

Cambridge Technicals Health and Social Care

Unit 25: Research methods in health, social care and childcare

Level 3 Cambridge Technical in Health and Social Care **05871**

Mark Scheme for January 2024

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This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

All examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

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PREPARATION FOR MARKING

RM ASSESSOR

- 1. Make sure that you have accessed and completed the relevant training packages for on-screen marking: RM Assessor Assessor Online Training; OCR Essential Guide to Marking.
- 2. Make sure that you have read and understood the mark scheme and the question paper for this unit. These are posted on the RM Cambridge Assessment Support Portal http://www.rm.com/support/ca
- 3. Log-in to RM Assessor and mark the **required number** of practice responses ("scripts") and the **number of required** standardisation responses.

MARKING

- Mark strictly to the mark scheme.
- 2. Marks awarded must relate directly to the marking criteria.
- 3. The schedule of dates is very important. It is essential that you meet the RM Assessor 50% and 100% (traditional 40% Batch 1 and 100% Batch 2) deadlines. If you experience problems, you must contact your Team Leader (Supervisor) without delay.
- 4. If you are in any doubt about applying the mark scheme, consult your Team Leader by telephone or the RM Assessor messaging system, or by email.

5. 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.

Rubric Error Responses – Optional Questions

Where candidates have a choice of question across a whole paper or a whole section and have provided more answers than required, then all responses are marked and the highest mark allowable within the rubric is given. Enter a mark for each question answered into RM assessor, which will select the highest mark from those awarded. (The underlying assumption is that the candidate has penalised themselves by attempting more questions than necessary in the time allowed.)

Multiple Choice Question Responses

When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate). When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.

Contradictory Responses

When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only **one mark per response**)

Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. (The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)

Short Answer Questions (requiring a more developed response, worth two or more marks)

If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

Longer Answer Questions (requiring a developed response)

Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first response.

- 6. Always check the pages (and additional objects if present) at the end of the response in case any answers have been continued there. If the candidate has continued an answer there, then add a tick to confirm that the work has been seen.
- 7. Award No Response (NR) if:
 - there is nothing written in the answer space

Award Zero '0' if:

• anything is written in the answer space and is not worthy of credit (this includes text and symbols).

Team Leaders must confirm the correct use of the NR button with their markers before live marking commences and should check this when reviewing scripts.

- 8. The RM Assessor **comments box** is used by your team leader to explain the marking of the practice responses. Please refer to these comments when checking your practice responses. **Do not use the comments box for any other reason.**If you have any questions or comments for your team leader, use the phone, the RM Assessor messaging system, or e-mail.
- 9. Assistant Examiners will send a brief report on the performance of candidates to their Team Leader (Supervisor) via email by the end of the marking period. The report should contain notes on particular strengths displayed as well as common errors or weaknesses. Constructive criticism of the question paper/mark scheme is also appreciated.
- 10. For answers marked by levels of response:
 - a. To determine the level start at the highest level and work down until you reach the level that matches the answer
 - b. To determine the mark within the level, consider the following

Descriptor	Award mark
On the borderline of this level and the one below	At bottom of level
Just enough achievement on balance for this level	Above bottom and either below middle or at middle of level (depending on number of marks available)
Meets the criteria but with some slight inconsistency	Above middle and either below top of level or at middle of level (depending on number of marks available)
Consistently meets the criteria for this level	At top of level

Annotations available for marking of scripts

Annotation	Meaning
/	Tick – correct answer
×	Cross – incorrect answer
+	To be used within evaluate and analyse questions
-	To be used within evaluate and analyse questions
LI	Level 1
L2	Level 2
L3	Level 3
BOD	Benefit of doubt (This does count as a mark – so do not 'tick' as well)
^	Omission mark
TV	Too vague
REP	Repeat
SEEN	To acknowledge additional pages/ notes were read
3	Not Relevant - 'noted but no credit given'
BP	Blank Page

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DO NOT USE ANY OTHER ANNOTATION

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Question	Answer	Marks	Guidance
1 (a)*	 Level 3 (5–6 marks) detailed explanation of advantages of using secondary research for the review AND explicitly relevant to the scenario. There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Level 2 (3–4 marks) sound explanation of advantages of using secondary research for the review AND mostly relevant and related to the scenario Sub max of 3 for one explanation done well. There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. Level 1 (1–2 marks) Basic attempt at an explanation of advantages of using secondary research for the review, may be list like. AND may not be specifically linked to the scenario There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. 0 marks - No response worthy of credit. 	6	Indicative points (not exhaustive): Scenario is local health authority review into effectiveness of bedsore treatments in nursing home patients. Secondary research methods that could be referred to: • Literature reviews – journals / books • Other documentary sources – government organisations • Published statistics – census data / government statistics – ONS, DH Specific reference does not have to be made to the above methods in the answers provided Advantages of using secondary research methods: • use of literature e.g. books and journals – summative points provided • saves time • easier and quicker • use of websites of organisations disseminating research – results already provided / questions asked re the effectiveness • large number of journals available; to provide different perspectives / results - able to compare • trustworthy – if verified / peer reviewed / little or no bias • use of e.g. government documents or statistics – trustworthy • large data sets available - generalisability • means of researching previous studies – comparing data with other sources • useful for making comparisons over time • many secondary sources, including those produced by the government e.g. official statistics, are available free of charge / inexpensive

Q	uestic	n	Answer	Marks	Guidance
					 allows the health authority to learn findings of trials/ studies of health care practices of many different health care organisations ensures the review will be supported by research-based evidence cost effectiveness; do not need to invest money or time in gathering own data through primary research data is already in a format to analyse and compare can provide a basis for primary research design if needed Research is carried out by professionals; expert knowledge and improved accuracy
1	(b)	(i)	 Any one from: Treatments - medicines / effectiveness of dressings and ointments / the treatment of bed sores ✓ informing health practices / health practices / practices ✓ informing health policies / health policies / policies ✓ 	1	For an incorrect answer use the cross. Do not accept: health services names health care settings

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Question	Answer	Marks	Guidance
1 (b) (ii)	 Two explanations required (relevant to scenario), two marks each. Improve outcomes for individuals – e.g. may help to reduce discomfort and pain from bedsores for patients Measure impact – e.g. the impact of using this ointment in comparison to other available treatments Improve practice – e.g. staff advised of best / effective treatments for bedsores Identify gaps in provision – e.g. some nursing homes may not have access to certain treatments Identifies needs of groups / individuals – e.g. needs of patients who are immobile / confined to bed rest Inform policy / improve policy –e.g. nursing homes can change treatment policy for bedsores Increase knowledge and understanding – e.g. staff / patients become more aware of effective treatments Identify what further research is needed? Cost effectiveness – can aid in the development of policy, can purchase ointment that is most effective for the majority of patients thus reducing waste 	4 (2x2)	One mark – for a statement (shown in bold in answer column) plus One mark for the explanation (shown as the e.g. in answer column) DO NOT ACCEPT repeated explanations. Annotate with if no statement is provided before the explanation Accept any other relevant explanation

Q	uestion	Answer		Marks	Guidance	
1	(c)	One mark per row		3 (3x1)	For an incorrect answer use the cross .	
		Statement	True (T) or False (F)		DO NOT ACCEPT any other answer	
		Only women who were over 75 years old would be selected as participants.	False / F		If more than one answer is given e.g. T/F: No mark should be awarded.	
		The participants would be randomly divided into two groups, an experimental group and a control group.	True / T			
		Informal observations would be the best method to collect data during the trial.	False / F			

Question	Answer	Marks	Guidance
1 (d)*	Level 3 (5–6 marks) • detailed discussion of ethical issues relating to both areas AND • explicitly relevant to the scenario. There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Level 2 (3–4 marks) • sound discussion of both ethical issues AND • mostly relevant and related to the scenario Sub max of 3 for one ethical issue done well OR access to information OR who the research may affect and how they may be affected There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence Level 1 (1–2 marks) • attempt at a brief discussion of one or both ethical issues but answer has limited information presented in an unstructured way / may be list like. AND • may not be specifically linked to the scenario There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. O marks - No response worthy of credit.	6	Indicative points (not exhaustive): Ethical issues relating to: Access to information Obtained / not obtaining informed consent – signed consent forms required Protect / not protecting anonymity and confidentiality – information may be subject to confidentiality agreement Ensure / not ensuring transparency and integrity - participants are fully informed / who commissioned and the purpose / offer opportunities to see finished research Avoid / not avoiding deception Consult / not consulting ethical review boards Link / not linking to relevant legislation - Human rights Act / Data Protection Act / GDPR Who the research may affect and how they may be affected Cause no harm / causes harm – some participants may suffer adverse effects – allergic reactions / heat / rashes / emotional trauma Provides benefits / does not provide benefits reduction on severity of bed sores / eradication of bed sores / money Right to withdraw / not offered the right to withdraw – if they have adverse effects to the treatment Debrief / fail to debrief participants Access / no access to support groups patients may be vulnerable, have dementia, lack mental capacity – may be unable to give signed consent families of patients may give consent / not asked for consent

Question	Answer	Marks	Guidance
2 (a)*	 Level 3 (8–10 marks) detailed evaluation of both libraries and the internet AND clear use of strengths and limitations for both AND explicitly relevant to the context of candidates' own research There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Level 2 (4–7 marks) sound evaluation of both libraries and the internet AND strengths and limitations are addressed AND mostly relevant and related to the context of candidates' own research There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. Sub max of 5 for either strengths or limitations OR libraries or internet done well Level 1 (1–3 marks) brief attempt at an evaluation with limited information presented in an unstructured way/ may be list like AND may not be specifically linked to the context of candidates' own research 	10	A: Childhood – fussy / picky eating behaviours B: Ageing related anorexia – disability / frailty C: Type 2 diabetes – dietary / nutrition approaches Indicative points (not exhaustive): Libraries: strengths when locating ANNOTATE + • free access / easily accessible / cost effective ✓ • large number of journals / books available ✓ • parofessional librarian to help with search ✓ • full texts available ✓ • professional librarian to help with search ✓ • current research – up to date research ✓ • library catalogues – to narrow research ✓ • use of abstract searches Libraries: limitations when locating ANNOTATE - • no relevant books / journals difficult to find sources linked to pre release ✓ • time consuming / slow ✓ • need to use correct search terms / key terms – time consuming ✓ • books / journals out of date ✓ • payment for information ✓ • difficult to find sources / navigate around the library • library catalogues – difficult to navigate ✓ • may have to book time slot for use of the internet / limited time therefore to access the internet / • Limited access to specific areas • Limited accessibility of libraries – closures / not 24/7

Question	Answer	Marks	Guidance
	There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant O marks - No response worthy of credit.		Internet searches: strengths when locating / ANNOTATE+ • fast ✓ • flexible – can complete anywhere ✓ • easy to access – 24/7 • worldwide search available / wide range of sources • varied search engines, e.g. google ✓ • easy to match key terms / by date ✓ • usually no cost ✓ • easy to skim articles • use of academic web searches or academic websites, e.g. google scholar, JSTOR, Universities • use of key terms / refining tools to search for relevant materials Internet searches: limitations when locating ANNOTATE - • have to pay e.g. to download articles , take a subscription • required to sign up and register • some academic sources may be locked • some articles only available in print • need to use correct search / key terms • may not be UK based • time consuming • volume of results can be excessive and overwhelming • lacks of sources due no specified topic • SEO (search engine optimisation) systems can rank some websites higher, and this could influence choice • no professional person to help firewalls may prevent access to some articles

Qu	estion	Answer	Marks	Guidance
2	(b)	 Any two reasons from: avoids plagiarism ✓ appropriate acknowledgement of sources ✓ tracking of information to then be used for referencing ✓ to represent statistics accurately ✓ avoid misinformation ✓ to ensure that the notes are easily understood / avoid the notes being misunderstood ✓ to make explicit links to the pre release ✓ enable cross referencing ✓ 	2 (2x1)	Any two reasons for two marks, two required. For an incorrect answer use the cross .
2	(c)	Any one factor for one mark plus explanation for one mark from: Relevant • based on the same topic as pre release • relates closely to overall research aims / objectives • if there is no relevance then there is no purpose • current / up to date • applied to the UK or a similar location Manageable in scope • enables development of topic • can reasonably be explored • topic / sources not too broad / too narrow • understand the direction of the research question • takes into account the researcher's capabilities • language used is precise	2 (1x2)	Two marks: one for factor and one for explanation For an incorrect answer use the cross. ACCEPT other relevant explanations Do not accept: original / interesting If the factor is incorrect then the explanation needs to be marked as incorrect

Question	Answer	Marks	Guidance
	Answerable / feasibility It fits SMART acronym – specific, measurable, answerable, realistic and time related It reach conclusions Clear/clarity /avoid ambiguity It targeted appropriately, e.g. to pre release If ocussed on topic It easily understood by audience It research questions should be clear and not open to misinterpretation		

Question	Answer	Marks	Guidance
2 (d)*	 Level 3 (7–8 marks) detailed analysis of how secondary sources were selected covering both appropriateness and complementary information AND covers both pros and cons and is linked to own research There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Level 2 (4–6 marks) Sound analysis of how secondary sources were selected covering both appropriateness and complementary information AND covers some pros and cons with some reference to own research There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. Sub max of 4 for either appropriateness or complementary information OR pros or cons done well Level 1 (1–3 marks) attempt at a brief analysis but limited information presented in an unstructured way / may be list like AND may not be specifically linked to the context of candidates' own research There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. O marks - No response worthy of credit 	8	A: Childhood – fussy / picky eating behaviours B: Ageing related anorexia – disability / frailty C: Type 2 diabetes – dietary / nutrition approaches Answers provided for both appropriateness and complementary can be given as pros or cons or both Indicative points (not exhaustive): Appropriateness of secondary source material date articles were written – in date or out of date authors – credentials / unknown: trustworthy / not trustworthy / validity / peer reviewed citations used or not used quality / lack of quality of information aimilar / different dates / reliable same topics / linked to prerelease: A: neophobia, parent feeding practices, emotional climate at mealtimes B: anorexia, ageing, frailty C: nutrition, morbidity, quality of carbohydrates, weight management similar / different countries /regions CARS – credibility, accuracy, reasonableness, support applies to research question / hypothesis sample size / generalisability bias / non bias accessibility of language / format

Question	Answer	Marks	Guidance
			Annotation + for pros for cons Complementary information from secondary source material • the use of different / the same research methods • can support findings – shows same results and same conclusions OR have differing results / conclusions • information presented in different ways – qualitative / quantitative – with the same focus • clarification of information – have different perspective / focus • reinforcement of ideas within pre release material • elaboration of information found within the pre-release – to develop a greater understanding • can provide broader overview • limited complementary information available • comparable key words / phrases • sampling methods – the same or different • comparable format / structure

Question	Answer	Marks	Guidance
2 (e)*	 Level 3 (8–10 marks) detailed presentation of secondary research that links research ideas together and compares / contrasts results and findings	10	A: Childhood – fussy / picky eating behaviours B: Ageing related anorexia – disability / frailty C: Type 2 diabetes – dietary / nutrition approaches Indicative points (not exhaustive): Formal writing that is: Well structured Written with clarity well-developed line of reasoning, logically structured Linked research and ideas: Comparable key themes from the secondary sources – could also link to pre release Questions / research question developed from chosen pre-release / article Hypothesis developed from secondary sources / pre release Drawing conclusions from the secondary sources / combining together Same / different research methods Compared and contrasted results and findings: Evidence and comment provided from their sources: similarities differences results qualitative / quantitative data presented Accept comments applied to results which link to generalisability, bias, validity, reliability

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Q	uestion	Answer	Marks	Guidance
2	(f)	 Outline to include: truthfulness of the source reputation, status or credentials of author - individual(s) or organisation whether citations are provided measures what it intended to measure published in a credible journal peer-reviewed / reviewed by other experts in the field non bias / declared conflict of interest research methods that were used, e.g. unstructured interviews ethical principles were adhered to evidence to support claims 	2 (1x2)	Two marks for outline. One mark for a basic outline Two marks for an outline which is qualified Do not accept: in date / up to date author by itself

Question	Answer	Marks	Guidance
2 (g)*	Level 3 (5–6 marks) detailed discussion of why further research may be conducted AND explicitly relevant to chosen article There is a well developed line of reasoning which is clear and	6	A: Childhood – fussy / picky eating behaviours B: Ageing related anorexia – disability / frailty C: Type 2 diabetes – dietary / nutrition approaches
	There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Level 2 (3–4 marks) • sound discussion of why further research may be conducted AND • mostly relevant and related to chosen article There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.		 Indicative points (not exhaustive): questions that have not been answered further evidence may be needed research methods not appropriate the use of alternative research methods results may not be plausible want to build on current knowledge / findings data was limited / want to extend data / sources lack clarity carry out own primary research difficulty finding reliable sources / sources that were UK based sample size was too small – lacking generalisability need more up to date research
	 Level 1 (1–2 marks) attempt at a brief discussion but limited information presented in an unstructured way / may be list like AND may not be specifically linked to chosen article There is an attempt at a logical structure with a line of 		 Specific examples linked to their findings Do not accept answers which link to implications applied to: Individuals Professionals
	reasoning. The information is in the most part relevant. 0 marks - No response worthy of credit.		 Groups Practice Settings Government policy

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