misrepresent behaviours/customs/ dress/uniform/food</td> </tr> <tr> <td>Language barriers/ Communication (L)</td> <td>English may not be their 1st Language</td> </tr> <tr> <td>Financial/income (F)</td> <td>May receive less pay</td> </tr> <tr> <td>Geographical/Location (G)</td> <td>More likely to live in areas with high unemployment</td> </tr> </table> <p><i>(any example that relates to ethnicity)</i> <i>Only one example from each category</i></p>	Three from:	Three from:	Identify	Example	Physical barriers (P)	lack of transport, access	Psychological barriers (PS)	embarrassment/fear/ stigma/ stereotypes/discrimination	Cultural barriers (C)	employers misrepresent behaviours/customs/ dress/uniform/food	Language barriers/ Communication (L)	English may not be their 1st Language	Financial/income (F)	May receive less pay	Geographical/Location (G)	More likely to live in areas with high unemployment	3x1 3x1	[6]
Three from:	Three from:																		
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Language barriers/ Communication (L)	English may not be their 1st Language																		
Financial/income (F)	May receive less pay																		
Geographical/Location (G)	More likely to live in areas with high unemployment																		
		Total	15																

Question	Answer	Mark	Total
2(a)	<p>One from:</p> <ul style="list-style-type: none"> • Direct/disability/disablism <p><i>Example - not given choice of (food or clothes)</i></p>	1x1 1x1	[2]
2(b)	<p>Three from:</p> <ul style="list-style-type: none"> • Upset • Devalued/Useless/stupid • Disempowered/Loss of independence • Learned helplessness • Not want to eat • Depressed • Angry/Resentment • Low self-esteem • Low self-confidence • Self-fulfilling prophecy • Humiliated/embarrassed 	3x1	[3]
2(c)	<p>Two from:</p> <ul style="list-style-type: none"> • Will help prevent future discrimination • Gives him guidance/advice on how to behave • Teach him about values of care/codes of practice • Understand his legal duties/ rights of clients • Improve care to James and/or other clients • Understand the effects of his actions <p><i>(if list like sub-max 2)</i></p>	2x2	[4]
2(d)	<p>One mark for each aspect, THREE required. One mark for each example, THREE required.</p> <p>Care Values: (A) Promoting the equality and diversity of service users (B) Promoting individuals rights and beliefs (C) Maintaining confidentiality</p> <p>Examples:</p> <ul style="list-style-type: none"> • Not using discriminatory language or behaviour • Knowing and applying EOP • Recognising individual; needs • Promoting opportunities for choice • Providing cultural and religious requirements g. dietary needs • Passing on information on a need to know basis • Storing information in a safe and secure place. <p><i>(plus any other suitable example)</i></p>	3x1 3x1	[6]
		Total	15

Question	Answer	Mark	Total
3(d)	<p>Children Act 1989 (date not required)</p> <p>Three from each:</p> <p>Content:</p> <ul style="list-style-type: none"> • Paramourncy principle • Children consulted wherever possible • Stay with wider family circle/ parents • Issues determined as soon as possible • Working in multidisciplinary teams • Overall protects welfare of children • Emergency protection/care orders <p>Benefits(must be to children)</p> <ul style="list-style-type: none"> • Stops being discriminated against • Ensures listened to • Keeps them safe/ removes them from abusers • Gives them legal protection • minimal disruption on their lives • Gives them a voice 	<p>1x1</p> <p>3x1</p> <p>3x1</p>	[7]
		Total	20

Question	Answer	Mark	Total
4(a)(i)	Primary socialisation	1x1	[1]
4(a)(ii)	<p>Three from (explanation):</p> <ul style="list-style-type: none"> • Education - how teachers treat children through what they learn. Stereotypes that they may have. Comments they make about certain groups. If the teacher holds racist beliefs etc. The resources that they use in the classroom. • Media - stereotyping of groups in the media has an impact on people. They may copy ideas. Role models may influence groups. • Peers - pressure, conformity to comply with friends if they too have those ideas. /family influence <p>(any other suitable example)</p>	3x2	[6]
4(b)	<p>Five from: (must be in correct order)</p> <ol style="list-style-type: none"> 1. A policy statement 2. An implementation plan 3. A section on how the policy will be monitored 4. An evaluation of the policy 5. Targets to improve further performance 	5x1	[5]
4(c)	<p>Three from:</p> <ul style="list-style-type: none"> • Questionnaire/interview/feedback/survey • Comments box • Inspection/observation/external bodies • Analysis/monitoring of data • Meetings/training to assess correct practice (needs link to monitoring) • Named person to monitor 	3x1	[3]
		Total	15

Question	Answer	Mark	Total
5(a)	<p>Two marks for full definition, one mark for identification:</p> <p>People or whole areas who operate outside of /do not benefit out of mainstream society/normal life</p> <p>Caused by a combination of linked social and economic problems (unemployment, poor skills, low incomes, poor housing, high crime environments, poor health, family breakdown).</p>	1x1 1x1	[2]
5(b)	<p>Three from each:</p> <p>Barriers:</p> <ul style="list-style-type: none"> • Physical barriers (P) • Psychological (PS) • Financial/Income (F) • Geographical/Location (G) • Cultural (C) • Language/communication (L) <p>Overcome:</p> <ul style="list-style-type: none"> • Better access, wider doors, etc • Campaigns , working in the community, leaflet drops • Professional staff • Flexible surgery hours to allow workers to attend. • Extra funding • Prescription deliveries • Mobile units/outreach work • Translators/leaflets in different languages /interpreters /workers who speak more than one language • Not have only female/male doctors • Bus service • Advice/guidance on benefits 	3x1 3x1	[6]

Question	Answer	Mark	Total
5(c)	<p>Level 1 – L There may be evidence of one or two ways organisations can ensure staff selection procedures promote equal opportunities. List like answers should be placed in this band .Answers are likely to be muddles and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive. [0 – 3 marks]</p> <p>Level 2 - M They will include a brief explanation of one or two ways organisations can ensure staff selection procedures promote equal opportunities. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. [4 - 5 marks]</p> <p>Level 3 – H There will be a minimum of two ways organisations can ensure staff selection procedures promote equal opportunities. 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. [6 - 7 marks]</p> <p>Knowledge requirements:</p> <ul style="list-style-type: none"> a) Non-discriminatory questions/advert b) Same questions to all c) No personal questions d) Mixed panel e) Accessible time and place f) Advertise in a wide range of areas g) Use an EOP logo/guidelines h) Analyse monitoring forms i) Select candidates on merit 		[7]
		Total	15

Question	Answer	Mark	Total
6(a)	<p>Level 1 - L One or two features of the DDA will be identified. 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. [0 – 3 marks]</p> <p>Level 2 - M They will include a brief explanation of one or two features of the DDA. Answers will be factually correct. There will be some noticeable errors of grammar, punctuation and spelling. [4 – 6 marks]</p> <p>Level 3 - H There will be a minimum of two features of the DDA. 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. [7 – 8 marks]</p> <p>Knowledge requirements:</p> <ul style="list-style-type: none"> a) Provides commission for support and advice b) Protects disabled people in employment, goods and services, land , property and education c) Reasonable adjustments must be made d) SENDA for education/ legal rights for disabled learners e) Minimal standards in public transport f) System of redress g) Defined disability h) Aims to eliminate discrimination against disabled people i) Gives disabled people rights 		[8]

Question	Answer	Mark	Total
6(b)	<p>Level 1 - L One or two strengths or weaknesses identified but not clearly discussed Errors of grammar, punctuation and spelling will be noticeable and intrusive. [0 - 4 marks]</p> <p>Level 2 - M Sound understanding of at least one strength and one weakness shown. There will be noticeable errors of grammar, punctuation and spelling. [5 - 8 marks]</p> <p>Level 3 - H A well balanced evaluation of at least two strengths and two weaknesses. There will be few errors of grammar, punctuation and spelling. [9 -12 marks] A conclusion needed for over 10 marks.</p> <p>Strengths:</p> <p>(Sa) Given people rights/protects (Sb) Accessible facilities (Sc) Raised awareness (Sd) DRC set up/monitors implementation/support/advice (Se) More independent (Sf) System of redress/court/made discrimination illegal (Sg) Reduced discrimination</p> <p>Weaknesses:</p> <p>(Wa) Late implementation, e.g. trains (Wb) Not all know their rights (Wc) Initial commission had little powers (Wd) Subjective term used, i.e. reasonable (We) Cost to employers (Wf) Still inaccessible areas (Wg) Hard to prove/cost/time (Wh) Discrimination still exists (Wi) Cannot change attitudes through laws alone (Wj) Victimisation/scared</p>		[12]
		Total	20

**Mark Scheme F913
January 2006**

Question	Marking points	Mark	Total
1 (a)	<p>Any one from:</p> <ul style="list-style-type: none"> • Health and Safety at Work Act (1974) • The Management of Health and Safety at Work Regulations (1992) • Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (1995) (RIDDOR) • Control of Substances Hazardous to Health (1999) Regulations (COSHH) • Health and Safety (signs and signals) Regulations (1996) • The Fire Precautions (workplace) (amended) Regulations (1997) • Manual Handling Operations Regulations (1992, revised 1998) • Lifting Operations and Lifting Equipment Regulations (1998) (LOLER) <p>Note: accept acronyms for those that are known by their abbreviation - (date not required)</p>	1x1	1
(b) (i)	Health and Safety Executive	1x1	1
(b)(ii)	<p>One from:</p> <ul style="list-style-type: none"> • Offer guidance and advice on Health and Safety • Publish leaflets etc about Health & Safety 	1x1	1
(c)	<p>One mark for each, THREE required:</p> <ul style="list-style-type: none"> • Name of employee representative (if there is one) • Name of the manager representative • The contact details of the enforcing authority • Competent person appointed • Trade union or other safety representative • Employment medical advisory service 	3x1	3
(d)	<p>Three marks for each section – one for the rule - one for a simple reason why it would reduce risk – one for a more complex description with two stages. THREE required:</p> <ul style="list-style-type: none"> • An identified person to take charge in an emergency – so people know where to go for instructions / so people don't panic with no one in charge / so someone has training and knows what to do in an emergency etc. • A first aid box must be available – so treatment can be given / so equipment is there in case of emergency / to prevent further injury or infection etc. • A notice is clearly visible stating location of first aid box (and who the approved person is) – so people will not waste time looking / no time wasted causing injuries to worsen / visitors will know where to go for assistance etc. • A trained first-aider and a first aid room available if workplace gives rise to special hazards – reduces risk of serious injury worsening / specialist knowledge to match specific requirements of workplace / reduce chance of fatalities etc. • Accident book (safety audit) – to keep record which may lead to improvement / back up in case of legal issues – RIDDOR links 	3x3	9
	Total for Question 1		15

Question	Marking points	Mark	Total
2 (a)	<p>One mark for identification. One mark for how risk is reduced, THREE required:</p> <p>1. First Aid Box (station / room) People know where equipment is in case of emergency / no time is lost looking for equipment / or equivalent</p> <p>2. Fire Extinguisher Shows where to obtain equipment in case of need / prevents wasted time / allows someone to fight fire to put out small fires / allows extra time for evacuation etc.</p> <p>3. Poisonous / toxic (chemicals) (NOT dangerous) Warns of danger / tells you special storage is required / warns to keep away from children etc.</p>	3x2	6
(b)	<p>One mark for item of protective clothing, one mark for saying how protected. Links must be valid for full marks. THREE required:</p> <p>Gloves- will protect patient from contamination / infection / bacteria from the care worker. Will protect care worker from infection from patient(s)</p> <p>Plastic Apron – will protect care worker from contamination by patient / will protect next patient from contamination from other patients/ can be changed cheaply and disposed of removing contamination risk if changed between</p> <p>Mask – protects worker from inhaling infectious agents from infected person – prevents re-breathing of infective agent onto next patient</p> <p>Overshoes – protects patients in a sterile environment (e.g. operating theatre) by reducing contamination brought in on workers shoes – protects workers from carrying contamination out with them afterwards</p> <p>If other reasonable protective equipment is given which is not in the specification, it should be marked correct and the additional points if adequate provided the answers given are reasonable for the scenario, e.g. hairnet, theatre gowns</p> <p>Note: 'germs' not acceptable</p>	3x2	6
2 (c) (i)	<p>One from:</p> <ul style="list-style-type: none"> • precautions carried out in virtually all situations • ordinary hygiene measures which ensure basic cleanliness 	1x1	1

Question	Marking points	Mark	Total
2 (c)(ii)	Any two from: <ul style="list-style-type: none">• wiping work surfaces clean• removing spillages• basic disinfection• regular cleaning of toilet areas• cleaning of sinks/baths/bathrooms• regular changing of bed linen• regular changing of towels etc.• routine hand washing before and after tasks• mopping floors• vacuuming carpeted areas• washing painted surfaces intermittently• covering own i.e. care workers wounds with blue plasters	2x1	2
	Total for Question 2		15

Question	Marking points	Mark	Total
3 (a)	<p>One mark per stage in correct order, FIVE required:</p> <ol style="list-style-type: none"> 1. look for hazards / risks 2. assess who may be harmed 3. consider the risks – whether precautions are adequate 4. document the findings 5. review the assessment and revise it if necessary 	5x1	5
3 (b)	<p>Level 3: 12-15 marks Candidates make detailed and well argued judgements showing clear links between the hazards, the service users and/or care workers and ways of reducing the risks. They indicate some consideration of precautions that are already in place. Note: 4-5 stages covered.</p> <p>Level 2: 6-11 marks Candidates identify risks and make sound links between the service users (and possibly care workers) and the risks. They make more detailed recommendations for risk reduction, but may not compare present precautions with actual requirements. Note: 3 stages covered.</p> <p>Level 1: 0-5 marks Candidates identify hazards but make few links between the service users and the specific risks. Advice on reducing risk is simplistic. The work may consist of a simple list of hazards with very basic suggestions for improvement. Note: 1-2 stages covered.</p> <p>Knowledge requirements:</p> <ul style="list-style-type: none"> • small number of fire extinguishers • large number of outside doors / security • storage facilities / security/ safety • steps – in and out • bedrooms / privacy • kitchen / access/ safety <p>Other features not visible on the diagram but reasonable suggestions should be accepted.</p> <p>Annotations: H – hazards R – risks to whom P – precautions in place I – implements</p>		15
	Total for Question 3		20

Question	Marking points	Mark	Total
4 (a)	<p>One mark for appropriate equipment action and one mark for reduction, TWO required:</p> <ul style="list-style-type: none"> • smoke alarm – give early warning of smouldering before fire starts • no smoking – reduces likelihood of fire outbreak • flammable liquids stored appropriately – reduces risk of spontaneous outbreak • no storage in corridors, stairwells etc of flammable materials – reduces fire risk in communal areas • sprinkler system – will put out fires very early and prevent serious outbreak 	2x2	4
(b)	<p>One mark for identifying equipment and one for stating how it helps, THREE required:</p> <ul style="list-style-type: none"> • Fire alarm – gives early warning to allow time for evacuation • Fire doors – long time to burn through so prevent spread of fire/allow time for evacuation • Fire extinguishers – allow small fires to be tackled before they spread • Smoke alarm – gives early warning to allow evacuation time • Fire exit signs – show most direct escape route & saves time • Exit lights – show exit route in dark even if normal power fails • Fire blanket – allows small fire to be smothered • Automatic door closers – to prevent spread of fire. 	3x2	6
(c)	<p>One mark for each correctly identified action. FOUR required:</p> <ul style="list-style-type: none"> • raise the alarm • close windows and doors • move swiftly to the nearest fire exit • do not stop to collect belongings • walk don't run • gather in the designated area • take a register to ensure everyone is out • do not return until given clearance <p>Note: NOT 'remain calm/don't panic'.</p>	4x1	4

Question	Marking points	Mark	Total
4 (d)	<p>Level 3: 5-6 marks Candidates show a thorough understanding of the specific difficulties likely to be encountered in their chosen care setting. They link these clearly to standard evacuation procedures and say how these would be affected/altered.</p> <p>Level 2: 3-4 marks Candidates show some understanding of the particular difficulties encountered in their chosen care setting. Some links to evacuation procedures are made.</p> <p>Level 1: 0-2 marks Candidates show limited understanding of the links between the care setting chosen and the evacuation procedures. They could list difficulties but not say how these will affect the evacuation process.</p> <p>Knowledge requirements:</p> <p>Hospital</p> <ul style="list-style-type: none"> • Patients in bed / unconscious/ in plaster etc • Visitors of unknown number / no way to check for missing people • Operations/ procedures underway cannot easily be stopped • Need for use of lifts to evacuate bed-ridden patients, babies in incubators etc • Vulnerability of patients to infection/ extremes of temperature <p>Knowledge requirements : nursery school</p> <ul style="list-style-type: none"> • Young children may not appreciate importance and think it's a game / hide etc • Children may panic and hide • Difficult to know where all children are due to multi-activity nature of environment • Keeping children in one place outside may be difficult • Possibility of parent helpers of unknown number • Additional trip hazards, e.g. toys on floor – requires greater care to exit safely <p>Annotation: D – difficulty E – evacuation problem A – alteration</p> <p>Note: must be relevant to the chosen setting.</p>		6
	Total Question 4		20

Question	Marking points	Mark	Total
5 (a)(i)	<ul style="list-style-type: none"> The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations Act (1995) RIDDOR (1995) <p><i>(date not required)</i></p>	1x1	1
5 (a)(ii)	<p>Four from:</p> <ul style="list-style-type: none"> Death Fracture (except fingers, thumbs and toes) Serious scald to patient Fall from height causing serious injury Illness caused at work causing more than 3 days absence from work Back injury due to lifting patient (more than 3 days off work) Serious assault on staff member Occupational dermatitis Hepatitis Tuberculosis Legionella Tetanus Other infections (e.g. HIV) likely spread via bodily fluids or similar Occupational cancer Amputation Electric shock causing unconsciousness or requiring resuscitation Loss of sight (permanent or temporary) Dislocation of knee, hip shoulder or spine Burn or penetrating injury to eye Injury leading to hypothermia, heat-induced illness or unconsciousness Occupational asthma or respiratory sensitisation Acute illness requiring medical treatment or loss of consciousness due to absorption by inhalation, ingestion, through skin, or by exposure to biological agent Accidental release of serious biological hazard Accidental release of any substance which may damage health Collapse of lifts etc Explosion of vessels / pipework Electrical short circuit causing fire or explosion Explosion or fire closing workplace for more than 24 hours <p><i>Candidates may specify incidents not covered here. Key factors are that serious injuries caused at work must lead to more than 3 days absence from work or hospitalisation for more than 24 hours In the case of infections, they must be attributable to the workplace.</i></p>	4x1	4

Question	Marking points	Mark	Total
5 (b)	<p>One mark for identification of check. One mark for explaining how risk would be reduced:</p> <ul style="list-style-type: none"> • Check weight of sling – ensure it will carry person’s weight • Ensure machinery is not broken / maintenance record – will not fail/break during use • Read instructions- ensure you know what you are doing • Have two people – for safety • Ensure one/both are trained – so no accidents through incorrect procedure • Follow guidelines/procedures laid down – ensure best practice so no injuries • Ensure client understands procedure – prevents panic/unexpected movement • Ensure client is ready before begin – so don’t fall / don’t panic when hoist begins • Ensure client is stable on sling before moving it – reduce risk of slipping out • Ensure adequate space ready – so no collisions • Visual check of hoist/sling – no snags / loose wires / parts 	5x2	10
	Question 5 total		15

Question	Marking points	Mark	Total
6 (a)	<p>Level 3: 5 marks Candidates will show a thorough understanding of measures that will protect their privacy. They will make clear links between the actions/procedures and the impact on their privacy.</p> <p>Level 2: 3-4 marks Candidates will make limited links between the actions/procedures and how their privacy will be affected.</p> <p>Level 1: 0-2 marks Candidates will list simple actions that should be taken without linking them to improved privacy.</p> <p>Knowledge requirements:</p> <ul style="list-style-type: none"> • Secure computer system / password protected – to ensure only authorised personnel have access to personal /medical information • Similar for paper files • Staff knock on doors to bedrooms, bathrooms etc – preserve dignity of clients / allow personal space • Information not given to others (even relatives possibly) without consent of service user • Secure systems to protect against intruders / Identification badges for staff (visitors?) – to reassure clients re validity of people’s reasons for being there <p>Annotation: M – measure to protect R – reason why important</p>		5

Question	Marking points	Mark	Total				
6 (b)	<p>Level 3: 8-10 marks Detailed response showing awareness of at least two benefits to service users and at least two benefits to care providers. Answers given will be clearly relevant and linked to the care setting chosen.</p> <p>Level 2: 5-7 marks Responses will show evidence of at least one benefit for both service users and care providers. They may discuss individual points in some detail but may have limited understanding of the benefits of such a policy.</p> <p>Level 1: 0-4 marks Candidates may state one or two benefits to either service users or care providers that might be expected to be present in such a policy. They are unlikely to consider benefits to care workers as well as service users.</p> <p>Knowledge requirements may vary depending on the care setting chosen:</p> <table border="0"> <thead> <tr> <th>Service Users</th> <th>Care Providers</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> • Everyone being aware of expectations • Service users confident that treatment is high standard and fair • Staff trained so consistent approach and everyone clear about procedures • Channels of responsibility clear so staff can obtain support readily • Best practice followed as likely to be following advice from professional bodies etc.) • Review after appropriate time (questionnaires to service users/ relatives or audit of incidents etc. • Amend policy as required to respond to changing circumstances </td> <td></td> </tr> </tbody> </table> <p>Annotation: B – benefit S – service user C – care provider E – evaluation (quality)</p>	Service Users	Care Providers	<ul style="list-style-type: none"> • Everyone being aware of expectations • Service users confident that treatment is high standard and fair • Staff trained so consistent approach and everyone clear about procedures • Channels of responsibility clear so staff can obtain support readily • Best practice followed as likely to be following advice from professional bodies etc.) • Review after appropriate time (questionnaires to service users/ relatives or audit of incidents etc. • Amend policy as required to respond to changing circumstances 			10
Service Users	Care Providers						
<ul style="list-style-type: none"> • Everyone being aware of expectations • Service users confident that treatment is high standard and fair • Staff trained so consistent approach and everyone clear about procedures • Channels of responsibility clear so staff can obtain support readily • Best practice followed as likely to be following advice from professional bodies etc.) • Review after appropriate time (questionnaires to service users/ relatives or audit of incidents etc. • Amend policy as required to respond to changing circumstances 							
	Question 6 total		15				

Question	AO1	AO2	AO3	AO4
1	9	6		
2	7	8		
3	5	5	5	5
4	9	5	6	
5	6	4	5	
6			5	10
Total marks	36	28	21	15

**Mark Scheme F918
January 2006**

Question	Answer	Mark	Total																		
1(a)	<p>One mark each, THREE required:</p> <ul style="list-style-type: none"> • mobility problems/loss of balance • muscles weaker • sight problems/cataracts • joints stiff • lack of exercise/less active • rheumatoid/osteoarthritis • painful joints 	3x1	3																		
1(b)	<p>One mark for each, FOUR required:</p> <ul style="list-style-type: none"> • increased dependency on others/less independent • inability to cope alone • lack of confidence • low self-esteem • feel worthless • feel upset/angry/frustrated • frightened/scared/worried • not feel valued • unable to do things for herself • could have accidents/less safe • confused • lack of motivation • change in role • social isolation • decreased fitness/mobility • feel lonely 	2x1 2x1	4																		
1(c)	<p>One mark for each professional care workers, THREE required. One mark for each description, THREE required</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><i>Professional care worker</i></th> <th style="text-align: left;"><i>Roles E.g.</i></th> </tr> </thead> <tbody> <tr> <td>• GP</td> <td>Prescribe medication</td> </tr> <tr> <td>• Community Nurse</td> <td>Check blood pressure</td> </tr> <tr> <td>• Health Visitor</td> <td>Advise about diet</td> </tr> <tr> <td>• Occupational Therapist</td> <td>Assess home for aids/adaptations Promote independence</td> </tr> <tr> <td>• Physiotherapist</td> <td>Give exercises to maintain mobility</td> </tr> <tr> <td>• Counsellor</td> <td>Talk to her about problems</td> </tr> <tr> <td>• Home Care Assistant</td> <td>Provide personal care Support daily living tasks</td> </tr> <tr> <td>• Social worker</td> <td>Assess needs</td> </tr> </tbody> </table>	<i>Professional care worker</i>	<i>Roles E.g.</i>	• GP	Prescribe medication	• Community Nurse	Check blood pressure	• Health Visitor	Advise about diet	• Occupational Therapist	Assess home for aids/adaptations Promote independence	• Physiotherapist	Give exercises to maintain mobility	• Counsellor	Talk to her about problems	• Home Care Assistant	Provide personal care Support daily living tasks	• Social worker	Assess needs	3x1 3x1	6
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• Home Care Assistant	Provide personal care Support daily living tasks																				
• Social worker	Assess needs																				

Question	Answer	Mark	Total
1(d)	<p>One mark for each, TWO required:</p> <ul style="list-style-type: none"> • the right to have her needs assessed • right to have services provided in accordance with published criteria • she has the right to complain if the service is not provided • care plan will be written to make sure her needs are met • multi-disciplinary team will care for her individual needs • professionals work together to provide care • information given about services available • allow her to have maximum independence • consistent approach will be given by all her carers • Matilda fully involved in the assessment of his needs • choices will be offered • health and social services working together • services delivered in a seamless manner • high standards of care 	2x1	2
		Total	15

Question	Answer	Mark	Total
2(a)	<p>One mark for each, FOUR required from:</p> <ul style="list-style-type: none"> • no longer see work colleagues • spend more time together/isolate themselves • see more of family • make new friends • take up new hobbies/leisure activities • can go on holiday • get involved in the community • voluntary work • spend more time with friends/improved social life 	4x1	4
2(b)	<p>One mark for each, FIVE required from:</p> <ul style="list-style-type: none"> • no income from work • less income/more income • rely on pension • have to budget carefully • difficulty paying bills • may get benefits/pension credits • mortgage paid off/have to pay rent • less/more debts • rely on savings • may not be able to afford to go on holiday • may use retirement money to go on holiday • less money for luxuries • may need to buy economy foods/poorer diet • may not be able to treat grandchildren • less money for presents • less money/more money for hobbies/interests 	5x1	5
2(c)	<p>One mark for each way, THREE required. One mark for each explanation, THREE required: <i>Ways:</i></p> <ul style="list-style-type: none"> • socially • emotionally • flexibility of time • physically • intellectually <p><i>Explanations:</i></p> <ul style="list-style-type: none"> • meet new people • make new friends • less leisure time to fill • needs to occupy herself • more freedom • need to feel valued • raise self-esteem • raise confidence • feel empowered • desire to help others • stimulating her mind 	3x2	6
		Total	15

Question	Answer	Mark	Total
3(a)i	<p>One from:</p> <p>a) osteoporosis b) rheumatoid arthritis c) osteoarthritis d) rheumatism</p>	1x1	1
3(a)ii	<p>One mark for each, FOUR required:</p> <ul style="list-style-type: none"> • lack of mobility • stiffness • tiredness/lack of energy • cannot walk very far • feel helpless • low self-esteem • lack of confidence • isolation • lack of fitness • pain <p>Osteoporosis</p> <ul style="list-style-type: none"> • brittle bones • bones less dense • reduced height • curvature of the spine/back curve <p>Rheumatoid arthritis</p> <ul style="list-style-type: none"> • swollen joints • disfigurement of joints • inflamed joints • joints attacked by immune system • weaker muscles/lack of strength • unable to grip <p>Osteoarthritis</p> <ul style="list-style-type: none"> • damage to cartilage/tissue around joints • wear and tear of joints <p>Rheumatism</p> <ul style="list-style-type: none"> • muscular pain 	4x1	4
3(b)	<p>One mark each ways, THREE required. One mark each for each explanation, THREE required.</p> <ul style="list-style-type: none"> • assess his needs • assess home for aids/adaptations • advise about daily living routines • teach new skills • observe Shariff doing tasks/activities • shows Shariff how to use aids/adaptations • arrange for specialist to come and fit adaptations • talk to Shariff about his difficulties • provide information about services available • produce a care plan to meet his needs <p><i>Note: explanation must be linked to the way identified.</i></p>	3x2	6

Question	Answer	Mark	Total
3(c)	<p>Level 1 Candidates will identify ways the occupational therapist should apply the care values. 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. [0 - 3 marks]</p> <p>Level 2 Candidates will describe how the occupational therapist should apply at least two of the three aspects of the care values when supporting Shariff. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. [4 - 7 marks]</p> <p>Level 3 Candidates will clearly analyse how the occupational therapist should apply at least two of the three aspects of the care values when supporting Shariff. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling. [8 - 9 marks]</p> <p>Knowledge requirements</p> <p>Maintain confidentiality:</p> <ul style="list-style-type: none"> c respect Shariff's wishes for information to be kept private; c do not talk about his care to those who do not need to know; c do not leave notes lying around for others to read; c explain who will have access to his information; c do not give information over the telephone unless identity of caller can be proven; c not leaving personal notes on the computer screen so that others can read them c having a password to access computer records c not talking about Shariff by name at home so that he can be identified <p>Promote equality and diversity:</p> <ul style="list-style-type: none"> e never stereotype individuals e identify and fight their own prejudices e use language that Shariff can understand e provide care according to his needs e challenge others who may discriminate against him e check Shariff has understood what is said e listen carefully to Shariff e use appropriate body language e not labelling people e respecting Shariff's sexuality e not verbally abusing Shariff e not physically abusing Shariff e providing information in chosen language 		9
		Total	20

Question	Answer	Mark	Total
3(c) cont	<p><i>Promote individual rights and beliefs:</i></p> <ul style="list-style-type: none"> i encourage Shariff to be independent i allow Shariff to have choices about his care and treatment i ask Shariff what he needs and wishes i provide equipment so that Shariff can do more for himself i make sure all care is carried out safely i providing a safe environment i treat sheriff with dignity and respect i recognise Shariff's beliefs i enable Shariff to maintain his identity i encourage Shariff to express his preferences i raise awareness of how to complain i being aware of Shariff's cultural needs i addressing Shariff correctly/calling him the name he prefers 		

Question	Answer	Mark	Total
4(a)	<p>One mark for each, THREE required:</p> <ul style="list-style-type: none"> • isolation • dependency • lack of confidence • decreased motivation • increased danger to himself • role reversal • increased health care needs • body weakened by the disorder • disorder of the Nervous system • less muscle control • lack of energy/tired <p>One mark for each, THREE required</p> <ul style="list-style-type: none"> • friends no longer want to know him • no social life • stress/depression • needs others to care for him because he can no longer do so for himself • at risk when he goes anywhere • children and family caring for him when he was the one who did the caring before • needs professional support from carers • incontinence/lack of bladder control • follows same routine/gets agitated if routine changes • less mobile • in pain 	<p>3x1 3x1</p>	6
4(b)	<p>One mark for each community care service, THREE required. One mark for describing role, THREE required:</p> <ul style="list-style-type: none"> • health-care services Role eg provide medical care • social-care services Role eg assess needs in his home • day care services Role eg provide opportunity to socialise • domiciliary services Role eg provide personal care • private services Role eg Nursing Home care • voluntary services Role eg shopping/gardening/socialising <p><i>Note: description of role must link directly to service.</i></p>	<p>3x1 3x1</p>	6
4(c)	<p>One mark for each, THREE required from:</p> <ul style="list-style-type: none"> • assess the ability of wife to provide care • social services must take this into consideration • wife not expected to take on duties of professional care worker • care plan will be written to make sure Stephen's needs are met • professionals work together with his wife to provide care • information given about services available • allow her to have maximum support • Stephen and his wife will be fully involved in the assessment of his needs • choices will be offered • services delivered in a seamless manner 	3x1	3
		Total	15

Question	Answer	Mark	Total
5(a)	<p>One mark for each, FOUR required from:</p> <ul style="list-style-type: none">• assess her needs• talk to her• listen to her concerns• provide advice• arrange for care to be provided• support her with the move to the residential home• reassure her• giving her medication• understand her feelings	4x1	4
5(b)	<p>One mark for each, THREE required from:</p> <ul style="list-style-type: none">• provides duty of care for people with mental illness• ensures Harriet will not have to cope alone• protect her from danger• can detain her against her will• ensures she will get the treatment she needs• ensures she gets information about support available• promote rights of people with mental illness	3x1	3

Question	Answer	Mark	Total
5(c)	<p>Level 1 Candidates will identify one or two basic ways moving into residential care has had an impact on Harriett. Limited understanding will be shown. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive. [0 - 3 marks]</p> <p>Level 2 Candidates will describe the impact of moving into residential care on Harriett. Understanding of both positive and negative aspects will be shown. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. [4 - 6 marks]</p> <p>Level 3 Candidates will thoroughly analyse the impact of moving into residential care on Harriett. Consideration will be given to both positive and negative aspects. Candidates will demonstrate clear understanding of both positive and negative aspects. 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. [7 - 8 marks]</p> <p>Knowledge requirements <i>Positive Impact:</i></p> <ul style="list-style-type: none"> • feeling of security • will be well cared for • all her needs will be looked after • professional carers available 24/7 • carers will understand her needs • supervised activities will be available • increased social life with other residents • improved confidence • reassure her she is not the only one with same disorder • no need to worry about her forgetfulness <p><i>Negative Impact:</i></p> <ul style="list-style-type: none"> • will miss her family • feel isolated • withdrawn • feel dependent • decreased motivation • low self-esteem • lack of confidence • feel no-one loves her anymore • get even more agitated/angry • her freedom has been taken away • loss of independence • confused • upset/distressed/depressed 		8
		Total	15

Question	Answer	Mark	Total
6(a)	<p>Level 1 Candidates will identify one or two effects of Rhys losing his wife. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive. [0 - 3 marks]</p> <p>Level 2 Candidates will describe the effects on Rhys losing his wife taking into consideration Rhys' particular care needs. A limited understanding of both positive and negative factors will be demonstrated. Answers will be factually accurate. There will be evidence of coherence within the work. There will be noticeable errors of grammar, punctuation and spelling. [4 - 7 marks]</p> <p>Level 3 Candidates will thoroughly evaluate the effects on Rhys losing his wife taking into consideration all of Rhys' particular care needs. A thorough understanding of both positive and negative factors relating to Rhys will be demonstrated. 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. [8 - 10 marks]</p> <p>Knowledge requirements</p> <p><i>Negative effects on Rhys:</i></p> <ul style="list-style-type: none"> • lost his lifetime partner • feel angry that she has gone • lonely/isolated/withdrawn • stress/depression • may feel confused • no one to share experiences with • may feel guilty it was not him that died • feel bereaved/sad/unhappy • his health could suffer • could pine for her • low self-esteem/feel worthless • lack of confidence • could give up on life/become suicidal • may not bother to cook for himself/poorer diet • difficulty coping • poor social life <p><i>Positive effects on Rhys:</i></p> <ul style="list-style-type: none"> • feel relieved she is not suffering any more • able to concentrate on looking after himself • feel reassured he did everything he could to help her • take up new hobbies/interests • spend more time with friends • visit his family more • able to go on holiday • enjoy doing the things he wants to 		10

Question	Answer	Mark	Total
6(b)	<p>Level 1 Candidates may identify one or two service providers who could support Rhys with little if any description of their role. Justification will be lacking. 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. [0 - 3 marks]</p> <p>Level 2 Candidates will make a limited description of care provision. Appropriate forms of care will be identified and the role of potential service providers clearly described. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling. [4 – 7 marks]</p> <p>Level 3 Candidates will analyse the care provision role of specific service providers justifying their choice by linking specific skills and qualities to provide for Rhys' particular care needs. Answers will be factually accurate, using appropriate terminology. 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. [8 - 10 marks]</p> <p>Knowledge requirements</p> <p><i>Service providers:</i></p> <ul style="list-style-type: none"> a) social worker b) key worker/care manager c) occupational therapist d) counsellor e) GP f) Advocate g) benefits agency h) support groups/voluntary groups i) domiciliary care j) home care assistant k) community nurse l) day centre m) optician n) meals on wheels <p>[Choices will be realistic. The descriptions will be accurate and link to the providers identified.]</p> <p>[A high level of understanding will be shown with the accurate application of underpinning knowledge]</p>		10
		Total	15

Total Mark Available: 100

Analysis of marks:

Question	AO1	AO2	AO3	AO4	Total
1(a)	3				3
1(b)	2	2			4
1(c)	3	3			6
1(d)		2			2
2(a)	4				4
2(b)	3	2			6
2(c)	1	2		3	5
3(a)	5				5
3(b)	3	3			6
3(c)	1	1	4	3	9
4(a)	3	3			6
4(b)	3			3	6
4(c)		1	1	1	3
5(a)	2			2	4
5(b)		3			3
5(c)	2	2	4		8
6(a)	1	1	6	2	10
6(b)		1	2	7	10
Totals	36	27	17	20	100
	30 - 40	20 - 30	15 - 25	15 - 25	

Report on the Units January 2006

F910: Promoting Quality Care

General Comments:

Overall candidates performed well in this paper and there was a good range of marks. Candidates found the more structured format of the paper beneficial and there was less unnecessary 'waffle'.

Some candidates were not referring enough to the content of the new specification, for example the new Care Values and Barriers.

Candidates also lost marks by not reading the questions carefully enough and therefore missing out on valuable marks of subject areas they clearly knew.

The quality of written communication was poor in some scripts. It must be stressed that this is an AS GCE paper and candidates need to be equipped with the appropriate language skills

Some centres entered candidates too early as they were unprepared and did not possess the subject specific terminology or knowledge required to tackle the paper.

Comments on Individual Questions:

Question No.	
1 a i	Well answered – some candidates lost marks by not referring to the scenario in Text 1
1a ii	Well answered
1b i	A concerning number of candidates did not know this
1 b ii	Some candidates did not understand what was meant by 'areas' and listed types.
1 b iii	Many candidates lost marks by putting in the Equal Opportunities Commission not the Commission for Racial Equality
1 c	Well answered but some candidates did not relate the examples to ethnic minorities or the links were unexplained, for example 'having no money'
2 a and b	Well answered
2 c	Candidates lost marks by relating all the benefits to James of attending a training session. Answers needed to be more fully explained.

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- 2d** Many candidates answered this very well and scored full marks. However some candidates used the old care values or did not give examples of how care workers could actually apply the care values in their day- to- day work.
- 3a** Poorly answered, especially for 'Becky'. Candidates wrote that she would 'lose her job' or were too vague and said Becky would be 'upset' or would have to tell 'someone'. They need to be more specific and accurate about her professional duties/emotions.
- 3 b** Well answered except 'breaking the law' was not accepted. It has to be breaking a 'serious' law.
- 3c** Candidates found the benefits to service users easier to answer than to service providers. Too much repetition and judgemental statements, for example, 'all bullying will stop'
- 3 d** Few candidates could actually name the legislation.
- The content was answered well by many candidates with good technical language. Candidates found it harder to discuss the benefits to the children and wrote responses like 'It would make them feel safer' – this was not accepted.
- 4ai** Well answered
- 4aii** Candidates lost many marks as they did not read the question properly. It asked for how the agencies teach **discriminatory attitudes** but many candidates wrote the opposite – how they teach non discriminatory attitudes.
- 4b** Many candidates lost 5 straightforward marks as they had no knowledge of this. It is a new area of the specification and is listed in the WYNTL section.
- 4c** Well answered. Candidates lost marks for repetition, for example, Questionnaires, interviews and surveys all counted as one response.
- 5a** Very few candidates knew what Social Exclusion meant. Many candidates thought it meant being 'left out' from social activities. This is an important term to explore with candidates.
- 5b** Well answered on the whole but some of the ways to facilitate access were unrealistic and therefore awarded no marks.
- 5c** Very well answered – a popular question with many candidates gaining full marks.
- 6a** Candidates found it difficult to outline the content of the act and wanted to just evaluate it. They need to have a clear idea about what it covers, where it applies, what it makes illegal and the commission it set up.
- 6b** On the whole this was well answered but it was fairly centre dependent. Candidates are developing their extended writing skills. They should be discouraged from bullet pointing their answers but to aim for more of an essay style format. Many candidates did not score over 10 Marks as they did not give an overall conclusion.

F913: Health & Safety in Care Settings

General Comments:

Entries represented a broad range of abilities and/or achievements, and therefore produced a reasonable range of marks despite the small number of entries.

The ability to carry out a risk assessment based on a plan of a care setting was surprisingly weak by many candidates. It is strongly recommended that centres provide many opportunities for candidates to practise this skill in preparation for the assessment. The most obvious weakness was the lack of links being made between the specific service users and the clearly identified risks.

Most legislation was correctly identified, although few candidates were able to give key facts in sufficient detail (e.g. in relation to RIDDOR)

Some confusion was apparent between standard precautions (which might be carried out anywhere, even a home setting), and special precautions, such as the wearing of protective equipment, which would be found only in a specialised setting.

The Health and Safety Law poster was generally not known, with the majority of candidates offering common sense, but largely incorrect, guesses at the answers.

Comments on Individual Questions:

Question No.	
1	Generally answered adequately, with most errors or omissions in parts (b) (ii) and (c)
2	Generally very well known, with the majority of candidates scoring highly. The use of the word 'germ' was not considered acceptable at AS level to indicate an infectious agent e.g. bacterium.
3 (b)	Knowledge of the five stages of risk assessment was either good or weak, with candidates generally scoring either 5 marks or 1. It is basic knowledge which should be learnt. A number of candidates described how to go about the process of risk assessment without actually attempting it. The main weakness of those attempting the risk analysis was a failure to link the (easily identified) hazards with the service users in the residential home. Purely generic answers limited candidates' achievements to the lower mark bands.
4	A number of candidates confused the answers to sections (a) and (b) by failing to differentiate between reducing the risk of outbreak of fire and the prevention of spread of fire to allow evacuation time. In section (d), successful candidates made clear links between the special needs of the service users and routine evacuation procedures. Some candidates identified the difficulties of those in the setting chosen quite

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clearly, but then did not say how these might have an impact on evacuation procedures.

- 5** The key facts about RIDDOR were not well known generally.

Candidates frequently gave poorly-defined answers about preparation for using a hoist. General principles such as the wearing of flat shoes and suitable clothing were not considered to be sufficiently specific to the situation to merit marks at AS level.

- 6** Section (a) was generally adequately answered although few candidates achieved the top marks available.

Section (b) was attempted to a reasonable standard by virtually all candidates. Many answers were very generic and therefore failed to meet the criteria for the higher mark bands. Equally some candidates wrote only from a service user's perspective, thereby failing to address the entire question.

Principal Moderator's Report:

General Comments:

Overall the standard of work submitted was encouraging and there was obvious correlation with unit specifications and assessment objectives. Candidates appeared to have grasped the basic structure of a unit and were able to present their evidence in a logical and coherent way. Candidates were able to describe concepts generically but performed less well at applying their understanding. There was a tendency to include all research material, in particular internet research, which should be avoided in the future. There was some evidence that candidates had not been made aware of the amplification set out in the specification and as a result their work had omissions, errors or lacked detail. For future reference it is imperative that every use is made of the amplification as well as the unit recording sheet and assessment evidence grid.

Most Centres were co-operative and sent their work promptly when requested. Centres with 10 or fewer candidates entered, sent all their work once the Moderator was known to them.

Many Centres annotated work clearly throughout the portfolio(s) and on the Unit Recording Sheet (UBS). When this was done, it was supportive to the candidate and the moderation process as it showed how the Centre had applied the assessment criteria. In cases where the criteria had not been met, the Moderator could see how "the judgements had been made" and could highlight specific aspects within the report to the Centre.

The majority of Centres had remembered to send the Centre Authentication Sheet along with their sample. This aided the moderation process enormously as it saved a letter being sent to the Centre requesting this sheet before moderation could begin. It should be noted that one form is required for each Unit entered, a reminder of the need for this form is sent with the request for sample. It is those centres entering less than 10 candidates that need to remember to include this form.

F911 Communication in Care Settings

Candidates were able to describe the four different types of communication used in care settings. Heavy use was made of textbooks and candidates do need to be careful that they write work up in their own words. When selecting the four communication skills used by care workers in the care setting, candidates must ensure they select four from those listed on page 13 of the specification. Some candidates tackled assessment objective two generically instead of applying it to a care setting and were unable to address how service users are valued and supported by the appropriate use of communication skills. Assessment objective two also requires candidates to demonstrate an understanding of the care values and explain their application in a care setting. Candidates should be encouraged to reference any research they have undertaken within the body of the text for assessment objective three. Often candidates were able to describe theories in isolation but were unable to show a level of understanding of theorist's views of the effects of communication on service users.

Candidates must refer to the amplification for assessment objective four in order to include sufficient detail in their write up of their interaction. Again, application of the care values during the interaction was poorly documented and insufficient evidence presented. For candidates to reach the middle mark band and beyond they must evaluate the interaction from their own and the service users/ care workers perspective.

F912 Promoting Good Health

Centres interpretation of assessment objective one varied and whilst this is acceptable for the 2006 sessions, it is important to note that for future reference the term 'from two perspectives', should be interpreted as that of the service user and service provider. For assessment objective two, candidates need to identify 'two key workers who are involved in promoting health', which clearly does not cover all key workers. Selection of an incorrect key worker, made it difficult for a candidate to identify and describe **two** preventative measures which they could apply in their work. Candidates provided evidence of both primary and secondary research for assessment objective three however it is worth noting that the factors that affect health and well being should be from different bullet points on page 27 of the specification. When providing evidence for the Health Promotion Campaign for assessment objective four, candidates must use the amplification which clearly identifies all the evidence required in order to address each mark band. Candidates must also ensure that they include records of observation of the health promotion campaign.

F914 Caring for People with Additional Needs

There was some confusion between causes of additional need and effects for assessment objective one. The different causes of additional need are listed on page 44 of the specification and a candidate should identify a disability from three of the seven causes listed. Once an additional need has been identified and described, the candidate should then go on to explain the effects the additional need has on the service user. For assessment objective two, candidates must ensure that they select one service provider that meets the **physical** needs of the service user and one service provider that meets the **emotional or social** needs of the service user. Careful consideration needs to be given to the types of research required for different mark bands for assessment objective three. In order to access mark bands two and three primary research must be carried out as well as secondary research. Evidence submitted for assessment objective four was generally of a good standard however some candidates lacked detail when evaluating the impact of a range of methods of support, aids and equipment used by the service user.

F915 Working in Early Years Care and Education

This unit was tackled well by the majority of centres, with candidates following the assessment objective criteria. Assessment objective three should have research sources referenced within the main body of the script. When considering factors which can affect learning and development, candidates should use page 60 of the specification to ensure they incorporate two factors from each of the three main groups.

F916 Health as a Lifestyle Choice

Many candidates focused heavily on the positive effects of exercise on an individual's **physical** health at the expense of an individual's **mental and social** health. Assessment objective two is based on an individual however candidates must first demonstrate a thorough understanding of all the macro and micro nutrients listed on page 72 of the specification. In order for a candidate to be able to suggest improvements and realistic changes to an individuals diet, information would first need to be gathered. This individual may not necessarily be the same individual used for assessment objective three however it would make sense to combine the two. Candidates must be guided by the amplification as to the specific content of the exercise plan and must include an advice sheet on safety factors to be considered. Assessment objective four requires candidates to evaluate both the likely effects of the diet recommendations and the exercise plan.

F917 Complementary Theories

This unit was interpreted well by centres and both the specification and amplification were referred to when completing the assessment objectives. It is important that one of the two complementary therapies studied is actually being used by the service user and that the other is appropriate for the service user. A copy of the questions used to assess the suitability of the two complementary therapies, should be included in the portfolio. There should be evidence of sound research practice and skills when collecting information to determine the views of the public

F918: Caring for Older People

General Comments:

Entries covered a range of centres and demonstrated achievement across the full ability range. It was encouraging to see that candidates have developed the ability to apply their knowledge and understanding to a range of different situations.

Candidates demonstrated a good level of understanding of the requirements of the specifications. Many candidates applied their knowledge accurately and with confidence. Candidates used the terminology of the unit appropriately however, some appeared to have difficulty spelling technical vocabulary correctly.

The majority of candidates used their time well and completed the whole paper. A few candidates gave irrelevant answers or simply repeated the same information in a slightly different way. Candidates who scored lower marks failed to respond to the key verb in the question and their answers generally lacked the required level of detail to achieve explain, analyse, discuss and assess.

Candidates demonstrated a sound understanding of the physical effects of ageing on body systems. Social, emotional and economic aspects of ageing were more challenging with a variety of levels of answers being evidenced. Confusion between community care and support services for older service users and professional care workers was apparent. Candidates need to be able to differentiate between these and apply their knowledge in their answers. Care values should be thoroughly covered as it is a requirement of several units, this was not seen in the papers of many of the candidates.

Comments on Individual Questions:

Question No.	
1 a	The majority of candidates were able to identify reasons why an older person may fall down stairs.
b	Candidates related well to the situation and gave clear effects of the fall on Matilda. A few candidates did not apply their answers to the situation and scored low marks. The emphasis of the question was on the way Matilda would be personally affected.
c	This question was answered well by most of the candidates. A few gave services rather than professional care workers. Marks were lost by candidates who did not describe how the care workers would help Matilda.
d	Few candidates accurately stated ways the NHS and Community Care Act would ensure needs were met.
2a	Well answered by most candidates. A minority did not give answers which applied to social life.
b	A high number of candidates did not seem to understand economic impact of

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retirement. Some gave social or physical answers

- c** Candidates scored well when they applied the information given. Social and emotional answers were the most popular. Some marks were lost because candidates did not explain their answers.
- 3a** Some candidates lost marks because they were not specific about their answers. 'Arthritis' alone was not accepted, the type either 'osteo' or 'rheumatoid' were required for the mark. Centres should note that candidates need to know in detail one of the examples for each category of disorders for the physical effects of ageing on body systems.
- b** Candidates knew the job role of an occupational therapist either very well or not at all. Many gave answers for a physiotherapist which was incorrect.
- c** Understanding of the care values was limited. Candidates did not fully analyse how the occupational therapist would apply them when assessing Shariff's needs. To achieve level two at least two of the three care values needed to be covered. A high proportion of candidates achieved level one.
- 4a** Candidates were able to identify three effects of ageing on Stephen. However, many lost marks because they omitted the required description.
- b** Limited understanding of community care services was evidenced. Candidates gave professional care workers which were not appropriate for this question. The quality of explanations varied. Candidates would benefit from practicing answers to this type of question.
- c** A high proportion of candidates did not understand the Carers Recognition and Services Act. Many guessed their answers. A minority showed sound knowledge.
- 5a** The job role of a community psychiatric nurse was understood by only a few candidates. Some gave generic answers which were applicable and gained marks.
- b** A well answered question. Candidates understood and applied their knowledge of the Mental Health Act accurately.
- c** Candidates who analysed fully gained excellent marks. Some candidates lost marks because they did not consider both positive and negative aspects of the move to the residential home.
- 6a** Candidates demonstrated a sound understanding of the negative impact on Rhys of losing his wife. Those who also considered the positive effects were able to access higher marks.
- b** Candidates were able to give a range of service providers who could support Rhys. Many did not give any information about their role and how the service providers would give support. Justification of their choice of service providers was generally limited with skills and qualities rarely mentioned.

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Unit Threshold Marks

Unit		Maximum Mark	a	b	c	d	e	u
F910	Raw	100	79	69	59	49	40	0
	UMS	100	80	70	60	50	40	0
F911-12	Raw	100	40	35	30	25	21	0
	UMS	100	80	70	60	50	40	0
F913	Raw	100	80	70	60	50	41	0
	UMS	100	80	70	60	50	40	0
F914-17	Raw	100	40	35	30	25	21	0
	UMS	100	80	70	60	50	40	0
F918	Raw	100	80	70	60	50	40	0
	UMS	100	80	70	60	50	40	0
	Raw							
	UMS							
	UMS							

For a description of how UMS marks are calculated see;
www.ocr.org.uk/OCR/WebSite/docroot/understand/ums.jsp

Statistics are correct at the time of publ

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