

**Oxford Cambridge and RSA Examinations**



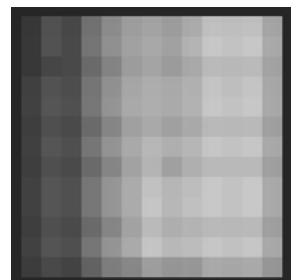
**GENERAL CERTIFICATE OF SECONDARY EDUCATION**

**GCSE 1493**

# **HEALTH AND SOCIAL CARE (DOUBLE AWARD)**

**COMBINED MARK SCHEME  
AND REPORT FOR THE UNITS  
JANUARY 2005**

**GCSE**



1493/MS/R/05J

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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.

The report on the Examination provides information on the performance of candidates which it is hoped will be useful to teachers in their preparation of candidates for future examinations. It is intended to be constructive and informative and to promote better understanding of the syllabus content, of the operation of the scheme of assessment and of the application of assessment criteria.

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### GCSE Applied Health & Social Care- 1493

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RECOGNISING ACHIEVEMENT

Mark Scheme 4871  
January 2005

Question	Expected Answer	Mark	Total								
1 (a)	<p><b>One</b> mark for each correct answer. FOUR required e.g.</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p><b>Physical</b></p> <p>Can sit with support Turn head to look around When in sitting position Pull themselves up</p> <p>Hands are grasped Has complete head control Can raise head when lying on back Uses straight arms to lift head and chest off the ground Can roll over from front to back Can take weight on the legs Enjoys bouncing up and down Can grasp objects Picks up everything in reach Can play with toes Eyes have learnt to work together Can smile Lift head up</p> <p><b>Emotional</b></p> <p>Will bond with main carer Still friendly with strangers Could show some shyness Excitement at familiar face Cries Little control over emotions</p> <p><i><b>Do not count one example twice</b></i> <i><b>Note: Some intellectual, emotional and social can be interchanged, but must be specific.</b></i></p> </td> <td style="vertical-align: top;"> <p><b>Intellectual</b></p> <p>Begins to understand Can attract attention Recognise Mum's voice Makes a variety of sounds</p> <p>Laughs/chuckles/smiles Recognises what some things are Knowing who the main carer/parent is</p> <p><b>Social</b></p> <p>Can smile/affection Can attract attention Can get people to respond to it Follows adults movements Plays with toys/laughs/ Can babble/interact Responds to main carer</p> </td> </tr> </table>	<p><b>Physical</b></p> <p>Can sit with support Turn head to look around When in sitting position Pull themselves up</p> <p>Hands are grasped Has complete head control Can raise head when lying on back Uses straight arms to lift head and chest off the ground Can roll over from front to back Can take weight on the legs Enjoys bouncing up and down Can grasp objects Picks up everything in reach Can play with toes Eyes have learnt to work together Can smile Lift head up</p> <p><b>Emotional</b></p> <p>Will bond with main carer Still friendly with strangers Could show some shyness Excitement at familiar face Cries Little control over emotions</p> <p><i><b>Do not count one example twice</b></i> <i><b>Note: Some intellectual, emotional and social can be interchanged, but must be specific.</b></i></p>	<p><b>Intellectual</b></p> <p>Begins to understand Can attract attention Recognise Mum's voice Makes a variety of sounds</p> <p>Laughs/chuckles/smiles Recognises what some things are Knowing who the main carer/parent is</p> <p><b>Social</b></p> <p>Can smile/affection Can attract attention Can get people to respond to it Follows adults movements Plays with toys/laughs/ Can babble/interact Responds to main carer</p>	4 x 1	[4]						
<p><b>Physical</b></p> <p>Can sit with support Turn head to look around When in sitting position Pull themselves up</p> <p>Hands are grasped Has complete head control Can raise head when lying on back Uses straight arms to lift head and chest off the ground Can roll over from front to back Can take weight on the legs Enjoys bouncing up and down Can grasp objects Picks up everything in reach Can play with toes Eyes have learnt to work together Can smile Lift head up</p> <p><b>Emotional</b></p> <p>Will bond with main carer Still friendly with strangers Could show some shyness Excitement at familiar face Cries Little control over emotions</p> <p><i><b>Do not count one example twice</b></i> <i><b>Note: Some intellectual, emotional and social can be interchanged, but must be specific.</b></i></p>	<p><b>Intellectual</b></p> <p>Begins to understand Can attract attention Recognise Mum's voice Makes a variety of sounds</p> <p>Laughs/chuckles/smiles Recognises what some things are Knowing who the main carer/parent is</p> <p><b>Social</b></p> <p>Can smile/affection Can attract attention Can get people to respond to it Follows adults movements Plays with toys/laughs/ Can babble/interact Responds to main carer</p>										
(b)	<p><b>One</b> mark for each. EIGHT required:</p> <table border="0"> <tr> <td>Childhood/child</td> <td>4 – 10</td> </tr> <tr> <td>Later adulthood/older person/older adult</td> <td>65+</td> </tr> <tr> <td>Adolescence</td> <td>11-18</td> </tr> <tr> <td>Adulthood/adult</td> <td>19 –65</td> </tr> </table> <p><i><b>Accept one year either side of correct age.</b></i></p>	Childhood/child	4 – 10	Later adulthood/older person/older adult	65+	Adolescence	11-18	Adulthood/adult	19 –65	8 x 1	[8]
Childhood/child	4 – 10										
Later adulthood/older person/older adult	65+										
Adolescence	11-18										
Adulthood/adult	19 –65										
(c) (i)	<p><b>One</b> mark for each correct response. TWO required e.g.</p> <p>Growth - Increase in physical <b>size, weight</b> or <b>mass</b> and <b>height physical</b> growth The physical development of a person/physical development Physical changes in life stages</p>	2 x 1	[2]								
(ii)	<p>Expected patterns of physical growth:</p> <ul style="list-style-type: none"> <li>• normal rate of growth</li> <li>• milestones in development</li> <li>• usual rate of growing</li> <li>• common stages of development</li> <li>• the expected rate of growth at a certain age</li> </ul>	1 x 1	[1]								
<b>Total</b>			<b>[15]</b>								

Question	Expected Answer	Mark	Total
2 (a)	Adolescence	1 x 1	[1]
(b)	<p><b>One</b> mark for each correct response. FIVE required e.g.</p> <ul style="list-style-type: none"> <li>• testicles drop</li> <li>• growth spurt/rapid growth/taller</li> <li>• genitals enlarge/sexual maturity/starts getting erections/testicles get larger/penis gets larger</li> <li>• sperm production/sex hormones/wet dreams</li> <li>• voice breaks/deepens</li> <li>• pubic hair develops/facial hair develops/underarm</li> <li>• increase in muscle tissue</li> <li>• shape broadens/shoulders broaden/chest broadens</li> <li>• body weight increases/heavier</li> <li>• spots occur</li> </ul> <p><b>Only allow 'puberty' if it is the only answer given.</b></p>	5 x 1	[5]
(c)	<p><b>One</b> mark for each correct social factor. THREE required e.g.</p> <ul style="list-style-type: none"> <li>• more independent</li> <li>• makes own decisions</li> <li>• group of friends/falling out with friends</li> <li>• want to fit in with peer group/peer pressure/jealousy</li> <li>• appearance</li> <li>• may start to experiment with sexual relationships/partners/gender/girls</li> <li>• can feel moody</li> <li>• may argue with parents (Mum/Dad)</li> <li>• could be influenced to start smoking/drinking/drugs</li> <li>• getting a job</li> <li>• the media</li> </ul>	3 x 1	[3]

Question	Expected Answer	Mark	Total
2 (d)	<p><b>Two</b> marks for the explanation of the term genetic.  <b>Two</b> marks for each example given – maximum of two.  <b>Two</b> marks for showing how the factor can affect development.</p> <p><b>Explanation of term (exp):</b></p> <p>(exp) shared features from others (parents, grandparents)  (exp) something that is passed down from one generation to another/hereditary  (exp) something that is inherited  (exp) disease/problems passed on through genes</p> <p><b>Examples (eg):</b></p> <p>(eg) heart conditions/disease  (eg) eye conditions (glaucoma, short sight, long sight)  (eg) hypertension(high blood pressure)  (eg) schizophrenia (personality disorder)  (eg) diabetes insipidus  (eg) haemophilia (inability for blood to clot)  (eg) high cholesterol  (eg) achondraplasia (dwarfism)  (eg) cystic fibrosis  (eg) down syndrome  (eg) baldness  (eg) colour of eyes  (eg) hair colour/curly hair  (eg) height  (eg) blood group  (eg) bone defect  (eg) eczema  (eg) asthma  (eg) freckles  (eg) epilepsy</p> <p><b>How it affects development (a):</b></p> <p>(a) could increase self-confidence  (a) could decrease self-confidence  (a) could cause physical health problems  (a) could limit ability  (a) can cause learning difficulties  (a) can prevent a person from participating in an activity/ inc  (a) can be limiting</p> <p><b>Note: The affect on development should be appropriate for the example given.</b></p>	6x1	<b>[6]</b>
			<b>Total [15]</b>



Question	Expected Answer	Mark	Total
3 (a)	<p><b>One</b> mark for each correct response. TWO required for each factor:</p> <p><b><i>Environmental:</i></b></p> <ul style="list-style-type: none"><li>• able to access health facilities easily</li><li>• having a house in the country</li></ul> <p><b><i>Social:</i></b></p> <ul style="list-style-type: none"><li>• having friends</li><li>• having unsuccessful long-term relationships</li></ul> <p><b><i>Economic:</i></b></p> <ul style="list-style-type: none"><li>• being able to save</li><li>• earning a good wage</li></ul> <p><b><i>Physical:</i></b></p> <ul style="list-style-type: none"><li>• enjoying good health</li><li>• taking part in leisure activities</li></ul>	8 x 1	<b>[8]</b>

Question	Expected Answer	Mark	Total
3 (b) (i)	<p><b>One</b> mark for each correct positive influence.  <b>One</b> mark for each reason.</p> <p><b><i>Enjoying good health:</i></b></p> <ul style="list-style-type: none"> <li>• good self-esteem or feeling good</li> <li>• ability to participate in activities</li> <li>• not needing time off work</li> <li>• able to socialise/not be isolated</li> <li>• free from worry about their health</li> </ul> <p><b><i>Being able to save:</i></b></p> <ul style="list-style-type: none"> <li>• having money to go on holiday</li> </ul> <p><b><i>Earning a good wage:</i></b></p> <ul style="list-style-type: none"> <li>• able to buy own house</li> <li>• will have a choice of food/clothes etc</li> <li>• can buy needs as well as wants e.g. car/not restricted in spending</li> <li>• able to go out and socialise</li> </ul> <p><b><i>Having friends:</i></b></p> <ul style="list-style-type: none"> <li>• will not feel isolated</li> <li>• will have a sense of self-worth</li> <li>• will have someone to share with</li> <li>• will feel wanted/support</li> </ul> <p><b><i>Access to health services:</i></b></p> <ul style="list-style-type: none"> <li>• more likely to use the facilities</li> <li>• more likely to access preventative methods</li> <li>• can easily get a health check up</li> <li>• more likely to visit a GP before an illness gets worse</li> <li>• able to obtain advice</li> </ul> <p><b><i>Having a house in the country:</i></b></p> <ul style="list-style-type: none"> <li>• less pollution</li> <li>• more likely to exercise e.g. walk</li> <li>• less stress/slower way of life</li> </ul> <p><b><i>Taking part in leisure activities:</i></b></p> <ul style="list-style-type: none"> <li>• keep herself fit</li> <li>• socialise</li> <li>• sense of achievement</li> </ul>	4 x 1	<b>[4]</b>

Question	Expected Answer	Mark	Total
3 (b) (ii)	<p><b>One</b> mark for a negative factor.  <b>One</b> mark for the explanation.</p> <p><b>Negative factor:</b></p> <p><b>Unsuccessful long-term relationship</b></p> <ul style="list-style-type: none"> <li>• low self-esteem</li> <li>• lack of confidence/insecurity</li> <li>• not trusting people</li> <li>• not being able to form lasting relationships/could put her off having a relationship</li> <li>• low self-concept</li> <li>• could become withdrawn/isolated/depressed/lonely</li> </ul> <p><b>Living in the country</b></p> <ul style="list-style-type: none"> <li>• may find it difficult to access leisure/recreational services</li> <li>• friends could find it difficult to visit/Shona find it difficult to visit them</li> <li>• may be difficult to access health services</li> <li>• little/no transport available</li> </ul>	2 x 1	<b>[2]</b>
(c)	<p><b>One</b> mark for linking one factor with another. <b>TWO</b> required.  <b>One</b> mark for basic explanation <b>two</b> marks for good explanation. <b>TWO</b> required:</p> <ul style="list-style-type: none"> <li>• Earning good money (f) – allows Shona to take part in leisure activities (f) – improves her social life and keeps her fit.</li> <li>• Saving (f) - earning good wage (f) – allows her to buy a home of her own – can choose where she lives/is not limited to rented accommodation</li> <li>• Taking part in leisure activities (f) – helps her to enjoy good health (f) – she can afford to pay for activities she likes doing- therefore she is more likely to do them/ could take others with her for support</li> <li>• Able to access health facilities (f) – enjoying good health (f) – feels good about herself/less likely to take time of work.</li> <li>• Having a house in the country (f) – enjoying good health (f) – able to walk and keep fit - could invite friends to stay - she is likely to socialise more.</li> <li>• Having friends (f) – taking part in leisure activities (f) – give her support so she feels secure – she knows people are there who could be relied on.</li> <li>• Unsuccessful long-term relationship (f) – friends (f) – provide emotional support – prevents her from feeling lonely/depressed.</li> </ul> <p><b>Note: only two factors from the text box may be linked together provided they are relevant.</b></p> <p><b>Note: the emphasis is on linking one factor with another and then giving an explanation.</b></p>	3 x 2	<b>[6]</b>
<b>Total</b>			<b>[20]</b>

Question	Expected Answer	Mark	Total
4 (a)	<p><b>One</b> mark for each correct life stage identified.</p> <p>Pat - Adulthood/adult  Simon - Adolescence  Sonia - Childhood/child</p>	3 x 1	<b>[3]</b>
(b)	<p><b>One</b> mark for each correct response. <b>FOUR</b> required e.g.</p> <p>Pat &amp; David - intimate personal/sexual/family/loving/informal/  husband and wife</p> <p>Pat &amp; Sarah - working relationship/formal/colleague/  professional</p> <p>Peter &amp; friends - friends/informal</p> <p>Simon &amp; Sonia - siblings/family/informal/brother and sister</p>	4 x 1	<b>[4]</b>
(c)	<p><b>One</b> mark for each physical, intellectual, emotional and social effect. A maximum of <b>two</b> for each PIES.</p> <p><b>Note: it is for Pat in a working environment.</b></p> <p><b>Physical:</b></p> <ul style="list-style-type: none"> <li>• having to travel to work could keep Pat fit</li> <li>• could feel physically tired from working and having a family life</li> <li>• could be more prone to infection as she is tired/could be more prone to infection as she is meeting a wider range of people</li> <li>• looks healthier because she is happy</li> </ul> <p><b>Intellectual:</b></p> <ul style="list-style-type: none"> <li>• work provides mental stimulation as she deals with new situations</li> <li>• Pat will feel involved as she will part of the decision making process</li> <li>• Pat will have a sense of purpose as she will have something definite to do</li> <li>• having to face challenges when she faces problems</li> <li>• learning new skills such as IT</li> <li>• acquiring new knowledge</li> </ul> <p><b>Emotional:</b></p> <ul style="list-style-type: none"> <li>• Pat will have a feeling of self-worth</li> <li>• she will have a high self-esteem if she is being successful</li> <li>• she will feel valued</li> <li>• Pat will have a positive self-concept</li> <li>• Pat will feel part of the decision making process/making a positive contribution</li> <li>• happier and more confident</li> <li>• work colleagues to confide in</li> </ul> <p><b>Social:</b></p> <ul style="list-style-type: none"> <li>• Pat will meet new people at work</li> <li>• she will have someone to whom she can talk/share things with</li> <li>• there will be someone to listen to her</li> <li>• Pat maybe able to share recreational activities with her colleagues/friends</li> <li>• she will feel less isolated.</li> </ul> <p><b>Note: must be a complete sentence, giving the context.</b></p>	4 x 2	<b>[8]</b>
			<b>Total [15]</b>

Question	Expected Answer	Mark	Total
5 (a)	<p><b>High-level response: 5 marks</b> Candidates will describe in full <b>two</b> positive and <b>two</b> negative affects on the family members given. Answers will be developed logically and supported with reasoning. Detailed illustration will be given to illustrate the points made.</p> <p><b>Mid-range response: 3 - 4 marks</b> Candidates will describe <b>two</b> positive and <b>two</b> negative affects. Marks will be given for clear descriptions or illustrations to describe the points made.</p> <p><b>Low-level response: 0 – 2 marks</b> One mark will be given for describing <b>one</b> positive and/or <b>one</b> negative affect with a basic description. There will be no illustrations of the points made.</p> <p><b>Pat:</b></p> <ul style="list-style-type: none"> <li>n may feel guilty/worried that she could no longer look after Ritchie (negative)</li> <li>n may feel guilty because she feels she has let David down because she has passed his father to nursing home (negative)</li> <li>n may have a lower self-concept as she is no longer able to contribute to Ritchie's care (negative)</li> <li>n may miss Ritchie who is an important family member, e.g. sense of bereavement (negative)</li>   <li>p more time to spend with David now that his father is not living with them and taking up time (positive)</li> <li>p will have more time to spend with her children and can share in their interests (positive)</li> <li>p will have more time for herself so she may not feel so stressed and will therefore be more relaxed (positive)</li> <li>p may be able to develop new interests or pick up past interests now she has more time (positive)</li> <li>p may have an improved self-concept as she can spend more time looking after herself, e.g. exercise, massage (positive)</li> </ul>	5	[10]

Question	Expected Answer	Mark	Total
5(a) cont	<p><b>High-level response: 5 marks</b> Candidates will describe in full <b>two</b> positive and <b>two</b> negative affects on the family members given. Answers will be developed logically and supported with reasoning. Detailed illustration will be given to illustrate the points made.</p> <p><b>Mid-range response: 3 - 4 marks</b> Candidates will describe <b>two</b> positive and <b>two</b> negative affects. Marks will be given for clear descriptions or illustrations to describe the points made.</p> <p><b>Low-level response: 0 – 2 marks</b> One mark will be given for describing <b>one</b> positive and/or <b>one</b> negative affect with a basic description. There will be no illustrations of the points made.</p> <p><b>Simon and Sonia:</b></p> <p>n may have lost a person/friend/may be sad or confused that they could share/talk over things with (negative)</p> <p>n loss of family information e.g. someone to talk about older generation family history and advice (negative)</p> <p>n Granddad leaving could cause more arguments and lead to an unpleasant atmosphere (negative)</p> <p>p will be able to do things together as a family as they have more time (positive)</p> <p>p may be able to share more time with their mother and socialise (positive)</p> <p>p may be happier at having more space in the house to live in (positive)</p> <p>p may be a more positive relationship with parents could develop and become closer (positive)</p> <p>p Simon and Sonia could bring friends around to the house and enjoy their company (positive)</p>		

Question	Expected Answer	Mark	Total
5 (b)	<p><b>High-level response: 5 marks</b> Candidates will describe in full <b>two</b> positive and <b>two</b> negative affects on the family members given. Answers will be developed logically and supported with reasoning. Detailed illustration will be given to illustrate the points made.</p> <p><b>Mid-range response: 3 - 4 marks</b> Candidates will describe <b>two</b> positive and <b>two</b> negative affects. Marks will be given for clear descriptions or illustrations to describe the points made.</p> <p><b>Low-level response: 0 – 2 marks</b> One mark will be given for describing <b>one</b> positive and/or <b>one</b> negative affect with a basic description. There will be no illustrations of the points made.</p> <p><b>Positive:</b></p> <ul style="list-style-type: none"> <li>p could enjoy the company of people of his own age-raised self-esteem</li> <li>p there may be organised activities so he may be intellectually stimulated</li> <li>p he could feel better/worse because he will receive professional care – more/less confident/secure about the treatment he is receiving</li> <li>p he may feel better because he will not feel he is a burden on Pat and David/will worry less</li> <li>p he may have more space so he can enjoy having more of his own things around him</li> </ul> <p><b>Negative:</b></p> <ul style="list-style-type: none"> <li>n he may have a lower self-esteem as he could feel his family no longer want him.</li> <li>n he may feel resentful that his son and daughter feel they can no longer look after him.</li> <li>n he may not feel valued by his family because they have moved him from their home.</li> <li>n he could lose confidence in himself as he is dependent on people he does not know</li> <li>n may feel that he has lost his independence and now has to receive day care</li> <li>n Ritchie may feel lonely/scared/sad as he is away from his family</li> </ul>		[5]
<b>Total [15]</b>			

Question	Expected Answer	Mark	Total
6 (a)	<p><b>One</b> mark for each unexpected life event. Maximum of two.  <b>One</b> mark for each correct reason.</p> <p><b>Unexpected:</b></p> <p>Divorce - no one can tell in advance if relationships are going to break down  people do not know if they will fall out of love or not be able to get on  someone else could appear to be more suitable/have the same interests to one partner  divorce is not planned</p> <p>Accident - an accident is not planned  it is an event that happens suddenly</p> <p>Having a leg amputated - the result of an accident  unplanned</p> <p>Meeting Malik - the result of an unplanned event  finding someone with the same interest through an activity</p> <p>Having a stroke - not planned</p>		
(b)	<p><b>One</b> mark for each unexpected life event. Maximum of two.  <b>One</b> mark for each correct reason.</p> <p><b>Expected:</b></p> <p>Menopause - all women between a certain age  experience these changes  it is a norm in a woman's dev'ment</p> <p>Starting work - it is the norm to get a job</p> <p>Ritchie dies - everyone dies eventually</p>	4 x 1	<b>[4]</b>



Question	Expected Answer	Mark	Total
6 (c)	<p>Marks are awarded according to the quality of response</p> <p><b>High level: 9 - 12 marks</b></p> <p>The candidate can accurately explain the support that could be provided by family and professional care workers. The explanation of how they could provide help is developed logically and supported by reasoning and relevant information. Ways in which support could be provided when a person is divorced or has a disability will be explained. Ways will be explained for coping with disability.</p> <p><b>Mid-range: 4 – 8 marks</b></p> <p>The candidate will describe clearly the types of support that may be available for coping with divorce and disability and will describe how these will help the person to cope. A mid range ability candidate will not offer an in-depth description, but may include one example to illustrate the point being made.</p> <p><b>Low-level: 0 - 3</b></p> <p>The candidate can make basic comments about one type of support for each situation. They may illustrate by just giving actual examples. Answers are likely to be in the form of a list.</p> <p><b>Family (f):</b></p> <ul style="list-style-type: none"> <li>f listening/talking together</li> <li>f practical support – cooking meals, doing the laundry</li> <li>f emotional support – love, affection, bonding</li> <li>f mutual support – both sides giving support to the other</li> </ul> <p><b>Professional Support (p):</b></p> <ul style="list-style-type: none"> <li>p counselling</li> <li>p medical help e.g. GP</li> <li>p advice e.g. Citizens Advice Bureau, Relate</li> <li>p social support e.g. social worker, social services</li> <li>p occupational therapist (adaptations to the home)</li> <li>p voluntary support groups e.g. Disabled Living Services, Disability Alliance, John Grooms Association for the Disabled, Mobility Information, The Winged Fellowship</li> <li>p informal networks – people who have similar problems/needs sharing together</li> <li>p formal networks – organised by professional care workers for people with like needs/problems</li> <li>p volunteer friend – help provided without charge e.g. collecting library books, talking to someone</li> <li>p private organisations e.g. BUPA hospitals/clinics, private practitioner</li> <li>p faith groups</li> </ul> <p><i>When explaining the good candidate will give examples to illustrate the points being made.</i></p>		[12]

## Specification Grid

Questions	AO1	AO3
1	15	
2	6	9
3		20
4	7	8
5	5	10
6	3	17
<b>Total</b>	36	64



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RECOGNISING ACHIEVEMENT

REPORT ON THE UNITS  
January 2005

## **Chief Examiner's Report**

### **General Comments**

Results are consistent with previous sessions, particularly for the written paper.

In the main candidates performed well for Unit 4871: Understanding Personal Development and Relationships. The responses showed that candidates have been well prepared and that delivery has followed the requirements of the specifications. Where candidates did less well their answers reflected a lack of specificity and factual knowledge. Details are given in the Principal Examiner's report.

For Unit 4869: Health, Social Care and Early Years Provision candidates who achieved the higher grades have given detailed specific factual knowledge about the two services chosen. Some candidates have given the facts for one service but failed to provide sufficient detail for the second service, suggesting possible poor time management.

Some results for Unit 4870: Promoting Health and Well-being are disappointing and assessment decisions in some instances are considered to be lenient. This is because of a lack of factual evidence within the unit. Candidates must produce a plan for the person chosen and give facts within the plan.

For both portfolio units it is essential that the requirements of the 'banner' are followed and that all the evidence for the criteria is applied to the person or services chosen. When assessing portfolios Assessors must make sure that they take into consideration the 'exemplification' within the unit specifications and the general grading descriptors. Annotating where candidates have achieved evidence is a requirement.

Overall the achievements of candidates in both the written paper and the portfolio evidence is pleasing and meets the national requirements of the specification.

## **4869 / 4870 Health and Social Care (Portfolios)**

### **General Comments**

There was an overall improvement in the standard of work produced by candidates this session. Most candidates clearly understood the organisation of Health, Social Care and Early Years services and they showed understanding of how to promote the health and well-being of a specific individual

Those Centres which supported candidates understanding of the banner evidence and ensured that they had read the exemplification notes in the specification where the assessment criteria are described in more detail, clearly gained marks. This was evident in some interesting assignment and task sheets written for candidates, as it included the depth and breadth of knowledge, understanding and skills required.

Many Centres had undertaken OCR training courses or had implemented the feedback received at previous examination sessions. There was evidence in the improved quality of candidates' portfolios.

Most Centres were co-operative and sent their work promptly when requested. Centres with 10 or fewer candidates entered can send all their work once the Moderator is known to them.

Many Centres did annotate work clearly throughout the portfolio(s) and on the Unit Recording Sheet, although some Centres did not.

The majority of Centres remembered to send the revised (September 2004) Centre Authentication Form along with their sample. This aided the moderation process enormously as it saved phone calls to Centres requesting this sheet before moderation could begin.

### **4869 - Health, Social Care and Early Years Provision**

There was evidence of some interesting and excellent practice where Centres had guided candidates to select two different services; e.g. a Pre-School Nursery being an Early Years Centre privately owned and a Community Hospital run by the Local Primary Health Care Trust, providing health care to the local community. By selecting two local settings, primary data could be collected.

Candidates should be encouraged to choose carefully the services that they wish to investigate. Poor choices meant that the candidate could not achieve all of the assessment criteria and so this limited the number of marks they could be awarded.

Candidates need to produce work of equal standard for both services if they are to achieve a particular mark. Some candidates produced a very good standard of work for one of the services chosen, but were not as consistently good for the other service. This tended to mean an adjustment to the marks was necessary.

## **Application of Assessment Criteria**

### **Achievement within Strand A**

**A1** – Candidates who included a diagram or map of the structure for the services chosen at both national and local level as well as a brief explanation of the diagram or map achieved a high level response to this criterion. A diagram alone, copied from a text book / internet source is insufficient evidence. Candidates need to show the care sector to which the service belongs.

**A2** – Candidates need to give details of how the two services are funded both locally and nationally. Use of relevant data which was explained gave candidates the opportunity of achieving the highest marks in this strand.

**A3** - Candidates often found this difficult and clearly need guidance on the effect of funding on services.

Careful selection of appropriate services was important to achieve marks at the higher level.

### **Achievement within Strand B**

**B1** - This was generally well done and candidates had obviously been well prepared. A high level response would include a detailed breakdown of the day-to-day tasks of the direct care workers chosen; this was evident when candidates had access to primary data. Candidates needed to be aware that caring for people requires 24 hour cover and shift work may be involved. Some candidates did not select two direct care workers, (one from each service) nor give a detailed breakdown of their day-to-day tasks.

**B2** – Most candidates responded well in the description of qualities and skills of the care workers they studied. For a high level response candidates also showed awareness of the specific qualifications needed for a job or career. A low level response resulted in candidates simply stating that the person would need an NVQ qualification, for example, rather than being specific.

**B3** – Most candidates could give alternative career routes for their chosen jobs or professions. For a high level response, candidates needed to actually discuss the advantages and disadvantages of the different career routes.

### **Achievement within Strand C**

Generally, the C Strand was well done with Centres realising that the care values in health and social care services differ from those in early years settings.

**C1** - Candidates demonstrated a clear understanding of at least three care values and could apply these to the day to day tasks of the two direct care workers studied.

**C2** – Candidates were able to demonstrate how at least four care values could be applied to the work of their chosen care workers. In some cases the care values were applied to each day-to-day task and this was presented clearly in a chart or table.

**C3** – A high level response to this included comparing the care values of the two care workers and noting the similarities and differences between the two job roles with a

conclusion statement at the end. In some Centres a chart was drawn listing the care values in one column and noting the similarities and differences in two subsequent columns. This helped candidates to provide a clear and detailed response.

### **Achievement within Strand D**

Where this Strand was done well, candidates used in great detail the primary evidence that they had collected from their survey work. The survey work was undertaken in many different ways: in the form of observations, questioning clients that used the services or interviewing care workers.

**D1** - Candidates were generally able to list client needs and to observe how these were met. Those candidates who actually carried out surveys had the opportunity to extend the evidence to D2, showing how well the services met client needs.

**D2 and D3** – Where candidates had identified needs carefully, had surveyed clients as well as care workers, they were able to give a detailed response and a conclusion about how well the services met needs.

### **Achievement within Strand E**

When this Strand was well done, candidates applied the barriers to the chosen services and did not describe them generically.

**E1 and E2** - Candidates showed a clear understanding of at least three barriers to the services chosen and to the different types of barriers. They were also able to suggest how the barriers identified might affect clients physically, intellectually, socially and emotionally across the two services.

**E3** – A high level response included evidence of synthesis of knowledge i.e. drawing together information from a range of sources. Candidates chose realistic solutions as to how to overcome the barriers identified and in some cases had interviewed care workers or clients to gather ideas. Only a small number of candidates mentioned the effect on the clients of overcoming the barriers and how this empowers them.

## **Unit 4870 – Promoting Health and Well-being**

There was some excellent evidence presented by candidates who had been guided on their choice of an individual. Where the 'person' was the same across the group the evidence looked similar and sometimes lacked the opportunity for candidates to achieve the higher marks.

### **Achievement within Strand A**

**A1** – Candidates who had completed and included a questionnaire were able to cover aspects of the physical, intellectual, emotional, and social health of the individual.

**A2** – Most candidates were able to describe the person's health and to draw conclusions about this.

**A3** – For a high level response, candidates needed to look back at the completed questionnaire and go through it in detail before drawing clear conclusions about the person's state of health. They also needed to compare the person's health with the 'norms'. This was not always clearly evident.

### **Achievement within Strand B**

**B1** – Candidates were able to identify and describe at least two positive factors. Candidates should be encouraged to describe factors affecting the health of the individual and avoid making lists without any real explanation.

**B2** – Most candidates were able to describe at least three positive factors. For a high level response they needed to describe how the factors chosen worked together to enable the person chosen to maintain their health. In some cases this was not evident.

**B3** – For a high level of response candidates needed to draw upon knowledge from a range of sources in order to describe at least four positive factors. They also needed to draw clear conclusions about the person's health.

### **Achievement within Strand C**

Generally this section was well done. To achieve full marks candidates need to understand the verbs used in the assessment criteria. A list of effects is insufficient when asked to review and assess possible long-term risks to the health and well being of the individual.

**C1** - Candidates were able to clearly identify two risks for the person concerned and give brief notes on how the risks might affect them

**C2** – Candidates were able to identify three risks and to describe short-term effects for the person concerned.

**C3** – Candidates were able to show how the short-term risks developed in several stages to have long-term effects on the person concerned. The high level response requires candidates to show increased depth and breadth of understanding.

### **Achievement within Strand D**

The indicators of physical health should be as set out in the WYNTL section of OCR's Approved Specification. In some portfolios candidates were not clear what constituted a measure of health. A small number of Centres guided candidates to describe the different measures without actually using them to record the results or identify the individual's health status.

**D1** - Candidates were able to identify one health measure and to accurately record this. Some candidates used this to draw conclusions about the effects on the person concerned and showed how this information would be used when developing a health plan.

**D2** – Most candidates were able to identify two health measures and to accurately record these and draw conclusions (including their own opinions) about the effects on the person concerned.

**D3** – Candidates were able to do the above and compare results to the norms for the person concerned, with a high level of understanding.



## **Achievement within Strand E**

The focus of this Strand is ensuring that the plan developed could be used by the individual. It was disappointing that many candidates did not clearly define at least two targets for their plan. Many plans did not contain factual information about how the individual could improve their health. There needed to be a greater depth of understanding, showing how the individual could be supported to maintain or improve their health and how they could be motivated to achieve the targets.

When portfolios were done well, candidates were imaginative in their presentation of a plan or plans e.g. presenting them in a booklet or leaflet form.

In portfolios achieving higher grades there was clear indication of targets that had been set and how these targets had been decided upon.

**E1** – Candidates were able to produce a basic plan with two targets and helpful advice on how the person could be supported to achieve them. They were able to draw simple conclusions about the effect of the plan on the health of the person.

**E2** – Candidates were able to suggest at least three ways of motivating the person and referred to PIES when assessing the effects of the plan on the person. Some candidates gave limited suggestions on how to motivate and support the person. Centres should be aware that motivation and support can include the use of leaflets, videos, websites, attending clubs or classes, the support of family and friends, etc.

**E3** – Candidates produced a detailed plan with at least two suggestions for supporting the individual. For the high level response they drew logical conclusions using information from a range of sources. They used the research within their assignment to support their suggestions and evaluated the plans in terms of how it might affect the person. When candidates compared alternative methods of support for the person, by suggesting advantages and disadvantages of different methods and then drawing conclusions, they were awarded the higher marks. This comparison was effectively done by some candidates in a chart, giving details of the methods being compared and their advantages and disadvantages.

## **Examples of Good Practice within Teachers' Preparation and Marking of the Portfolio**

### **It is good practice to:**

- Annotate work clearly throughout the text and on the (URS) front mark sheet; this supports and justifies the marks awarded.
- Ensure that marking is consistent between members of a department by undertaking internal standardisation.
- Encourage candidates to refer to the information they gather from the Internet or from books/journals rather than just add it to their work without using/referencing it.
- Encourage candidates to set out their work clearly with appropriate headings that link to the assessment criteria as this helps with assessment.
- Avoid excess material in the portfolio: e.g. only include one copy of a survey used, make reference to leaflets, internet research in a bibliography rather than include it in the portfolio evidence.
- Where writing frames are given to guide candidates to access the criteria, they must not be too prescriptive otherwise all candidates from the Centre produce

similar work and this suggests a lack of independent learning skills being developed.

- Ensure that pupils number the pages of their assignment once it is complete. The page references should be clearly shown on the URS form, as this allows for quick referral to each section when looking for assessment criteria.

### **Good Practice within Coursework Administration**

- Check that the marks for each Strand have been added up correctly and all marks are out of 50.
- Avoid plastic wallets for individual pieces of work.
- Candidates portfolios kept in order using treasury tags assist the moderation process.
- Avoid sending ring binders of work as these are heavy to post and bulky to store.
- Ensure that Internal Moderation is evident.
- Send work promptly once the Moderator is known to the Centre – when 10 candidates or fewer send work straightaway, do not wait for the Moderator to make contact.
- Complete the teacher mark column of the MS1 as well as shading in the lozenges, checking that the Moderators copy is clear to read.
- Include the Coursework Assessment Form (which gives a breakdown of marks given for each strand of each unit) with the copy of the MS1 that is sent to the moderator.
- Include **one** signed copy of form CCS160, Centre Authentication Form (revised September 2004), with the work to be sampled.

## **4871 – Understanding Personal Development and Relationships**

### **General Comment**

Candidate responses showed that they were reasonably well prepared for the test, gaining marks consistently across all questions within the paper. Those who achieved low scores appeared to struggle due to low levels of literacy. This was reflected in poor responses that indicated that questions had been misunderstood. There was lack of specificity in many of the answers given, particularly in Section B.

Questions were based on the 'What You Need to Learn' section of the unit. A few questions were based on recall but most required candidates to apply their knowledge to specific contexts. The format of the paper was similar to all OCR Health and Social Care papers in that there were six main questions, each with sub – questions.

The questions set for Section A of the paper were mainly required candidates to respond to 'identify' or 'describe' command words. 'Identify' questions required a one word or phrase response while questions which required candidates to 'describe' needed a phrase or complete sentence answer. Illustrations and mini case studies were included in the paper to help motivate and stimulate candidate response.

Section B of the question paper, while being accessible to G level candidates, was generally more demanding and provided the opportunity for candidates to give an extended response in order to demonstrate their depth and breadth of knowledge. In-depth case studies gave candidates the opportunity to provide more detailed responses to questions.

Within Section B of the paper, candidates were less clear when responding to questions which asked them to include how a service would 'help them to cope'. Lack of specificity appeared to be a problem.

Topics within the question paper included growth and development, focussing on the different life stages, and the characteristics associated with each life stage, factors that can affect growth and development, the effects of relationships on development, self-concept and the effects of life events and the different types of support that can be provided during expected and unexpected life events.

### **Centres could help to improve the quality of responses by candidates by:**

- Helping candidates to differentiate between command word in each sentence e.g. identify, describe, explain etc. Many are not meeting the required depth of command words such as 'explain'.
- Ensuring that candidates know the difference between 'positive' and negative' and how to apply these within questions.
- Helping candidates to differentiate between vague responses and factual answers. For example, 'to provide support' is vague, but 'family could provide support by talking and listening' is factual as it actually states what those involved would do.

- Giving candidates opportunities to practice questions using short scenarios. This would help candidates to learn how to 'apply knowledge' in different contexts.
- Making sure that candidates are familiar with the technical terminology associated with the unit. For example, understanding what is meant by the 'inter-relationship of factors and how self-esteem can be affected' or how 'self-concept' can be influenced during different life stages.
- Providing guidance to raise candidate awareness that the sentence beneath a 'Fig' or 'Text' indicates which questions are based on them. For example, 'Use the information given in Text 2 to answer questions **2(a)**, **2(b)** and **2(c)**.'
- Helping candidates to differentiate between physical, intellectual emotional and social (PIES) and to give factual answers relating to these.

### **Comments on Individual Questions**

1(a) The question required candidates to give one physical, one intellectual, one emotional and one social characteristic of a one year old. Answers were inaccurate and often vague. This question generally received a poor response.

1(b) This question addressed the first part of the WYNLT section of the specifications relating to life stages and age spans. Many candidates were very successful in achieving full marks (10), correctly giving the life stage and the age span for the characteristic given.

Candidates who were less successful showed through their responses that they were unable to give the age span for most of the life stages. As a consequence only five marks were scored out of a possible ten marks.

If candidates gave one year either side of the accepted (in specification) age span they were given a mark.

1(c) Candidates were required to explain the term 'growth'. It was necessary in the answers to indicate 'an increase in size' e.g. putting on weight or getting taller. Lack of facts contributed to a poor response.

2(a) Most candidates were successful in achieving the correct answer for this question.

2(b) A large number of candidates were successful in gaining full marks for this question by giving the **physical** changes likely to occur in the life stage. Answers could have included, for example:

- voice deepens
- shoulders broaden
- testicles get larger/drop

Candidates who were less successful gave answers such as 'mood swings' or 'likes to go out with friends' which are not physical.

- 2(c) The question was poorly answered as a candidates were not able to differentiate between social factors and the other types of factors. Answers could have included for example:
- like being with friends
  - enjoys trying out relationships with girls
- 2(c) This question addressed section 2.2.2 in the specifications which deals with genetic factors that can affect growth and development. Many candidates did not achieve more than four of the six possible marks. The depth of 'explaining' was not achieved, neither was the 'affect on development' of the genetic disorder or disease.
- 3(a) Most candidates answered the question successfully. Where they were less successful candidates were unable to differentiate between the various factors given. For example, they were unable to distinguish which was an environmental, physical, social, economic factor.
- 3(bi) A large number of candidates answered the question successfully. They were able to select two positive influences and to show how each was positive.
- 3(bii) Most candidates were able to select a negative influence in Shona's growth and development. However, they were not able to give a good 'explanation' as to why it was negative. A large number of candidates scored only one of the two possible marks.
- 3(c) Many candidates were not able to give a coherent or reasoned answer to show how the factors had interrelated in Shona's life. They could not 'explain' the links between one factor and another. Also they were not able to give factual answers about how the interrelationship of factors could possibly affect self-esteem. For example, part of a good answer could have said:

*'Earning a good wage (f) and being able to save money (f) would enable Shona to be able to buy needs and wants. She would not have to think about whether she could afford to go out with her friends (f) or whether to join in taking part in leisure activities as she would have the money to be able to do so. Being able to save would help Shona to feel secure as she would know that she has money if an unexpected bill occurred. This would give her confidence and contribute to a high self-esteem'.*

Marks for this question were poor with few reaching the top mark range.

- 4(a) Most candidates achieved at least two marks by identifying the life stages correctly. Many candidates gave Sonia's life stage as 'infancy' when 'childhood' was the correct answer.
- 4 (b) Candidates were unable to differentiate between physical, intellectual, emotional and social (PIES). Also, candidates did not read the question accurately, for example, they were asked to focus on 'positive **working relationships**' not on family life. The 'emotional affects' were least well completed. Answers could have included:
- Pat could have a high self esteem **because** she is successful

- Pat would feel part of the decision making process **because/as** she is making a positive contribution
- Pat will have a feeling of self worth **because** she is feeling happier/confident

Low marks were scored for this question.

5(a, b, c)

These questions required candidates to complete short pieces of extended writing, putting together thoughts in a logical and coherent manner. Many answers were vague, being without fact and made assumptions about how Pat, Simon, Sonia and Ritchie could be affected. The emphasis of the questions was on **'the affects on self-concept'**. Answers for 5(a) could have included, for example:

*'Pat could feel guilty or worried because she could no longer look after Ritchie now that his condition had worsened and could feel that she was not doing her duty.'*

*Pat could be feeling guilty because she had let her husband down because she had passed his father on to a nursing home where he would be looked after by people he did not know.*

*Pat would now have time for herself as she no longer had to look after Ritchie and she would be able to spend this additional time with David, Simon and Sonia, doing things together as a family.'*

These are examples of the type of complete answers that could have been given within the quality responses made by candidates.

- 6(a) This question was quite well answered. Candidates gave reasons, justifying why they had chosen expected/unexpected for the life events given.
- 6(b) Candidates were less successful in identifying two expected events from the given scenario. They were also unsuccessful in giving the reasons why they were expected.
- 6(c) Lack of specificity resulted in candidates achieving fewer marks for this question. Responses demonstrated:
- lack of factual knowledge e.g not identifying the professional care worker or what they would do
  - repetition of the actual question
  - lack of organisation within the answer
  - lack of knowledge about **the type of** support could be provided by the family and **what it would involve**
  - lack of understanding of **how** the support would help Pat **to cope**

No marks were awarded for simply repeating the words 'support' or 'family' or 'professionals', as these were given in the stem of the question. No marks were given for 'care workers' as this did not name the professional and could have been anyone.

Marks were awarded for the quality of the response. For example, for giving explicitly the names of professionals who could help the family, e.g. GP and Counsellor and then **explaining** what such professionals would actually do to help. Technical terminology should have been used correctly and **ways** in which the support would **help Pat to cope** should have been given.

Similarly this process should have been applied to the support provided by family. It was important to state what support would be given and how it would help Pat to cope.

**An example of a paragraph of an acceptable answer:**

*Pat would probably be feeling very upset so family could encourage her to talk about her feelings and worries and they would need to listen carefully and try to get her to express her feelings and not to bottle them up (1). This would help Pat to think about some of the positive things she could still do so she would feel valued (1). Pat could visit a counsellor who is trained to help people to think about their feelings and he/she would encourage Pat to talk and to look forward to see what she could cope with in the future (1). This would help Pat to cope as she would not feel guilty that she would not be able to contribute anything to life and would perhaps help her realise that she would, in time, be able to work (1). An occupational therapist could visit to see if the house could be adapted so that Pat could live as independently as possible. Ramps could be fitted or lower surfaces could be put in the kitchen (1). Pat could cope better with every day living tasks such as cooking if this happened and would feel she was making a positive contribution (1).*

## GCSE Health & Social Care (Double Award) 1493

### January 2005 Assessment Session

#### Unit Threshold Marks

Unit		Maximum Mark	a*	a	b	c	d	e	f	g	u
4869	Raw	50	46	41	36	31	26	21	16	11	0
	UMS	100	90	80	70	60	50	40	30	20	0
4870	Raw	50	46	41	36	31	26	21	16	11	0
	UMS	100	90	80	70	60	50	40	30	20	0
4871	Raw	100	87	76	65	55	45	36	27	18	0
	UMS	100	90	80	70	60	50	40	30	20	0

#### Specification Aggregation Results

Overall threshold marks in UMS (i.e. after conversion of raw marks to uniform marks)

	Maximum Mark	a*a*	aa	bb	cc	dd	ee	ff	gg	uu
1493	300	270	240	210	180	150	120	90	60	0

The cumulative percentage of candidates awarded each grade was as follows:

	a*a*	aa	bb	cc	dd	ee	ff	gg	uu	Total Number of Candidates
1493	0.0	7.4	25.9	44.4	85.2	92.6	100	100	100	156





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