

General Certificate of Education Health and Social Care

HSC03

Mark scheme

2820 June 2013

Version/Stage: Final

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

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of students' 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 from aga.org.uk

Question	Part	Sub Part	Marking Guidance	Mark	Comments
1	а		Accept: Hereditary/genetic (1)	1	Accept a more detailed explanation that implies hereditary/genetic if accurate
1	b		Allow 2 marks for each of the three explanations given. Likely answers may include: Hard to breathe (1) Persistent coughing (1) CF affects lungs by clogging them with thick sticky mucus (1) Hard to digest food (1) affects the digestive system by clogging internal organs/pancreas with thick sticky mucus (1) Poor weight gain (1) Frequent infections (1) due to problems with lungs as previously stated(1) Lacking in energy (1) due to frequent lung infections or problems digesting food (1) Reduced life span (1) due to wear and tear on body (1) Weakened immune system (1) Stunted growth (1) probably linked to malnourishment for reasons given above Delayed puberty (1) Infertility (1) probably linked to malnourishment for reasons given above	6	Do not award 'cannot do physical exercise'. Exercise programmes are encouraged for C.F.

1	С	Emotional: huge challenges ahead and lots of information to absorb – may feel very vulnerable, awareness of reduced life span; anxious about her future and how to cope Social: They may feel that their social life will be affected if Anne requires extra support. They may not be able to leave her with baby sitters. Financial: They may need advice on the financial support available e.g. Disability Living Allowance form, specifically relating to Cystic Fibrosis. They may feel that one of them will have to give up work in order to meet the demands of physio and hospital appointments. Some equipment e.g. vibrating vest not available on NHS and so will incur costs. Intellectual: Bob and Carol would need to learn percussion. They would also learn a great deal about CF. Physical: Carrying out percussion can be time-consuming/physically demanding. Mark Bands O marks Nothing worthy of credit. 1-2 marks The answer is limited and/or unconvincing. 3-4 marks Fifective examples are less convincing and/or lack elaboration. Effective examples are provided and well described.	6	No mark for just naming P.I.E.S
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1	d	Accept any two of the following: Output GP (1) CF nurse (1) health visitor (1) CF trust (1) Dietician (1) Physiotherapy (1) School (1) Counselling (1) CAB (1) Consultant (1) CF Specialist clinic (1) Cystic Fibrosis Trust or similar support groups (1) Social Worker (1)	max 2	2	Allow specific reference to Disability Living Allowance but do not allow 'benefits'.
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Intellectual: Accept any one of the following: may be missing school (1) not concentrating at school due to worry about his mum (1) not able to fulfil intellectual potential (1) No time to do homework (1) has little support with his education from parent (1) Emotional: Accept any one of the following: may be stressed (1) depressed (1) upset/down (1) constantly worried about his mum (1) Social: Accept any one of the following: probably misses school (1) does not socialise after school due to rushing to get home (1) no stimulation/socialising in after school clubs (1) hard to develop friendships when mother unable to support this (1) unlikely to invite friends back (1)	Question	Part	Sub Part	Marking Guidance	Mark	Comments
max 3	2	а		Intellectual: Accept any one of the following: • may be missing school (1) • not concentrating at school due to worry about his mum (1) • not able to fulfil intellectual potential (1) • No time to do homework (1) • has little support with his education from parent (1) Emotional: Accept any one of the following: • may be stressed (1) • depressed (1) • upset/down (1) • constantly worried about his mum (1) Social: Accept any one of the following: • probably misses school (1) • does not socialise after school due to rushing to get home (1) • no stimulation/socialising in after school clubs (1) • hard to develop friendships when mother unable to support this (1) • unlikely to invite friends back (1)		

2	b	Allow 1 mark for each elaboration of each ris 1 mark for any of the following risk Bullying (1) Isolation (1) Social exclusion (1) Stress (1)	2 marks for explanation of each risk. Likely answers: • bullied by other children because he doesn't fit in (1) • may appear withdrawn (1) • different to other children (1) • lack of opportunities to socialise (1) • unable to make friends (1) • feels lonely (1) • has no one to talk to about how he feels (1) • lack of opportunities to socialise (1) • lack of opportunities to socialise (1) • unable to make friends (1) • can't invite friends home because of his situation (1) • constantly worried about his mum (1) • finds it difficult to cope with school and being a carer for his mum (1) • feels upset/down/depressed (1) • a feeling that he is out of control (1) • feels vulnerable/insecure (1) • unable to solve problems (1) • could lead to self-harm (1)	6	2 marks can be allowed for a risk which has one point explained in detail.
		Self- harming (1)	could lead to self-harm (1)		

2 c	Allow 1 mark for each of the two sources named plus 2 marks for appropriate elaboration of each of the two sources of support named. Accept: School pastoral system (1)	6	2 marks can be award for one point which is explained in detail Some points may be relevant to different 'methods of support'
	 contact support services e.g. young careers/social service (1) 		

 provides strategies to cope (1) emotional support (1) provide support (1) provide strategies to help her come to terms with her feelings e.g. talking treatments (1) refer to young carers (1) Do not accept give advice 	
Websites which are set up to support young carers (1) • Events (1) • training (1) • young carers festivals (1) • web chats (1) • local carers projects (1) • local services such as sports clubs (1) • support groups (1)	Accept name of a website (1) – e.g. www.Family-action.org.uk, www.youngcarer.com, www.barnardo's.org.uk etc.

Question	Part	Sub Part	Marking Guidance	Mark	Comments
Question 3	Part		1 mark for each of the two barriers identified plus 2 marks for each appropriate elaboration/explanation of the two barriers identified. Accept: Employment (1) Lack of opportunities due to employers rejecting her job application (1) This could be due to mistaken assumptions about her capabilities and/or an unwillingness to give her a chance (1) Equality act doesn't prevent discrimination (1) Societal Barriers (1) Avoiding social contact due to embarrassment/ignorance/fear of not knowing what to say (1) discrimination due to lack of knowledge about Down's (1) assumption that, for example, people with down's cannot live independently or have relationships (1)	Mark 6	2 marks can be award for one point which is explained in detail.
		Econon	 the expectations of people with disability and their informal carers might also act as a barrier (1) she may find it difficult to access supported accommodation due to the reasons stated above (1) Economic Barriers (1) If she does find work she is likely to be on the minimum wage which will have an impact on her life opportunities (1) She may always be reliant upon her parents and so find it hard to 		Environmental barriers do not apply.
			achieve independence (1) max 6		

		Accept any four of the following:		
		• choice (1)		
		• dignity (1)		
		autonomy (1)		
		equitable treatment (1)		
0		psychological security (1)	4	
3	b	effective communication (1)	4	
		Occupation (1)		
		Stimulation (1)		
		Social contact (1)		
		Social support (1)		
		max 4		
3		Accept:	1	Allow gonetic (1)
3	С	Chromosomal/an extra chromosome (1)	I	Allow genetic (1)
		Accept:		
		A policy exists to protect children (1)		
		 If she/he were to be bullied, the policy will provide clear guidelines on 		
		how to deal with the issue (1)		_ , , , ,
		 There should be a designated child protection officer (1) 		For 4 marks 'evaluation'
3		The policy is only effective if the school makes staff and students aware		is required – it is not
	d	of the policy (1)	4	enough to assume that
		the school/teachers actively seeks to prevent bullying (1)		the policy will work.
		by encouraging staff and students to report incidents (1)		There should also be
		 creating a positive environment where individuals with Down's are 		reference to DOWNS.
		respected (1)		
		The policy alone will not prevent bullying (1)		
		max 4		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
4	а		 Marks should be awarded for showing knowledge of Alzheimer's and linking this to the ability to cope alone. e.g. Memory Loss - especially for new information (1) Michael might forget how to work the cooker/ locate items in his house which may lead to poor nutrition (1) forgetting the way home from the shops/being unable to remember names and places/what happened earlier the same day (1) Impaired performance of learned skills (1) difficulty with everyday tasks (1) e.g. problems washing/dressing/eating/leading to neglect/poor hygiene (1) Disorientation (1) not knowing where he is/wandering around his area /getting lost leading to dangerous situations (1) Mood changes (1) particularly as parts of the brain that control emotion are affected by disease (1) people with Alzheimer's may also feel sad/frightened/angry about what is happening to them (1) Communication problems e.g. aphasia (1) a decline in the ability to talk/read/write (1) Loss of logic and ability to reason or use initiative (1) 	4	Two features of Alzheimer's explained well would be enough for 4 marks.

4	b	Accept: Emotionally: (max 3 marks for this area) • failing to cope at home could lead to frustration for Michael and neglect (1) • This could cause anxiety for his neighbour who feels she can no longer help him(1) • Michael could feel vulnerable as he becomes increasingly confused and out of control (1) • Michael's behaviour could shock/ upset his neighbour (1) Socially: (max 3 marks for this area) • Michael may miss appointments and not be able to interact • He might become increasingly isolated (1) • his neighbour may no longer be able to socialize with him (1) • This could be a loss to her of a friend (1)	4	For full marks there should be both emotional and social examples and reference to both Michael and his neighbour.
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4 c	principles. Likely answers: Initially, getting a diagnosis for Michael from his GP is essential the neighbour may report her concern to social services who will then carry out an assessment on Michael's ability to remain in his home this will take into account his safety, availability of carers in the absence of informal care, the likelihood is that Michael will require Home care and ultimately residential care within residential care there will be policies in place to protect the welfare of the individual from abuse e.g. Dignity in Care initiatives. Reference to legislation/Mental Health Act/The Mental Capacity Act/ The Care Standards Act/The Equality Act The Mental Capacity Act means Michael must be involved in the decision making process Health and Social Care Act 2008 established the CQC Care Quality Commission which regulates/inspects care homes Reward appropriate care actions applied in the home from domiciliary care and/or visits from appropriate practitioners such as ensuring hygiene and dietary needs are met CQC Care standards Act relates to inspections of care homes. Candidates who display appropriate knowledge and understanding and display higher QWC skills should be rewarded at the top of the mark band. Conversely, those who display some confusion and weakness in QWC supporting knowledge and understanding should be placed at the bottom of the mark band. Mark Bands O marks Nothing worthy of any credit. The candidate will have limited awareness of the above and there may be inaccuracy. 3-4 marks The candidate will show some understanding of care actions from	7	Do not credit domiciliary care because it is provided in the scenario.
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5-7 marks	practitioners and legislation but there will be less detail. The candidate will show a good understanding of how Michael will be supported and safeguarded and refer to relevant care actions from practitioners and one piece of legislation. In this band legislation and practitioners /service provision should be applied	
	correctly.	