Rewarding Learning

ADVANCED
General Certificate of Education
2012

Health and Social Care

Assessment Unit A2 9

assessing

Unit 9: Providing Services

[A6H31]

WEDNESDAY 6 JUNE, AFTERNOON

MARK
SCHEME

1 (a) Write down three ways a voluntary organisation like Niamh might be funded. (AO1)

- lottery
- bequests
- fundraising events
- government funding
- sponsorships
- payment by service users
- donations
- government contracts
- proceeds from high street charity shop
- street collections.

(3 × [1]) [3]

(b) Discuss how the following barriers may be broken down for service users with mental health problems. (AO1, AO2, AO3)

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

Geographical location – barriers may be broken down by 24 hour help lines, provision of bus services, taxi service, Internet access, services provided in service users' homes or communities, e.g. befriending, home visiting, family support.

(1 × [3]) [3]

The psychological barrier of fear – may be broken down by reducing stigma related to seeking help through education and campaigns, by reassuring service users that they are not alone in their needs by providing information on illness, treatment and support, by initiatives such as counselling, assertiveness training, esteem building and helplines, and advertising campaigns targeted towards individuals who need help and support, by providing advocacy services, by providing services in the service users own home or community and by providing consistent care where possible.

(1 × [3]) [3]

(c) Explain four benefits of voluntary sector organisations such as Niamh providing care and support for service users with mental health problems. (AO1, AO2)

[1] for key phrase(s) [2] for explanation of each benefit

Answers may include an explanation of any of the following:
- responsive to needs, e.g. quicker to access due to less bureaucracy
- can provide 24 hour support
- are often staffed by individuals with an interest in the service users' needs and experience of mental health problems
- fill gaps in provision
- are often free of charge

- provide access to extra trained staff who specialise in supporting
  service users
- provide valuable opportunities which may not be available in the
  statutory sector, e.g. social outings, hobbies, therapies
- a commitment to the provision of information for service users and
  families
- lobby for rights of services.

This list is not exhaustive and other examples of benefits may be
accepted if they are relevant and valid.
(4 × [2])   [8]

(d) Analyse the needs of service users with mental health problems and
how they might be met by Niamh. (AO1, AO2, AO3, AO4)

Level 1 ([1]–[4])
Overall impression: basic
- displays limited knowledge of the needs of service users with
  mental health problems **and** how these needs might be met by
  Niamh
- there is limited analysis.

Level 2 ([5]–[8])
Overall impression: adequate
- displays adequate knowledge of the needs of service users with
  mental health problems **and** how these needs might be met by
  Niamh
- two types of needs must be analysed to achieve in this band
- there is adequate analysis.

Level 3 ([9]–[12])
Overall impression: competent
- displays very good knowledge of the needs of service users with
  mental health problems **and** how these needs might be met by
  Niamh
- three types of needs must be analysed to achieve in this band
- answers at the top of this mark band will analyse all four PIES
  needs and how they might be nmet.

Answers might include a discussion of some of the following points:
- physical needs such as accommodation, nutrition, medication and
  mobility needs may be met through providing sheltered housing
  schemes, day centres where lunch is provided and where care staff
  can provide medication, transport to day centres or to hospital or
  counselling appointments
- intellectual needs such as need for stimulation through activities
  like reading or hobbies, the need to understand their illnesses may
  be met by clubs where clients can become involved in creative
  activities and the provision of literature giving information about a
  range of mental illnesses and their treatments, support for gaining
  employment, running classes to develop skills, e.g. ICT

- emotional/psychological needs such as self-esteem, a sense of belonging, or emotional well being can be met by providing the opportunity to form self-help groups where service users can support each other, through counselling or therapies, developing independent living skills, supporting employment opportunities, providing access to advocacy services
- social needs such as communication and friendship can be met by providing service users with opportunities to socialise perhaps through social clubs or outings, providing day support and assistance with obtaining benefits or with managing money and through home visits, befriending services.

Answers should include a discussion of how Niamh can support clients in relation to PIES needs [12]

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2 (a) Explain four benefits to service users with mental health problems of effective inter-agency co-operation. (AO1, AO2)

[1] for key phrase(s) [2] for explanation of each benefit

Answers may include any four the following points:
- prevents service users "falling through the net"
- information can be passed on easily from one organisation to another
- service users needs are more likely to be met
- avoids repetitive questioning of service users by different organisations, reducing frustration
- service users can receive holistic care
- problems can be identified and dealt with more quickly
- expertise of range of agencies likely to improve quality of care
- helps to achieve seamless care
- service users at less risk of abuse as dealing with staff from a range of agencies.

(4 × [2]) [8]

(b) Discuss three strengths and three weaknesses of 'care in the community' for service users with mental health problems. (AO1, AO2, AO3, AO4)

Level 1 ([1]–[4])
Overall impression: basic
- displays limited knowledge and understanding of the strengths and weaknesses of 'care in the community' for service users with mental health problems
- there is limited discussion
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])
Overall impression: adequate
- displays adequate knowledge and understanding of the strengths and weaknesses of 'care in the community' for service users with mental health problems
- there is adequate discussion
- answers which address only strengths or only weaknesses cannot score more than [6]
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])
Overall impression: competent
- displays a very good knowledge of the strengths and weaknesses of 'care in the community' for service users with mental health problems
- there is competent discussion
- answer must address three strengths and three weaknesses to achieve in this band
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

Answers may address three of the following strengths and three of the weaknesses:
Strengths –
- normalisation/avoids effects of institutionalisation
- social integration
- reduction in stigma associated with hospitalisation
- more cost effective for government
- promotes independence
- sustains family and social contacts
- promotes empowerment, sense of belonging and self-esteem
- able to stay at home in family environment
- enables full assessment of clients' needs.

Weaknesses –
- patchwork provision
- lack of funding to implement it properly
- lack of support for service users in the community
- poor risk assessment leading to increase in accidents
- failure to support service users in the community – too many and not enough staff

- lack of adequate support and monitoring when service users move into the community from hospital or supported living
- not suitable for service users with very severe problems
- people with mental health problems may experience isolation/feel they are prisoners in their own homes
- may have to deal with discrimination, stereotyping and stigma
- increased vulnerability to abuse
- most services not focused on those with the most severe mental health problems
- family may be burdened with caring role so service users may feel guilty.   [12]

(c) Discuss three other ways the CPN might contribute to the care of service users with mental health problems. (AO1, AO2, AO3, AO4)

[1] For key phrase(s), [2] for discussion, [3] for fuller discussion

Answers may include a discussion of any three of the following points:
- may be responsible for care planning
- may liaise with other health care practitioners – GP, psychiatrist, psychologist, social worker
- may provide advice and support for informal carers and families who look after/live with service users in the community
- may support service users to become independent
- may refer service users to other professionals and or agencies
- attending case conferences
- provision of therapeutic interventions
- running support groups for service users
- may admit service users to a mental health unit
- provides acute/emergency care and out-of-hours cover
- involved in the rehabilitation and continuing care of service users in their own homes
- may act as an advocate.

Accept discussion of separate aspects of care planning (assessing, planning, implementing, monitoring, review, evaluation)
(3 × [3])   [9]   29

3 (a) Discuss **different** ways the following practitioners might support service users with mental health problems. (AO1, AO2, AO3)

[1] For key phrase(s), [2] for discussion of way practitioners might support clients, [3] for fuller discussion of one way or for three examples of how practitioners might support clients

An occupational therapist
- may carry out an assessment of needs, e.g. for aids
- may help clients to skills necessary for independence, e.g. work related skills
- may do activities with clients such as art therapy, anger management, esteem building
- will write reports on clients' progress
- will liaise with other professionals – social worker, GP
- may attend case conferences
- help people return to employment/find sheltered employment
- assess how the workplace meets the service users physical needs.

$(1 \times [3])$ [3]

A psychologist
- may conduct therapy sessions for example CBT
- may support clients to develop coping strategies
- may support family regarding managing clients in the home environment
- carries out assessments of psychological well being, e.g. using standardised tests to assist with diagnosis
- provides literature to support therapy sessions – may give client "homework" activities relevant to therapy
- takes part in case conferences
- contributes to the care planning process.

$(1 \times [3])$ [3]

A social worker
- responsible for assessing needs and organising a care plan/care package and monitors, reviews and evaluates the care plan
- liaises with other members of the multi-disciplinary team – occupational therapist, speech therapist, community nurse, GP
- may make referrals to ensure clients' health and social care needs are being met
- may liaise with voluntary organisations with regard to the support they can offer clients with mental illness
- may advise clients about financial benefits
- may liaise with clients' families about informal care
- will write reports regarding clients' progress
- may arrange for advocacy services for clients
- may provide or organise emotional support/counselling
- may conduct home visits to check on progress of clients
- approved social worker may be involved in detaining
- make decisions about living accommodation in conjunction with clients and their families

- help to organise employment opportunities for clients
- organise multi-disciplinary meetings
- assist clients with gaining access to day centres or educational facilities.

(1 × [3])   [3]

(b) Explain three ways the quality of care provided for patients with mental health problems in psychiatric hospitals might be measured. (AO1, AO2)

[1] for key phrase, [2] for full explanation of any three of the following

Answers may explain any three of the following ways of measuring quality:
- client feedback
- feedback from relatives
- meeting targets
- league tables
- complaints
- inspections
- charter marks
- feedback from staff
- health/clinical audits.

(3 × [2])   [6]

(c) Analyse how the Mental Health Order (NI) 1986 (amended 2004) has influenced the care of service users with mental health problems. (AO1, AO2)

Level 1 ([1]–[3])
Overall impression: basic
- displays limited knowledge of how the Mental Health Order has influenced the care of service users with mental health problems
- there is limited analysis
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([4]–[6])
Overall impression: adequate
- displays adequate knowledge of how the Mental Health Order has influenced the care of service users with mental health problems
- there is adequate analysis
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([7]–[9])
Overall impression: competent
• displays very good knowledge of how the Mental Health Order has influenced the care of service users with mental health problems
• there is competent analysis
• quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

Level 4 ([10]–[12])
Overall impression: excellent
• displays very good to excellent knowledge of how the Mental Health Order has influenced the care of service users with mental health problems
• there is highly competent analysis
• quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

Answers may include the following points:
• clearly defined mental illnesses
• named professionals/relatives who can be involved in detention process
• set up the Mental Health Commission
• no certification required for entry or departure from hospital
• admission and treatment without compulsion is a key principle
• sets out clear grounds for compulsory admission
• clients can be detained for assessment for 72 hours and can be kept for up to 28 days at the second stage and 6 months at the final stage, depending on the review process
• sets out conditions for appeal
• service users have a right to a tribunal
• introduced the approved social worker and defined their role
• makes provision for guardian ad litem. [12]

(d) Evaluate the effectiveness of three policies aimed at improving the quality of care provided in settings for service users with mental health problems. (AO1, AO2, AO3, AO4)

Level 1 ([1]–[4])
Overall impression: basic
*   displays limited knowledge of the effectiveness of policies in improving the quality of care provided
*   there is no evaluation of policies discussed
*   quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])
Overall impression: adequate
*   displays adequate knowledge of the effectiveness of policies in improving the quality of care provided
*   there is adequate discussion
*   there is evidence of evaluation of one or more of the policies discussed
*   quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])
Overall impression: competent
*   displays very good knowledge of the effectiveness of policies in improving the quality of care provided
*   there is competent discussion
*   candidates have evaluated all three policies at the top of this band
*   quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

Level 4 ([13]–[15])
Overall impression: excellent
- displays very good to excellent knowledge of the effectiveness of policies in improving the quality of care provided
- there is highly competent evaluation
- candidates have evaluated all three policies
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

Answers may include an evaluation of any three of the following policies:
Usefulness of whistle blowing policy
- a whistle blowing policy allows staff to report other staff who are behaving inappropriately in the course of their work
- staff are less likely to behave inappropriately
- vulnerable clients are better protected in an environment where whistle blowing is encouraged
- standards of care are likely to be higher in an environment where whistle blowing is encouraged
- roots out bad practice and poor practitioners
- guides practice and provides procedures for addressing problems such as poor practice in care
- gives staff the confidence to challenge inappropriate behaviour by others, even those senior to them
- because whistle blowers are protected by confidentiality procedures, they are more likely to report bad practice
- whistle blowing policy places a legal obligation on staff to disclose or report inappropriate behaviour
- helps to ensure clients rights are protected and promoted.

Problems with whistle blowing policy
- workers may be reluctant to report "inappropriate behaviour" by colleagues in case their identity becomes known to the remainder of the workers
- staff who whistle blow may experience bullying by other staff members
- it can cause mistrust between employees – this can affect team dynamics and so the quality of patient care can be negatively affected
- can be abused by employees – staff may invent incidents because of personal issues between staff.

Usefulness of Health and Safety Policies
- staff should be aware of what to do in order to promote health and safety for themselves and clients
- if an accident occurs in a care setting all staff should know the exact procedures and so be able to deal with the problem immediately
- clients in care settings will have a sense of security as they know that these policies are in place
- these policies should help to raise the standard of care available as they should lead to a safer and cleaner environment
- all accidents should be recorded in accordance with policy which allows improvements to be made and the risk of accidents to be reduced in the future
- health and safety policies help to protect staff and clients, for example cross infection should be prevented, safe storage of medication, source users attacking staff.

Problems with Health and Safety Policies
- money may not be available to buy equipment, for example hoists, etc.
- staff may not attend training relating to health and safety
- staff may cut corners for example, not use hoists as they are time consuming to use
- lack of staff/understaffing can mean that health and safety policies are sometimes ignored
- the policy is often long and complex and changes make it difficult for staff to keep up to date.

Usefulness of Complaints Policy
- this policy empowers clients as they know they can complain if they feel their needs are not being met
- provides a route for clients to complain and so helps to promote high standards of care
- staff are less likely to provide inappropriate care
- complaints policies allow reoccurring problems to be highlighted, for example if a number of clients complain about a member of staff then management will be obliged to investigate this and implement necessary changes
- complaints policy gives staff the incentive to work harder as they will want to avoid being complained about.

Problems with Complaints Policy
- clients may abuse this policy and invent incidents about staff
- clients who have complained may be ignored by staff and so their needs may not be met
- managers may use this as a weapon against staff
- clients may be reluctant to complain about standards of care as they do not want to get nurses into trouble who they feel are overworked
- it may be difficult for clients to complain about a manager – may not know the procedures.

Usefulness of the Staff Training Policy

- should keep staff up to date regarding training and practice issues and so care provision should be better
- staff should provide better standards of care for clients because they are properly trained
- staff training policy should help to promote health and safety for clients and staff, for example all staff should have regular training updates in manual handling, first aid, etc.
- it should help to promote anti-discriminatory practice
- should help staff to understand clients' rights
- helps staff to understand clients' needs and how they may be met
- should make staff aware of the importance of adhering to policies and procedures
- should make staff aware of current professional development issues and how they impact on the work they do
- should help to prevent accidents by making staff aware of their responsibilities in the area of health and safety
- encourages staff to provide better care, e.g. through team working.

Problems with Staff Training Policy

- staff may not be given the opportunity to attend organised training events due to work rotas or workload
- staff may not take seriously the training event and so may not benefit
- a high turnover of staff may mean that staff training becomes very expensive for managers and as a result managers may not send all staff for training
- not all organisations will have adequate facilities to provide staff training.

Usefulness of the Protection from Abuse of Vulnerable Adults Policy

- should make it less likely that clients may experience abuse or neglect
- should promote a sense of security for clients and staff
- should help to ensure standards of care are high
- makes it clear how incidents of abuse should be reported and dealt with
- helps to protect very vulnerable clients, such as those with mental illness
- should mean that staff are able to recognise abuse
- outlines procedures for reporting abuse
- allows for legislation to be implemented
- helps to prevent abuse
- outlines requirement for vetting prospective staff.

Problems with the Protection from Abuse of Vulnerable Adults Policy

- if staff don't know the policy it becomes worthless
- staff and clients may be afraid to report abuse
- some staff may just ignore the policy.

Usefulness of the Confidentiality Policy

- should promote a sense of trust between staff and clients – better relationship, improved quality of care
- should guide and inform staff regarding confidentiality and when it can be breached
- should maintain client privacy and dignity
- sets out procedures for staff to follow, e.g. in storing clients' records, in discussing information about clients with others, etc.

Problems with the Confidentiality Policy

- the policy may not be clearly understood and so may not be properly implemented – quality of care may be compromised
- staff may ignore policy – quality of care may be negatively affected
- hard to prove confidentiality has been breached. [15]

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Total **100**