

### **General Certificate of Education**

# Health and Social Care 8626/8629

**HC13** 

## **Mark Scheme**

2007 examination - June series

Mark schemes are prepared by the Principal Examiner and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation meeting attended by all examiners and is the scheme which was used by them in this examination. The standardisation meeting ensures that the mark scheme covers the candidates' responses to questions and that every examiner understands and applies it in the same correct way. As preparation for the standardisation meeting each examiner analyses a number of candidates' scripts: alternative answers not already covered by the mark scheme are discussed at the meeting and legislated for. If, after this meeting, examiners encounter unusual answers which have not been discussed at the meeting they are required to refer these to the Principal Examiner.

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of candidates' reactions to a particular paper. Assumptions about future mark schemes on the basis of one year's document should be avoided; whilst the guiding principles of assessment remain constant, details will change, depending on the content of a particular examination paper.

Further copies of this Mark Scheme are available to download from the AQA Website: www.aqa.org.uk

Copyright © 2007 AQA and its licensors. All rights reserved.

#### **COPYRIGHT**

AQA retains the copyright on all its publications. However, registered centres for AQA are permitted to copy material from this booklet for their own internal use, with the following important exception: AQA cannot give permission to centres to photocopy any material that is acknowledged to a third party even for internal use within the centre.

Set and published by the Assessment and Qualifications Alliance.

#### **HC13**

#### Question 1

- (a)(i) Genotypes/Genetics AW (1) presence/absence or example of (respiratory) disease/illness (1) (regularity/amount) of exercise performed/fitness level (1) Not: disability max 2 2 marks
- (a)(ii) Ref to: a measure of aerobic fitness (1) measuring maximum O2 uptake/aerobic power (1) (in Naomi's case poor/below average O2 uptake and utilisation/ use energy release/respiration (1) in terms of O2 usage per minute (1) per Kg of body weight (1) max 4

  4 marks
- (b) Ref to: Naomi's heart rate increases (1) with increased stroke volume AW (1) increasing cardiac output (1) with more blood flow to (skeletal) muscles (1) increased ventilation/breathing rate (1) due to increasing CO2 in blood/decreasing blood pH (1) sweating (1) skin flushes AW/redness/shunt vessels open (1) max 5

  5 marks
- i) Re Naomi's stress levels the exercise will reduce blood pressure (1) improve concentration span (1) improve decision making (1) improve sleeping pattern (1) lower anxiety/worries/calm/relaxed AW (1) may also prevent indigestion (1) palpitations (1) 'muscular' chest/pains (1) feel more able to cope AW (1) ref to chemical/e.g. endorphin released (1) enhances mood AW (1) max 7
   7 marks
  - ii) Ref to improved stamina AW (1) from greater muscle strength (1) withstanding fatigue/keep going/not tiring (1) Not: flexibility max 2 **2 marks**

#### **Question 2**

- (a) Allow gradual/gentle mark in any part (1)
  Warming up will make Adrian's body ready for exercise by preventing
  injury (1) muscle soreness (1) by (gently) raising pulse (1) and cardiac
  output (1) and ventilation (1) increases O2 delivery to muscles (1)
  helping reduce O2 deficit at start of exercise (1) increases muscle
  temperature (1) blood vessels in muscles dilate (1) cellular respiration
  increases (1) muscle flexibility increases AW(1) mentally he will be prepared
  to exercise/motivate (1) max 8
- (b) Ref to Adrian's body systems maintaining effectiveness Not: 'improving' ideas but maintaining (1) but allow separate examples of these e.g. (maintaining) respiratory function AW (1) circulatory function (1) digestive function (1) muscles skeletal function AW (1) strength maintained (1) mobility maintained (1) flexibility maintained (1) muscle/fibre loss delayed (1) reduces protein depletion (1) helps prevent Adrian from suffering from age-related diseases (1) allow egs DVT/strokes thrombosis (1) blood pressure reduced (1) less risk of clots forming (1) atherosclerosis (1) blood cholesterol reduced (1) osteoporosis (1) Calcium deposition in bones maintained (1) keeps bones strong/dense (1) by clearing Adrian's mind AW (1) sleep

patterns improved (1) his metabolic rate will be maintained (1) max 12
Allow explanation mark for named diseases e.g. atherosclerosis (1) maintains essential arterial elasticity/reduces plague in blood vessels AW

12 marks

#### **Question 3**

(a)(i) BMI indicates – Adult W is lean/below average/normal (1) Adult Y obese/

very overweight (1) Adult Y least fit (1)

Adult X – average/normal (1) Adult Z average/normal (1)

Adults X/Z – similar fitness (1)

4 marks

(ii) Peak flow indicates - Adult W in normal/average range (1)

Adult X in average range (1)

Adult Y in average range (1)

Adult Z least fit

Adult W/X/Y similar fitness (up to 2 for separate cf.)

Adult Z possible asthmatic/respiratory problem/below

normal/average (1)

4 marks

(iii) Resting pulse rates - Adult W in average range (1)

Adult X below average range/(very) fit or may have heart disease

(1)

Adult W/Z similar fitness (1)

Adult Y above average range/less fit (1)

Adult Z in average range (1)

4 marks

(iv) Recovery times after identical exercise

Adult X fittest (1)

Adult Y least fit (1)

Adults W/Z similar fitness (1)

Adults W/Z more fit than Y (1) less fit than X (1) 4 marks

(b)(i) Tidal volume – amount of air inhaled/exhaled (1) per single breath (1) 2 marks

(b)(ii) Minute ventilation – tidal volume AW (1) multiplied by numbers of breaths per minute/breathing rate (1)

2 marks

#### **Question 4**

(a) Barriers – Family commitments/having two pre-school children (1)

Costs/examples – gym fees/clothes/equipment (1)

Low fitness level (1) Not embarrassment/facilities location/or cultural issues

3 marks

Can be overcome by – exercising as part of housework regime (1) taking

children for walks/taking part in energetic play (1)

Exercise gently at first/small progression increments (1)

Allow use video (1) join beginners class (1)

3 marks

(b) Any 4 of – seek medical advice/expert advice – prevent overexertion wear appropriate clothing (allow example) – prevent accidents/temp control/be comfortable

use appropriate equipment – prevent injuries warm down after exercise – prevent muscle soreness/stiffness use monitoring equipment correctly – plan progress appropriately max 4 principles and 4 different reasons

8 marks

(c) (i) Socially – Rhona may meet new people when exercising AW/interact/social contact (1)

make new friends (1) develop social skills (1)

3 marks

(ii) Raise self esteem – Rhona will develop a positive mental attitude (1) develop (self) -confidence (1) through losing weight (1)develop 'feel good'/'happy' factor (1) due to regular exercise stimulating chemical secretions (1) endorphins/ entrephalins/analgesics/serotonin (1) sense of social belonging (1) max 3

3 marks

#### Paper Total 80 marks

	<u>AO1</u>	<u>AO2</u>	<u>AO3</u>	<u>AO4</u>
1ai		2		
ii	4			
bi		5		
ii	5	4		
2a	4	4		4
b	5	3		
3ai			2	2
aii			2	2
aiii			2	2
aiv			2	2
bi	2			
bii	2			
4a			6	
b			4	4
С			2	4