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**General Certificate of Education
June 2010**

Health and Social Care

HC15

Final

Mark Scheme

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Question 1

0 1 1 mark for naming a correct practitioner and a further 2 (max) for describing their roles.
Likely answers:

(GP) prescribing antibiotics for (1) infected wound (1) e.g. /referral to a consultant (1)

(OT) assessing Theo (1) supporting him with new adaptations(1) advising on use of aids (1) plus relevant example (1)

(domiciliary care worker) assistance with daily living tasks (1) e.g. getting Theo dressed/bathed etc (1)

(social worker) needs assessment (1) plus detail e.g. of observation/criteria (1) care planning (1) giving information/referral to other services (1)

Community nurse(1) dressing wound (1) monitoring (1)

Physiotherapist (1) providing exercises (1) to restore movement(1) advice (1)

Hospital Consultant(1) specializing in spinal injuries. Carrying out surgery (1) reviewing progress (1)

(6 marks)

0 2 1 mark each (up to 3) adaptations. Do not credit aids. Likely answers:
Widened doorways; ramps; stair lift; bath hoist/walk-in bath; lowered work surfaces; hand rails; downstairs bathroom. Accept other relevant adaptations

(3 marks)

0 3 Disability Living Allowance

(1 marks)

0 4 Different practitioners from different organizations working together to manage and provide care. (1)
Risks of misunderstandings (1) poor communication(1) Poor scheduling/unpredictable provision(1) Lack of continuity (1)
Allows Theo to return home and have specialist professional help for a variety of needs (1) Contact with several practitioners who could give support and advice(1)

(4 marks)

0 5 Up to 3 marks for each LQF (1 for identification, 1 for explaining why it may be lacking and 1 for suggesting a way of providing the LQF)

Autonomy is the ability and opportunity to influence your own situation and actions. The accident has removed Theo's autonomy and opportunities should be given to empower him. For example the OT working with him to make him independent in using aids/adaptations.

Psychological security –The loss of mobility will have created a lot of anxiety and loss of confidence. Likelihood of depression. Theo may require professional help. Family and

friends and visiting practitioners will need to give a lot of support and reassurance.

Social Contact – The type of social contact Theo now has will be very different as he cannot be involved in the activities he was used to. Initially he will be reliant on friends to visit him but can be encouraged to make contact with spinal injuries organizations which can suggest day centres and possibilities for activities

Effective communication - Theo will need clear explanations about his condition from practitioners and information about future prospects. He will be very vulnerable and will need to be listened and given the opportunity to express his fears.

Social support - Theo will be very vulnerable and need the support of family and friends as well as practitioners involved in his care to improve his self confidence and self-esteem.

Occupation – is having something interesting or worthwhile to do such as a sporting activity or a hobby. The 'occupation' that Theo was used to experiencing might not be available to him now so he may be depressed and fear that there will be nothing for him. Family and friends can encourage him to make contact with spinal injuries organizations which can suggest day centres and possibilities for activities

Stimulation – Theo is likely to feel bored and require stimulating to make life interesting and challenging.

Other life quality factors are confidentiality, dignity, privacy, equitable treatment, and choice. These should only be credited if they are made relevant to Theo.

(6 marks)

Question 2

0 6 Any 5 of the following

A chromosomal disorder *(1) in which there is an additional chromosome (1) with the 21st chromosome pair/trisomy 21 (1) the extra chromosome comes either from the father or the mother (1) usually on the first cell division of a newly-fertilised ovum (1) sometimes as a result of a sperm with an extra chromosome (1). Mother's age is a contributory factor (1) possibly due to increased risk over time of damage to eggs(1)

* if this is not stated explicitly, but candidate goes on to give details of chromosomal abnormality, credit them with this point too.

(5 marks)

0 7 Amniocentesis (1) A needle is inserted through the woman's abdomen into the uterus/ and amniotic sac (1) positioned with the aid of an ultrasound scan (1) A sample of the amniotic fluid in the sac is extracted (1) at around 15/16 weeks into pregnancy (1) the tissue sample is tested for chromosomal abnormalities (1)
Chorionic villus sampling/CVS (1) tissue sample of placenta (1) extracted by needle via ultrasound (1) abdomen or catheter via cervix (1) 10 weeks (1)
The AFP/alpha foetal protein test (1) a test using a sample of mother's blood (1)
Accept percutaneous umbilical blood sampling/ PUBS (1) similar to CVS except blood is taken from umbilical cord (1)

(4 marks)

0 8 QWC question

Candidates who deploy appropriate knowledge and understanding and display higher QWC skills should be rewarded at the top of the mark band.

Conversely, those who display some confusion and weakness in QWC supporting knowledge and understanding should be placed at the bottom of the mark band.

For 7 marks the candidate should refer to at least 2 kinds of barriers and give some explanation as to why they occur. The barriers must be linked specifically to Down's so credit should not be given to barriers to physical access or transport.

Employment barriers employers rejecting him due to mistaken assumptions about his capabilities due to ignorance or lack of knowledge about what is possible. assuming all Down's people are the same when there are great differences.

Barriers resulting from ignorance, prejudice and discrimination

Avoiding social contact, bullying due to embarrassment fear or not knowing what to say. Ignorance due to not mixing with people with a disability. Lack of knowledge about Downs which assumes that for example Down's people can't live independently or have relationships

The expectations of disabled people and their informal carers might also act as a barrier eg. Mark's parents might have been over-protective and not wanted him to live independently.

Barriers to education: Mark's parents might have found the school unhelpful in providing the support necessary. The school might have been resistant to taking Mark. Mark may have experienced social isolation at school, for the reasons stated above

Barriers resulting from own impairment. Reduced cognitive abilities might limit the range of jobs available.

Banding

0

No response worthy of credit.

1-2 marks: Answers show some basic relevant knowledge but are very brief, fail to address the question, or have irrelevant details/inaccuracies.

3-5 marks: Barriers will be described but not explained as clearly as in the top mark band or only one barrier will be explained well. There may be some irrelevant detail.

6-7 marks: At least 2 kinds of barriers will be discussed and explanations given as to why they occur. Knowledge of Down's will be evident and the impact on Mark's parents as well as himself should be included. Correct terminology is expected at this mark band.

(7 marks)

0 9 1 mark for identifying provision, plus up to 3 for accurate detail. Likely answers

The Access to work Scheme (1) run by job centres(1) which provides grants to enable disabled people to start work(1) eg for aids and adaptations to the workplace(1) travel costs(1) and communication assistance at job interviews (1)

Placing Assessment and Counselling Teams (PACTS) (1) based at job centres (1) which include a Disability Employment Adviser (1)

Requirement of the Disability Discrimination Act (1) to provide equal access to job interviews (1) training (1) promotion (1) and adaptations to the workplace (1)

(4 marks)

Question 3

1 | 0 Paralysis/loss of movement/impaired movement (in that arm) (1)

(1 mark)

1 | 1 Blindness/partial sight

(1 mark)

1 | 2 Loss of skin sensation/numbness(1) in the left hand side of the body (1)

(2 marks)

1 | 3 Wernicke's area (1)

(1 marks)

1 | 4 Stroke(1), Infectious disease/meningitis(1), injury to nerve tissue/accident(1), death of neurons/anoxia/birth trauma(1), disease which attacks myelin sheath/MS(1)

(2 marks)

1 | 5 The act makes it illegal for an employer to treat a disabled person less well than an able-bodied person (1) for recruitment (1) training/promotion/dismissal(1). Requires employers to make reasonable adjustments to work place(1) plus example (1) including small businesses (1). The act ended the employment quota system(1)

(4 marks)

1 | 6 (1 mark for identification of aid. 1 mark for detail/clarification Example/benefit (1 mark) (might name specific software or give clear benefit)
Likely answers

Blindness/partial sight.

Aids

Low vision aids, computer screen readers, Braille books, notices, keyboards, typewriters, electronic text pads, auditory message systems in lifts and transport (eg taking lift, talking bus stop) audio description for cinema television

Benefits

Could enable a person to be employed if vision deteriorating. Eg someone with MS if the company invests in computer screen reader.

Enables independence/reassurance for daily living, when travelling and for recreation.

Possibility for email. Promotes equality of opportunity

Voice recognition software-User talks into a microphone and words appear on screen.

IBM ViaVoice, Dragon Naturally Speaking. HAL or JAWS for Windows

(3 marks)

1 7 (1 mark for identification of aid. 1 mark for detail/clarification Example/benefit (1 mark)
(might name specific software or give clear benefit)

Likely answers

Deafness/partial hearing

Aids

Hearing aids; hearing induction loops; television and telephone amplifiers, visual message display in transport, sign language translation.

Benefits

Enables independence/reassurance for daily living, when travelling and for recreation.

Promotes equality of opportunity

Explanation of loop system. Turn to T setting

(3 marks)

1 8 (1 mark for identification of aid. 1 mark for detail/clarification Example/benefit (1 mark)
(might name specific software or give clear benefit)

Likely answers

Speech impairment

Aids

Speech synthesisers;

spelling and word boards/cards for patients

sign language/makaton

Benefits

Input on keyboard spoken by computer. Slow conversation but useful for degenerative conditions eg MS.

User points to commonly used words or spells out words by pointing to different letters. eg stroke patients communicate with practitioners in care setting.

(3 marks)

1 9 1 mark for identifying symptom and 1 mark for giving example of resulting behaviour.

Lack of inhibition(1) loss of control over emotions/aggression (1) eg verbal physical anger with family members (1) masturbation in public/swearing

Memory Loss (1) especially for new information(1) Mrs Johnson might forget where their room/the toilet is (1)

Confusion (1) not being able to follow a conversation/making mistakes about dates and times(1) eg waking up at 4am and wanting breakfast

Impaired performance of learned skills(1) eg problems washing, dressing and eating

Disorientation(1) not knowing where she is/wandering into the rooms of other family members/getting lost/distressing herself and others.(1)

Increased action slips (1) eg mistaking the time of day; putting dirty dinner plates in cupboard (1)

Loss of social skills

Disturbed sleep pattern

Since the scenario suggests Mrs Johnson's condition is worsening, the family might experience the following

Voluntary incontinence(1) eg not being able to find the toilet or not being able to ask

Involuntary incontinence (1) poor personal hygiene and careless toileting(1)

Language may be affected by (1), inability to find correct word/substituting other words or non-words(1) inability to understand the speech of others(1) complete inability to produce and understand speech/aphasia(1)

(6 marks)

2 | 0 1 mark per point up to 4. Likely points:
Abnormalities in brain chemistry (1) including overproduction of beta-amyloid (1)
deficiency of acetylcholine (1) leading to death of neurons/nerve cells (1) and formation of
plaques/clumps of dead cells (1) can be genetic in younger people (1) cause not known
(1)

(4 marks)

2 | 1 Candidates who deploy appropriate knowledge and understanding and display higher
QWC skills should be rewarded at the top of the mark band.
Conversely, those who display some confusion and weakness in QWC supporting
knowledge and understanding should be placed at the bottom of the mark band.

Respite care is residential care for a brief/temporary period

Mrs Johnson will be provided with care and supervision. She will get to mix with other
people at the home. Her hygiene and nutrition needs will be well looked after. However
she might be upset because the home is an unfamiliar place. This could create more
disorientation and anxiety as she does not recognize anybody.

Melanie will get some rest and time to give attention to herself, her daughter and her
husband. She may feel guilty that she is not caring for her mother and not trust the care
in the residential home.

Her daughter will welcome the break and get more time with her mother. She may feel
more able to invite friends back

Melanie's husband will benefit from seeing his wife under less stress although she might
resent him for putting pressure on her to put her mum in care.

The care is appropriate as it gives the family a break and the chance to try out residential
care with a view to Mrs Johnson moving out of the family home permanently. They might
be able to make decisions for the future in a less stressful situation. Melanie might benefit
from the expertise of the care staff at the home.

Banding

0

No response worthy of credit

1-3 marks

Respite care might not be understood fully. Answers show some basic knowledge but
are very brief or fail to address the question

4-7 marks

Respite care must be understood. Answers will show some good understanding but may
lack detail or include some irrelevancies.

7-10 marks

A clear understanding of respite care The effects of the decision will be discussed for all
people listed including advantages and disadvantages. Answers will be well expressed
and logically ordered. Good technical knowledge will be shown when referring to
Alzheimers

(10 marks)