



Rewarding Learning

**ADVANCED SUBSIDIARY (AS)
General Certificate of Education**

Health and Social Care

Assessment Unit AS 3

assessing

Health and Well-being

[SHC31]

Assessment

**MARK
SCHEME**

Additional Guidance for teachers for 2021 only

You will find it useful to view the EEP webinar to help you gauge the standard for this assessment.

Please read the general marking instructions that follow before you begin marking.

Some additional points that will help you use the mark scheme:

- The questions where QWC (quality of written communication) is assessed are identified on the front cover of the paper. In all other questions on the paper QWC should not influence the marking.
- Where you see “all other valid responses will be given credit”, if you think a response which is not on the mark scheme may be correct, you should check it for accuracy and award the marks if appropriate.
- Avoid awarding marks twice for repeated points in a question.
- When a question requires a specific number of points to be given (e.g. one example, two advantages, three ways), only that number of points can achieve marks. Where a student makes more points than the number required, their best points should be selected for marking. In these types of questions, compensation may be used; this means that a correct additional point in one part of the answer can be awarded marks where another part of the answer is incorrect or blank.
- For extended responses, you need to read the level descriptors carefully to help you make a judgement. There is further advice in the general marking instructions.
- You may find it useful to annotate the responses to help you decide on and justify the marks you award.

General Marking Instructions

Introduction

The main purpose of a mark schemes is to ensure that examinations are marked accurately, consistently and fairly. The mark scheme provides examiners with an indication of the nature and range of candidates' responses likely to be worthy of credit. It also sets out the criteria which they should apply in allocating marks to candidates' responses.

Assessment objectives

Below are the assessment objectives for **GCE Health and Social Care**.

Candidates should be able to:

- AO1** Demonstrate knowledge and understanding of the specified content.
- AO2** Apply knowledge, understanding and skills to a variety of health, social care and early years contexts.
- AO3** Investigate, analyse, and evaluate acquired knowledge and understanding, present arguments, make reasoned judgements and draw conclusions.

Quality of candidates' responses

In marking the examination papers, examiners should be looking for a quality of response reflecting the level of maturity which may reasonably be expected of a 17 or 18-year-old which is the age at which the majority of candidates sit their GCE examinations.

Flexibility in marking

Mark schemes are not intended to be totally prescriptive. No mark scheme can cover all the responses which candidates may produce. In the event of unanticipated answers, examiners are expected to use their professional judgement to assess the validity of answers. If an answer is particularly problematic, then examiners should seek the guidance of the Supervising Examiner.

Positive marking

Examiners are encouraged to be positive in their marking, giving appropriate credit for what candidates know, understand and can do rather than penalising candidates for errors or omissions. Examiners should make use of the whole of the available mark range for any particular question and be prepared to award full marks for a response which is as good as might reasonably be expected of a 17 or 18-year-old GCE candidate.

Awarding zero marks

Marks should only be awarded for valid responses and no marks should be awarded for an answer which is completely incorrect or inappropriate.

Types of mark schemes

Mark schemes for tasks or questions which require candidates to respond in extended written form are marked on the basis of levels of response which take account of the quality of written communication.

Other questions which require only short answers are marked on a point for point basis with marks awarded for each valid piece of information provided.

Levels of response

In deciding which level of response to award, examiners should look for the ‘best fit’ bearing in mind that weakness in one area may be compensated for by strength in another. In deciding which mark within a particular level to award to any response, examiners are expected to use their professional judgement.

The following guidance is provided to assist examiners.

- **Threshold performance:** Response which just merits inclusion in the level and should be awarded a mark at or near the bottom of the range.
- **Intermediate performance:** Response which clearly merits inclusion in the level and should be awarded a mark at or near the middle of the range.
- **High performance:** Response which fully satisfies the level description and should be awarded a mark at or near the top of the range.

Quality of written communication

Quality of written communication is taken into account in assessing candidates’ responses to all tasks and questions that require them to respond in extended written form. These tasks and questions are marked on the basis of levels of response. The description for each level of response includes reference to the quality of written communication.

For conciseness, quality of written communication is distinguished within levels of response as follows:

- Level 1: Quality of written communication is basic.
- Level 2: Quality of written communication is adequate.
- Level 3: Quality of written communication is competent.
- Level 4: Quality of written communication is highly competent.

In interpreting these level descriptions, examiners should refer to the more detailed guidance provided below:

Level 1 (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 (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 (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 meaning is clear.

Level 4 (Highly competent): 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.

- 1 (a) List two environmental factors that can impact on health and well-being.
(AO1)

Any two of the following:

- geographical location
- pollution
- occupational hazards

(2 × [1])

[2]

- (b) Explain two ways social class can affect physical health and well-being.
(AO1, AO2)

Examples of suitable points to be explained:

- middle classes/social classes I and II have a longer life expectancy – may be because they can afford a better diet and live in better conditions so are less likely to get illnesses
- middle classes/social classes I and II may be able to access specialist health services more quickly by paying privately or because they have been able to afford private health insurance – their illnesses/health problems are therefore dealt with more quickly
- older people from working classes/social classes IV and V have a 3 to 4 times greater risk of having a physical dysfunction than older people from higher social classes
- children from lower class families are over three times more likely to be in poor health than children from middle class families
- breast cancer is more prevalent in middle class women than working class women – probably related to delayed childbearing due to their careers
- middle classes are also more likely to get skin cancer – may be related to sun exposure on holidays abroad
- working classes/social classes IV and V are more prone to conditions associated with poorer quality housing, e.g. more likely to have chronic chest infections if living in damp conditions
- infant mortality rates are higher in social class V – this may be related to living in poor housing or to difficulties accessing health checks in infancy
- working class people are more prone to health problems like cancer and respiratory problems caused by smoking
- children from lower class families are at greater risk of death or injury from accidents, e.g. more likely to be hit by a motor vehicle than the children of middle-class parents, who are more likely to be able to play safely in private gardens

All other valid responses will be given credit

[1] basic explanation [2] competent explanation

(2 × [2])

[4]

- (c) Huntington's disease is an example of a genetically inherited condition. Using the headings below, describe how this condition can affect health and well-being. (AO1, AO2)

Effect on physical health and well-being

Examples of suitable points to be included in description:

- due to faulty genes, toxic proteins collect in the brain and cause brain damage – the part of the brain most affected by HD is a group of nerve cells at the base of the brain known collectively as the basal ganglia, which organize muscle-driven movements of the body, or “motor movement” – as it is a degenerative disease this worsens over time
- physical effects include stumbling and clumsiness and the development of rapid, jerky, uncontrolled movement of the arms, legs, head, face and upper body, referred to as ‘chorea’
- other effects are slow or abnormal eye movements, difficulty with the physical production of speech or swallowing and breathing problems
- people with HD experience problems sleeping
- loss of appetite and weight loss also occur
- people with HD usually die about 15 to 20 years after their symptoms first appear – the cause of death is not the disease itself but complications such as pneumonia, heart failure or infection developing from the body's weakened condition

All other valid responses will be given credit

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

Effect on social health and well-being

Examples of suitable points to be included in description:

- individuals may withdraw from social activities as a result of their physical and mental problems
- they may find it difficult to develop and maintain friendships due to erratic behaviour in social situations, for example outbursts of aggression
- may lack interest in social interaction with others as a symptom of the disease is apathy

All other valid responses will be given credit

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

Effect on psychological health and well-being

Examples of suitable points to be included in description:

- personality change is an early indicator before the onset of physical problems – common signs are a lack of will and interest in life as well as anger and irritability or mood swings
- depression is common – over 50% of people with HD develop depression
- cognitive functioning is affected – memory problems, difficulty concentrating and slower thought processes result from neurological damage
- the individual may feel lonely and isolated especially as the condition progresses and communication with others becomes difficult
- the individual could feel very anxious, worried and afraid as the progression of the disease is inevitable
- the individual could develop a negative self-concept and have low self-esteem
- the individual could feel emotionally insecure and vulnerable
- the individual may feel a burden on others

- the individual may worry about children inheriting the condition
- the individual may feel disempowered, a sense of no control over what is happening

All other valid responses will be given credit

[1] basic description [2] adequate description [3] competent description
(3 × [3]) [9]

- (d) (i) One approach to health promotion is the medical approach, sometimes referred to as the preventative approach, which focuses on persuading individuals to take up opportunities for screening or vaccinations. Explain two advantages of this approach. (AO1, AO2)

Examples of suitable points to be explained:

- campaigns using this approach are based on medically sound scientific evidence and research so are convincing, e.g. the flu vaccination is medically proven to prevent deaths due to flu in vulnerable groups such as older people
- it is expert led – doctors and other medical workers are usually people the public feel they can trust with their health and therefore uptake may be good
- has a history of success – successful smallpox vaccination programme practically eradicated this disease
- may be cost effective for the government, e.g. disease prevented meaning less medical care needed

All other valid responses will be given credit

[1] basic explanation [2] competent explanation
(2 × [2]) [4]

- (ii) Another approach to health promotion is the fear arousal approach, which uses frightening images or statistics to persuade people to be healthier. Explain two disadvantages of this approach. (AO1, AO2)

Examples of suitable points to be explained:

- people may become resistant to the message and think it will never happen to them, e.g. an image of mouth cancer caused by smoking may be shocking the first couple of times one sees it, but the shock may wear off after a few times
- this approach can cause annoyance and upset for some individuals, e.g. if they had a family member who died of a particular health problem that is graphically portrayed
- individuals may feel that they are being manipulated by these shock tactics so may respond by saying they aren't going to be persuaded by government propaganda
- this approach may work for some people but not for others when shocking visual images are used, e.g. for those who remember visual images well but not for those who remember written or verbal information better and for some issues more than others, e.g. may work to portray risks like cancer, but the effects of other conditions related to lifestyle choices may be less visual, for example type 2 diabetes

All other valid responses will be given credit

[1] basic explanation [2] competent explanation
(2 × [2]) [4]

- (e) Discuss the three ways individuals can take responsibility for their own health and well-being. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

Lifestyle choices

- eating a healthy diet, e.g. based on the Eatwell Guide
- exercising regularly, e.g. by playing a sport or going walking or swimming
- limiting alcohol intake, e.g. by sticking to limits recommended by government
- avoiding illegal drugs
- avoiding smoking tobacco and/or passive smoking or giving up smoking

Accessing health and social care services

- attending for regular check-ups, e.g. dental check-ups every six months
- responding to invitations for screening, e.g. for breast cancer in women over fifty
- making GP appointments before a health condition deteriorates too much, e.g. seeing GP about a chest infection
- taking up opportunities for health checks offered at work or through voluntary organisations, e.g. blood pressure checks conducted by occupational nurse or breast screening offered by a cancer charity
- attending appointments with a social worker, e.g. for help with a family crisis

Self advocacy

- asking a G.P. for a referral to a specialist, e.g. a gynaecologist or neurologist
- asking a hospital doctor for a second opinion on whether surgery is an appropriate treatment, e.g. ask for a referral to another specialist to see what he/she would advise
- researching one's own condition and possible treatments on the internet and requesting the most up-to-date treatment

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

- limited knowledge and understanding of how individuals can take responsibility for their own health and well-being
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss the three ways individuals can take responsibility for their own health and well-being
- may discuss only one of the ways or list examples
- 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 ([4]–[6])

Overall impression: adequate

- adequate understanding of how individuals can take responsibility for their own health and well-being
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss the three ways individuals can take responsibility for their own health and well-being
- there must be a discussion of at least two of the ways 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 ([7]–[9])

Overall impression: competent

- competent understanding of how individuals can take responsibility for their own health and well-being
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss the three ways individuals can take responsibility for their own health and well-being
- there must be a discussion of all three ways 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. [9]

32

2 (a) Define the following concepts. (AO1, AO2)

(i) Ill-health

Examples of suitable points to be included in definition:

- a state in which an individual is unable to function normally and without pain – can be physical or mental
- ill-health may be about the presence of something negative like a disease or the absence of something positive like adequate nutrition

All other valid responses will be given credit

[1] basic definition [2] competent definition

(1 × [2])

[2]

(ii) Mental illness

Examples of suitable points to be included in definition:

- a collective term for all diagnosable mental health problems that become “clinical,” i.e. where professional intervention and treatment is required. Examples of mental illnesses include the major psychotic illnesses, such as endogenous depression, schizophrenia, and manic-depressive psychosis
- mental illness is the term used to describe behaviour that is generally regarded as abnormal and inexplicable within the expected patterns of behaviour associated with particular roles in society.
- mental illness has been linked to chemical changes in the brain which produce abnormal often undesired behaviour, e.g. violent mood swings, physical aggression

All other valid responses will be given credit

[1] basic definition [2] competent definition

(1 × [2])

[2]

(b) Describe the effect of osteoarthritis on Jean’s physical health and well-being. (AO1, AO2)

Examples of suitable points to be included in description:

- osteoarthritis causes the cartilage in joints to become stiff and lose elasticity, making them more susceptible to damage – this commonly occurs in the weight-bearing joints of the hips, knees, and spine
- there is a limited range of motion or stiffness in the joints, e.g. in the small joints of the hands, although this diminishes after movement
- swelling around the joints causes pain – this is worse after activity or at the end of the day
- there is a loss of muscle around the joint and a feeling of weakness, for example difficulty gripping for those with arthritis in the finger joints

All other valid responses will be given credit.

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

(1 × [3])

[3]

- (c) Explain two ways good physical health may have affected Jean's psychological well-being in the past. (AO1, AO2)

Examples of suitable points to be explained:

- Jean may have had a positive self-concept – high self-esteem
- Jean may have had a sense of autonomy – a feeling that she was in control of her life
- she may have experienced positive emotions, e.g. happiness, freedom from worry and anxiety
- she may have felt confident and able to cope with the demands of daily life

All other valid responses will be given credit

[1] basic explanation [2] competent explanation

(2 × [2])

[4]

- (d) Complete the table below to give one example of each type of need and describe how the staff at the day centre could meet those needs. (AO1, AO2)

Physical needs

Suitable examples:

- nutrition
- hygiene
- warmth
- exercise/mobility
- medication

All other valid responses will be given credit

[1] for example

How the staff could meet this need:

Explanation must be clearly linked to the need identified and relevant to a day centre, e.g. need for nutrition could be met by staff providing service users with nutritious balanced meals that are easily digested and with choices which will encourage them to eat well. They can also provide plenty of fluids and healthy snacks or high calorie snacks like cake for service users who are underweight.

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

Intellectual needs

Suitable examples:

- stimulation
- mental
- knowledge
- learning skills

All other valid responses will be given credit

[1] for example

How the staff could meet this need:

Explanation must be clearly linked to the need identified and relevant to a day centre, e.g. need for stimulation could be met by the staff offering a range of activities to help keep older people's minds active, e.g. board games, quizzes. They could also provide daily newspapers and magazines. They could offer service users a choice of hobbies like crafts or growing plants and vegetables.

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

Emotional needs

Suitable examples:

- sense of belonging
- feeling respected and cared for
- feeling of stability/security
- sense of control over one’s life/autonomy
- positive self-concept/esteem needs/confidence
- need to express feelings and emotions

All other valid responses will be given credit

[1] for example

How the staff could meet this need:

Explanation must be clearly linked to the need identified and relevant to a day centre, e.g. need for a sense of belonging could be met by staff welcoming individuals when they arrive for the day, for example, addressing them by their preferred name and asking them how they are. They could show they remember things that are important to individual service users in their conversations with them, for example information about their families, the places they have lived or their former occupations.

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

Social needs

Suitable examples:

- friendships
- interaction with others
- communication with others

All other valid responses will be given credit

[1] for example

How the staff could meet this need:

Explanation must be clearly linked to the need identified and relevant to a day centre, e.g. need for social interaction could be met by staff introducing new service users to others who use the day centre – they could encourage them to have a chat over a cup of tea. They could organise activities that encourage service users to interact with each other, for example table quiz teams.

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

(4 × [1])

[4]

(4 × [3])

[12]

- (e) Assess the potential impact of Jean’s ill-health on her daughters’ income, leisure activities and relationships. (AO1, AO2, AO3)

Examples of suitable points to be included in assessment

Impact on their income

- they may have less income because they can’t work or work as much as they previously did due to their caring commitments
- the source of their income may have to change – they may have to depend on benefits like Carers’ Allowance, which can reduce income considerably or they may get financial help from other family members, e.g. siblings
- over the longer term their income may be drastically reduced – long-term dependency on state benefits may mean they experience poverty
- their income may be used in different ways, e.g. they may have to pay for frequent travel to Jean’s home or they may spend their money on

things for Jean, e.g. food or alternatively they may spend less of their income on social activities as they are curtailed by the caring role

Impact on their leisure activities

- they may not take part in leisure activities as often because of lack of time or energy due to their caring responsibilities
- they may have to give up some leisure activities altogether for the same reasons, e.g. no longer able to play a team sport as they can't make the commitment
- may have to change the type of leisure activities they do/take up new leisure activities that fit in better with the caring role, e.g. may take up a craft like crochet that they can do whilst spending time with Jean
- may have more time for some activities, e.g. for reading or watching television when they are sitting with their mother

Impact on their relationships

- they may have fewer relationships than before if they have to stop work and leisure activities to care for their mother and they may have fewer opportunities to meet new people and develop new relationships as they spend so much time at Jean's home
- some of their relationships may be strengthened, e.g. their relationships with Jean and with each other as they spend time together and support each other
- they may develop new relationships for example with others involved in Jean's care
- they may have less time for other relationships, e.g. their partners or children
- they may also have less contact with friends due to being so busy juggling Jean's care with other family responsibilities
- some relationships may become strained, e.g. they may resent others in the family who do not help, or they may fall out with each other if they feel overburdened

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

- limited knowledge and understanding of the potential impact of Jean's ill-health on her daughters' income, leisure activities and relationships
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to assess the potential impact of Jean's ill-health on her daughters' income, leisure activities and relationships
- may assess only one aspect (income, leisure activities or relationships) or list points on more than one aspect
- 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 understanding of the potential impact of Jean’s ill-health on her daughters’ income, leisure activities and relationships
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to assess the potential impact of Jean’s ill-health on her daughters’ income, leisure activities and relationships
- there must be an assessment of at least two aspects 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 understanding of the potential impact of Jean’s ill-health on her daughters’ income, leisure activities and relationships
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to assess the potential impact of Jean’s ill-health on her daughters’ income, leisure activities and relationships
- there must be an assessment of all three aspects 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]

39

- 3 (a) (i) A hospital nurse failing to challenge discriminatory comments about learning disability by other patients towards a patient with Down Syndrome is one example of discriminatory practice on the basis of cognitive ability. Using the headings below, describe two other different examples of discriminatory practice in health, social care or early years settings. (AO1, AO2)

Examples of discrimination relevant to beliefs:

- not consulting service users from minority religions about dietary requirements linked to their faith in a residential care home whilst catering for the main religious groups, for example by having fish on the menu for Christians on days of abstinence, but not having Kosher food for Jewish residents
- not asking service users from minority religions about spiritual needs or religious practices in a hospital, whilst providing facilities and organising pastoral visits for more common religious groups, e.g. for Christian faiths but not for Jewish patients
- verbal abuse of a service user of a minority religion by staff in a nursing home, e.g. carers making discriminatory remarks of a sectarian nature
- managers selecting resources that don't reflect different beliefs, e.g. books in an early years setting not having any families of Muslim faith as shown by the dress of the characters in pictures

All other valid responses will be given credit

[1] basic description [2] adequate description [3] competent description of one example

Examples of discrimination relevant to gender:

- staff making assumptions based on stereotypical views of gender about what male and female service users want to do in a day centre, e.g. offering craft activities like crochet and sewing only to women
- staff making inappropriate comments with reference to gender in a mental health day centre, e.g. female support staff making inappropriate jokes about men being useless when it comes to looking after themselves
- managers selecting resources that don't reflect gender equality, e.g. jigsaws in an early years setting only showing males and females in stereotypical roles, such as firemen and policemen but no female fire fighters or female police officers

All other valid responses will be given credit

[1] basic description [2] adequate description [3] competent description of one example

(2 × [3])

[6]

- (ii) An example of discriminatory practice on the basis of race is a day centre worker failing to challenge racist comments by other service users. Use the headings below to explain the potential impact on the social and psychological health and well-being of the service user affected. (AO1, AO2)

One way social health and well-being might be affected

Examples of suitable points to be explained:

- the service user may become isolated – stay deliberately separate

from other service users.

- the service user may not make friends – may not want to engage with staff or other service users
- the service user may be ostracised/alienated, preventing them from interacting with others

All other valid points will be given credit

[1] basic explanation [2] adequate explanation

One way psychological health and well-being might be affected

Examples of suitable points to be explained:

- the service user may have low self-esteem – feel worthless and undervalued
- the service user may have a negative self-concept or poor self-image
- the service user may experience depression in the longer term
- the service user may feel disrespected and uncared for
- the service user may feel scared, unsafe and insecure in the setting
- the service user may feel upset or angry
- the service user may experience stress, the response that occurs when individuals feel they cannot cope with the environment they are in
- the service user may experience a lack of autonomy i.e. a lack of control over what is happening
- where the service user already has a mental health condition, it may well deteriorate

All other valid points will be given credit

[1] basic explanation [2] adequate explanation

(2 × [2])

[4]

- (iii) Managers in health, social care and early years settings can promote anti-discriminatory practice by setting a good example in their own practice. Explain two other ways they can promote anti-discriminatory practice in their management role. (AO1, AO2)

Examples of suitable points to be explained:

- organise staff training in anti-discriminatory practice – managers can make this a key part of staff induction for new members of staff and organise ongoing staff training in anti-discriminatory practice
- have a complaints policy for service users – managers should have this in place to encourage service users or their families to complain if they feel they have been treated unfairly on the basis of their race, beliefs, gender or disability
- have a whistle blowing policy that requires staff to report discriminatory practice by other staff, even those who have a more senior position. They can encourage a culture in the setting that means staff are not afraid to be whistleblowers
- the manager can directly challenge staff and service users when discrimination occurs. The manager should speak to staff who engage in discriminatory practice to explain what they have done wrong
- managers should use disciplinary procedures to deal with members of staff where appropriate – this can involve verbal and written warnings and even dismissal
- managers can ensure resources and activities reflect all the different cultures, ethnicities and family types of service users
- managers may supervise staff to check they are practising in an

anti-discriminatory way
All other valid points will be given credit
[1] basic explanation [2] adequate explanation
(2 × [2])

[4]

- (b) (i) Most holistic therapists work in private or commercial organisations. Focusing on one therapy, describe how a holistic therapist contributes to health and well-being. (AO1, AO2)

Examples of suitable points to be described:

- massage therapists work with their hands to rub, knead and stroke parts of the body, for example hand, arm, neck, shoulder, back and Indian head massage – this promotes muscle relaxation, reduces stress and anxiety, improves skin condition and promotes sleep
- acupuncturists stimulate points on the body with fine needles – this can aid pain relief and is effective in reducing tiredness, nausea and depression
- aromatherapists use essential oils extracted from herbs, plants, flowers and trees – these give off fragrant aromas which are soothing, relaxing and can reduce anxiety
- art therapists teach painting, drawing and crafts – this helps individuals to express their feelings, become less anxious and relax
- Reiki involves therapists placing their hands either on or just above certain points of the body – this may relieve pain, reduce anxiety, encourage sleep and improve well-being
- chiropractors use their hands to manipulate and realign the spine to treat disorders of the bones, joints and muscles or conditions like migraine

All other valid points will be given credit
[1] basic description [2] adequate description [3] competent description
(1 × [3])

[3]

- (ii) Other examples of private or commercial organisations are pharmacies, drug companies and private nursing homes. Analyse how each of these can contribute to health and well-being. (AO1, AO2, AO3)

Examples of suitable points to be included in analysis:

Pharmacies

- provide treatments, e.g. sell a range of medicines that people can buy over the counter like pain killers and dispense medicines prescribed by GP's
- sell products relevant to health and well-being, e.g. vitamin supplements or aids to daily living
- advise individuals on health issues by having pharmacists or even doctors available for consultation in person or online
- measure health indicators such as blood pressure or blood sugar
- provide tests for infections, for example some provide free tests for chlamydia
- run health promotion campaigns and activities, for example smoking cessation support
- give vaccinations, e.g. for influenza

Drug companies

- conduct research on physical and mental health issues and develop innovative drug treatments to prevent, manage or cure a range of

- illnesses and diseases
- carry out extensive drug testing to try to ensure the efficacy and safety of their products
- distribute their products to pharmacies and hospitals, providing information on safe dosage and any potential side effects and contraindications – this enables pharmacists and doctors to choose the best drug treatments for individuals as well as to give appropriate advice for their use

Private nursing homes

- provide full-time, often permanent residential care where individuals can receive help with the activities of daily living as well as nursing care, such as medication for the illnesses and conditions they have – this can be for older adults or people with complex physical and mental illnesses or learning disabilities and brain injuries
- provide a social environment with opportunities for interaction with others for people who cannot live independently, for example because of physical disabilities or learning disabilities
- may provide specialist nursing care, e.g. for people with dementia where they provide therapies such as reminiscence therapy to build self-esteem
- provide shorter term rehabilitation care for people transitioning from hospital to home
- provide respite care to support families who provide care to their loved ones with illnesses and disabilities

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

- limited knowledge and understanding of how pharmacies, drug companies and private nursing homes can contribute to health and well-being
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to analyse how pharmacies, drug companies, and private nursing homes can contribute to health and well-being
- may focus on only one part of the question (pharmacies, drug companies or private nursing homes) or list points on more than one
- 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 understanding of how pharmacies, drug companies and private nursing homes can contribute to health and well-being
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question

- demonstrates an adequate ability to analyse how pharmacies, drug companies, and private nursing homes can contribute to health and well-being
- there must be an analysis of at least two parts of the question 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 understanding of how pharmacies, drug companies and private nursing homes can contribute to health and well-being
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to analyse how pharmacies, drug companies, and private nursing homes can contribute to health and well-being
- there must be analysis of all three parts of the question 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]

29

Total

100

AVAILABLE
MARKS

