

GCE

Health and Social Care

Advanced GCE

Unit F918: Caring for Older People

Mark Scheme for January 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
BOD	Benefit of doubt
×	Cross
Li	Level 1
L2	Level 2
L3	Level 3
REP	Repeat
SEEN	Noted but no credit given
✓	Tick
TV	Too vague
^	Omission mark
✓ +	Development of point

Highlighting is also available to highlight any particular points on the script.

Ques	tion	Answer	Marks	Guidance
1 (a)	(i)	One from: senile dementia/Alzheimer's Parkinson's multiple sclerosis	1	
	(ii)	 may have difficulty cooking for themselves cleaning her home could be difficult difficulty socialising with others/isolated people may not want to be friends with them difficulty communicating 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 difficulty shopping for food/clothes difficulty remembering how to carry out tasks/confusion concentration whilst carrying out day to day tasks difficulty remembering who/where they are/get lost easily may have difficulty dressing/doing up buttons fastenings. movement/mobility/shaking 	4	Responses must describe the effects – one-word answers do not describe. Sub-max 2 marks for identification only

Qı	estio	ı	Answer	Marks		Guidance
					Content	Levels of response
1	(b)		may refuse to use aids/adaptations – 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 at groups/clubs – because they cannot remember/ feel disempowered dependent on others / cannot go out on own – as they cannot do things for themselves / forgetful socially excluded – people do not understand their condition / stereotyping / prejudice / cannot go out to help/be part of the community poor social skills – forget people's names/manners/ forget family/friends difficulty communicating with others – because they cannot remember how to 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/ low self esteem because due to effects of disorder embarrassed to go out – because they feel different to others/of their condition transport issues – they cannot get to places they want to go to/visit family/friends harder to entertain visitors – so people do not come round to see them. pain/ mobility problems so cannot go out/see others	6	Explanations are interchangeable – accept only once. Level 3 – clear explanation of at least two reasons. Sub max THREE marks for one way done very well. Level 2 – Description/attempted explanation of at least two reasons Level 1 – Identification/list of reasons	Level 3 (5–6 marks) Candidates will clearly explain at least two reasons why an older person with a disorder of the nervous system 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. Level 2 (3–4 marks) Candidates will describe or attempt to explain at least two reasons why an older person with a disorder of the nervous system 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. Level 1 (0–2 marks) Candidates will identify reasons why an older person with a disorder of the nervous system 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.

G	uestio	Answer		Guidance	
				Content	Levels of response
1	(c)	 ONE mark each for identification of two ways ONE mark for relevant explanation of each way activities/hobbies 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/new friends – make them feel valued/respected/confident/happy prevent them feeling lonely/isolated – by enabling them to mix with others increase social skills- talking/ discussing/sharing experiences take them on trips – to stimulate their minds/give them different experiences 	4	Ways must relate to social development. Explanations can be interchangeable	

Question	Answer		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	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.

C	Questi	on	Answer	Marks	Guidance
2	(b)		 change in work pattern/no longer working no longer in a regular routine has more free time to choose what she 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 because of ill-health take up voluntary/community work no longer see work colleagues not go out/socialise as often as used to cannot afford to socialise/participate in hobbies could go on more /less holidays. 	3	Responses must describe the effects to achieve a mark – one-word answers do not describe. Sub-max one mark for identification only

Q	uestion		Answer	Marks	Guidance		
					Content	Levels of response	
2	(c)	•	able/unable to provide support to family/friends/others feel more/less needed/wanted — because she is able/unable to do the things she has always wanted to raised/lowered self-esteem/self-worth — because she has more freedom to choose what she does/feels valued/unvalued raised/lowered confidence — because she 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 her new roles/no longer using skills feel happy/unhappy — because she is enjoying/not enjoying her new roles feel bored — no longer working/ less active worried/concerned — because she does not like the changes that are happening to her improved/decreased health status — because she is more/less active intellectually stimulated — because she is doing different activities/learning new skills	7	Candidates cannot gain marks for repetition of the positive and negative emphasis of each response. Roles and impacts may be interchangeable. Level 3 – clear evaluation of at least two role changes with conclusion for full marks Level 2 – Evaluation including both positives and negatives. Submax of FOUR marks for only positive or negative only Level 1 – Identification of at least one role change attempted evaluation. Role changes: as a wife/partner as a parent as a grandparent voluntary worker member of the community as an employee/pensioner	Level 3 (6–7 marks) Candidates clearly evaluate the impact of at least two role changes on Helen. Explicit evidence of both positive and negative responses and for the top mark in this band a conclusion will be drawn. Factually accurate, appropriate terminology. Evidence of synthesis in answer. There will be few errors of grammar, punctuation and spelling. Level 2 (4–5 marks) Candidates evaluate the impact of at least two role changes on Helen. 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. Level 1 (0–3 marks) Candidates will identify at least one role change and may attempt to evaluate the impact of this on Helen. 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.	

Q	uesti	on	Answer	Marks	Guidance
3	(a)	(i)	ONE from: osteoporosis rheumatoid arthritis rheumatism osteoarthritis	1	
		(ii)	 poor mobility/difficulty walking weakened/unstable joints/joints give way easily climbing steps/stairs may be difficult pain in joints that are affected difficulty standing for long periods of time poor grip/jars/bottles are difficult to open joints stiffen/find it difficult to get out of chairs/cars/bath/bed swollen/inflamed joints decreased bone density/bones break more easily/brittle bones cannot lift heavy things chronic fatigue/lack of energy 	4	Responses must describe the effects – one-word answers do not describe. Do not accept weak bones Sub-max Two marks for identification only eg pain/tired [Accept any other appropriate answer linked to chosen disorder]

Question	Answer	Marks	Guidance
3 (b)	ONE mark each for identifying four ways ONE mark each for each explanation linked directly to the ways identified. • assess his needs – to ensure they are met fully • talk to his family/carers – to ensure all his needs are met • teach exercises – so he can move more easily • give massages to loosen joints/relax muscles • 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 in supporting his needs • refer him to other practitioners – so that all of his differing needs are met • provide hydro-therapy – to increase his mobility/reduce pain in his joints • analyse the way he stands/walks – to advise on need for insoles/using different techniques • provide him with mobility aids/equipment (accept examples) – to enable him to move around safely / independently	8	Examples of mobility aids include – sticks, crutches, walking frame, wheelchair

Question	Answer	Marks		Guidance
			Content	Levels of response
3 (c)	Positive effects: increased safety/security with aids/adaptations in place staff there to support in emergency warden 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 happy/content Negative Effects: feel upset to leave his old home feel inadequate 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 learned helplessness	7	Sub-max of FOUR marks if only positive or negative Level 3 – Clear evaluation of impact with conclusion for full marks. Level 2 – Limited evaluation including both positive and negative effects. Submax of FOUR marks for only positive or negative only. Level 1 – Identification of effects, superficial evaluation	Level 3 (6–7 marks) Candidates will clearly evaluate the impact on Frank of moving into sheltered accommodation. Both positive and negative effects will be considered in detail. Judgements will be sound and link directly to the impact on Frank. For top mark a conclusion must be given. 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 impact on Frank of moving into sheltered accommodation. 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. Level 1 (0–3 marks) Candidates may identify effects of moving into sheltered accommodation on Frank. 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.

C	uestion	Answer	Marks	Guidance
4	(a)	 ONE from: cancer of the bowel / stomach ulcerative colitis Crohn's Disease diabetes 	1	Guidance
		Irritable bowel syndromeChronic constipation		

Question	Answer		Guidance	
4 (b)	 her condition gets worse – operation could cause complications which make her feel worse her condition improves – operation reduces the impact of the disorder and enables her to do things she was not able to do before improved digestion of food – her affected part of the digestive system is removed/treated/becomes less painful and swelling reduced severe pain and discomfort – parts of the digestive system affected can be very painful at first due to bleeding/post-operative stress dependent on others – needs to be cared for because she is unable to do things for herself/lack confidence 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/may experience blackouts due to after effects of anaesthetic needs formal support from care professionals – may need physiotherapy to aid digestion/ occupational therapist to assess for adaptations to the home/community nurse to change dressings/home care assistant/GP need to take medication regularly – to relieve pain/symptoms have to do regular exercises – to improve digestion have regular health checks – to monitor her progress/look for signs of infection 	6	1 mark for each identification – 3 required 1 mark for each explanation – 3 required	

Q	uesti	on	Answer		Marks	Guidance		
						Content	Levels of response	
4	(c)		Social-service practitioners from:	Roles eg	8	Meals on wheels are not social services – They are a third sector service	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	
			✓ Occupational Therapist	 assess home for aids/adaptations safety issues ability to carry out tasks independently 		Level 3 – Thorough analysis of the role of at least two social care practitioners. Level 2 – Attempted analysis of the role of at	and qualities to provide for Tatiana'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	
			✓ Home Care Assistant	 provide personal care support daily living tasks carry out cleaning tasks 		least two social care practitioners. Submax FOUR marks for one practitioner done very well Level 1 – Identification	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.	
			✓ Social worker	assess needs/devise care plan/monitor care provision		of possible social care practitioners.	There will be limited justification of their choices with minimal links to Tatiana's particular care needs when she returns home. Choices made will be realistic demonstrating sound understanding of	
			Day Centre Care	provide meals/ activities/bath shower			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	
			 Counsellor 	listen and help them to cope with illness			grammar, punctuation and spelling.	
			Care needs include:	·			Level 1 (0–3 marks)	
			 relief of pain/disco 	omfort			Candidates may identify social-service practitioners who could support Tatiana with little if	
			 promotion of safet 	-			any description of their role. Understanding will be	
			 encouragement of 	•			superficial. Answers are likely to be list like,	
			 prevent/reduce de 	•			muddled, demonstrating little knowledge or	
				nal hygiene – washing/bathing			understanding. Errors of grammar, punctuation	
			support with dress	· ·			and spelling will be noticeable and intrusive.	
			daily living tasks –	•				
			 cooking nutritious 	meals				

Question	Answer	Marks		Guidance
			Content	Levels of response
5 (a)	 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 (accept examples) use aids and adaptations 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 UK /Disability Information and Advice Centres/Sensory Impairment support groups move into sheltered accommodation/residential care use meals-on-wheels to provide nutritious meals use complementary therapies to help relieve effects of sensory impairment research sensory impairment on the internet to find out more about it/what to expect learn sign language to help them communicate with others. use Braille/Makaton operation to remove cataracts/ ease symptoms of glaucoma 	7	Accept coping strategies which link explicitly to the disorder named Accept Age Concern as text books do not reflect current changes to Age UK Level 3 – Clear analysis of at least two coping strategies Level 2 – Describe at least two coping strategies Submax of FOUR marks for one coping strategy done very well Level 1 – Identify/list coping strategies/minimal description Sensory impairments:	Candidates clearly analyse at least two coping strategies which could be used by a person with a named sensory impairment to help them remain independent for as long as possible. Factually accurate, using appropriate terminology. Evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling. Level 2 (4–5 marks) Candidates describe at least two coping strategies which could be used by a person with a named sensory impairment to help them remain independent for as long as possible. Factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Level 1 (0–3 marks) Candidates will identify coping strategies which could be used by a person with a named sensory impairment 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.

Question	Answer	Marks	Guidance		
			Content	Levels of response	
5 (b)	 Strengths pwus have right to have needs assessed right to have services provided in accordance with published criteria pwus have the right to complain if the service is not provided care plan will be written to make sure needs are met practitioners work in partnership to care for individual needs information given about services available gives pwus maximum independence enables pwus to remain in their own home for longer consistent approach given by all carers pwus involved in the assessment of need choices will be offered H&SC services working together services delivered in a seamless manner high standards of care Weaknesses pwus not aware of their rights post-code lottery for provision of services financial constraints on provision pwus may be afraid to complain care is often rushed due to shortage of time allocations lack of communication between services records can be completed inaccurately some professionals do not work well with others 	8	Level 3 – Clear evaluation with conclusion for full marks. Candidates must link the NHS & Community Care Act to meeting the needs of older people Level 2 – Basic evaluation including both strengths and weaknesses. Submax of FOUR marks for only strengths or weaknesses. Level 1 – Identification of features, minimal description, limited understanding.	Level 3 (7–8 marks) Candidates clearly evaluate the impact of the NHS&CC Act on provision of care and support. Evidence of both strengths and weaknesses, explicit links to meeting individual needs of the older person. A conclusion will be drawn for full marks. Factually accurate, using appropriate terminology. Evidence of synthesis within the answers. There will be few errors of grammar, punctuation and spelling. Level 2 (4–6 marks) Candidates give a basic evaluation of the impact of the NHS&CC Act on the provision of care and support. There may be evidence of both strengths and weaknesses with limited links to meeting the needs of the older person. Evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Level 1 (0–3 marks) Candidates identify features of the NHS&CC Act which could have an impact on the provision of care. 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.	

Q	uestio	n An	swer	Marks	G	uidance
					Content	Levels of response
6	(a)	Health care services ✓ GP Surgery ✓ Community Nursing	Support Provided ✓ visit Habib at home to assess his needs/provide treatment ✓ prescribe medication ✓ refer to other professionals ✓ monitor health/progress ✓ monitor health ✓ administer oxygen ✓ administer medication ✓ take blood pressure/pulse ✓ check respiratory rate ✓ check peak flow	8	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. Level 3 – Clear explanation of how at least two different health care services could provide support Level 2 – Limited explanation of how at least two different health care services could provide support Submax FOUR marks for one healthcare service done very well. Level 1 – Identification of possible health care services	Candidates will explain in detail how at least two different health care services could provide support for Habib at this time. A thorough understanding of the support provided will be evident. Answers will be factually accurate, using appropriate terminology with explicit links to his respiratory disorder. 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 explain of how at least two different health care services could provide support for Habib at this time. A basic understanding of the support they could provide will be evident. Answers will be factually accurate with reference to respiratory disorder for higher marks in this level. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling.

Question	A	nswer	Marks		Guidance
				Content	Levels of response
	✓ Physio	 ✓ give Habib exercises to improve his breathing ✓ advise Habib about activities he should/should not do 			Level 1 (0–3 marks) Candidates may identify one or two different health care services who could provide support for Habib 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
	✓ Occupational Therapy	 ✓ assess Habib'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 			muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.
	✓ Ambulance Service	provide transport to hospital appointments ✓ provide emergency treatment if he has a respiratory attack ✓ monitor health ✓ provide advice			
	Health Visiting	and guidance ✓ discuss coping strategies ✓ advise about diet/ exercise			

Question	Answer		Marks	Guidance	
				Content	Levels of response
	 ✓ Hospice / intermediate care centre 	provide support if Habib finds it too difficult to cope at home			
	✓ Dietetics Service	dietician could make sure Habib is eating a nutritious diet to maintain his strength			

Question	Answer		Guidance		
			Content	Levels of response	
6 (b)	 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 Habib discussing care provision assessment of needs completion of records Maintain confidentiality: respecting Habib's wishes for information to be kept private not talking about his care to those who do not need to know not leaving notes lying around for others to read asking permission to share information explaining who will have access to his information not giving 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 using a password to access computer records not talking about Habib by name in public so that he can be identified 	12	Candidates who just list ways of applying the care values can only achieve Level 1 marks. Level 3 – Clear analysis of application of at least two of the three values of care in at least two day-to-day tasks Level 2 – Basic analysis of application of at least two of the three values of care in at least two day-to-day tasks. Sub max SIX marks for one aspect and one day-to-day task analysed very well. Level 1 – Identification of ways HCP should apply values of care.	Candidates will clearly analyse how the health-care practitioner in t 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 Habib. 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 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 Habib. Answers will be factually accurate. There will be evidence of coherence within the answers. There may be occasional errors of grammar, punctuation and spelling. Level 1 (0–5 marks) Candidates will identify ways the health-care practitioner 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	

Question	Answer	Marks	Guidance
			Content Levels of response
	 Promote equality and diversity: never stereotyping Habib identifying and fighting their own prejudices using language that Habib can understand providing care according to his needs challenging others who may discriminate against him checking that Habib has understood what is said listening carefully to Habib using appropriate body language not labelling people respecting Habib's sexuality not verbally abusing Habib not physically abusing Habib providing information in chosen language providing meals according to his preferences 		to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling will be noticeable and intrusive.
	 Promote individual rights and beliefs: encouraging Habib to be independent allowing Habib to have choices about his care and treatment asking Habib what he needs and wishes providing equipment so that Habib can do more for himself making sure all care is carried out safely providing a safe environment 		

Question	Answer	Marks	Guidance	
			Content	Levels of response
•	treating Habib with dignity and respect recognising Habib's beliefs enabling Habib to maintain his identity encouraging Habib to express his preferences raising awareness of how to complain being aware of Habib's cultural needs addressing Habib correctly/calling him the name he prefers			

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