

GCE

Health and Social Care

Advanced GCE

Unit F918: Caring for Older People

Mark Scheme for January 2011

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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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Any enquiries about publications should be addressed to:

OCR Publications PO Box 5050 Annesley NOTTINGHAM NG15 0DL

Telephone: 0870 770 6622 Facsimile: 01223 552610

E-mail: publications@ocr.org.uk

Que	Question		Expected Answer	Mark	Rationale / Additional Guidance
1	(a)	(i)	 One mark for naming a relevant sensory impairment from cataracts hearing degeneration sight degeneration 	[1] 1x1	Accept relevant examples which relate to aging. Sight, hearing, taste, smell, touch are not acceptable – candidates must state what the impairment is.
		(ii)	 One mark for each effect on daily living, FOUR required from may have difficulty cooking themselves cleaning her home could be difficult difficulty socialising with others people may not want to be friends with them safety impaired / they could have more accidents hygiene / washing may be impaired lack of stimulation from reading / television need to use aids / adaptations dependent on others to provide care difficult to get transport because cannot see / hear cannot hear phone / doorbell difficulty shopping Sub-max 2 marks for identification only	[4] 4x1	Responses must describe the effects – one-word answers do not describe.

Question	Expected Answer	Mark	Rationale / Additional Guidance
1 (b)	Level 3 [5 – 6 marks] Candidates will clearly explain at least two reasons why an older person with their chosen sensory impairment could be socially isolated. 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.	[6]	Explanations are interchangeable – accept only once
	Level 2 [3 – 4 marks] Candidates will describe or attempt to explain at least two reasons why an older person with their chosen sensory impairment could be socially isolated. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. (Submax 3 marks for one way done very well).		
	Level 1 [0 – 2 marks] Candidates will identify reasons why an older person with their chosen sensory impairment could be socially isolated. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.		
	 may need to use aids and adaptations – so that they can go out and meet others / socialise may refuse to wear glasses / hearing aid – so that they find it difficult to interact with others / maintain social life 		
	 family / friends may not visit them – so they do see people as often as they would like to do not take part in hobbies / interests – because 		

Question	Expected Answer		Rationale / Additional Guidance
	 they cannot see / hear / feel disempowered dependent on others – as they cannot do things for themselves socially excluded – people do not understand their condition / stereotyping / prejudice poor social skills – cannot interact with others difficulty communicating with others – because they cannot see / hear / make themselves understood increased risk of potential dangers – therefore they tend to stay at home on their own poor personal hygiene – so people do not want to know them / spend time with them lack of confidence / embarrassed to go out – because they feel different to others transport issues – they cannot get to places they want to go to / visit family / friends 	Mark	

Question	Expected Answer	Mark	Rationale / Additional Guidance
1 (c)	 One mark each for identification of TWO ways. Additional marks for relevant explanation of each way. activities provided for them to participate in - less time to fill at home / increased opportunities for interaction can form relationships with the carers / other older people – make them feel valued / respected prevent them feeling lonely / isolated – by enabling them to mix with others / share experiences provide advice / guidance / support – to help them cope with their impairment take them on trips – to stimulate their minds / give them different experiences 	[4] 2x1 2x1	Ways must relate to social development.

Question	Expected Answer	Mark	Rationale / Additional Guidance
2 (a)	 One mark for each economic change, FIVE required from no income from work increased income from lump sum on retirement / insurance policies mature less income to rely on rely on pension have to budget carefully may be eligible for benefits mortgage paid off less / more debts may / may not be able to afford to go on holiday / leisure activities / socialising less / more money for luxuries may need to buy economy foods / poorer diet may / may not be able to treat grandchildren less / more money for presents no travelling expenses to work downsizing of house to release money may not be able to afford to run a car may not be able to afford bills eligible for a free bus pass / pensioner discounts rely on savings get a part-time job for extra cash rely on family economically 	[5] 5x1	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 ^ Links must be made to retirement situation.

Qu	estion)	Expected Answer	Mark	Rationale / Additional Guidance
Qu 2	estion (b)		 One mark each for THREE lifestyle changes change in work pattern / no longer working no longer in a regular routine has more free time to choose what he wants to do realisation that time is passing by / closer to death spend more time with family / friends can participate in more leisure activities could take up new hobbies / interests may become dependent on others take up voluntary / community work 	Mark [3] 3x1	Responses must describe the effects to achieve a mark – one-word answers do not describe. Sub-max one mark for identification only.
			 no longer see work colleagues take on household chores / help out more at home / role reversal with wife not go out / socialise as often as used to cannot afford to socialise / participate in hobbies / go on holiday 		

Qu	estion	Expected Answer	Mark	Rationale / Additional Guidance
2	(c)	Level 3 [6 – 7 marks] Candidates will clearly evaluate the impact of at least two role changes on Henrys development. There will be explicit evidence of both positive and negative responses and for the top mark in this band a conclusion will be drawn. 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. Level 2 [4 – 5 marks] Candidates will evaluate the impact of at least two role changes on Henrys development. There will be evidence of both positive and negative responses. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Sub-max of FOUR marks for only positive or negative only. Level 1 [0 – 3 marks] Candidates will identify at least one role change and may attempt to evaluate the impact of this on Henry's development. Answers are likely to be list-like. Candidates may give minimal description and show limited understanding. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.	[7]	Candidates cannot gain marks for repetition of the positive and negative emphasis of each response. Roles and impacts may be interchangeable.
		Role changes		

Question	Expected Answer	Mark	Rationale / Additional Guidance
	 Fefects feel more / less valued / proud – he is able / unable to provide support to family / friends / others feel more / less needed / wanted – because he is able / unable to do the things he has always wanted to raised / lowered self-esteem / self-worth – because he has more freedom to choose what he does / feels valued raised / lowered confidence – because he has been able / unable to make new friends / lost friends at work improved / lowered motivation – because is / needs to learn new skills to carry out his new roles / no longer using skills feel happy / unhappy – because he is enjoying / not enjoying his new roles feel bored – no longer working / less active worried / concerned – because he does not like the changes that are happening to him improved / decreased health status – because he is more / less active intellectually stimulated – because he is doing different activities / learning new skills stressed / depressed – due to being dependent on others / because he is no longer relied on to provide for his family 		

Que	estion)	Expected Answer	Mark	Rationale / Additional Guidance
3	(a)	(i)	One from	[1]	
			 lung cancer emphysema chronic obstructive pulmonary disease (COPD) 		
		(ii)	 One mark for each, FOUR required from becomes very breathless / lungs less efficient lungs produce mucus which he coughs up coughing up blood can become dizzy / light headed increased danger to himself / needs others to care for 	[4] 4x1	Responses must describe the effects – one-word answers do not describe. Sub-max Two marks for identification only [Accept any other appropriate answer linked to chosen disorder]
			 him because he can no longer do so for himself pain / discomfort associated with the condition 		,
3	(b)		One mark each for identifying FOUR ways One mark each for each explanation linked directly to the ways identified, FOUR required	[8] 4x1 4x1	
			 assess his needs – to ensure they are met fully talk to his family / carers – to ensure all his needs are met teach breathing exercises – so he can breath more easily talk to him about his difficulties – to find out specific needs / to help him understand his disorder provide information about services / support available – to enable him to access them produce a care plan – to inform others of their responsibilities 		
			refer him to other practitioners – so that all of his differing needs are met		

Question	Expected Answer	Mark	Rationale / Additional Guidance
Question 3 (c)	Expected Answer Level 3 [6 - 7 marks] Candidates will clearly evaluate the effects of moving into a residential home on Owen. Both positive and negative effects will be considered. Judgements will be sound and link directly to the impact on Owen. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling. Level 2 [4 - 5 marks] Candidates will make a limited evaluation of the effects of moving into a residential home on Owen. Positive and negative effects will be considered superficially. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Sub-max of 4 if only positive or negative. Level 1 [0 - 3 marks] Candidates may identify effects of moving into a residential home on Owen. Evaluation will be lacking. Understanding will be superficial. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.	Mark [7]	Rationale / Additional Guidance

Question	Expected Answer	Mark	Rationale / Additional Guidance
	Positive effects:		
	+ increased safety / security with aids / adaptations in		
	place		
	+ staff there to support in emergency		
	+ support available 24/7		
	+ make new friends with other residents		
	+ increased social life		
	+ can join in activities arranged for residents		
	+ raised confidence		
	+ raised self-esteem		
	+ excursions / trips arranged		
	+ less stressful		
	Negative Effects:		
	- feel upset to leave his old home		
	- feel inadequate		
	- dependent on others		
	- lose old friends		
	- loss of self esteem		
	- depression		
	- feel he is losing control of his life / independence		
	- lack of confidence		
	- see less of his family / friends		
	 have less privacy as surrounded by other people all the time 		
	uic uilic		

Ques	stion	Expected Answer	Mark	Rationale / Additional Guidance
4	(a)	 One from osteoporosis rheumatoid arthritis osteoarthritis rheumatism 	[1]	
	(b)	 One mark for each identification, THREE required her condition gets worse – operation could cause complications which make her feel worse her condition improves – operation reduces the impact of the muscular skeletal disorder and enables her to do things she was not able to do before improved mobility – her affected joint becomes less painful and swelling reduced so she can move about initially decreased mobility – after the operation her joint will be swollen and bandaged so she will not be able to move about severe pain and discomfort – replacement of joints can be very painful at first as the body tries to reject it dependent on others – needs to be cared for because she is unable to do things for herself / lack confidence to do things for herself wound could get infected – not kept clean enough / may have to take antibiotics increased likelihood of potential dangers – she is not stable on her feet / lacks mobility so could fall 	[6] 3x1 3x1	

Question	Expected Answer	Mark	Rationale / Additional Guidance
	 needs formal support from care professionals my need physiotherapy to increase mobility / occupational therapist to assess for adaptations to the home / community nurse to change dressings need to take medication regularly – to relieve pain / symptoms have to do regular exercises – to improve flexibility of the joint have regular health checks – to monitor her progress / look for signs of infection 		
4 (c)	Level 3 [7 - 8 marks] Candidates will thoroughly analyse the role of at least two social-service practitioners justifying their choice by linking specific skills and qualities to provide for Ushmita's particular care needs when she returns home. Choices made will be realistic demonstrating a high level of understanding of their role with accurate application of underpinning knowledge. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling. Level 2 [4 - 6 marks] Candidates will attempt analysis of the roles of at least two appropriate social-service practitioners. There will be limited justification of their choices with minimal links to Ushmita's particular care needs when she returns home. Choices made will be realistic demonstrating sound understanding of their role with clear application of underpinning knowledge. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Submax 4 marks for one practitioner covered very well	[8]	Meals on wheels are not social services – they are a third sector service

Question	Expected Answer	Mark	Rationale / Additional Guidance
	Level 1 [0 - 3 marks] Candidates may identify social-service providers who could support Ushmita with little if any description of their role. Understanding will be superficial. Answers are likely to be list like, muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.		
	Social-service practitioners from ✓ Occupational Therapist ✓ Counsellor ✓ Home Care Assistant Social-service practitioners from Assess home for - aids / adaptations - ability to carry out tasks independently talk about problems / concerns Frowide personal care - support daily living tasks - carry out cleaning tasks assess needs / devise care		
	 ✓ Social worker plan / monitor care provision provide meals / activities / bath ✓ Day Centre shower Care Assistant Care needs include relief of pain / discomfort changing dressings to maintain cleanliness of wound 		
	 promotion of safety and security encouragement of independence prevent / reduce depression / stress washing / bathing / dressing 		

Question	Expected Answer	Mark	Rationale / Additional Guidance
5 (a)	 One from senile dementia / Alzheimer's Parkinson's multiple sclerosis 	[1]	
(b)	Level 3 [5 - 6 marks] Candidates will clearly analyse at least two coping strategies which could be used by a person with this disorder of the nervous system to help them remain independent for as long as possible. 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. Level 2 [3 - 4 marks] Candidates will describe at least two coping strategies which could be used by a person with this disorder of the nervous system to help them remain independent for as long as possible. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. (Submax 3 marks for one coping strategy done very well) Level 1 [0 - 2 marks] Candidates will identify coping strategies which could be used by a person with this disorder of the nervous system with little if any reference to helping them remain independent for as long as possible. Candidates may give minimal description. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.	[6]	

Question E	Expected Answer		Rationale / Additional Guidance
	 talk to others in a similar situation make sure everything is kept in a particular place so that they can find them ask for an assessment to be carried out by an occupational therapist for aids and adaptations to be fitted use aids / adaptations in the home / to go out and about (accept examples) ask family to support them seek advice / support from care professionals seek advice / support from third sector organisations eg Age Concern / Alzheimer's Society / MS support group 	Mark	

Condidates will clearly evaluate the impact of the Health Act 1999 on the provision of care and support for an older person with a disorder of the nervous system. There will be evidence of both strengths and weaknesses with explicit links to meeting individual needs of the older person. A conclusion will be drawn. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the answers. There will be evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling. Level 2 [4 – 6 marks] Candidates will give a basic evaluation of the impact of the Health Act 1999 on the provision of care and support for an older person with a disorder of the nervous system. 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. Submax of FOUR marks for only strengths or weaknesses. Level 1 [0 – 3 marks] Candidates will identify features of the Health Act 1999 which could have an impact on the provision of care for an older person with a disorder of the nervous system. Candidates may give minimal description and show limited understanding. Answers are likely to be list like and muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.	Question	Expected Answer	Mark	Rationale / Additional Guidance
		Level 3 [7 – 8 marks] Candidates will clearly evaluate the impact of the Health Act 1999 on the provision of care and support for an older person with a disorder of the nervous system. There will be evidence of both strengths and weaknesses with explicit links to meeting individual needs of the older person. A conclusion will be drawn. 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. Level 2 [4 – 6 marks] Candidates will give a basic evaluation of the impact of the Health Act 1999 on the provision of care and support for an older person with a disorder of the nervous system. 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. Submax of FOUR marks for only strengths or weaknesses. Level 1 [0 – 3 marks] Candidates will identify features of the Health Act 1999 which could have an impact on the provision of care for an older person with a disorder of the nervous system. Candidates may give minimal description and show limited understanding. Answers are likely to be list like and muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be		

Question	Expected Answer	Mark	Rationale / Additional Guidance
	Strengths		
	 established Primary Care Trusts which makes provision for an older person with disorder of the nervous system 		
	improved quality of care which is important for an older person with a disorder of the nervous system		
	 established the Commission for Health Improvement to monitor provision and ensure quality of services 		
	 improved co-operation within the NHS so that care workers can share information 		
	 improved co-operation between NHS and local authorities to ensure seamless provision of care for an older person with a disorder of the nervous system 		
	 increased flexibility between NHS and health related services to enable the best possible care to be provided for an older person with a disorder of the nervous system 		
	 improved monitoring of the quality of health care which would reassure an older person with a disorder of the nervous system 		
	 increased flexibility of provision to meet an older person with a disorder of the nervous system's individual needs 		
	 seamless provision of care to ensure there are no gaps in provision and all care providers know what each other is responsible for 		
	 single provider can deliver both health and local authority services which would be less stressful for an older person with a disorder of the nervous 		
	system		
	 packages of care can be developed to suit an older person with a disorder of the nervous system 's 		

Question Expected Answer	Mark	Rationale / Additional Guidance
individual needs / rights for services to be provide + pooled budgets to share responsibility of funding care ensures an older person with a disorder of to nervous system 's individual needs are met + minimum standards of care have to be met Weaknesses - cost implications / lack of funding could mean services are not available which the older person needs - post-code lottery may limit services available - older person may be unaware of their rights so neask about services available - lack of communication between carer providers could mean mistakes are made / duplication of provision - older person may refuse support - older person may be too proud to accept the sup available - poor record keeping can lead to problems in care provision	of he 's ot	

Question Expected Answer	Mark	Rationale / Additional Guidance
Level 3 [7 – 8 marks] Candidates will analyse in detail how at least two different health care services could provide support for Vladimir at this time. 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 errors of grammar, punctuation and spelling. Level 2 [4 – 6 marks] Candidates will make a limited analysis of how at least two different health care services could provide support for Vladimir at this time. 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. (Submax 5 marks for ONE type of service covered very well) Level 1 [0 - 3 marks] Candidates may identify one or two different health care services could provide support for Vladimir at this 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 little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.	Mark [8]	Rationale / Additional Guidance Accept relevant examples of practitioners who work for the service – it should be noted that technically these are not the services as asked for in the question.

Question	Expected Answer		Mark	Rationale / Additional Guidance
	Health care services	Support provided		
	✓ GP	✓ visit Vladimir at home✓ prescribe medication✓ refer to other		
		professionals ✓ monitor health / progress		
	✓ Community Nursing	 ✓ monitor health ✓ change dressings ✓ administering medication ✓ take blood pressure / pulse 		
	✓ Counselling	 ✓ talk to Vladimir about his concerns ✓ give advice / guidance ✓ help Vladimir to cope with changes in his lifestyle 		
	✓ Physiotherapy	 ✓ give Vladimir exercises to improve his mobility / breathing ✓ advise Vladimir about activities he should / should not do 		
	✓ Occupational Therapy	 ✓ assess Vladimir's ability to cope at home ✓ write a care plan ✓ arrange for care plan to be put into practice ✓ liaise with other community-care services ✓ provide aids / adaptations 		

Question	Expected Answer		Mark	Rationale / Additional Guidance
	✓ Ambulance service	 ✓ provide transport to hospital appointments ✓ provide emergency treatment if he has another heart attack 		
	✓ Health Visiting	 ✓ monitor health ✓ provide advice and guidance ✓ discuss coping strategies ✓ advise about changes in his diet 		
	✓ Hospice / intermediate care centre	 ✓ provide support if Vladimir finds it too difficult to cope at home 		
	✓ Dietetics service	✓ dietician could make sure Vladimir is eating a nutritious diet to maintain his strength		

Question	Expected Answer	Mark	Rationale / Additional Guidance
6 (b)	Level 3 [10 - 12 marks] Candidates will clearly analyse how the health-care practitioner in the residential home should apply at least two of the three aspects of the values of care in at least two day-to-day tasks when providing care for Vladimir. 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. Level 2 [6 - 9 marks] Candidates will basically analyse how the health-care practitioner in the residential home should apply at least two of the three aspects of the values of care in at least two day-to-day tasks when providing care for Vladimir. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Submax 6 marks for one aspect and one day-to-day task analysed very well. Level 1 [0 - 5 marks] Candidates will identify ways the health-care practitioner in the residential home should apply the values of care in their day-to-day tasks. Candidates may give minimal description and show limited understanding of different aspects of the values of care. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.	[12]	Candidates who just list ways of applying the care values can only achieve Level 1 marks.

Question	Expected Answer	Mark	Rationale / Additional Guidance
	Day-to-day tasks include		
	provision of care		
	administering medication		
	changing dressings		
	 taking blood pressure / measures of health 		
	 interactions with other care workers / services 		
	 interactions with family / friends 		
	interactions with Vladimir		
	discussing care provision		
	assessment of needs		
	completion of records		
	Maintain confidentiality		
	 respect Vladimir's wishes for information to be 		
	kept private		
	 do not talk about his care to those who do not 		
	need to know		
	 do not leave notes lying around for others to read 		
	 ask permission to share information 		
	 explain who will have access to his information 		
	 do not give information over the telephone unless 		
	identity of caller can be proven		
	 not leaving personal notes on the computer screen 		
	so that others can read them		
	 use a password to access computer records 		
	not talking about Vladimir by name at home so		
	that he can be identified		
	Promote equality and diversity		
	 never stereotype individuals 		
	 identify and fight their own prejudices 		
	 use language that Vladimir can understand 		
	 provide care according to his needs 		
	 challenge others who may discriminate against 		

Question	Expected Answer	Mark	Rationale / Additional Guidance	
	him check Vladimir has understood what is said listen carefully to Vladimir use appropriate body language not labelling people respect Vladimir's sexuality not verbally abusing Vladimir not physically abusing Vladimir provide information in chosen language provide meals according to his preferences Promote individual rights and beliefs encourage Vladimir to be independent allow Vladimir to have choices about his care and treatment ask Vladimir what he needs and wishes provide equipment so that Vladimir can do more for himself make sure all care is carried out safely provide a safe environment treat Vladimir with dignity and respect recognise Vladimir's beliefs enable Vladimir to maintain his identity encourage Vladimir to express his preferences raise awareness of how to complain being aware of Vladimir's cultural needs address Vladimir correctly / calling him the name he prefers	WIGHT		

Analysis of mark distribution:

Question	AO1	AO2	AO3	AO4	Total
1(a)i	1				1
1(a)ii	4				4
1(b)		3	3		6
1(c)	2	2			4
2(a)	5				5
2(b)		3			3
2(c)	3	4	3		7
3(a)i	1				1
3(a)ii	2	2			4
3(b)	4	4			8
3(c)		4	3		7
4(a)	1				1
4(b)		3	3		6
4(c)		2	2	4	8
5(a)	1				1
5(b)			3	3	6
5(c)			4	4	8
6(a)	2	2	2	2	8
6(b)	2		2	8	12
Totals	28	29	22	21	100
	25 – 35	25 – 35	15 – 25	15 – 25	

OCR (Oxford Cambridge and RSA Examinations) 1 Hills Road Cambridge **CB1 2EU**

OCR Customer Contact Centre

14 – 19 Qualifications (General)

Telephone: 01223 553998 Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

www.ocr.org.uk

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