

Cambridge TECHNICALS LEVEL 3

Cambridge
TECHNICALS
2016

HEALTH AND SOCIAL CARE

Combined feedback on the January 2017 exam
paper (including selected exemplar candidate
answers and commentary)

Unit 7 – Safeguarding
Version 1



CONTENTS

Introduction	3
General examiner comments on the paper	4
Question 1 (a)	5
Question 1 (b)	5
Question 1 (c)	6
Question 2 (a)	9
Question 2 (b)	9
Question 2 (c)	10
Question 3 (a)	13
Question 3 (b)	13
Exemplar candidate work with commentary	15
Question 4 (a)	18
Question 4 (b)	19
Question 5	20

INTRODUCTION

This resource brings together the questions from the January 2017 examined unit (Unit 7), the marking guidance, the examiners comments and the exemplar answers into one place for easy reference.

We've also included candidate exemplar answers with commentaries for Question 3b.

The marking guidance and the examiner's comments are taken from the Report to Centre for this question paper.

The Question Paper, Mark Scheme and the Report to Centre are available from: <https://interchange.ocr.org.uk/>

OCR
Oxford Cambridge and RSA

Level 3 Cambridge Technical in Health and Social Care
05832/05833/05871

Unit 7: Safeguarding
Wednesday 18 January 2017 – Morning
Time allowed: 1 hour 30 minutes

You must use:
- none

You may use:
- none

First Name: Last Name:

Centre Number: Candidate Number:

Date of Birth:

INSTRUCTIONS

- Use black ink.
- Complete the boxes above with your name, centre number, candidate number and date of birth.
- Answer all the questions.
- Write your answer to each question in the space provided.
- If additional space is required, you should use the lined page(s) at the end of this booklet. The question number(s) must be clearly shown.

INFORMATION

- The total mark for this paper is 60.
- The marks for each question are shown in brackets [].
- Quality of extended responses will be assessed in questions marked with an asterisk (*).
- This document consists of 12 pages.

FOR EXAMINER USE ONLY	
Question No	Mark
1	15
2	20
3	10
4	10
5	5
Total	60

© OCR 2017 (8017981X), (8017982Y), (8530381Z)
C444171016 OCR is an exempt charity Turn over

OCR
Oxford Cambridge and RSA

Cambridge Technicals
Health and Social Care

Unit 7: Safeguarding
Level 3 Cambridge Technical Certificate/Diploma in Health and Social Care
05830 - 05871

Mark Scheme for January 2017

Oxford Cambridge and RSA Examinations

OCR
Oxford Cambridge and RSA

Cambridge Technicals
Health and Social Care

Level 3 Cambridge Technicals Certificates in Health and Social Care
05830, 05831

Level 3 Cambridge Technicals Diplomas in Health and Social Care 05832, 05833, 05871

OCR Report to Centres January 2017

Oxford Cambridge and RSA Examinations

GENERAL EXAMINER COMMENTS ON THE PAPER

Candidates performed well in questions relating to safeguarding children and how abuse may have effects on individuals.

Centres may wish to use more time focusing on how laws can be outlined by candidates and how the disclosure and barring service is put into practice in health and social care settings.

Possible use of a centre's own policies for the candidates to consult may aid their understanding of procedures and how they can help safeguard individuals.

(c)* Discuss the possible effects of abuse on children.

The following list is not definitive:

- lonely/isolated/excluded/withdrawn – may not want to mix with people. Fears going to service/ seeking help
- low self-esteem/self-worth/worthless – slowly begins to erode. Makes them feel unworthy so do not seek help
- low self-confidence – difficult to go and see providers/apply for help/support due to previous experiences.
- Depressed – feels very low. Hard to motivate themselves.
- stressed/ill health – effects of the experience may bring on illnesses, depression.
- self-harming – in severe cases may resort to this as a cry for help.
- self-fulfilling prophecy – begin to believe what they have been told and how they have been treated.
- anxious/frightened/scared – if the prejudice/attitudes have been threatening they may not want to go out, leave their homes.
- Changes in personality/mood
- Failure to thrive
- Physical injuries, bruises, broken bones
- Long term psychological effects, e.g. trust
- Thinking abuse is normal
- Go on to abuse others themselves.

No credit for just identification of effect.

Accept any suitable discussion of an effect

Answers must link to abuse of children

[6]

Mark scheme guidance

1 (a)

Annotation:

The number of ticks must match the number of marks awarded.

No other answers are acceptable.**If more than three boxes are ticked:**

Mark the first three only.

Crossed Out Responses:

Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

1 (b)

Content	Levels of response
<p>This is a levels of response question – marks are awarded on the quality of the response given. The focus of the question is justification.</p> <p>Level 3 checklist</p> <ul style="list-style-type: none"> • detailed justification of at least two of the chosen answers • related to Jamie • clear understanding of the situation will be evident • well-developed line of reasoning • logically structured • QWC – high <p>Level 2 checklist</p> <ul style="list-style-type: none"> • sound justification of one or two of the chosen answers • related to Jamie • understanding of the situation will be evident • a line of reasoning in the most part relevant • QWC – mid <p>Level 1 – checklist</p> <ul style="list-style-type: none"> • descriptive (upper end) list like (low end) • lacking an understanding of the situation • basic information presented in an unstructured way • may not be specifically linked to Jamie • QWC – low 	<p>Level 3: 5 - 6 marks</p> <p>There will be a detailed justification which clearly addresses the situation. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling</p> <p>Level 2: 3 - 4 marks</p> <p>Answer provides a sound justification which addresses the situation. Answers will be factually correct. There may be some noticeable errors of grammar, punctuation and spelling. Sub max 3 for one justification done well/ repeat justifications</p> <p>Level 1: 1 - 2 marks</p> <p>Answer provides a limited or basic justification. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive</p> <p>0 marks - response not worthy of credit.</p>

1 (c)

Content	Levels of response
<p>This is a levels of response question – marks are awarded on the quality of the response given.</p> <p>Level 2 checklist At least two effects fully discussed clear understanding of effects of abuse will be evident High QWC</p> <p>Level 1 checklist May be only one effect Basic understanding of effects of abuse Mid – Low QWC</p>	<p>Level 2: 4 – 6 marks There will be a detailed discussion of at least two effects of abuse on children. These will be developed logically and there will be evidence of synthesis within the work.</p> <p>Level 1: 1 – 3 marks They will include a brief discussion (more descriptive in nature) of at least two effects of abuse on children. Answers will be factually correct. There may be some noticeable errors of grammar, punctuation and spelling. Sub-max of 3 for one effect done well.</p> <p>0 marks - response not worthy of credit.</p>

Examiners comments

1a

The vast majority of candidates achieved full marks. The most common, incorrect answer ticked by candidates was 'arrange to meet with Jamie's father the next day'.

1b

Most candidates could justify their answers, although were sometimes vague in relation to why a record should be kept. Higher level answers linked recording the incident to the future use as evidence and the importance of recording information quickly.

1c

Well answered with most candidates giving at least a few points of discussion. Weaker responses tended to just list possible effects with no discussion/rationale.

Question 2

2 (a) Define the term 'lacking mental capacity'.

Individuals who may not be able to make their own decisions about care/treatment (1) law that applies to individuals aged 16 or over(1) or others may be able to make decisions on a person's behalf (1)

[2]

(b) Explain how each of the following environmental factors can make abuse more likely.

Care services with institutional practices

The following examples provided are not definitive

Care services with institutional practices:

Culture of turning blind eye/covering up

Mistrust

Stereotyping/discrimination

Labelling

Canteen culture

Similarity of care systems causing distress to those in and out of care

[2]

Homelessness

Homelessness:

Lack of access to support/protection services

No fixed location – difficult to track

Reasons for being homeless e.g. abuse in the past

Self fulfilling prophecy

Lack of affordable housing

Limited support services/funding

Risk of harm from others, e.g. especially at night

Stereotyping by public

[2]

Adults with dementia in a nursing home

Dementia:

Lack of control over own choices

Disempowerment

Memory impairments

Dependency on others

Isolation

Less aware of being abused

[2]

(c)* Analyse how the following situations may make abuse more likely:

- social isolation
- relationship where there is an imbalance of power.

Social isolation:

- Unable or restated in ability to access support services (formal or informal)
- Loss of contacts over time, people cannot help if not told/ able to see their friends
- May be scared to speak out as not believed/ become more isolated.
- May be targeted by abusers as vulnerable
- Loss of contact with friends – so unable to seek help
- Scared to speak to others

Relationships where there is an imbalance of power:

- Too scared to leave partner/ face persecution
- Cannot seek help as access to communication restricted, e.g. phone use
- Physical violence/ intimidation – cannot speak out/ not safe
- Made to feel reliant
- Threats made by partner
- Power may relate to control of finances / freedoms (e.g. movement/travel and physical strength/ control/abuse)
- Relationships may be partners or relationships with service providers, e.g. abuse of power by carers/ teachers

[12]

Mark scheme guidance

2 (a)

Wording does not have to be exactly the same as in indicative content. Any 2 points fine

One mark:

A basic definition that lacks clarity

Two marks:

A full definition that clearly shows understanding. May provide an example to illustrate points made within the definition

2 (b)

Accept any other suitable responses

For all environmental factors:

One mark:

A basic explanation that lacks clarity

Two marks:

A full explanation that clearly shows understanding with an example or context or further detail

2 (c)

Content	Levels of response
<p>This is a levels of response question – marks are awarded on the quality of the response given. The focus of the question is analysis.</p> <p>Annotation: The number of ticks will not necessarily correspond to the marks awarded.</p> <p>Level 3 checklist:</p> <ul style="list-style-type: none"> • detailed analysis – well-developed line of reasoning • balanced – social isolation and imbalance of power • explicitly linked to abuse • Correct use of terminology • QWC – high <p>Level 2 checklist:</p> <ul style="list-style-type: none"> • sound analysis • balance – may be one-sided with only social isolation or imbalance of power done well • links mostly relevant to abuse • QWC – mid <p>Level 1 checklist:</p> <ul style="list-style-type: none"> • limited / basic analysis • Social isolation or imbalance of power • limited relevance to abuse • list like / muddled • QWC - low 	<p>Level 3: 9 - 12marks</p> <p>There will be a detailed analysis how both social isolation and imbalance of power in relationships may make abuse more likely. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 2: 5 - 8 marks</p> <p>There will be a basic analysis of how social isolation and/or imbalance of power in relationships may make abuse more likely.</p> <p>Answers will be factually correct. There may be some noticeable errors of grammar, punctuation and spelling. Sub max 6 for only isolation or abuse done well.</p> <p>Level 1: 1 - 4 marks</p> <p>There will be an attempt at analysis of how social isolation and/or imbalance of power in relationships may make abuse more likely. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive</p> <p>0 marks - response not worthy of credit.</p>

Examiners comments

2 (a)

A number of weak answers talking about people generally not being able to do 'things' and/or describing people who are 'mentally ill'.

2 (b)

Most candidates could explain the factors of homelessness and adults with dementia in a nursing home, however, very few appeared to know the concept of institutional practices, instead they just gave general ideas about abuse.

2 (c)

Quite well answered although most candidates appeared to have a clearer understanding of relationships with an imbalance of power than the concept of social isolation. Although not vital, clear examples helped to illustrate answers and the ability to show how these factors could increase the likelihood of abuse.

Question 3

The Equality Act outlines protected characteristics including sex and age.

3 (a) State three other protected characteristics.

- | | | |
|--------|--|-----------|
| 1..... | Protected characteristics:
Disability | [1] |
| 2..... | Gender reassignment
Marriage and civil partnership
Pregnancy and maternity | [1] |
| 3..... | Race
Religion and belief
Sexual orientation | [1] |

(b)* Outline key features of the Mental Capacity Act (2005).

- | | | |
|-------|---|-----------|
| ..... | Features of the Mental Capacity Act: | ..... |
| ..... | • Gives right to make your own decisions if you have capacity and are aged 18 or over. There are a few exceptions, such as decisions about treatment for mental health problems if you are detained under the Mental Health Act 1983. | ..... |
| ..... | • Users are assumed to have capacity | ..... |
| ..... | • Users should receive support to make your own decisions before anyone assumes you don't have capacity | ..... |
| ..... | • Any decisions made must be in users best interests and restrict freedom as little as possible.(best interest checklist) | ..... |
| ..... | • Applies if users do not have the mental capacity to make a decision that needs to be made, for example about healthcare or residential care. | ..... |
| ..... | • Mental capacity assessment | ..... |
| ..... | • Can be used to give treatment for physical health problems | ..... |
| ..... | • States how users can plan ahead | ..... |
| ..... |  | ..... [6] |

Mark scheme guidance

3 (a)

Do not accept repeated answers

Do not accept 'gender' on its own must state 'gender reassignment'

Must have both terms when applicable

3 (b)

Content	Levels of response
<p>This is a levels of response question – marks are awarded on the quality of the response given. The focus of the question is analysis.</p> <p>Annotation: The number of ticks will not necessarily correspond to the marks awarded.</p> <p>Level 2 checklist:</p> <ul style="list-style-type: none"> • Detailed outline – with a well-developed line of reasoning • Features explicitly link to the Mental Capacity Act • Correct use of terminology • High QWC <p>Level 1 checklist:</p> <ul style="list-style-type: none"> • Basic outline • List like • Limited knowledge or understanding evident • Low QWC 	<p>Level 2: 4 - 6 marks</p> <p>There will be a detailed outline of the main features of the Mental Capacity Act. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1: 1 - 3 marks</p> <p>There will be an attempt at an outline of the main features of the Mental Capacity Act. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive. Sub-max of 3 for one feature done well.</p> <p>0 marks - response not worthy of credit.</p>

Examiners comments

3 (a)

Most common answer was race, many candidates gave incomplete answers, e.g. 'gender' rather than 'gender reassignment'

3 (b)

Quite poorly answered with only a few candidates able to actually describe features. Some just stated the law was about people and tries to stop abuse.

Exemplar Candidate Work

Question 3 (b) – Low level answer

(b)* Outline key features of the Mental Capacity Act (2005).

The mental capacity Act is a legislation put in place for vulnerable people who can not make their own choices due to their mental capacity for example some one that suffers from severe dementia or a physical and mental disability. They are provided with support and advocates to speak on their behalf and make ~~some~~ decisions for them.

[6] 1

Commentary

The command verb of the question requires an 'outline' of the 'key features' of the act. The candidate has provided a description of a situation where the Mental Capacity Act would apply – someone with dementia. This does not answer the question very well as no specific features of the act have been given. The answer is vague and the one mark achieved is a 'benefit of doubt' mark for reference to support such as advocates that would be provided.

To gain more marks the candidate needs to focus the answer on the piece of legislation itself. Some facts about the legislation including its main principles need to be provided. Some correct use of terminology from the principles of the act should be demonstrated, such as referencing that the advocates, mentioned in the candidate's answer, have to ensure that decisions have to be made in the 'best interests' of the individual.

Using paragraphs to structure an answer is good practice, with each paragraph having a focus on an aspect of the act, this helps the candidate to achieve a structured response.

Question 3 (b) – Medium level answer

(b)* Outline key features of the Mental Capacity Act (2005).

L2

It empowers and protect vulnerable people. It doesn't allow lack of mental capacity to be assumed. The Mental Capacity Act 2005 makes sure if someone is acting on behalf of the person lacking capacity due to illness or injury, then they have to act in the individual's best interest. It also says an assessment of the individual must be taken before lack of capacity can be declared. [6] 4

Commentary

The answer begins with a description of the impact of this piece of legislation. The candidate states that it 'empowers' and 'protects' vulnerable people. This was not asked for by the question, key features, not 'impacts' are required.

The candidate has then given an outline of a few features of the Mental Capacity Act and though the answer lacks technical detail some appropriate terminology has been used such as 'best interests' and that it doesn't allow lack of capacity to be 'assumed'. Also mentioning the requirement for an assessment of mental capacity. The candidate clearly knows some aspects of the legislation and has given an outline of these.

To gain higher marks the candidate needs to provide a little more detail of the features chosen to write about and the answer could have a better structure with the facts following though logically.

For example regarding decision making the candidate could start with how the act the fact that the Act protects individual's rights to make decisions and go on to detail how this achieved. It states that individuals should always be assumed to have capacity, the candidate could link this to individuals should receive support to make their own decisions before anyone assumes they don't have capacity. Any decisions made should restrict the individual's freedom as little as possible and be in their best interests.

A more structured response linking the relevant facts together with more developed detail would enable more marks to be achieved.

Question 3 (b) – High level answer

(b)* Outline key features of the Mental Capacity Act (2005).**This is a candidate style answer**

The Mental Capacity Act states that every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise. A key feature of the MCA is that the individual has to have a mental capacity assessment before anyone can state that the person lacks the 'capacity' that is the ability, to make their own decisions.

The MCA provides safeguards to protect the right of individuals to make their own decisions and recognises that the ability to make decisions may vary and lack of capacity may not be permanent. For example if someone is in a coma they do not have the capacity to make a decision, when they recover from the coma the ability to make a decision may return. The act also states that care workers must ensure that all decisions are made in the best interests of the individual, for the individual's benefit and not for the benefit of others.

The MCA also states that individuals should be provided with support to make decisions and that they should be allowed to make what others consider to be 'unwise' decisions. An individual cannot be treated as without capacity just because a care worker disagrees with the individual's decision as everyone has their own values, beliefs and preferences.

The MCA has five key principles, 1 – 3 support the process before and at the point of deciding that someone has or does not have capacity. These principles are: a presumption of capacity, support to make decisions and allowing unwise decisions. Principles 4 and 5 support the decision making process: 'best interests' and 'less restrictive option' where the person's rights and freedom of action would be least affected by the decision being made on their behalf.

[6]**Commentary**

This answer provides a detailed outline of the Mental Capacity Act as required by the command verb at the start of the question. The answer is factually accurate and gives coverage of all of the main features and key principles of the MCA. The answer is developed by giving further detail for each of the features covered, not just listing the content of the act.

Correct terminology has been used throughout and a high standard of spelling, punctuation and grammar is demonstrated. The response is well structured with paragraphs and the information given follows through logically. All of the information presented is relevant demonstrating detailed knowledge of this piece of legislation.

Full marks - 6

Question 4

- 4 (a)* Explain how the following policies could help safeguard vulnerable adults from abuse in a hospital:
- Disclosure and Barring Service
 - risk assessment.

The following examples are not definitive:

Risk assessment:

- Maintains health of all
- Safety requirements met
- Active risks allowed
- Risk assessments reviewed/carried out
- Incidents reported and reviewed

Disclosure and barring service:

- Helps ensure staff are suitable
- Reviewed
- Safety checks
- Prevents reoffending
- Protects users elsewhere as well as in organisation
- Barred list

Generic

- Helps staff know what to do/guidelines
- Helps prevent abuse/ reduces risk
- People know rights/responsibilities
- Raises awareness
- Answers must relate to a Hospital setting

[8]

(b) Identify two other policies that could be used in a hospital to help safeguard vulnerable adults from abuse.

Policy 1	Safeguarding[1]
.....	Confidentiality	
Policy 2	Data protection[1]
.....	Risk assessment	
	Disclosure and barring service	
	Staff recruitment policy/ training policy	
	Complaints	

Mark scheme guidance

4 (a)

Content	Levels of response
<p>This is a levels of response question – marks are awarded on the quality of the response given. The focus of the question is description.</p> <p>Annotation: The number of ticks will not necessarily correspond to the marks awarded.</p> <p>Level 3 checklist:</p> <ul style="list-style-type: none"> Detailed explanation – with a well-developed line of reasoning Both policies are addressed fully relates to safeguarding Correct use of terminology QWC – High <p>Level 2 checklist:</p> <ul style="list-style-type: none"> Sound explanation Both policies are addressed relevant to safeguarding QWC – Mid <p>Level 1 checklist:</p> <ul style="list-style-type: none"> Basic explanation Either of the policies referred to may not relate to safeguarding QWC - Low 	<p>Level 3: 7 - 8 marks There will be a detailed explanation of how both policies could help safeguard vulnerable adults from abuse. Link to hospital must be explicit. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling</p> <p>Level 2: 4 - 6 marks There will be a basic explanation of how the policies could help safeguard vulnerable adults from abuse. Answers will be factually correct. There may be some noticeable errors of grammar, punctuation and spelling. Sub max 4 for one policy done well.</p> <p>Level 1: 1 - 3 marks There will be an attempt at an explanation of how the policies could help safeguard vulnerable adults from abuse. List like answers should be placed in this band. Answers are likely to be muddled and lack technical detail. Errors of grammar, punctuation and spelling will be noticeable and intrusive</p> <p>0 marks - response not worthy of credit.</p>

4 (b)

Accept other suitable policies

Examiners comments

4 (a)

A surprising number appeared to assume the Disclosure and Barring service was about general complaints within a hospital. Most marks achieved related to risk assessments.

4 (b)

Well answered although a few candidates stated laws instead of policies.

Question 5

- 5 Outline how each of the following factors can help workers in social care environments minimise the risk of abuse.

Building trusting relationships.

Building trusting relationships:

Helps ensure clear and transparent communication between workers and users and between workers

Encourages users to complain/raise concerns without fear. May help users and workers feel safe/secure

[2]

Continuing Professional Development

Continuing Professional Development:

Ensures staff are trained and using the best practice allowing them to develop and update knowledge/skills and so prevent abuse.

Updates staff Raises awareness

[2]

Following policies and procedures

Following policies and procedures:

Ensures all ways to reduce risk of abuse are followed and polices protect users and workers .Feel safe /secure. Know what the law/ policy requires them to do./ Helps staff avoid disciplinary actions/ accusations / framework and guidance materials for staff

[2]

Mark scheme guidance

Accept any other suitable responses

For all categories:

One mark:

A basic outline that lacks clarity

Two marks:

A full outline that clearly shows understanding with an example or context or further detail

Examiner comments

5

Quite well answered with most candidates able to outline how the factors could help staff and/ or service users minimise the risk of abuse.



We'd like to know your view on the resources we produce. By clicking on the 'Like' or 'Dislike' button you can help us to ensure that our resources work for you. When the email template pops up please add additional comments if you wish and then just click 'Send'. Thank you.

Whether you already offer OCR qualifications, are new to OCR, or are considering switching from your current provider/awarding organisation, you can request more information by completing the Expression of Interest form which can be found here:

www.ocr.org.uk/expression-of-interest

OCR Resources: *the small print*

OCR's resources are provided to support the delivery of OCR qualifications, but in no way constitute an endorsed teaching method that is required by OCR. Whilst every effort is made to ensure the accuracy of the content, OCR cannot be held responsible for any errors or omissions within these resources. We update our resources on a regular basis, so please check the OCR website to ensure you have the most up to date version.

This resource may be freely copied and distributed, as long as the OCR logo and this small print remain intact and OCR is acknowledged as the originator of this work.

OCR acknowledges the use of the following content:
Square down and Square up: alexwhite/Shutterstock.com

Please get in touch if you want to discuss the accessibility of resources we offer to support delivery of our qualifications:
resources.feedback@ocr.org.uk

Looking for a resource?

There is now a quick and easy search tool to help find **free** resources for your qualification:

www.ocr.org.uk/i-want-to-find-resources/

www.ocr.org.uk/healthandsocialcare OCR Customer Contact Centre

Vocational qualifications

Telephone 02476 851509

Facsimile 02476 851633

Email vocational.qualifications@ocr.org.uk

OCR is part of Cambridge Assessment, a department of the University of Cambridge. *For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored.*

© **OCR 2017** Oxford Cambridge and RSA Examinations is a Company Limited by Guarantee. Registered in England. Registered office 1 Hills Road, Cambridge CB1 2EU. Registered company number 3484466. OCR is an exempt charity.

