

Cambridge Technicals Health and Social Care

Unit 3: Health, safety and security in health and social care

Level 3 Cambridge Technical in Health and Social Care
05830 - 05833 & 05871

Mark Scheme for June 2022

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This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

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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PREPARATION FOR MARKING ON-SCREEN

1. Make sure that you have accessed and completed the relevant and training packages for on-screen marking: *RM Assessor Online Training* and the *OCR Essential Guide to Marking*.
2. Make sure that you have read and understood the Instructions for On-Screen Marking and the mark scheme and the question paper for this unit. These are posted on the RM Cambridge Assessment Support Portal <http://www.rm.com/support/ca>
3. Log-in to RM Assessor and mark the **required number** of practice responses and the **required number** of standardisation responses.

PREPARATION FOR PAPER BASED MARKING

1. Make sure that you have accessed and completed the relevant training for paper based marking.
2. Make sure that you have read and understood the Instructions for Specialist Marking and the mark scheme and the question paper for this unit.
3. Before the Standardisation meeting you must mark at least 10 scripts from several centres. Use **pencil** and follow the **mark scheme**. Bring these **marked scripts** to the meeting

MARKING INSTRUCTIONS – FOR MARKING ON-SCREEN AND FOR PAPER BASED MARKING

1. Mark strictly to the mark scheme.
2. Marks awarded must relate directly to the marking criteria.
3. The schedule of dates is very important. It is essential that you meet the RM Assessor 50% and 100% (traditional 40% Batch 1 and 100% Batch 2) deadlines. If you experience problems, you must contact your Team Leader (Supervisor) without delay.
4. If you are in any doubt about applying the mark scheme, consult your Team Leader by telephone or the RM Assessor messaging system, or by email.
5. Crossed Out, Rubric Error (Optional Questions) and Multiple Responses

Crossed Out Responses

Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

Rubric Error Responses – Optional Questions

Where candidates have a choice of question across a whole paper or a whole section and have provided more answers than required, then all responses are marked and the highest mark allowable within the rubric is given. *(The underlying assumption is that the candidate has penalised themselves by attempting more questions than necessary in the time allowed.)*

Multiple Choice Question Responses

When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate). *When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.*

Contradictory Responses

When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only **one mark per response**)

Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. *(The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)*

Short Answer Questions (requiring a more developed response, worth **two or more marks**)

If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

Longer Answer Questions (requiring a developed response)












Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first response.

6. Always check the additional pages (and additional objects if present) at the end of the response in case any answers have been continued there. If the candidate has continued an answer there then add a tick to confirm that the work has been seen. The 'link page' check box should be used on scoris to link candidate responses in additional objects to the corresponding question number.
 - a. Where additional objects are present, all pages must contain an annotation, or scoris will not allow you to submit the script. Where no response is given by a candidate on a whole page the 'BP' annotation **must** be applied.
 - b. Where generic answer booklets are used, all pages must contain an annotation, or scoris will not allow you to submit the script. Where no response is given by a candidate on a whole page the 'BP' annotation **must** be applied.
 - c. Where structured answer booklets are used, the 'BP' annotation **must** be applied to all pages where no response is given by a candidate.
7. There is a NR (No Response) option. Award NR (No Response)
 - if there is nothing written at all in the answer space
 - OR if there is a comment which does not in any way relate to the question (e.g. 'can't do', 'don't know')
 - OR if there is a mark (e.g. a dash, a question mark) which isn't an attempt at the questionNote: Award 0 marks - for an attempt that earns no credit (including copying out the question)

8. The RM Assessor **comments box** is used by your team leader to explain the marking of the practice responses. Please refer to these comments when checking your practice responses. **Do not use the comments box for any other reason.**
If you have any questions or comments for your team leader, use the phone, the RM Assessor messaging system, or e-mail.
9. For answers marked by levels of response:
- To determine the level** – start at the highest level and work down until you reach the level that matches the answer
 - To determine the mark within the level**, consider the following:

Descriptor	Award mark
<ul style="list-style-type: none"> On the borderline of this level and the one below 	<ul style="list-style-type: none"> At bottom of level
<ul style="list-style-type: none"> Just enough achievement on balance for this level 	<ul style="list-style-type: none"> Above bottom and either below middle or at middle of level (depending on number of marks available)
<ul style="list-style-type: none"> Meets the criteria but with some slight inconsistency 	<ul style="list-style-type: none"> Above middle and either below top of level or at middle of level (depending on number of marks available)
<ul style="list-style-type: none"> Consistently meets the criteria for this level 	<ul style="list-style-type: none"> At top of level

These are the annotations to be used when marking Unit 3.

Annotation	Meaning
	Tick – correct answer
	Cross – incorrect answer
	Level 1
	Level 2
	Level 3
	Benefit of doubt (This does count as a mark – so do not ‘tick’ as well)
	Omission mark
	Too vague
	Repeat
 or 	Noted but no credit given

Question	Answer/Indicative Content	Marks	Guidance
1 (a)	<p>ANY THREE FROM:</p> <ul style="list-style-type: none"> • Staff are provided with adequate safety equipment, e.g. PPE / manual handling equipment ✓✓ • To provide equipment to support safe working, e.g. wrist support for lap tops / anti-glare screens / monitor overlays / chairs • Health and safety is promoted, e.g. sufficient staff/resident ratios • Responsibility to check working hours are not exceeded ✓✓ • Health and safety is promoted, e.g. policies, procedures and guidelines are in place ✓✓ • Update and review policies and procedures ✓✓ • Equipment is regularly maintained, e.g. PAT testing of electrical equipment, testing of fire alarms/extinguishers ✓✓ • Systems are put in place to ensure hazardous material is securely stored / handled / used / transported / disposed of, e.g. biological waste ✓✓ • Staff are provided with instruction / supervision / training (meetings) / knowledge, e.g. in appropriate manual handling ✓✓ • Health and safety information is displayed / posters e.g. to inform those attending the setting how to keep safe / providing information ✓✓ • Regular risk assessments are carried out, e.g. to identify hazards, minimise the risk of harm and accidents , control measures put in place ✓✓ • Staff recruitment, e.g. ensure staff have appropriate qualifications, NEBOSH (National Examination Board in Occupational Safety and Health) ✓✓ • A <u>legal requirement</u> to report specific incidences to the HSE ✓✓ • Systems in place to record and report incidences / accidents e.g. accident book ✓✓ • Inspection / monitoring to check policies / procedures are being followed ✓✓ <p>Accept other appropriate ways if applied to management practices</p>	6 (3x2)	<p>TWO MARKS: A detailed description AND Clear understanding of health and safety <u>management practices</u></p> <p>ONE MARK: Basic description AND Limited understanding of health and safety <u>management practices</u></p> <p>DO NOT ACCEPT:</p> <ul style="list-style-type: none"> • Legal requirement on its own can only gain 1 mark– 2 marks - must be qualified by a process, e.g. carrying out risk assessments / reporting incidences to the HSE • HSE by itself – must state how this influences management practice, e.g. reporting accidents • Prevents accidents - must reference can minimise / reduce • DBS checks and any reference to safeguarding • 'SAFE' – must be qualified – e.g. safe to use; safe by itself cannot be credited <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>ANSWERS MUST LINK TO MANAGEMENT PRACTICE</p> </div>

Question	Answer/Indicative Content	Marks	Guidance
1 (b)*	<p>ANY TWO INCIDENTS FROM:</p> <ul style="list-style-type: none"> • Deaths caused by workplace accidents – do not accept death by itself unless qualified • Injuries caused by workplace accident - do not accept injuries by itself unless qualified • Serious injuries caused by workplace accidents, e.g. amputations / loss or damage to sight / crush injuries / serious burns (including scalding) / head injury leading to loss of consciousness • Any injury that requires resuscitation • Occupational diseases e.g. carpal tunnel syndrome / occupational dermatitis / occupational asthma / occupational cancer / any disease attributed to exposure to a biological agent • Any accident to non-workers, e.g. visitors • Near misses / dangerous occurrences e.g. the collapse / overturning or failure of lifting equipment – can include hoists for manual handling • Exposure to infections • Exposure to dangerous chemicals / asbestos • Gas incidents e.g. gas leak / explosion <p>Types of settings</p> <ul style="list-style-type: none"> • health environment (e.g. hospital, GP surgery) • care environment / social care environment (e.g. residential setting, individual's home) • child care environment (e.g. nursery, school) • public environment (e.g. shopping centre, park) • transport (e.g. minibus, ambulance) <p>Two settings can be chosen from the same category.</p> <p>Incidents can be repeated if the scenario provided through the setting is different, i.e. injuries can be credited twice through different scenarios</p>	8	<p>Level 3 (7-8 marks) Detailed description of two incidents AND Explicitly linked to two settings.</p> <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</i></p> <p>Level 2 (4-6 marks) Sound description of two incidents. AND Some reference to two settings. Sub max of 4 for one incident done well in a referenced setting</p> <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Level 1 (1–3 marks) Limited description of one or two incidents which may or may not refer to a setting</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Two marks to be allocated for naming two different settings, e.g. GP surgery / Dentist</p> </div> <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks <i>No response or no response worthy of credit.</i></p> <p>Example descriptions:</p>

Question		Answer/Indicative Content	Marks	Guidance
		<p>DO NOT ACCEPT:</p> <ul style="list-style-type: none"> • Intruders • Aggressive and intoxicated individuals • Fire • Floods • Loss of water supply • Food poisoning / food allergies • Abuse • illness 		<p>A care worker uses a hoist to lift a resident out of bed. The hoist is faulty and falls over. The resident breaks their arm when they fall.</p> <p>A paramedic is exposed to an infectious disease while transporting a patient to hospital. Action needs to be taken to prevent the disease being passed on to others.</p>
1	(c)	<p>ANY THREE FROM:</p> <ul style="list-style-type: none"> • Routine inspection ✓ • Comply with legislation / national guidelines ✓ • Follow up on issues identified in previous inspections ✓ • Respond to concerns and complaints / reports by other agencies / made by workers / service users / the public ✓ • Investigate incidents / accidents ✓ • When a report is made under RIDDOR ✓ • Following work related deaths ✓ • Following work related specified / serious injuries / injuries ✓ • Following occupational disease ✓ • Following exposure to infections ✓ • Any breach of health and safety law ✓ • Checking that health and safety law is being followed ✓ • To issue warnings / improvement notices / stating what needs to be improved ✓ 	3 (3x1)	<p>ACCEPT alternative language</p> <p>Do not accept:</p> <ul style="list-style-type: none"> • To carry out a risk assessment • Abuse • Following policies and procedures

Question	Answer/Indicative Content	Marks	Guidance
2 (a)*	<p>ANY THREE FROM:</p> <p><u>Security of premises hazards:</u></p> <ul style="list-style-type: none"> • Lack of locks / broken locks on doors/windows • No access codes/keypad in place • key holders not specified • alarm system faulty or not installed • No CCTV / broken CCTV / No Receptionist on entrances / unsupervised reception • gates, boundary fence – broken or not in place <p><u>Security of possessions hazards:</u></p> <ul style="list-style-type: none"> • lockers, storage facilities not available / personal items unsecure • Lack of visitor ID badges /staff ID badges • No signing in/out of visitors <p><u>Security of individuals hazards:</u></p> <ul style="list-style-type: none"> • unsafe working practices • lone working • data protection not being followed: no password protection on IT systems / no firewall installed / lap tops being left unattended / gossiping about patients /lack of privacy for confidential meetings • access to premises by unauthorised individuals / intruders <p>How to reduce risk of harm:</p> <ul style="list-style-type: none"> • Staff training • Clarify staff roles and responsibilities • Change policies/procedures/practices 	9	<p>Level 3 (7-9 marks) Detailed explanation of three security hazards AND How to reduce risk of harm</p> <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</i></p> <p>Level 2 (4-6 marks) Sound explanation of two or more hazards AND Some link to how to reduce risk of harm</p> <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Level 1 (1–3 marks) Limited explanation of one or more hazards AND/OR How to reduce risk of harm</p> <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks <i>No response or no response worthy of credit</i></p> <p>ACCEPT: Examples from any section (e.g. the candidate can provide three examples of hazards relating to the security of individuals)</p> <p>DO NOT ACCEPT: Safety Hazards, e.g. fire safety/ health risks / medication as a security hazard / safeguarding / reference to disciplinary procedures</p>

Question			Answer/Indicative Content	Marks	Guidance										
			<ul style="list-style-type: none"> • Install monitoring equipment • Specifics provided for initial security hazard, e.g. regular testing of alarm systems • Repairing broken locks / CCTV etc. 		<p>If a candidate has provided more examples than 3, mark the whole response but only credit the first 3 answers</p>										
2	(b)		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Circumstance</th> <th style="width: 50%;">Consequence</th> </tr> </thead> <tbody> <tr> <td>A care worker does not apply their training in food safety.</td> <td>Disciplinary action ✓</td> </tr> <tr> <td>A staff member is off work due to a work-related accident</td> <td>Increased staff costs ✓</td> </tr> <tr> <td>Health and safety legislation has been breached and a resident is seriously injured.</td> <td>Prosecution of management ✓</td> </tr> <tr> <td>Staff are not provided with manual handling training.</td> <td>Musculoskeletal injury ✓</td> </tr> </tbody> </table>	Circumstance	Consequence	A care worker does not apply their training in food safety.	Disciplinary action ✓	A staff member is off work due to a work-related accident	Increased staff costs ✓	Health and safety legislation has been breached and a resident is seriously injured.	Prosecution of management ✓	Staff are not provided with manual handling training.	Musculoskeletal injury ✓	4 (4x1)	<p>ACCEPT: Abbreviations / diagrammatic indication of consequence (e.g. by drawing a line)</p> <p>No other answers are to be accepted</p> <p>If more than one answer is provided – then this must be marked as incorrect – refer to page 3 / point 5</p>
Circumstance	Consequence														
A care worker does not apply their training in food safety.	Disciplinary action ✓														
A staff member is off work due to a work-related accident	Increased staff costs ✓														
Health and safety legislation has been breached and a resident is seriously injured.	Prosecution of management ✓														
Staff are not provided with manual handling training.	Musculoskeletal injury ✓														
2	(c)	(i)	Working practices ✓	1 (1x1)	<p>No other answer is to be accepted</p> <p>Mark left to right and only and only mark the first answer provided.</p> <p>Do not accept:</p> <ul style="list-style-type: none"> • Working conditions 										

Question			Answer/Indicative Content	Marks	Guidance
2	(c)	(ii)	<p>ANY TWO FROM:</p> <p>Injury / harm ✓ Illness / high blood pressure ✓ Stress ✓ Fatigue / exhaustion / tired / burn out ✓ Anger / Resentment / Conflict ✓ Loss of motivation ✓ Poor judgements ✓ Loss of morale / confidence ✓ Frustration ✓ Overwhelmed ✓ Reduced efficiency / effectiveness ✓</p> <p>This list is not exhaustive, accept alternative appropriate examples</p>	2 (2x1)	<p>ACCEPT alternative language / examples</p> <p>DO NOT ACCEPT:</p> <ul style="list-style-type: none"> • Mental health issues – must specify • Impacts linked to residents • Financial loss
2	(c)	(iii)	<p>ANY TWO FROM:</p> <p>Injury / harm ✓ Illness ✓ Poor / inadequate standards of care ✓ Needs neglected ✓ Loss of trust ✓ Frustration ✓ Not receiving medication on time / wrong medication ✓ Lack of hydration ✓ Emotional effects as a consequence of poor standards of care – afraid / lowered self-esteem / vulnerable / stress ✓</p> <p>This list is not exhaustive, accept alternative appropriate examples</p>	2 (2x1)	<p>ACCEPT alternative language / examples</p> <p>DO NOT ACCEPT:</p> <ul style="list-style-type: none"> • Mental health issues – must specify • Impacts linked to staff • Unintentional abuse by itself – must be qualified

Question	Answer/Indicative Content	Marks	Guidance
2 (d)	<p>Transparency - MAX ONE FROM:</p> <p>Consent: Parents are asked for their consent to collect/store/use data, e.g. photographs, assessments, attainment records ✓✓</p> <p>Being fully informed on data / being open on usage of date: Parents are told / fully informed about what information/data is collected/stored, e.g. learning journals, child development records / builds trusting relationships ✓✓</p> <p>Access to data / being clear on procedures to access data: Parents are given access to data about their child, e.g. information on their progress, outcomes of assessments ✓✓</p> <p>Being open, honest and clear / having a clear purpose about data relating to their child ✓✓</p> <p>Need to know basis – some data may need to be shared with staff / parents / authorities – through training and specified procedures</p> <p>Storage limitation - MAX ONE FROM:</p> <p>Deleting records: Children’s records are deleted from the nursery server when they are no longer needed / have left the setting ✓✓</p> <p>Shredding data: Documentary data about children, e.g. assessments/observation records are shredded/destroyed on a regular basis ✓✓</p> <p>Data sent home: Staff send data about children home when it is no longer needed, e.g. their work, photographs, records ✓✓</p> <p>Relevance of data: all data stored must be of relevance to the child, e.g. allergies – irrelevant data must be deleted, e.g. ✓✓</p>	4 (2x2)	<p>TWO MARKS: A clear example AND Clear relevance on how it might influence practice</p> <p>ONE MARK: A brief / muddled example AND Limited relevance on how it might influence practice</p> <p>ACCEPT other appropriate examples</p> <p>Influences on practice may be interchangeable</p> <p>Practice can refer to both staff and parents</p>

Question	Answer/Indicative Content	Marks	Guidance
3 (a)*	<p>ANY TWO FROM:</p> <ul style="list-style-type: none"> • Having a designated safeguarding lead (DSL) / named person: staff know who to report concerns to; ensures concerns are acted on; keeps records in one place; less likelihood of cases of abuse being overlooked • Staff are trained in safeguarding: they know the signs of abuse; they know how to report concerns; more likely to notice when an adult is being abused; more likely to take action when they have concerns • Staff are DBS checked: prevents employment of staff who have a criminal conviction for an offence which would put individuals at risk of harm; prevents those on the barred list working with vulnerable adults • Systems are in place to prevent unauthorised access: visitors must sign in/ be accompanied / wear ID badges; keypads on doors; to prevent unsafe people from being in contact with adults with learning disabilities • Data about adults with learning difficulties is protected: prevents access to personal details about individuals; information is shared on a need to know basis; prevents information being used to harm/abuse an individual • Risk assessments: potential hazards are identified; actions are taken to reduce risk of harm; ensure premises / working practices are as safe as is reasonably possible • System in place for adults with learning disabilities / family to report concerns / providing literature on how to raise a concern <p>If a candidate has provided more examples than 2, mark the whole response but only credit the first 2 answers</p>	7	<p>Level 3 (6-7 marks) Detailed description of two safeguarding practices AND How they reduce risk of harm and abuse</p> <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</i></p> <p>Level 2 (4-5 marks) Sound description of two safeguarding practices AND Some reference to how they reduce risk of harm and abuse OR Detailed description of one safeguarding practice AND Some reference to how they reduce risk of harm and abuse</p> <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Level 1 (1–3 marks) Limited description of one or two safeguarding practices AND May not refer to how they reduce risk of harm and abuse</p> <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks <i>No response or no response worthy of credit.</i></p> <p>References to security must link to unauthorised access only References to data protection must link to access to data held on the system for adults with learning disabilities</p>

Question		Answer/Indicative Content	Marks	Guidance														
3	(b)	<p>ANY TWO FROM:</p> <p>Follow staff instructions / cooperate with staff ✓ Follow rules / policies / procedures / guidance ✓ Observe hazard signs ✓ Keep themselves and others safe / not putting self in danger ✓ Report health and safety concerns ✓ Take part in fire drills / evacuation practices / procedures ✓ Wearing face masks / coverings ✓ Maintain personal hygiene, e.g. washing hands ✓</p>	<p>2 (2x1)</p>	<p>DO NOT ACCEPT:</p> <ul style="list-style-type: none"> • Training • Supervision • Use of full PPE • Attendance at health and safety meetings <p>ACCEPT alternative language</p>														
3	(c)	<table border="1"> <thead> <tr> <th>Practices</th> <th>Tick (✓) three only</th> </tr> </thead> <tbody> <tr> <td>Chemicals are clearly labelled if they are hazardous to health</td> <td>✓</td> </tr> <tr> <td>Colour-coded chopping boards are used to prepare food</td> <td></td> </tr> <tr> <td>Infectious waste is disposed of in yellow bags</td> <td>✓</td> </tr> <tr> <td>Lifting equipment is regularly maintained</td> <td></td> </tr> <tr> <td>Medicines are stored securely</td> <td></td> </tr> <tr> <td>Protective gloves are worn when using cleaning products</td> <td>✓</td> </tr> </tbody> </table>	Practices	Tick (✓) three only	Chemicals are clearly labelled if they are hazardous to health	✓	Colour-coded chopping boards are used to prepare food		Infectious waste is disposed of in yellow bags	✓	Lifting equipment is regularly maintained		Medicines are stored securely		Protective gloves are worn when using cleaning products	✓	<p>3 (3x1)</p>	<p>These are the only accepted answers</p> <p>If more than 3 ticks are given mark from top to bottom</p>
Practices	Tick (✓) three only																	
Chemicals are clearly labelled if they are hazardous to health	✓																	
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Protective gloves are worn when using cleaning products	✓																	

Question		Answer/Indicative Content	Marks	Guidance
3	(d)*	<p>Consequences for the adult</p> <ul style="list-style-type: none"> • physical injuries e.g. they may have bruising, fractures, be in need of medical treatment. • loss of trust e.g. they may not trust care staff to help them with their personal care which could lead to further harm / refusing care • psychological harm, e.g. they may have flash backs (PTSD). • loss of self-esteem e.g. they may feel that they are not valued enough by others to receive care and support. • self-harm e.g. their loss of self-esteem and the emotional harm they experience may lead them to hurt themselves. • depression e.g. physical abuse leads to lack of self-worth. Their mental health may deteriorate. • behavioural changes e.g. they may become socially withdrawn or aggressive. • Emotional effects e.g. anxiety, stress, loss of confidence, disempowered , suicidal thoughts – this list is not definitive • Difficulties in forming relationships with other staff members • Wants to move care setting 	7	<p>Level 3 (6-7 marks) Detailed explanation of consequences AND Balance of consequences for the-adult and staff member <i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</i></p> <p>Level 2 (4-5 marks) Sound explanation of consequences AND Both adult and staff member, may not be balanced OR Detailed consequences OR Only adult <u>or</u> staff member consequences done well <i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Level 1 (1–3 marks) Limited explanation of consequences AND May not include adult and staff member <i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks <i>No response or no response worthy of credit.</i></p>

Question	Answer/Indicative Content	Marks	Guidance
	<p>Consequences for the staff member</p> <ul style="list-style-type: none"> • criminal prosecution / imprisonment / fines / compensation e.g. physically abusing vulnerable adults is a criminal offence so they could be arrested, charged and imprisoned. • removed from professional register / placed on barred list / prevented from working with vulnerable adults, e.g. if they are prosecuted for physical abuse their employers will be made aware through the DBS system. • disciplinary action e.g. warning, suspension, dismissal, e.g. if the physical abuse is minor, does not lead to injury and is unintentional they may receive a warning and be required to undertake training on the first occasion / supervision and monitoring • financial loss e.g. fines, compensation loss of income, difficulty finding work in future e.g. if they are dismissed from their job and their employer refuses to give them a reference. • emotional consequences e.g. guilt and frightened – this list is not definitive • loss of reputation e.g. their colleagues, family will lose respect for them. 		

Question		Answer/Indicative Content	Marks	Guidance
3	(e)	<p>MAX ONE FROM:</p> <p>Carry out a fire risk assessment / risk assessment: identify areas/practices that increase the risk of fire and take action to reduce the risk, e.g. in kitchen ✓✓</p> <p>Following fire safety policy to ensure correct procedures are adopted ✓✓</p> <p>Prohibit smoking on the premises: ensure smoking areas are located away from flammable material ✓✓</p> <p>Electrical safety: ensure sockets are not overloaded / electrical equipment is regularly PAT tested to ensure it is working correctly ✓✓</p> <p>Test fire safety equipment regularly: ensure alarms, fire extinguishers are working ✓✓</p> <p>Ensure ignition sources are not located near to flammable materials, e.g. heaters are not covered by clothing, medical oxygen is not stored near the kitchen ✓✓</p> <p>Ensure adults with learning disabilities have adequate supervision and monitoring, e.g. when cooking ✓✓</p> <p>Switching off electrical appliances when not in use ✓✓</p> <p>Install smoke alarms and regularly check them ✓✓</p>	2 (1x2)	<p>TWO MARKS: A detailed description of one way AND How it reduces risk of a fire breaking out</p> <p>ONE MARK: A brief description of one way. May not include how it reduces risk of a fire breaking out</p> <p>DO NOT ACCEPT</p> <ul style="list-style-type: none"> • fire evacuation procedures • training on fire evacuation • Fire doors – these prevent the spread nit the breaking out

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