

## **Health and Social Care**

Advanced GCE

Unit **F918**: Caring for Older People

### **Mark Scheme for June 2013**

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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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## Annotations

Annotation	Meaning
	Good response/positive
	Negative
	Benefit of doubt
	Cross
	Level 1
	Level 2
	Level 3
	Repeat
	Noted but no credit given
	Tick
	Too vague
	Omission mark
	Development of point

Question		Answer	Marks	Guidance
1	(a)	<p><b>One</b> mark for each, FIVE required</p> <ul style="list-style-type: none"> <li>• no income from work</li> <li>• increased income from lump sum on retirement/ insurance policies mature</li> <li>• less income to rely on</li> <li>• rely on pension-private/state</li> <li>• have to budget carefully</li> <li>• may be eligible for benefits</li> <li>• mortgage paid off</li> <li>• less/more debts</li> <li>• may/may not be able to afford to go on holiday/leisure activities/socialising/hobbies</li> <li>• less/more money for luxuries</li> <li>• may need to buy economy foods/poorer diet</li> <li>• may/may not be able to treat grandchildren</li> <li>• less/more money for presents</li> <li>• no travelling expenses to work</li> <li>• downsizing of house to release money</li> <li>• may not be able to afford to run a car</li> <li>• may not be able to afford bills</li> <li>• eligible for a free bus pass/pensioner discounts</li> <li>• rely on savings</li> <li>• get a part-time job for extra cash</li> <li>• rely on family economically</li> </ul>	5x1	<p>Answers must link explicitly to 'money' – vague answers such as 'cannot go on holiday' are not acceptable as there is no monetary justification – use omission annotation ^ if no monetary justification.</p> <p>Links must be made to retirement situation.</p>

Question		Answer	Marks	Guidance
1	(b)	<p><b>One</b> mark for each lifestyle change, <b>THREE</b> required  <b>One</b> mark for each explanation, <b>THREE</b> required</p> <ul style="list-style-type: none"> <li>• <b>increased ability to participate in community activities</b> – <i>may take on voluntary work/raised self-esteem</i></li> <li>• <b>increased leisure time</b> – <i>so able to spend more time with family</i></li> <li>• <b>no longer see work colleagues/working</b> – <i>as she is no longer an employee and does not go to work each day</i></li> <li>• <b>able to go out and make new friends/spend more time with friends</b> – <i>so have increased/more varied support</i></li> <li>• <b>take up new hobbies/leisure activities</b> – <i>so feel more relaxed/fitter</i></li> <li>• <b>has the freedom to choose what she does</b> – <i>no longer in routine/have to work shifts</i></li> <li>• <b>could experience health problems</b> – <i>become dependent on others and rely on partner/husband/friends</i></li> <li>• <b>realisation that time is passing by/closer to death</b> – <i>so make the most of opportunities</i></li> <li>• <b>role in family</b>- <i>looking after children</i></li> <li>• <b>financial change</b> – <i>no longer supporting family as much/ buy more economic foods</i></li> <li>• <b>dependent on others</b> – <i>have to rely on family rather than being the leading role</i></li> <li>• <b>socially isolated/lonely</b> – <i>change in focus with friends/no longer working</i></li> </ul>	3x2	<p>Explanation will be relevant and valid.</p> <p>Explanations can be interchangeable - accept each once only.</p>

Question		Answer	Marks	Guidance
1	(c)	<p><b>One</b> mark for each emotional effect, TWO required  <b>One</b> mark for each explanation, TWO required</p> <ul style="list-style-type: none"> <li>• <b>feel more/less valued</b> – because she is able/unable to provide support to her family</li> <li>• <b>feel more/less needed/wanted</b> – because she is able/unable to do the things she has always wanted to</li> <li>• <b>raised/lowered self-esteem/self-worth</b> – because she has more/less freedom to choose what she does/loss of status</li> <li>• <b>raised/lowered confidence</b> – because she has been able/unable to make new friends/lost friends at work</li> <li>• <b>improved/lowered motivation</b> – because she is able to learn new skills/no longer using skills</li> <li>• <b>feel happy/unhappy</b> – because she is enjoying/not enjoying her retirement</li> <li>• <b>feel bored</b> – no longer working/less active</li> <li>• <b>worried/concerned</b> – because she does not like the changes that are happening to her</li> <li>• <b>stressed/depressed</b> – due to being dependent on others/because she is no longer relied on at work</li> <li>• <b>feel isolated/lonely/withdrawn</b> - loss of colleagues</li> </ul>	2x2	Emotional effects must link directly to <b>retirement</b> .

Question			Answer	Marks	Guidance
2	(a)	(i)	ONE from: <ul style="list-style-type: none"> <li>• osteoporosis</li> <li>• rheumatoid arthritis</li> <li>• rheumatism</li> <li>• osteo arthritis</li> </ul>	1x1	
		(ii)	<p><b>One</b> mark for each identification, TWO required  <b>One</b> mark for each explanation, TWO required</p> <ul style="list-style-type: none"> <li>• <b>isolation</b> – because they are unable to go out/people avoid them</li> <li>• <b>loss of friends</b> – because they do not understand their disorder</li> <li>• <b>not able to take part in some activities</b> – because of the risk of falling over/lack of mobility</li> <li>• <b>do not want to go out</b> – because of lack of confidence/embarrassed about their disorder</li> <li>• <b>people have negative reactions to them</b> – because they do not want them to be a burden</li> <li>• <b>make friends with carers</b> – because they see them regularly</li> <li>• <b>see less of family</b> – because they do not like to see what is happening to their loved one</li> <li>• <b>see more of family</b> – because they are concerned about them</li> <li>• <b>do not take part in hobbies/interests</b> – because they do not have the energy to do so</li> <li>• <b>make new friends with people in a similar situation to themselves</b> – because they understand their situation</li> <li>• <b>dependent on others</b> – as they cannot cope with their disorder</li> <li>• <b>socially excluded</b> – people do not understand their condition/stereotyping/prejudice</li> </ul>	2x2	<p>Effects must be SOCIAL - for example 'cannot afford to go out' is not appropriate.</p> <p>Effects will be linked to the disorder of the musculo-skeletal system.</p> <p>Explanations may be interchangeable but accept each explanation once only.</p> <p>Explanation of each effect will be relevant and valid.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
2	(b)	<ul style="list-style-type: none"> <li>• <b>use complementary therapies</b> – for relaxation/relieve symptoms</li> <li>• <b>occupational therapist</b> - to get information about aids and adaptations/rearrange furniture/bed downstairs</li> <li>• <b>physiotherapist</b>- give advice about exercise/ ways of moving</li> <li>• <b>take prescribed medication regularly</b> – relieve pain/aid mobility</li> <li>• <b>eat a balanced diet/talk to dietician</b> - to maintain healthy bones/joints/increase calcium in diet</li> <li>• <b>join a support group</b> - to share experiences/get advice</li> <li>• <b>talk to others in a similar situation</b> – to support them/gain advice</li> <li>• <b>research using internet/books/leaflets</b> – increase understanding of the disorder/to know what to expect as disorder progresses</li> <li>• <b>seek advice/support</b> from voluntary groups eg Age UK</li> <li>• <b>take gentle exercise</b> - to increase mobility</li> <li>• <b>ask family for support</b> – because they will feel more relaxed with them than carers</li> <li>• <b>move into sheltered accommodation/residential care</b> – will be safer/have all care needs met fully</li> <li>• <b>use meals-on-wheels</b> – to reduce</li> </ul>	6	<p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed explanation At least two coping strategies High QWC</p> <p><b>Level 2</b> Attempt to explain (more descriptive) At least two coping strategies Must have additional explanation for at least one of the ways to get to this level Mid-QWC <i>Sub-max of three marks for one coping strategy done very well.</i></p> <p><b>Level 1</b> List-like/muddled Lacks depth Low QWC</p>	<p><b>Level 3 (5–6 marks)</b> Detailed explanation of at least <b>two</b> coping strategies an older person could use to relieve the effects of the chosen disorder of the musculo-skeletal system. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (3–4 marks)</b> Candidates will attempt to explain at least <b>two</b> coping strategies an older person could use to relieve the effects of the chosen disorder of the musculo-skeletal system. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>Sub-max of three marks for one coping strategy done very well.</i></p> <p><b>Level 1 (1–2 marks)</b> Candidates will identify coping strategies an older person could use to relieve the effects of a disorder of the musculo-skeletal system. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>



Question			Answer	Marks	Guidance	
					Content	Levels of response
			<p>safety risks when preparing meals/make sure they eat a balanced diet</p> <ul style="list-style-type: none"> <li>• <b>support from domiciliary carers</b> – to help with daily living activities eg. cooking, laundry, making bed</li> <li>• <b>talk to professionals</b> – to get information about condition</li> </ul>			

Question		Answer	Marks	Guidance	
				Content	Levels of response
2	(c)	<p><b>One</b> mark for each identification, TWO required  <b>One</b> mark for each explanation, TWO required</p> <ul style="list-style-type: none"> <li>• <b>GP</b> – <i>prescribe medication/refer to hospital consultant</i></li> <li>• <b>Hospital consultant</b>- assesses need for an operation</li> <li>• <b>physiotherapist</b> – <i>give exercises to improve mobility</i></li> <li>• <b>occupational therapist</b> – <i>assess home for aids/adaptations</i></li> <li>• <b>home care assistant/domiciliary carer</b> – <i>provide personal care at home</i></li> <li>• <b>district/community nurse</b> – monitor progress/administer medication</li> <li>• <b>dietician/nutritionist</b> – give advice about diet/foods to eat/avoid</li> <li>• <b>complementary therapist</b> – <i>give complimentary treatments to assist with disorder</i></li> <li>• <b>health visitor</b> – <i>give advice/guidance/monitor health</i></li> <li>• <b>health care assistant</b> – <i>give advice/monitor health</i></li> <li>• <b>rheumatology specialist nurse</b> – <i>provide advice/monitor progress/teach how to give self-injections</i></li> <li>• <b>social worker</b> – <i>assess needs/devise care plan/monitor care provision</i></li> </ul>	4	<p>Roles must be relevant – eg provision of ramps by practitioners is not appropriate.</p> <p><i>Doctor</i> is acceptable for GP.</p> <p><i>Care worker</i> is too vague so no marks awarded</p>	

Question		Answer	Marks	Guidance
3	(a)	<p><b>One</b> mark for each, <b>FOUR</b> required</p> <ul style="list-style-type: none"> <li>• unable to eat a normal diet/loss of appetite</li> <li>• weaker stomach muscles</li> <li>• weak muscles in digestive tract</li> <li>• dehydration due to loss of fluids</li> <li>• weak muscles in the rectum</li> <li>• diarrhoea/loose stools</li> <li>• constipation</li> <li>• feeling very tired/lack of energy/fatigue</li> <li>• bloating of the abdomen</li> <li>• severe wind causing pain in stomach</li> <li>• painful piles</li> <li>• severe/unexpected- loss of weight</li> <li>• anaemia/lack of iron in the body</li> <li>• lack of essential nutrients</li> <li>• inflammation of the digestive tract</li> <li>• severe abdominal pain/ stomach cramps</li> <li>• blood in stools</li> <li>• passing mucus when you open your bowels</li> <li>• feeling of incomplete emptying of the rectum</li> <li>• chronic- nausea and vomiting</li> <li>• feeling that there is a need to empty bowels even when they have just been to the toilet</li> <li>• increased thirst</li> <li>• passing water frequently, especially at night</li> <li>• severe genital itching</li> <li>• blurred vision</li> </ul>	4x1	<p>Responses must describe the physical effects of a disorder of the digestive system.</p> <p><i>Do not accept pain/tired - too vague.</i></p> <p>Accept other appropriate answers.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
3	(b)	<ul style="list-style-type: none"> <li>• <b>lack of self-esteem</b> – because they rely on help from other people to keep them clean</li> <li>• <b>increased care needs</b> – because their body does not function properly/ increased accidents/soiling of clothing/bed</li> <li>• <b>tiredness/lack of energy</b>- poor diet/ effects of disorder</li> <li>• <b>self-image/identity changed</b> - people making fun of them/prejudice</li> <li>• <b>lack of confidence</b> – because they are unsure of how to deal with the disorder</li> <li>• <b>afraid/concerned</b> – because the disorder increases the risk of accidents</li> <li>• <b>embarrassment</b> – because of the smell/excess gas associated with their disorder</li> <li>• <b>pain/discomfort</b> – may affect their ability to carry out daily living tasks/participate in activities</li> <li>• <b>not able to go out socialising</b> - afraid of being too far away from a toilet/risk of accidents</li> <li>• <b>lack of visitors</b> – people lose interest in going to see them/ do not enjoy their company</li> <li>• <b>not see family/friends</b> – unable to cope with their condition deteriorating</li> <li>• <b>less leisure activities/hobbies</b> – due to risk of accidents</li> <li>• <b>have to spend time at medical appointments</b> – to keep disorder under control</li> <li>• <b>isolation/loneliness</b> – because cannot go out as much as before/ find it difficult to talk to</li> </ul>	7	<p>Answers must be linked to daily living activities to achieve Level 2 and 3 marks – not generalised.</p> <p><b>Levels checklist</b></p> <p><b>Level 3</b> Clear discussion At least two reasons High QWC</p> <p><b>Level 2</b> Attempt to discuss At least two reasons Mid-QWC <i>Sub-max of FOUR marks for one reason done very well.</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (6–7 marks)</b> Candidates will clearly discuss at least <b>two</b> reasons why Sid could find it difficult to cope with daily living activities. References will be directly made to the impact of a disorder of the digestive system and examples of daily living activities demonstrating thorough understanding. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–5 marks)</b> Candidates will discuss at least <b>two</b> reasons why Sid could find it difficult to cope with daily living activities. Candidates will attempt to link their answer to a disorder of the digestive system and daily living activities. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>Sub-max of FOUR marks for one reason done very well.</i></p> <p><b>Level 1 (1–3 marks)</b> Candidates will identify possible ideas why Sid could find it difficult to cope with daily living activities. There may be limited, if any reference to a specific disorder. Candidates may give minimal description and show</p>

Question			Answer	Marks	Content	Guidance
						Levels of response
			<p>others about their disorder</p> <ul style="list-style-type: none"> <li>• <b>confusion</b> – because they do not understand the impact of their disorder</li> <li>• <b>lack of concentration</b>- dehydration</li> <li>• <b>poor personal hygiene</b> – forget to wash/use of toilet frequently</li> <li>• <b>need for more hygiene/washing</b> – to prevent smells/ spread of infections</li> <li>• <b>stress/depression/lack of motivation</b> - impact of disorder</li> <li>• <b>change in diet</b> - effects of doing this</li> </ul>			<p>limited understanding. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question		Answer	Marks	Content	Guidance
					Levels of response
3	(c)	<ul style="list-style-type: none"> <li>• encouraging older person to be independent wherever possible</li> <li>• allowing older person to have choices about their care and treatment and not try and force them to do things they think she should</li> <li>• always asking older person what they need/want and not make presumptions</li> <li>• empowering older person to do as much as they can for themselves no matter how long it takes</li> <li>• making sure the support they provide is carried out safely</li> <li>• making sure they live in a safe environment</li> <li>• treating older person with dignity and respect</li> <li>• recognising personal beliefs and preferences</li> <li>• enabling them to maintain their identity</li> <li>• raising awareness of how to complain</li> <li>• being aware of their cultural/religious needs</li> <li>• addressing older person correctly/calling them by the name they prefer</li> <li>• keeping information confidential and sharing on a need to know basis</li> <li>• talking in an appropriate manner and not making them feel inadequate</li> <li>• providing care according to their individual needs</li> <li>• requesting consent before providing support</li> </ul>	9	<p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed analysis At least two ways High QWC</p> <p><b>Level 2</b> Attempt to analyse At least two ways Mid-QWC <i>Sub-max FIVE marks for one way done very well</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (7–9 marks)</b> Candidates will give a detailed analysis of at least <b>two</b> ways an occupational therapist should promote individual rights and beliefs when supporting an older person. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–6 marks)</b> Candidates will attempt analysis of at least <b>two</b> ways an occupational therapist should promote individual rights and beliefs when supporting an older person. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling.</p> <p><b>Level 1 (1–3 marks)</b> Candidates will identify ways an occupational therapist should promote individual rights and beliefs when supporting an older person. Candidates may give minimal description and show limited understanding. Answers are likely to be list-like, muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question		Answer	Marks	Guidance
4	(a)	<p><b>One</b> mark for each description, THREE required</p> <ul style="list-style-type: none"> <li>• lack of confidence in their own ability</li> <li>• low self esteem</li> <li>• frustrated that it takes longer to do daily tasks/ communication is more difficult</li> <li>• annoyed that has to rely on support from her daughter</li> <li>• angry that the sensory impairment affects her so much</li> <li>• worried/concerned/scared/frightened about how the sensory impairment could progress</li> <li>• unhappy/self-conscious that they need to use aids/adaptations</li> <li>• lack of motivation to go out and socialise</li> <li>• afraid of any operations/treatment necessary</li> <li>• feelings of isolation/loneliness</li> <li>• feel embarrassed – way they look</li> <li>• feel depressed - lack of independence</li> <li>• feel loved by others</li> </ul>	3x1	<p>Answers must be a description.</p> <p><i>Upset too vague. [If effect is directly linked to a sensory disorder the mark will be awarded].</i></p>

Question		Answer	Marks	Content	Guidance
4	(b)	<ul style="list-style-type: none"> <li>• <b>unable to see/feel sensation in her hands/feet</b> – which could make her fall</li> <li>• <b>hearing loss could affect her speech</b> – so unable to call for help</li> <li>• <b>poor hearing makes it difficult to hear traffic coming</b> - could get knocked down</li> <li>• <b>poor sight makes it difficult to see traffic coming</b> – so could get knocked down</li> <li>• <b>loss of feeling in her fingers/poor grip</b> – so she drops things easily</li> <li>• <b>tiredness could make her sensory impairment worse</b> – so she could drop tins/bottles/stumble and break bones</li> <li>• <b>poor mobility could result in accidents</b> – because she is unstable on her feet</li> <li>• <b>she could fall more easily/bump into obstacles</b> – because she cannot see kerbs/ shop displays</li> <li>• <b>she might not see steps/stairs</b> – causing her to trip</li> <li>• <b>she could become forgetful</b> - so not know where she is/how to get home</li> <li>• <b>driving to shops</b> - could be unsafe</li> <li>• <b>may find getting using an escalator difficult</b> – so trip and hurt herself/break bones</li> <li>• <b>she cannot see labels/prices</b> - so is vulnerable to exploitation/harm</li> </ul>	5	<p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed explanation At least two possible reasons High QWC <i>For level 3 reasons must link to Chantal eg age related or related to her sensory impairment.</i></p> <p><b>Level 2</b> Attempt at explanation At least two possible reasons Mid-QWC <i>Sub-max THREE marks for one reason done very well</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Levels of response</b></p> <p><b>Level 3 (5 marks)</b> Candidates will give a detailed explanation of at least <b>two</b> possible reasons why Chantal has an increased likelihood of potential dangers when going shopping. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (3–4 marks)</b> Candidates will attempt to explain at least <b>two</b> possible reasons why Chantal has an increased likelihood of potential dangers when going shopping. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>Sub-max THREE marks for one reason done very well</i></p> <p><b>Level 1 (1–2 marks)</b> Candidates will identify possible reasons why Chantal has an increased likelihood of potential dangers. There may be explicit reference to going shopping. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>



Question		Answer	Marks	Content	Guidance
					Levels of response
4	(c)	<ul style="list-style-type: none"> <li>• assess the ability of Angelique to provide care</li> <li>• social services must take this into consideration</li> <li>• Angelique is not expected to take on duties of professional care worker</li> <li>• care plan will be written to make sure Chantal's needs are met</li> <li>• professionals work together with Angelique to provide care</li> <li>• information given about services available</li> <li>• allow Angelique to have maximum support</li> <li>• Angelique and Chantal will be fully involved in the assessment of her needs</li> <li>• choices will be offered</li> <li>• services delivered in a seamless manner</li> <li>• provide respite care to give Angelique a break</li> </ul>	7	<p>Must be reference to Angelique to achieve level 2 and above marks – application of knowledge is required.</p> <p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed analysis At least two ways High QWC</p> <p><b>Level 2</b> Attempt to analyse At least two ways Mid-QWC <i>Sub-max FOUR marks for one way done very well</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (6–7 marks)</b> Candidates will give a detailed analysis analyse of at least <b>two</b> ways the Carers Recognition and Services Act 1995 ensures Angelique receives the support she needs to care for Chantal at home. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–5 marks)</b> Candidates will attempt to analyse at least <b>two</b> ways the Carers Recognition and Services Act 1995 ensures Angelique receives the support she needs to care for Chantal at home. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>Sub-max FOUR marks for one way done very well.</i></p> <p><b>Level 1 (1–3 marks)</b> Candidates will identify ways the Carers Recognition and Services Act 1995 ensures Angelique receives the support she needs to care for Chantal at home. Answers are likely to be list-like. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question		Answer	Marks	Content	Guidance
					Levels of response
5	(a)	<p><b>Health-care services</b></p> <ul style="list-style-type: none"> <li>• <b>GP surgery</b> - GPs prescribe medication to reduce pain</li> <li>• <b>community nursing</b> - monitor health to assess changes/administer medication/take blood pressure/pulse</li> <li>• <b>physiotherapy</b> - provide exercises to improve circulation/strengthen heart</li> <li>• <b>health visiting</b> – advise on health living practices to improve safety/reduce risks/monitor health</li> <li>• <b>NHS Direct</b> – provide advice and guidance if her condition worsens</li> <li>• <b>ambulance service</b> – provide transport to hospital appointments/provide emergency treatment if circulatory disorder re-occurs.</li> <li>• <b>community pharmacist</b>- advice on medication/reassurance</li> <li>• <b>visiting dietician</b>- advice on diet</li> </ul> <p><b>Social-care services</b></p> <ul style="list-style-type: none"> <li>• <b>social services</b> - social worker - assess needs to produce a care plan to ensure needs are met/care manager – monitor care plan and ensure needs are being met</li> <li>• <b>occupational therapy</b> – assess home for aids and adaptations/provide specialist aids/adaptations/advise on safe practices to improve independence</li> </ul>	7	<p>Accept relevant examples of practitioners who work for the service.</p> <p>Care worker is too vague to be awarded mark</p> <p>Services must be linked to supporting Aisha to live in her own home.</p> <p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed explanation At least two different types of community care services High QWC</p> <p><b>Level 2</b> Attempt explanation At least two different types of community care services Mid-QWC <i>Sub-max FOUR marks for one type of community care service done very well</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (6–7 marks)</b> Candidates will give a detailed explanation of how at least <b>two</b> different types of community care services that could provide support for Aisha at this time. Relevant examples of services will be used to highlight the answer. A thorough understanding of the support provided will be evident. 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, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–5 marks)</b> Candidates will give a limited explanation of how at least <b>two</b> different types of community care services that could provide support for Aisha at this time. Examples of services will be used to highlight their answer. A basic understanding of the support they could provide will be evident. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>(Sub-max 4 marks for ONE type of service covered very well)</i></p> <p><b>Level 1 (1–3 marks)</b> Candidates may identify <b>one</b> or <b>two</b> different community care services that could provide support for Aisha at this</p>

Question			Answer	Marks	Content	Guidance
						Levels of response
			<ul style="list-style-type: none"> <li>• <b>day-care centre</b> – meet others in similar situations to share experiences, increase social interaction to make friends/reduce isolation/ exercise</li> <li>• <b>transport services</b> – take them to appointments safely</li> </ul> <p><b>Domiciliary services</b></p> <ul style="list-style-type: none"> <li>• <b>home-care</b> – provide support with daily living tasks, support with personal hygiene</li> <li>• <b>meals on wheels</b> – delivering ready-made meals to give the nutrients required/reduce potential risks of preparing own meals</li> </ul> <p><b>Private and third sector services</b></p> <ul style="list-style-type: none"> <li>• Age UK - appropriate services</li> <li>• British Heart Foundation - advice/ classes</li> </ul>			<p>time. There will be limited reference to specific types of services or the support provided. Understanding will be superficial. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question		Answer	Marks	Content	Guidance
					Levels of response
5	(b)	<p><b>Day-to-day tasks include:</b></p> <ul style="list-style-type: none"> <li>• administering medication</li> <li>• changing dressings</li> <li>• taking blood pressure/measures of health</li> <li>• interactions with other practitioners/services</li> <li>• interactions with family/friends</li> <li>• interactions with Aisha</li> <li>• discussing care provision</li> <li>• assessment of needs</li> <li>• completion of records</li> <li>• washing/showering</li> <li>• providing meals</li> </ul> <p><b>Promote equality and diversity</b></p> <ul style="list-style-type: none"> <li>• using non-discriminatory practice/language towards Aisha</li> <li>• providing care according to Aisha's needs for her circulatory disorder</li> <li>• never stereotyping Aisha because she has a circulatory disorder</li> <li>• identifying and fighting their own prejudices towards older people/those with circulatory disorders</li> <li>• using language that Aisha can understand when explaining the care they are providing</li> <li>• challenging others who may discriminate against her</li> <li>• checking that Aisha has understood what is said before</li> </ul>	8	<p>Accept other acceptable responses.</p> <p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed discussion At least two ways High QWC</p> <p><b>Level 2</b> Attempt at discussion At least two ways Mid-QWC Sub-max of FOUR marks for one reason done very well</p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (7–8 marks)</b> Candidates will give a detailed discussion of at least <b>two</b> ways practitioners should promote equality and diversity in their day-to-day tasks. There will be specific reference to day-to-day tasks they will carry out when providing care for Aisha. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–6 marks)</b> Candidates will briefly discuss at least <b>two</b> ways practitioners should promote equality and diversity in their day-to-day tasks when caring for Aisha. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. (<i>Sub-max 4 marks for one way done very well</i>)</p> <p><b>Level 1 (1–3 marks)</b> Candidates will identify ways the practitioners should promote equality and diversity with limited reference to their day-to-day tasks or provision of care for Aisha. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question			Answer	Marks	Guidance	
					Content	Levels of response
			continuing with her care <ul style="list-style-type: none"> <li>• listening carefully to Aisha when she is talking to them</li> <li>• using appropriate body language so that Aisha feels she can approach them for care</li> <li>• not labelling people as disabled/old</li> <li>• respecting Aisha's personal beliefs</li> <li>• not verbally abusing Aisha by swearing/shouting at her</li> <li>• not physically abusing Aisha/hurting her/hitting her</li> <li>• providing information in chosen language</li> <li>• encouraging Aisha to be as independent as possible/do as much as she can for herself</li> </ul>			

Question		Answer	Marks	Content	Guidance
6	(a)	<ul style="list-style-type: none"> <li>cannot understand conversations</li> <li>may have to rely on someone to interpret conversations for them</li> <li>may lose track of the interaction</li> <li>low self-esteem</li> <li>lack of confidence</li> <li>others may get frustrated when trying to interact with them and give up trying</li> <li>may get frustrated when they are not understood</li> <li>can miss non-verbal signals through body language</li> <li>interactions tend to be less meaningful</li> <li>unable to concentrate fully on interactions they are having</li> <li>may need advocates/carers to help with interactions</li> <li>carers make an effort to interact with them in an effective manner</li> <li>clarity of speech could worsen as their disorder progresses</li> <li>others may not realise they have a disorder of the nervous system</li> <li>people may be distracted by shakes/behaviour when trying to interact with them</li> <li>loss of memory can make interactions difficult.</li> <li>personality changes making them withdrawn</li> <li>embarrassed due to effects of disorder - accept examples</li> <li>poor personal hygiene affects people wanting to talk to them</li> </ul>	8	<p>Accept examples of impact of disorder of the nervous system on older person's ability to interact.</p> <p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed analysis At least two ways High QWC</p> <p><b>Level 2</b> Some analysis At least two ways Mid-QWC <i>Sub-max FOUR marks for one way done very well</i></p> <p><b>Level 1</b> List-like/muddled Low QWC</p>	<p><b>Level 3 (7–8 marks)</b> Candidates give a detailed analysis of at least <b>two</b> ways disorder of the nervous systems could affect an older person's ability to interact with other people. Relevant examples will be used to highlight the answer given demonstrating a high level of knowledge and understanding of the impact of disorder of the nervous systems. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (4–6 marks)</b> Candidates give sound analysis of at least <b>two</b> ways disorder of the nervous systems could affect an older person's ability to interact with other people. Examples will be used to highlight the answer given demonstrating a sound level of knowledge and understanding of the impact of disorder of the nervous systems. Answers will be factually accurate. There will be evidence of coherence within the work. There may be occasional errors of grammar, punctuation and spelling.</p> <p><b>Level 1 (1–3 marks)</b> Candidates will give a basic analysis or identify <b>one</b> or <b>two</b> effects of disorder of the nervous system on an older person's ability to interact with other people. Examples may be omitted or vague. Answers are likely to be muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question		Answer	Marks	Content	Guidance
					Levels of response
6	(b)	<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>established Primary Care Trusts which makes provision for an older person</li> <li>improved quality of care which is important for an older person</li> <li>established the Commission for Health Improvement to monitor provision and ensure quality of services</li> <li>improved co-operation within the NHS so that care workers can share information</li> <li>improved co-operation/ communication between NHS and local authorities to ensure seamless provision of care for an older person</li> <li>increased flexibility between NHS and health related services to enable the best possible care to be provided</li> <li>improved monitoring of the quality of health care which would reassure an older person</li> <li>increased flexibility of provision to meet an older person's individual needs</li> <li>seamless provision of care to ensure there are no gaps in provision and all care providers know what each other is responsible for</li> <li>single provider can deliver both health and local authority services which would be less stressful for an older person</li> </ul>	12	<p><b>Levels checklist</b></p> <p><b>Level 3</b> Detailed evaluation (with conclusion for full marks) 2 strengths + 2 weaknesses Link the Health Act to meeting the needs of older people. High QWC</p> <p><b>Level 2</b> Some evaluation 2+1 or 1+2 Mid-QWC <i>Sub-max of SIX marks for strengths OR weaknesses</i></p> <p><b>Level 1</b> List-like/muddled Identification of features Limited understanding Low QWC</p>	<p><b>Level 3 (10–12 marks)</b> Candidates will clearly evaluate the impact of the Health Act on the provision of care and support for older people. There will be evidence of both strengths and weaknesses with explicit links to meeting individual needs of the older person. Conclusion for full marks. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p><b>Level 2 (6–9 marks)</b> Candidates will give a basic evaluation of the impact of the Health Act 1999 on the provision of care and support for older people. There may be evidence of both strengths and weaknesses with limited links to meeting the needs of the older person. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. <i>Sub-max of SIX marks for strengths OR weaknesses.</i></p> <p><b>Level 1 (1–5 marks)</b> Candidates will identify features of the Health Act 1999 which could have an impact on the provision of care for older people. Candidates may give minimal description and show limited understanding. Answers are likely to be list like and muddled, demonstrating limited knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p><b>0 – response not worthy of credit.</b></p>

Question			Answer	Marks	Content	Guidance
						Levels of response
			<ul style="list-style-type: none"> <li>• packages of care can be developed to suit an older person with a disorder of the nervous system 's individual needs/rights for services to be provided</li> <li>• pooled budgets to share responsibility of funding of care ensures an older person 's individual needs are met</li> <li>• minimum standards of care have to be met</li> </ul> <p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>• cost implications/lack of funding could mean services are not available which the older person needs</li> <li>• post-code lottery may limit services available</li> <li>• older person may be unaware of their rights so do not ask about services available</li> <li>• lack of communication between carer providers could mean mistakes are made/duplication of provision</li> <li>• older person may refuse support</li> <li>• older person may be too proud to accept the support available</li> <li>• poor record keeping can lead to problems in care provision.</li> <li>• lack of effectiveness of systems to ensure quality standards</li> </ul>			



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