

New  
Specification



*Rewarding Learning*

**ADVANCED**  
**General Certificate of Education**  
**2018**

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**Health and Social Care**

**Assessment Unit A2 3**

*assessing*

**Providing Services**

**[AHC31]**

**MONDAY 11 JUNE, MORNING**

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**MARK  
SCHEME**

## General Marking Instructions

### Introduction

Mark schemes are published to assist teachers and students in their preparation for examinations. Through the mark schemes teachers and students will be able to see what examiners are looking for in response to questions and exactly where the marks have been awarded. The publishing of the mark schemes may help to show that examiners are not concerned about finding out what a student does not know but rather with rewarding students for what they do know.

### The Purpose of Mark Schemes

Examination papers are set and revised by teams of examiners and revisers appointed by the Council. The teams of examiners and revisers include experienced teachers who are familiar with the level and standards expected of students in schools and colleges.

The job of the examiners is to set the questions and the mark schemes; and the job of the revisers is to review the questions and mark schemes commenting on a large range of issues about which they must be satisfied before the question papers and mark schemes are finalised.

The questions and the mark schemes are developed in association with each other so that the issues of differentiation and positive achievement can be addressed right from the start. Mark schemes, therefore, are regarded as part of an integral process which begins with the setting of questions and ends with the marking of the examination.

The main purpose of the mark scheme is to provide a uniform basis for the marking process so that all the markers are following exactly the same instructions and making the same judgements in so far as this is possible. Before marking begins a standardising meeting is held where all the markers are briefed using the mark scheme and samples of the students' work in the form of scripts. Consideration is also given at this stage to any comments on the operational papers received from teachers and their organisations. During this meeting, and up to and including the end of the marking, there is provision for amendments to be made to the mark scheme. What is published represents this final form of the mark scheme.

It is important to recognise that in some cases there may well be other correct responses which are equally acceptable to those published: the mark scheme can only cover those responses which emerged in the examination. There may also be instances where certain judgements may have to be left to the experience of the examiner, for example, where there is no absolute correct response – all teachers will be familiar with making such judgements.

- 1 (a) Discuss reasons for the increased life expectancy of older people in Northern Ireland. (AO1, AO2, AO3)

**Examples of suitable points to be included in the discussion:**

- the development of specialist health and social care provision
- better living conditions such as those related to improvements in housing, income, etc.
- improved working conditions leading to fewer industrial illnesses/accidents as a result of health and safety legislation
- improvements in nutrition
- improvements in technology leading to improvements in diagnosis and treatments
- advances in medicines – discovery of new drugs and vaccinations
- better education – a greater awareness of health, more awareness of risk factors for disease and so can reduce these
- increase in use of health services so problems identified and dealt with
- improvements in lifestyle, e.g. walking groups, smoking cessation groups
- improved preventative care programmes such as screening for bowel cancer
- wider availability of health and fitness facilities leading to improvements in physical health
- advances in medical research leading to improved understanding and treatments
- improved access to support services, e.g. voluntary agencies

All other valid responses will be given credit.

[0] is awarded for a response not worthy of credit

**Level 1 ([1]–[3])**

Overall impression: basic

- basic knowledge and understanding of reasons for the increased life expectancy of older people in Northern Ireland
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss reasons for the increased life expectancy of older people in Northern Ireland.

**Level 2 ([4]–[6])**

Overall impression: adequate

- adequate knowledge and understanding of reasons for the increased life expectancy of older people in Northern Ireland
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss reasons for the increased life expectancy of older people in Northern Ireland.

**Level 3 ([7]–[9])**

Overall impression: competent

- competent knowledge and understanding of reasons for the increased life expectancy of older people in Northern Ireland
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss reasons for the increased life expectancy of older people in Northern Ireland. [9]

- (b) Explain **two** ways private nursing homes are funded. (AO1, AO2)

**Examples of suitable points to be explained include:**

- payment by family member
- direct payment by service user
- payment by statutory sector/government
- private investment
- donations, e.g. to patient comfort fund
- bequests
- business loan

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(2 × [2])

[4]

- (c) Using **one** example of each type of need, describe how staff in a private nursing home could meet the needs of older service users. (AO1, AO2)

**A physical need**

**Examples of suitable points to be described include:**

- physical needs include the need for hygiene, medical care and/or medication, mobility, warmth, clothing, shelter, nutrition, personal care. These may be met through personal assistance with washing and dressing, provision of aids and adaptations, rehabilitation, e.g. OT. They may also be met through provision of meals, drinks etc., through provision of prescribed medication and medical care such as contacting GP if service user is unwell.

All other valid responses will be given credit.

[1] basic description [2] adequate description [3] competent description

(1 × [3])

[3]

**An intellectual need**

**Examples of suitable points to be described include:**

- intellectual needs such as need for stimulation may be met through activities like reading, hobbies and games: knowledge and understanding, e.g. of condition, may be met through conversation. Need to keep brain active and stimulated may also be met by providing access to newspapers and TV and through conversation with service users.

All other valid responses will be given credit.

[1] basic description [2] adequate description [3] competent description

(1 × [3])

[3]

**An emotional need**

**Examples of suitable points to be described include:**

- emotional needs include esteem needs, the need for a sense of security, a sense of belonging, the need for a sense of autonomy, emotional well-being, the need to feel valued, feel respected, and the need to feel supported. These can be met by providing counselling therapy, by involving service users in decisions about their care, thus giving them a sense of control – through empowerment and provision of advocacy support. Being treated with dignity, through staff spending time talking and listening etc., through provision of spiritual care, e.g. access to religious services/personnel and flexible visiting hours to ensure adequate access to family and friends can all help meet emotional needs.

All other valid responses will be given credit.

[1] basic description [2] adequate description [3] competent description

(1 × [3])

[3]

**A social need****Examples of suitable points to be described include:**

- social needs such as the need for communication or interaction with others or friendship can be met by providing opportunities to mix with others, e.g. groups of children and young people by encouraging visits from family and friends or by providing group recreational activities such as reminiscence therapy. Participation in hobbies such as painting, sewing, gardening can address social needs, as can organising social outings. Taking time to converse and share stories with service users can also meet social needs.

All other valid responses will be given credit.

[1] basic description [2] adequate description [3] competent description

(1 × [3])

[3]

- (d) Discuss **three** advantages and **three** disadvantages for older service users of receiving health and social care services from private providers. (AO1, AO2, AO3)

**Advantages of receiving health and social care services from private providers****Examples of suitable points to be included in the discussion:**

Answers may address any three of the following points

- greater choice for service users
- creates competition between service providers and so may contribute to raising standards of care provided
- service users can receive treatment sooner and avoid long waiting lists
- service users can receive one-to-one care
- flexibility is better, e.g. appointment times
- environment may be more pleasant, e.g. room in private hospital
- may be able to provide very specialist care and advanced technology
- risk of cross-infection reduced due to individual rooms in private hospitals
- subject to regulation unlike informal care and some voluntary providers, e.g. private care homes and private home care providers

**Disadvantages of receiving health and social care services from private providers****Examples of suitable points to be included in the discussion:**

Answers may address any three of the following points

- operates to make a profit so standards of care may not be as high as they should be, e.g. may be less focused on training updates
- need for profit may mean low ratio of staff to patients/residents which may negatively impact on the quality of care
- some private sector organisations may not be as well regulated as the statutory sector, e.g. complementary therapist, counselling service and other private practices
- can be very expensive for service users/cost can be prohibitive
- can be unreliable – may “pull” provision if it becomes unprofitable
- potential for exploitation leaves older people vulnerable to debt etc.
- may be a lack of accountability in private sector – doctors/providers may be difficult to trace if things go wrong

All other valid responses will be given credit.

[0] is awarded for a response not worthy of credit

**Level 1 ([1]–[4])**

Overall impression: basic

- basic knowledge and understanding of the advantages and disadvantages for older service users of receiving health and social care services from private providers
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss advantages and disadvantages of receiving health and social care services from private providers
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

**Level 2 ([5]–[8])**

Overall impression: adequate

- adequate knowledge and understanding of the advantages and disadvantages for older service users of receiving health and social care services from private providers
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss advantages and disadvantages of receiving health and social care services from private providers
- answers which focus **only** on the advantages **or only** on the disadvantages for older service users of receiving health and social care services from private providers cannot achieve beyond this level
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

**Level 3 ([9]–[12])**

Overall impression: competent

- competent knowledge and understanding of the advantages and disadvantages for older service users of receiving health and social care services from private providers
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss advantages and disadvantages of receiving health and social care services from private providers
- at the top of this level candidates should discuss three advantages and three disadvantages for older service users of receiving health and social care services from private providers
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

**Level 4 ([13]–[15])**

Overall impression: highly competent

- highly competent knowledge and understanding of the advantages and disadvantages for older service users of receiving health and social care services from private providers
- demonstrates highly competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a highly competent ability to discuss advantages and disadvantages of receiving health and social care services from private providers
- at the top of this level candidates should discuss in detail all three advantages and all three disadvantages for older service users of receiving health and social care services from private providers
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

[15]

AVAILABLE  
MARKS

40

- 2 (a) Discuss how an informal carer might support an older person. (AO1, AO2, AO3)

**Examples of suitable points to be included in the discussion:**

Informal carers can support an older person in a wide range of ways including shopping, cleaning, doing laundry, providing help with personal care such as bathing and showering or support with mobility, lighting fire, collecting benefits, organising finances, providing transport to appointments or to social outings, administering medication, making appointments, e.g. for doctor or dentist, contacting social services, ordering and collecting prescriptions. They may also provide social and emotional support, e.g. company and a ‘listening ear’, act as advocate, may also make changes or alterations to the home to accommodate or stay overnight, locking doors/gates to secure property and promote safety.

[0] is awarded for a response not worthy of credit

**Level 1 ([1]–[3])**

Overall impression: basic

- basic knowledge and understanding of how an informal carer might support an older person
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss how an informal carer might support an older person.

**Level 2 ([4]–[6])**

Overall impression: adequate

- adequate knowledge and understanding of how an informal carer might support an older person
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss how an informal carer might support an older person.

**Level 3 ([7]–[9])**

Overall impression: competent

- competent knowledge and understanding of how an informal carer might support an older person
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss how an informal carer might support an older person. [9]

- (b) Explain **four** ways a social worker might support informal carers who help to look after older people. (AO1, AO2)

**Examples of suitable points to be explained include:**

- may organise respite care for older person to give the carer a break
- may arrange training for carer such as manual handling
- may advise carer about benefit entitlement
- many provide counselling support/listening ear or access to counselling
- may arrange day care for older person to enable the carer to do things for themselves
- may put carer in touch with support groups
- may liaise with other services like OT and nursing to support the informal carer, e.g. request supplies to support carer
- may complete a carer's assessment
- may act as an advocate for carer
- may provide help for carer to understand their role and how to care, e.g. by providing or going through care plan – gives confidence to carer and reduces their responsibility and stress
- may advise carer on coping strategies to deal with their stress

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(4 × [2])

[8]

- (c) Discuss **three** disadvantages for older service users of community care. (AO1, AO2, AO3)

**Examples of suitable points to be included in the discussion:**

- patchwork provision can mean care provided in the community is piecemeal and so often the needs of the older service users are not being properly met – in some areas service users have much better provision than in others
- lack of support for older service users in the community due to problems with implementation of care packages. The case-loads for some staff are so large that often appointments are postponed or visits are too short to provide adequate support, leading to failure to provide adequate support to service users in the community – too many service users and not enough staff due to lack of funding
- for those living in their own homes, poor risk assessment leading to greater likelihood for accidents to happen which can result in hospitalisation for older service users and even earlier death as a result of complications, e.g. MRSA
- service users may experience isolation – those living in the community who live alone may be very isolated and some see only carers in any one day – this isolation can lead to loneliness and depression
- older people living in their own homes in the community are at increased risk of abuse – many older service users feel vulnerable as a result of frailty or illness, which can make them easy targets of crime
- due to the limited care packages available to many older service users, family end up burdened with the caring role. This can often cause elderly service users to report feelings of guilt at the burden they place on their family and friends, which can cause unhappiness for them and cause difficulties for their families and friends

- care provision can be inflexible, e.g. unsuitable times for home visits
- All other valid responses will be given credit.

[0] is awarded for a response not worthy of credit

### Level 1 ([1]–[4])

Overall impression: basic

- basic knowledge and understanding of the disadvantages for older service users of community care
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss disadvantages for older service users of community care
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

### Level 2 ([5]–[8])

Overall impression: adequate

- adequate knowledge and understanding of the disadvantages for older service users of community care
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss disadvantages for older service users of community care
- must address at least two disadvantages to achieve at this level
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

### Level 3 ([9]–[12])

Overall impression: competent

- competent knowledge and understanding of the disadvantages for older service users of community care
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss disadvantages for older service users of community care
- must address three disadvantages to achieve at this level
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [12]

- (d) Discuss **three** advantages and **three** disadvantages for older people of receiving informal care. (AO1, AO2, AO3)

**Examples of suitable advantages to be discussed:**

- the older person can remain in their own home which is perhaps where they have lived all their life and so they can avoid the emotional distress of having to leave their own space which can be a major trauma for some people
- informal care is generally very cost effective and less expensive than other forms of care
- there is a great degree of flexibility; often the informal carers can come when the older person needs them and not at set times as can be the case with formal care package provision
- one-to-one attention can often be given by family and friends who understand the needs of the older person more fully and this can lead to a greater degree of contentment
- consistent care is more likely as often the same person or people are providing the care over a long period of time – this also makes it more likely that needs will be met as a sense of trust is established between the older person and the carer
- the familiar surroundings of an older person's own home can reduce anxiety and promote a sense of happiness and well-being
- there is less risk of contracting diseases like MRSA that can be easily picked up in other care settings such as nursing homes
- living in their own home can support the older person to retain their sense of independence and autonomy which can enhance self-esteem and so increase sense of happiness and well-being
- the older person is perhaps in a better position to maintain regular contact with their family and friends because they live in their own home in their own community and so this can promote a sense of well-being and happiness
- older people are being looked after by people they know and love and this may be a lot less stressful for them than having to take up residence in a nursing home surrounded by strangers
- informal carers perform a range of tasks to meet a variety of needs which perhaps visiting carers who come as part of formal care packages may not do such as cutting grass or cleaning windows

**Examples of suitable disadvantages to be discussed:**

- due to the nature of informal care it is largely unregulated – meaning checks are not usually carried out on the quality of care provided, which can result in poor care being delivered
- no requirement for criminal check so greater potential for neglect or abuse of older people
- informal carers are usually untrained and so may not be equipped to provide quality care; consequently the needs of the older person may not be appropriately met
- older people may miss out on opportunities to socialise with others as they would be able to do while receiving care in other sectors of the mixed economy and so can feel isolated and lonely
- this type of care may be unreliable – there may be no backup if carer becomes ill or needs time off and so the older service user may be left without the help and support they need

- older people may feel uncomfortable or embarrassed to receive personal care from people they know well or may feel like a burden
- the home environment may be unsafe and so older people may be increasingly at risk of being victims of accidents and crime such as robbery and physical assault
- carers often experience stress and may find it difficult to cope with caring responsibilities alongside other responsibilities and so the standard of care provided may suffer

All other valid responses will be given credit.

[0] is awarded for a response not worthy of credit

### **Level 1 ([1]–[5])**

Overall impression: basic

- basic knowledge and understanding of the advantages and disadvantages of informal care for older people
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss the advantages and disadvantages for older people of receiving informal care
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

### **Level 2 ([6]–[10])**

Overall impression: adequate

- adequate knowledge and understanding of the advantages and disadvantages of informal care for older people
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss the advantages and disadvantages for older people of receiving informal care
- answers which focus only on the advantages or only on the disadvantages of informal care for older people cannot achieve at the top of this level
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

### **Level 3 ([11]–[14])**

Overall impression: competent

- competent knowledge and understanding of the advantages and disadvantages of informal care for older people
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss the advantages and disadvantages for older people of receiving informal care

- at the top of this level candidates should discuss three advantages and three disadvantages of informal care for older people
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

**Level 4 ([15]–[18])**

Overall impression: highly competent

- highly competent knowledge and understanding of the advantages and disadvantages of informal care for older people
- demonstrates a highly competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a highly competent ability to discuss the advantages and disadvantages for older people of receiving informal care
- at the top of this level candidates should discuss all three advantages and all three disadvantages in detail with application to older people
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

[18]

47

- 3 (a) Explain **three** ways older service users gain access to the services they require. (AO1, AO2)

**Examples of suitable ways to be explained:**

- self-referral – service user may refer themselves via phone or in person, e.g. make an appointment with own GP or social worker
- third-party referral, e.g. referral to services by a relative or friend
- professional referral, e.g. referral to a specialist by a GP or social worker
- recall – receiving a letter from a service provider for a review or a check-up
- emergency referral, e.g. ambulance or police
- compulsory referral, e.g. detained under the Mental Health (Northern Ireland) Order

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(3 × [2])

[6]

- (b) Explain **one** way the following barriers to accessing services might be overcome for older service users. (AO1, AO2)

**Geographical location**

**Examples of suitable ways to be explained:**

- via telephone help lines where service users (as appropriate) and/or their relatives may get advice about issues they are facing
- via information on the internet, in chat rooms – giving advice about issues of concern
- via provision of transport to facilities such as day centres, hospital appointments etc., e.g. free taxi service
- by provision of healthcare in service user's own home, e.g. visits from OT in service user's own home
- by provision of healthcare in own community, e.g. use of local hospital by visiting consultants

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(1 × [2])

[2]

**Physical barriers**

**Examples of suitable ways to be explained:**

- via telephone
- bus/taxi service for service users who cannot drive themselves
- provision of equipment, e.g. phone equipment, buzzers
- via third-party referral
- use of large print in leaflets etc.
- home care provision
- help lines
- suitable physical access to transport and buildings

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(1 × [2])

[2]

- (c) Explain **two** different ways each of the following practitioners might support older service users living in their own homes. (AO1, AO2)

**The occupational therapist (OT)**

**Examples of suitable points to be explained include:**

- responsible for assessing and providing care relevant to promoting independence including risk assessments
- may organise suitable activities following needs assessment
- may recommend adaptations to service users' homes to accommodate needs, e.g. wider doorways
- may provide aids to support daily living, e.g. hoist, stair lift, cutlery
- may make referrals to or liaise with other professionals for extra support, e.g. to social worker or mental health team
- may teach skills to regain or maintain independence, e.g. shaving and dressing for an older man who has had a stroke
- may be responsible for all aspects of the care planning process
- assess emotional/mental health and well-being, e.g. Alzheimer's
- provide information and advice to support independent living at home, e.g. safe use of equipment, positions of comfort

[1] basic explanation [2] competent explanation

(2 × [2])

[4]

**The district nurse**

**Examples of suitable points to be explained include:**

- may provide nursing care, e.g. direct care such as change dressings, empty catheters
- may take blood and urine samples
- may check vital signs such as blood pressure, pulse or temperature
- may administer medication via injection or orally
- may prescribe medication if qualified to do so
- responsible for the care planning cycle including monitoring, evaluating and updating the nursing care plan
- may liaise with other healthcare professionals, e.g. social worker or GP
- may provide family and carers with health promotion advice
- may be involved in advising re: accident prevention in the home
- may provide information or advice on an illness or condition

All other valid responses will be given credit.

[1] basic explanation [2] competent explanation

(2 × [2])

[4]

- (d) Discuss **four** ways codes of practice or conduct should influence the work of those who provide care for older service users. (AO1, AO2, AO3)

**Examples of suitable points to be included in the discussion:**

- codes of practice or conduct clearly set out the conduct and behaviour that is expected of social care workers and inform service users and the public about the standards of conduct they can expect so they can do something about care which falls below standards expected
- codes of practice or conduct regulate practice – require staff to follow rules and regulations and those who do not can be disciplined and may lose their job, thus helping to ensure appropriate standards of care are provided

- codes of practice or conduct help to promote fair treatment for all individuals – codes require health and social care workers to treat service users in their care equitably and not show favour or give preferential treatment to any one person
- codes of conduct inform and guide practice so that health and social care workers know what to do in any given situation and so service users should receive appropriate standards of care
- codes of conduct reflect legislative requirements for appropriate standards of care, e.g. the need to maintain confidentiality as outlined in the Data Protection Act and health and social care workers who do not adhere can again be disciplined and may lose their job
- all health and social care workers are expected to know their role and responsibilities as outlined in their code of practice or conduct and so this in turn should result in appropriate standards of care being provided
- health and social care workers are required, through their code of practice or conducts to review their own standards of practice and update knowledge and skills where necessary – this should lead to the delivery of appropriate care

**Also accept discussion of specific points from codes**

- respect patients/service users as individuals
- obtain consent before giving treatment or care
- protect confidential information
- co-operate with others in teams
- maintain professional knowledge and competence
- be trustworthy
- minimise risk to service users
- promote the independence of service users while protecting them as far as possible from danger or harm
- honour work commitments, agreements and arrangements and, when it is not possible to do so, explain why to service users and carers
- require staff to maintain confidential information
- be accountable for the service they provide
- take responsibility for maintaining and improving their knowledge and skills

All other valid responses will be given credit.

[0] is awarded for a response not worthy of credit

**Level 1 ([1]–[5])**

Overall impression: basic

- basic knowledge and understanding of how codes of practice or conduct influence the work of those who provide care for older service users
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss ways codes of practice or conduct influence the work of those who provide care for older service users
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

## Level 2 ([6]–[10])

Overall impression: adequate

- adequate knowledge and understanding of how codes of practice or conduct influence the work of those who provide care for older service users
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss ways codes of practice or conduct influence the work of those who provide care for older service users
- to achieve at this level at least two ways must be addressed
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

## Level 3 ([11]–[15])

Overall impression: competent

- competent knowledge and understanding of how codes of practice or conduct influence the work of those who provide care for older service users
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss ways codes of practice or conduct influence the work of those who provide care for older service users
- to achieve in this level four ways must be addressed
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [15]

**Total**

AVAILABLE  
MARKS

33

**120**