



GCSE MARKING SCHEME

SUMMER 2016

**HISTORY - DEVELOPMENT STUDY
CHANGES IN HEALTH AND MEDICINE,
c.1345 TO THE PRESENT DAY
4383/02**

INTRODUCTION

This marking scheme was used by WJEC for the 2016 examination. It was finalised after detailed discussion at examiners' conferences by all the examiners involved in the assessment. The conference was held shortly after the paper was taken so that reference could be made to the full range of candidates' responses, with photocopied scripts forming the basis of discussion. The aim of the conference was to ensure that the marking scheme was interpreted and applied in the same way by all examiners.

It is hoped that this information will be of assistance to centres but it is recognised at the same time that, without the benefit of participation in the examiners' conference, teachers may have different views on certain matters of detail or interpretation.

WJEC regrets that it cannot enter into any discussion or correspondence about this marking scheme.

NOTE ON THE QUALITY OF WRITTEN COMMUNICATION

Examiners are required to credit the quality of written communication for each candidate's performance on particular questions. These are the questions in Section B. There are no additional marks for the Quality of Written Communication, but examiners are expected to consider the following descriptions of performance when awarding levels to the work of candidates:

Level 1	the text is generally legible; aspects of spelling, punctuation and grammar are clear; some information is presented in a suitable manner
Level 2	most of the text is legible; spelling, punctuation and grammar are used to make the meaning clear; information is presented in a suitable format.
Level 3	the text is legible; spelling, punctuation and grammar are sufficiently accurate to make meaning clear; relevant information is presented in a suitable format; uses an appropriate structure and style of writing; uses some specialist vocabulary
Level 4	the text is legible; spelling, punctuation and grammar are consistently accurate to make meaning clear; information is always presented in a suitable format; uses an appropriate structure and style of writing; uses specialist vocabulary accurately

PAPER 4383/02

UNIT 3: DEVELOPMENT STUDY

CHANGES IN HEALTH AND MEDICINE,
c.1345 TO THE PRESENT DAY

MARKING SCHEME

QUESTION 1

Question 1 (a)

Target:	Recall and deployment of knowledge; understanding of key historical features		
Mark allocation:	AO1	AO2	AO3
5	3	2	

Question: **Describe the work of Andreas Vesalius in the sixteenth century.** [5]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer with a weak or implied point made.** [1]

E.g: Answers will say that Vesalius wrote an anatomy book.

LEVEL 2 **A more detailed and accurate description.** [2-3]

*E.g: Answers refer to Vesalius as a professor of anatomy who published his book *The Fabric of the Human Body* in 1543. They could mention the *Tabulae Sex* (1538). They may alternatively, give detail about his books, focusing on the quality of illustrations and their basis in dissection.*

LEVEL 3 **A fully detailed and accurate description.** [4-5]

E.g: Answers will combine the two elements present at Level 2 in one detailed and accurate description. The best answers may well refer to Vesalius as 'the father of anatomy' or similar.

Question 1 (b)

Target:	Recall and deployment of knowledge; explanation of key concept; use of source material		
Mark allocation:	AO1	AO2	AO3
7	2	3	2

Question: **Explain why medical knowledge changed in the nineteenth century.** [7]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer; paraphrases the sources; lacks focus on the set issue.** [1-2]

E.g: Source A shows that Pasteur found germs whereas Source B shows how Koch found different germs.

LEVEL 2 **Accurate answer which begins to address the question.** [3-5]

Answers worth 3 marks will use the sources and their own knowledge to mostly describe the set issue.

E.g: Source A shows that Pasteur developed the Germ Theory whereas Source B shows that Koch developed his work further, and was able to isolate specific germs, like cholera.

Answers worth 4 or 5 marks will use the sources and their own knowledge to begin to focus on the concept of change or development. (For 4 marks candidates will begin to focus on the concept of change; for 5 marks candidates will focus more clearly on the concept of change).

E.g: The sources show why medical knowledge changed and improved in the nineteenth century. Source A shows that Pasteur identified germs in the 1860s and he was the first to develop the 'germ theory' whereas Source B shows that Koch began to identify specific germs. Answers will begin to explain why this happened i.e. because the two men and their governments were in competition, and so they received funding for their work. To develop the idea of change, they could mention the growth of technology e.g. Koch's use of industrial dyes, or the improvement in communication of ideas and discoveries.

LEVEL 3 **Answer addresses the question clearly.** [6-7]

Answers worth 6 marks will use both the sources and own knowledge to begin to explain the concept of change or development.

Answers worth 7 marks will clearly use both the sources and own knowledge to explain more fully the concept of change or development.

E.g: Answers will refer to the sources to show why medical knowledge increased in this period. They will focus on the breakthrough made by Pasteur in discovering germs in the 1860s. His work for the brewing industry led him to identify pasteurisation as the way to kill germs. This is clearly shown by Source A, and led to the decline of the spontaneous generation theory. They should use Source B to show how Koch was able to use technology to find specific germs. By the end of the nineteenth century, medical knowledge had increased enormously. Answers should concentrate on the influence of individual and international competition, with the funding of the work of Pasteur and Koch. Expect some discussion of the role of improved technology e.g. use of industrial dyes, and communication of ideas.

Question 1 (c)

Target:	Recall and deployment of knowledge; analysis and evaluation of key historical concepts		
Mark allocation:	AO1	AO2	AO3
8	2	6	

Question: **Why was the discovery of DNA a turning point in the development of medical knowledge in the twentieth century?** [8]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer, with weak or implied points made.** [1-2]

E.g: The discovery of DNA meant that doctors could understand how people are put together.

LEVEL 2 **Mostly descriptive answer; limited attempt at analysis of key issue; weak explanation seen.** [3-4]

E.g: Answers may be confined to a straightforward description of the discovery and uses of DNA e.g. Crick and Watson discovered DNA and this led to better understanding of how humans develop. The concept of a double helix, which they announced in 1953, led to better knowledge of genetics and attempts at cloning.

LEVEL 3 **More detailed and accurate analysis of key issue with a clear attempt at explanation, not fully sustained.** [5-6]

E.g: Answers may tend to describe the discovery of DNA, as at Level 2 but there will be a more direct attempt to analyse the significance of Crick and Watson's work. Specifically, they should focus on the huge increase in medical knowledge due to DNA, and its uses in medicine e.g. replacement tissue, gene therapy etc. In 1982 genetically engineered insulin was produced as a result of the DNA breakthrough. This has been of great value to people with diabetes.

LEVEL 4 **Detailed and accurate analysis of key issue providing a fully substantiated explanation.** [7-8]

E.g: Answers should clearly discuss the significance of the discovery of DNA for the development of medical knowledge. As well as reference to the importance of the discovery for treatment, the discovery of DNA provided a highly detailed insight into the way humans are programmed and put together. It was such an important turning-point that led to other major developments e.g. the development of replacement tissue, gene therapy, the production of synthetic insulin and the diagnosis and treatment of genetic illnesses.

QUESTION 2

Question 2 (a)

Target:	Recall and deployment of knowledge; understanding of key historical features		
Mark allocation:	AO1	AO2	AO3
5	3	2	

Question: **Describe the work of Alexander Fleming in the twentieth century.** [5]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer with a weak or implied point made. [1]

E.g: Answers will say that he discovered penicillin, which killed off many different kinds of bacteria.

LEVEL 2 A more detailed and accurate description. [2-3]

E.g: Answers refer to Fleming as a scientist who discovered a bacteria-killing mould growing in his laboratory. This accidental discovery was called penicillin and Fleming published the details in 1928. They may mention this was termed the 'wonder-drug' after its mass-production in the 1940s.

LEVEL 3 A fully detailed and accurate description. [4-5]

E.g: Answers will refer to Fleming as a scientist, or even bacteriologist and surgeon. They may make reference to his experience as a medical officer in France during World War One and discovery of the antiseptic powers of lysozyme, present in tears and mucus. They will certainly mention his 1928 rediscovery of the properties of penicillin, and the publication of his research. They should mention his discovery of a mould by accident, which he found killed many different bacteria. The mould was called penicillium notatum. They may describe how Florey and Chain further developed his work and to mass-produce penicillin from 1942, but this is only creditworthy if they say that Fleming lacked the facilities to develop his initial idea. Remember this is not a question about Florey and Chain or penicillin per se, but Fleming himself.

Question 2 (b)

Target:	Recall and deployment of knowledge; explanation of key concept; use of source material		
Mark allocation:	AO1	AO2	AO3
7	2	3	2

Question: **Explain why surgical methods had changed by the end of the sixteenth century.** [7]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer; paraphrases the sources; lacks focus on the set issue.** [1-2]

E.g: Source A shows that medieval surgery was very painful whereas Source B shows that there was less pain in the sixteenth century.

LEVEL 2 **Accurate answer which begins to address the question.** [3-5]

Answers worth 3 marks will use the sources and their own knowledge to mostly describe the set issue.

E.g: Source A shows that medieval surgical methods were very painful and basic whereas Source B shows that the work of individuals like Pare had discovered a way to reduce the pain in operations. This happened because traditional surgical methods were very unsafe and could even kill the patient. The candidate may use the term 'barber-surgeon'.

Answers worth 4 or 5 marks will use the sources and their own knowledge to begin to focus on the concept of change or development. (For 4 marks candidates will begin to focus on the concept of change; for 5 marks candidates will focus more clearly on the concept of change).

E.g: The sources show why surgical methods had changed and improved by the sixteenth century. Source A shows that medieval surgeons had no anaesthetic, making operations incredibly painful for the patient. Source A shows this very well as the patient is having his head cut into. The candidate may refer to the role of 'barber-surgeons'. On the other hand, Source B shows that Pare developed a new surgical method which greatly reduced pain, using egg yolk, oil of roses and turpentine to create a soothing ointment. Answers will begin to explain why this happened i.e. because of the difficulty and high casualty rate from operations, as well as the stimulus to sharing ideas that arrived with printing in the sixteenth century. To develop the idea of change, they could mention Pare's development of surgical instruments, or his 'Apology and Treatise' book, from 1575.

LEVEL 3

Answer addresses the question clearly.

[6-7]

Answers worth 6 marks will use both the sources and own knowledge to begin to explain the concept of change or development.

Answers worth 7 marks will clearly use both the sources and own knowledge to explain more fully the concept of change or development.

E.g: Answers will focus on the inadequacy of medieval surgery and should explain the role and status of the 'barber-surgeon'. They must be clear about the inadequacies of medieval surgical methods as shown in Source A. The reason for change is partly shown in Source B, where Pare's use of ointment was a major, if slightly accidental, step forward in surgical methods. His subsequent use of instruments such as the crow's beak, and his 'Apology and Treatise' (1575) enhanced surgical methods further. Answers at this level should refer directly to why methods had improved – Pare's use of ligatures in surgery, although conceptually sound, actually increased infection. For the top mark, they should also mention the printing of Pare's book as an impetus to change.

Question 2 (c)

Target:	Recall and deployment of knowledge; analysis and evaluation of key historical concepts		
Mark allocation:	AO1	AO2	AO3
8	2	6	

Question: **Why was the work of Christian Barnard in the twentieth century a turning point in the treatment of disease? [8]**

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer, with weak or implied points made. [1-2]

E.g: There will be reference to the first heart transplant.

LEVEL 2 Mostly descriptive answer; limited attempt at analysis of key issue; weak explanation seen. [3-4]

E.g: Answers may be confined to a descriptive answer e.g. Christian Barnard did the first heart transplant. Although the patient only survived for 18 days, Barnard's work showed others the way. They may mention subsequent work e.g. a second patient lasted longer with his new heart and from then on, people started having more organ transplants.

LEVEL 3 More detailed and accurate analysis of key issue with a clear attempt at explanation, not fully sustained. [5-6]

E.g: Answers may tend to describe with more detail than at Level 2 e.g. Christian Barnard did the first heart transplant. Although the patient only survived for 18 days, Barnard was able to transplant a second heart and the patient lasted 594 days before dying from an infection. There will be a more direct attempt to analyse the longer-term effect of Barnard's work – either his solution for the problem of infection, and the consequent development of cyclosporine, or a reference to the development of further transplant surgery - heart and lung, liver and pancreas, kidney – and donor registration.

LEVEL 4 Detailed and accurate analysis of key issue providing a fully substantiated explanation. [7-8]

E.g: Answers should focus directly on the idea of Barnard's work as a turning point in medical knowledge. They must offer comprehensive detail and judgement on Barnard's heart transplants, and additional detail on the development of infection control through drugs (cyclosporine). We would expect to see reference to subsequent development in transplant surgery, (examples noted in L3). They may also note the growth of donor registration and the importance of this in making transplants possible. At this level answers would need to show that Barnard's work was not immediately successful, but that it was a major inspiration to others, particularly as it was reported widely in the world's media and treated as a sensational event.

QUESTION 3

Question 3(a)

Target:	Recall and deployment of knowledge; understanding of key historical features		
Mark allocation:	AO1	AO2	AO3
5	3	2	

Question: **Describe the main features of the work of the NHS in the twentieth century.** [5]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer with a weak or implied point made.** [1]

E.g: Answers will say that the NHS provided free medicine and treatment.

LEVEL 2 **A more detailed and accurate description.** [2-3]

E.g: Answers refer to the establishment of the NHS in 1948 as a way of providing health care for all the British public, from the 'cradle to the grave'. They should make an accurate description about the work of the NHS, with any sensible detail to be credited e.g. mass immunisation, the development of GP services, hospitals being nationalised under the Ministry of Health. Remember these can be drawn from the period 1948-2000, so can include details like dental services / optician care, as well as antenatal care.

LEVEL 3 **A fully detailed and accurate description.** [4-5]

E.g: Answers will refer to the establishment of the NHS by Labour's Aneurin Bevan as a landmark in providing 'cradle to grave' healthcare for the British public. They should refer to the range of services provided, with examples such as those at Level 2 used. For this level, we would expect to see reference to most of or all of the following - family doctors, hospitals, maternity services, medicines, dental and eye services.

Question 3 (b)

Target:	Recall and deployment of knowledge; explanation of key concept; use of source material		
Mark allocation:	AO1	AO2	AO3
7	2	3	2

Question: **Explain why public health improved in the nineteenth century.** [7]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 **Generalised answer; paraphrases the sources; lacks focus on the set issue.** [1-2]

E.g.: Source A shows that streets in 1839 were filthy whereas Source B shows that they started to clean them up.

LEVEL 2 **Accurate answer which begins to address the question.** [3-5]

Answers worth 3 marks will use the sources and their own knowledge to mostly describe the set issue.

E.g.: Source A shows that public health conditions in London were terrible. Open gutters and sewers added to overcrowding, and this would make disease spread quickly. Source B on the other hand shows that in 1875 the slums started to be cleared and sewage systems put in big cities. This happened because of government deciding to pass laws to improve public health.

Answers worth 4 or 5 marks will use the sources and their own knowledge to begin to focus on the concept of change or development . (For 4 marks candidates will begin to focus on the concept of change; for 5 marks candidates will focus more clearly on the concept of change).

E.g.: Source A shows that public health conditions in nineteenth century London were very poor, with poor sanitation and overcrowding. This was a breeding ground for disease. On the other hand, Source B shows that by 1875 the government's attitude had changed and councils were now ordered to improve sanitation and housing conditions. This was in part due to successive epidemics e.g. cholera. Answers will begin to explain why previous attempts to clean up public health had failed due to the laissez-faire attitude of government. They could also directly reference the voluntary nature of the First Public Health Act, 1848.

LEVEL 3 **Answer addresses the question clearly.**

[6-7]

Answers worth 6 marks will use both the sources and own knowledge to begin to explain the concept of change or development.

Answers worth 7 marks will clearly use both the sources and own knowledge to explain more fully the concept of change or development.

E.g: Answers will focus clearly on the reasons for improvements in public health in this century. The poor quality of sanitation and housing in the early nineteenth century is clearly shown by Source A. Successive epidemics, especially of cholera, eroded the government's laissez-faire stance, and led to legislation that made improvements in public health compulsory. This is illustrated in Source B, which shows the 1875 Public Health Act made councils responsible for clean water and sewerage. Answers at this level should mention the increasing link between poor conditions and disease that the work of people like Chadwick exposed. They may also refer to increased medical knowledge of germs to support this point. The best answers should show awareness that improvements were very slow – as the First Public Health Act of 1848 indicates, not all legislation was effective. Very good answers might link this to Source B, where the Artisans' Dwelling Act is shown to be permissive but not compulsory. This meant change was very patchy by the end of the century.

Question 3 (c)

Target:	Recall and deployment of knowledge; analysis and evaluation of key historical concepts		
Mark allocation:	AO1	AO2	AO3
8	2	6	

Question: **Why did the Black Death have such a major impact in the fourteenth century?** [8]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer, with weak or implied points made. [1-2]

E.g: There will be very limited reference to the lack of public health facilities in the fourteenth century, or the lack of medical knowledge due to superstition / religion e.g. it had a big impact because people didn't know about science and just prayed.

LEVEL 2 Mostly descriptive answer; limited attempt at analysis of key issue; weak explanation seen. [3-4]

E.g: Answers may be confined to descriptive points about the problems of public health in the fourteenth century, especially the dirty conditions and lack of organisation. They may alternatively examine the lack of scientific knowledge due to the prevalence of religious and superstitious beliefs. They could also refer to the types of plague and how easily infection passed around, or give some detail on failed cures such as the prayer, persecution of Jews, flagellation or using pomanders to clear bad air.

LEVEL 3 More detailed and accurate analysis of key issue with a clear attempt at explanation, not fully sustained. [5-6]

E.g: Answers will focus on the reasons for the huge impact of the Black Death on public health in this period. They will consider the poor state of public health in this period, with the dirty conditions, poor sanitation and series of failed cures as at level 2. However, there will be a more direct attempt to analyse why this occurred i.e. organisation was limited due to the feudal nature of society and the lack of effective administration and government in health matters. Also, they will be clear and specific about the lack of medical knowledge due to the power of the Church / superstition and lack of scientific understanding.

LEVEL 4 Detailed and accurate analysis of key issue providing a fully substantiated explanation. [7-8]

E.g.: Answers should focus on the main reasons for the huge impact of the Black Death, considering poor public health, the role of religion and superstition, and the highly infectious nature of the disease itself. At this level, they should give accurate examples of ineffective cures, and show how the lack of effective government increased the spread of the plague. Some answers might question that the Black Death's impact was universal, with some villages hit by a 80-90% mortality rate and others less affected.

QUESTION 4

Question 4

Target:	Recall and deployment of knowledge; analysis of key concepts; quality of written communication			
Mark allocation:	AO1	AO2	AO3	SPG
15	4	8		3

Question: **Have new developments in medical knowledge always led to improvements in health from the Middle Ages to the present day?** [12+3]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer; basic response which offers little support. [1-3]

E.g: Answers may refer to some new developments in medical knowledge in general terms, making the point that people have lived increasingly longer and healthier lives. Some vague associated points may be mentioned.

LEVEL 2 Answers will demonstrate understanding of the period largely through description with some relevant historical knowledge deployed. [4-6]

Award 4 marks for some related facts; or superficial coverage; or weak references to issue of change.

Award 5-6 marks for answers based on issues in the scaffold only; partial coverage; a patchy overall outline with some reference to change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers may focus on parts of the period such as the Renaissance or the twentieth century, writing about individuals like as Vesalius or Barnard whose work led to a better understanding of anatomy. Alternatively, they will provide a poor outline of changes in medical knowledge across the period.

LEVEL 3 **Answers will demonstrate understanding of the period through description and explanation with relevant historical knowledge deployed.** **[7-9]**

Award 7 marks for answers with more developed chronological grasp but with imbalanced coverage; some reference to change and continuity

Award 8 marks for a very good chronological coverage of whole period with good supporting detail and an attempt to address the issue of change and continuity.

Award 9 marks for a clear attempt to discuss the issue in a chronological context and to assess more fully the extent of change and continuity over most of the period. Candidates may begin to appreciate the differences in experience between groups.

E.g: Answers may focus on the question set with supporting material from a range of periods. Medical knowledge in the later Middle Ages relied on pre-existing methods such as the zodiac charts and the theory of the humours – there were very few new developments. New developments in the Renaissance led to a much better understanding of anatomy, with figures like Vesalius and Harvey helping doctors understand more about the body. The 'germ theory' in the late nineteenth century and the discovery of X-rays have certainly led to better health. Change was considerable as twentieth century developments like scanning, and developments in DNA and genetics have successfully improved medical knowledge and improved people's health. There will, however, be little reference in variations in political and economic systems across the period.

LEVEL 4 **Answers will demonstrate understanding of the period through developed and well-substantiated explanations of the extent and process of change with relevant and accurate historical knowledge deployed.** **[10-12]**

Award 10 marks for an effective overview of the main developments over the period with an obvious attempt to discuss issue of change and continuity; the answer must build on very good chronological coverage.

Award 11-12 marks for a fully effective chronological overview of the main developments over the whole period with a sustained attempt to discuss extent of change and continuity; there will be recognition of the varying impact of change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers will provide a sound chronological account of new developments in medical knowledge as at Level 3, but with greater detail and depth. There will be a clear attempt to deal with variations in the impact of new developments in medical knowledge. Candidates may refer to periods such as the Middle Ages, where knowledge was inhibited by religion and primarily based on superstition, and periods of rapid progress like the 19th and 20th centuries. They may also show how major steps forward in medical knowledge in the Renaissance period were not easy to translate to better health due to limited treatment options. Expect reference to medical knowledge that has been revolutionary, such as the Germ Theory and the discovery of DNA.

Examiners are expected to award marks for spelling, punctuation and the accurate use of grammar in this question.

Level	Performance descriptions
0	Candidates do not reach the threshold performance outlined in the performance description below.
<i>Threshold performance</i> 1 mark	Candidates spell, punctuate and use the rules of grammar with reasonable accuracy in the context of the demands of the question. Any errors do not hinder meaning in the response. Where required, they use a limited range of specialist terms appropriately.
<i>Intermediate performance</i> 2 marks	Candidates spell, punctuate and use the rules of grammar with considerable accuracy and general control of meaning in the context of the demands of the question. Where required, they use a good range of specialist terms with facility.
<i>High performance</i> 3 marks	Candidates spell, punctuate and use the rules of grammar with consistent accuracy and effective control of meaning in the context of the demands of the question. Where required, they use a wide range of specialist terms adeptly and with precision.

QUESTION 5

Question 5

Target:	Recall and deployment of knowledge; analysis of key concepts; quality of written communication			
Mark allocation:	AO1	AO2	AO3	SPG
15	4	8		3

Question: **Have methods of prevention and treatment of disease always led to success from the Middle Ages to the present day?** [12+3]

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer; basic response which offers little support. [1-3]

E.g.: Answers may refer to methods of prevention and treatment being unsuccessful – many people have died of diseases since the Middle Ages. Some vague associated points may be mentioned.

LEVEL 2 Answers will demonstrate understanding of the period largely through description with some relevant historical knowledge deployed. [4-6]

Award 4 marks for some related facts; or superficial coverage; or weak references to issue of change.

Award 5-6 marks for answers based on issues in the scaffold only; partial coverage; a patchy overall outline with some reference to change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers may focus on parts of the period such as the Middle Ages where methods of treatment were not always successful for patients. There may be a section on the work of individuals like Jenner and Lister whose work was initially criticised, or a poor outline of the utility of treatment methods over the period.

LEVEL 3 Answers will demonstrate understanding of the period through description and explanation with relevant historical knowledge deployed. [7-9]

Award 7 marks for answers with more developed chronological grasp but with imbalanced coverage; some reference to change and continuity

Award 8 marks for a very good chronological coverage of whole period with good supporting detail and an attempt to address the issue of change and continuity.

Award 9 marks for a clear attempt to discuss the issue in a chronological context and to assess more fully the extent of change and continuity over most of the period. Candidates may begin to appreciate the differences in experience between groups.

E.g: Answers may focus on certain periods as more progressive than others. The 19th and 20th centuries were times when highly effective and helpful treatments were developed, such as Simpson's use of chloroform as an anaesthetic from 1847. Expect to see more detailed reference to pioneers such as Lister, whose use of carbolic acid from 1865 also helped patients undergoing surgery have a safer experience. The 20th century saw the development of the 'wonder drug' penicillin which helped countless patients survive infections since Fleming's discovery (1928) and its mass production (1942).

LEVEL 4 **Answers will demonstrate understanding of the period through developed and well-substantiated explanations of the extent and process of change with relevant and accurate historical knowledge deployed.** **[10-12]**

Award 10 marks for an effective overview of the main developments over the period with an obvious attempt to discuss issue of change and continuity; the answer must build on very good chronological coverage.

Award 11-12 marks for a fully effective chronological overview of the main developments over the whole period with a sustained attempt to discuss extent of change and continuity; there will be recognition of the varying impact of change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers will provide a sound chronological account of how treatments have helped patients as at Level 3, but with greater detail and depth. There will be a clear attempt to deal with variations in the success of treatments in different periods. Candidates may refer to periods such as the Middle Ages, where operations and treatments could be positively dangerous to patients, and periods of rapid progress like the 19th and 20th centuries. They may also show how even major steps forward in treatment were not without their initial problems, such as the Black Period in surgery (1848-70) when better anaesthetics led to longer operations with more risk of infection. In the Renaissance period those following Pare's work on ligatures may have increased the risk of infection due to the lack of understanding of germs. Some treatments have essentially failed e.g. Thalidomide.

Examiners are expected to award marks for spelling, punctuation and the accurate use of grammar in this question.

Level	Performance descriptions
0	Candidates do not reach the threshold performance outlined in the performance description below.
<i>Threshold performance</i> 1 mark	Candidates spell, punctuate and use the rules of grammar with reasonable accuracy in the context of the demands of the question. Any errors do not hinder meaning in the response. Where required, they use a limited range of specialist terms appropriately.
<i>Intermediate performance</i> 2 marks	Candidates spell, punctuate and use the rules of grammar with considerable accuracy and general control of meaning in the context of the demands of the question. Where required, they use a good range of specialist terms with facility.
<i>High performance</i> 3 marks	Candidates spell, punctuate and use the rules of grammar with consistent accuracy and effective control of meaning in the context of the demands of the question. Where required, they use a wide range of specialist terms adeptly and with precision.

QUESTION 6

Question 6

Target:	Recall and deployment of knowledge; analysis of key concepts; quality of written communication			
Mark allocation:	AO1	AO2	AO3	SPG
15	4	8		3

Question: **Have efforts to improve public health and patient care always had a positive effect on people's health from the Middle Ages to the present day? [12+3]**

Use 0 for incorrect or irrelevant answers.

LEVEL 1 Generalised answer; basic response which offers little support. [1-3]

E.g: Answers may refer to improvements in patient care and public health in more recent times. Some vague associated points may be mentioned.

LEVEL 2 Answers will demonstrate understanding of the period largely through description with some relevant historical knowledge deployed. [4-6]

Award 4 marks for some related facts; or superficial coverage; or weak references to issue of change.

Award 5-6 marks for answers based on issues in the scaffold only; partial coverage; a patchy overall outline with some reference to change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers may focus on parts of the period such as the 20th century, where the advent of the NHS has substantially improved people's health. Alternatively, they may provide a poor outline of developments in standards of public health and patient care across the period.

LEVEL 3 Answers will demonstrate understanding of the period through description and explanation with relevant historical knowledge deployed. [7-9]

Award 7 marks for answers with more developed chronological grasp but with imbalanced coverage; some reference to change and continuity

Award 8 marks for a very good chronological coverage of whole period with good supporting detail and an attempt to address the issue of change and continuity.

Award 9 marks for a clear attempt to discuss the named issue in a chronological context and to assess more fully the extent of change and continuity over most of the period. Candidates may begin to appreciate the differences in experience between groups.

E.g: Answers may focus on supporting material from a range of periods. The Church's role in patient care in the Middle Ages had some effect on health, but this was very minor. Better health care for the general population became necessary with the increasing industrialisation of Britain. Chadwick's work in the 19th century improved public health and Florence Nightingale's work in the same century improved patient care. The establishment of the NHS after the Second World War had an unprecedented effect on standards of patient care and public health. Standards generally improved, right up to the provision of 'Care in the Community' in the late C20th. There will, however, be little reference in variations between periods.

LEVEL 4 **Answers will demonstrate understanding of the period through developed and well-substantiated explanations of the extent and process of change with relevant and accurate historical knowledge deployed.** **[10-12]**

Award 10 marks for an effective overview of the main developments over the period with an obvious attempt to discuss issue of change and continuity; the answer must build on very good chronological coverage.

Award 11-12 marks for a fully effective chronological overview of the main developments over the whole period with a sustained attempt to discuss extent of change and continuity; there will be recognition of the varying impact of change. Award the higher mark for the degree of understanding of change and continuity over the period.

E.g: Answers will provide a sound chronological account of how developments in patient care and public health led to better health, as in Level 3, but with greater detail and depth. There will be a clear attempt to deal with variations in progress towards better health. Candidates may refer to periods such as the Middle Ages, where care was provided by the Church and by hospitals. Methods of combating the plague were not organised and were left to individual towns to deal with; patient care was ineffective, with no trained nurses. Alternatively other periods, especially from the 20th century onwards, saw enormous efforts by government to organise systems of support for patient care and public health through the NHS and acts of parliament on matters of housing and clean air. Answers should show awareness that, despite the improvements, there is currently criticism of the standards of patient care provided in hospitals. Waiting lists continue to be long in some respects and there is the fear of hospital infection – MRSA.

Examiners are expected to award marks for spelling, punctuation and the accurate use of grammar in this question.

Level	Performance descriptions
0	Candidates do not reach the threshold performance outlined in the performance description below.
<i>Threshold performance</i> 1 mark	Candidates spell, punctuate and use the rules of grammar with reasonable accuracy in the context of the demands of the question. Any errors do not hinder meaning in the response. Where required, they use a limited range of specialist terms appropriately.
<i>Intermediate performance</i> 2 marks	Candidates spell, punctuate and use the rules of grammar with considerable accuracy and general control of meaning in the context of the demands of the question. Where required, they use a good range of specialist terms with facility.
<i>High performance</i> 3 marks	Candidates spell, punctuate and use the rules of grammar with consistent accuracy and effective control of meaning in the context of the demands of the question. Where required, they use a wide range of specialist terms adeptly and with precision.