



**General Certificate of Education**

**Health and Social Care  
8621/8623**

**HC01**

**Mark Scheme**

*2007 examination - June series*

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# HC01

## Question 1

- (a) 1 mark each for:
- (i) autonomy
  - (ii) privacy
  - (iii) occupation
  - (iv) social support
  - (v) approval
- (b) 1 mark each up to 3 for naming factors, plus 1 mark each for valid justification.  
Likely answers:

Exercise (1) A frail person might avoid this because they fear injury (1) (Adequate) nutrition (1) The person might be too tired to cook proper meals/ might be unable to go shopping for food very often (1)  
Physical safety (1) Being frail might mean the person is at risk of falling/living alone means help might not be available in case of an accident (1)  
Hygiene (1) The person might be too frail to get in and out of the bath (1)  
Also credit freedom from pain, and physical comfort if made relevant.

- (c) (i) 1 mark each for any 2 suggestions relevant to information about treatment including: The risks/side effects of the treatment; the likelihood of the treatment being successful; duration; details of procedure. Accept alternative valid answers and wording.
- (c) (ii) Up to 2 marks for one right elaborated. Likely answers include;
- R1 Confidentiality (1), personal information should not be passed on to others (1)
  - R2 To receive his treatment on the basis of his clinical need (1) not ability to pay/free (1)
  - R3 Access to a comprehensive range of services (1) regardless of where he lives (1)
  - R4 To have his needs/preferences taken into account (1) e.g. his diet in hospital (1)
- Accept other valid answers.

## Question 2

- (a) 1 mark for each evaluative point made, plus 1 mark for accurate elaboration of each point, up to 5.  
A wide range of acceptable answers is possible, but likely answers might include  
Advantages of special school  
A1 The school is likely to be purpose-built for wheelchair access (1) e.g. wide corridors (1)  
A2 Specialist learning equipment/facilities (1) e.g. large computer keyboards, mouth-controlled interfaces (1)  
A3 Curriculum designed to be accessible to children with learning disabilities  
A4 Large staff: pupil ratio  
A5 Specially trained staff
- Disadvantages  
D1 Fewer opportunities for contact/to integrate with non-disabled children

These points might be expressed the other way round, e.g. as advantages and disadvantages of mainstream education. However each point should only be credited one way round.

- (b) 1 mark each (up to 3) for identifying appropriate skills, plus 1 mark each for definition/example of use. Sample answers:

Social perception (1) noticing how a client is feeling, when he might not be able to put this into words (1)

Working alongside (1) e.g. sorting bricks into groups by colour, to encourage him to do the same with another set of bricks (1)

Other skills likely to be mentioned include:

Using physical contact	creating trust	effective communication
Gaining compliance	disengagement	showing approval
Encouraging adaptive behaviours	setting challenges	using eye contact/facial expression
Setting challenges	social perception	observation
Reducing negative feelings	distraction	modelling

Candidates might also use distraction and reducing negative feelings/behaviours, though these might be difficult to make relevant

- (c) (i) 1 mark for showing awareness of meaning of inadequate resources, plus 1 mark for explanation. Answers are likely to relate to funding, staffing and service capacity. Example answer: It might be difficult for a child to get into a special school if there are not enough places available. (2)
- (c) (ii) 1 mark for showing awareness of meaning of physical difficulties, plus 1 mark for explanation. Answers are likely to relate to problems in transport and distance from home to school. Example answer: There are not many special schools so children often have to travel long distances to get there (2)

### Question 3

- (a) (i) 1 mark (up to 3) for identifying bases plus 1 each for examples that must be drawn from the scenario. Note that candidates can get credit for bases not illustrated in the scenario, but they would not get the second example mark.

Likely answers:

Sex/gender (1) Klara finds it easier to talk to women/does not talk to John because he is a man (1) Sexuality (1) Klara does not talk to John because she thought he was gay (1) Impairment (1) Klara does not talk to John because he is blind (1)

Other bases that might be mentioned: ethnicity, religion, social class, age, health status

- (a) (ii) 1 mark for naming barrier plus up to 2 for explanation/elaboration. Likely answer:

Pre-occupation with own needs/lack of skill (1) Klara is inexperienced (1) and might not be confident in communicating with a blind person (1)

- (b) 1 mark each (up to 3) for benefits, plus 1 mark each for elaboration. Likely answers include:
- Social contact (1) clients will be able to enjoy talking to/spending time with other clients/care workers (1)
  - Stimulation/occupation (1) for example singing songs/reminiscence sessions/crafts/games/quizzes (1)
  - Nutrition (1) clients might get a cooked meal at the centre (1) which might improve diet/contribute to a balanced diet/especially if they eat poorly at home (1)
  - Health monitoring/access to treatment (1) care workers are likely to notice changes in health of clients / refer client to a GP/community nurse (1)
  - Accept other benefits provided these are appropriate and made relevant e.g. improved hygiene.

#### Question 4

- (a) (i) 1 mark each up to 6 for relevant points, likely to include the following:

Admission/recording personal details (1) initial assessment of seriousness of condition (1) triage (1) diagnosis by medical staff (1) plus example such as taking an X-ray (1) treatment (1) plus example such as stitching wound/setting and plastering broken limb (1) updating medical records (1) discharge or transfer to ward (1)

- (a) (ii) By paramedic staff/ambulance (1) by self-referral/making own way to hospital (1)

- (b) Likely answers include categories of service, such as day surgery, diagnosis and treatment by hospital consultant, outpatient clinics or alternatively details of any specific treatments usually provided at hospitals.

1 mark for naming service plus up to 2 for accurate detail.

Example answer: Day surgery (1) in which a patient does not have to stay in hospital overnight /surgery as an outpatient (1), minor surgery/which can be performed within 2 hours of arrival (1) which only requires a local anaesthetic (1) and uses endoscopy/minimally invasive/keyhole surgery (1) Plus example such as cataract/gall bladder removal/ keyhole surgery on knee (1)

- (c) (i) 1 mark each (up to 2) for valid suggestions. Likely answers:
- Washing hands with antibacterial soap/alcohol gel before touching patient
  - Keeping wounds covered by dressings
  - Isolating infecting patients
  - Keeping wards/surfaces/equipment clean/free from dust
  - Wearing sterile aprons/gloves

- (c) (ii) 1 mark each (up to 2) for valid suggestions. Likely answers:
- Cover cuts/sores with dressing/plaster
  - Dispose of needles/scalpels in sharps container/care in avoiding sharps
  - Cleaning up spills of body fluids/using sterile gloves/disinfectant