



Topic Tests

for BTEC Tech Award Level 1/2 in
Health and Social Care

*Component 2: Health and Social Care
Services and Values*

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Teacher's Introduction

This resource is for use with the BTEC Tech Awards Level 1/2 in Health and Social Care (first teaching 2022), and covers content for **Component 2: Health and Social Care Services and Values**.

Each topic test starts with quick, short-answer questions that ensure the core fundamental ideas of each topic are understood by the student. Questions then increase in difficulty and culminate with either longer, essay-style questions or detailed activities which are engaging and help consolidate learning, giving students the opportunity to practise applying their knowledge to case study scenarios. A range of question styles has been used to expose students to different question types and to give variety in the activities, as well as providing some questions which are linked to Component 2.

Mark allocations and answers are provided, which are useful for peer- and self-assessment as well as providing you, the teacher, with an opportunity to assess students' strengths and weaknesses in order to inform the teaching and learning process.

Specification reference table

This table can be used to identify which specification points you are teaching and select the appropriate topic test to suit your needs.

Tests range from 24–53 marks in total and take approximately 30–45 minutes to complete.

Test 7 looks at feedback and self-reflection. This test is slightly different from the others as it is split into two parts: Part A and Part B. Part A contains questions for which answers are provided, whereas Part B is about self-reflection, and there is no 'correct' answer. Part B allows students to identify their own strengths and weaknesses to support their learning.

Topic test	Topic test title	Spec points to include	Total marks
1	Healthcare services	A1	53
2	Social care services	A2	40
3	Barriers to accessing services: Part 1 – <i>Physical, sensory, social, cultural and language barriers</i>	A3	37
4	Barriers to accessing services: Part 2 – <i>Geographical, intellectual, financial barriers</i>	A3	44
5	Skills and attributes in health and social care	B1	36
6	Values in health and social care	B2	24
7	Obstacles individuals requiring care may face	B3	29
8	Benefits to individuals of the skills, attributes and values in health and social care practice	B4	45

1. Healthcare services

1. Match each health condition in the table below with the correct description. One has been done for you.

1. Coronary heart disease	A. A group of health conditions that cause joint pain
2. Arthritis	B. A health condition in which a blood clot in one of the arteries
3. Asthma	C. Health condition of the lungs (inflammation and narrowing) which stops the airways from working properly
4. Stroke	D. Chronic (long-term) condition of the lungs leading to breathlessness
5. Sensory impairment	E. A form of disability that affects a person's ability to move
6. Physical disability	F. Medically defined condition of the brain combined with a genetically specific learning difficulty or impairment
7. Learning disability	G. General term covering conditions that affect a person's sense of balance, taste or smell

2. Fill in the gaps in the following sentences about COPD.

Chronic obstructive pulmonary disease (COPD) affects the lungs so is a form of chronic disease. It is b) _____, meaning that it becomes worse over time. c) _____.

3. Obesity is a risk factor for developing type 2 diabetes.

- a) Outline what is meant by obesity.

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- b) Outline what is meant by type 2 diabetes.

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4. Use the words below to fill in the gaps in the following sentences.

mobility	memory
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- Dementia can cause progressive loss of a) _____ and independence
 b) _____ speed and difficulty making decisions. Physical symptoms
 c) _____ may develop in the later stages of dementia.

5. Outline what is meant by each of the following terms.

- a) Primary care services



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- b) Secondary care services

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- c) Tertiary care services

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6. a) Define the term 'allied health professional'.



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- b) Match each allied health professional to their role.

Physiotherapist
Occupational therapist
Speech and language therapist
Dietician

Supports individuals to maintain skills for
Can provide support for people with difficulties
Assesses and counsels
Treats people who have mental health problems and neurological conditions

- c) Give **one** more example of an allied health professional.



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7. a) State what is meant by 'out of hours' care.

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b) Look at the following out of hours services and outline what each of the

i) NHS 111 service

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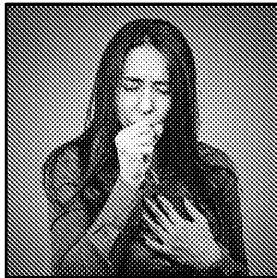
ii) Accident and Emergency (A & E) department

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8. Read the case study below.



Jenny has a persistent cough and is feeling breathless, having to stop for a rest when walking up the hill to see her general practitioner (GP) who referred her to the hospital. Many less serious illnesses can cause a cough, but unfortunately scans confirm that Jenny has lung cancer. The consultant refers Jenny to an oncologist (a doctor who treats cancer), who prescribes treatment for Jenny.

Explain how the GP, respiratory consultant and oncologist may support Jenny's treatment, and whether they are part of primary, secondary or tertiary health care.

General practitioner (GP).....

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Respiratory consultant.....

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Oncologist

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9. Select **one** health condition from the following list:

- Arthritis
- Asthma
- Diabetes
- Heart disease

a) Explain how an individual with your chosen condition can self-manage it

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b) Identify and briefly describe how a healthcare service can support the service user at various levels.

- Primary care
- Secondary care
- Tertiary care (if appropriate)

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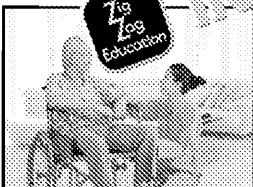


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10. Classify each of the following statements about multidisciplinary team (MDT) circling the correct answer.
- a) MDT working means two or more professions working together. **TRUE / FALSE**
 - b) MDT working is not as effective as one profession working alone. **TRUE / FALSE**
 - c) Everyone works in the same way, whatever their profession. **TRUE / FALSE**
 - d) Multidisciplinary teams may include allied professions and social workers. **TRUE / FALSE**

11. Read the page and review.




Edward was living on his own, but since he has been diagnosed with heart disease he has moved into a hospice. His illness is being supported by a multidisciplinary palliative

The team includes a hospice doctor managing medication, nurses addressing physical symptoms, social workers supporting family and friends, healthcare support workers providing essential tasks, a social worker assisting with practicalities, and allied health professionals including speech, occupational, and language therapists, addressing specific issues. The palliative care team aims to support the patient's physical, emotional, and spiritual well-being and quality of life as he faces an incurable illness.

Discuss the **benefits** and **challenges** of multidisciplinary team working in the

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2. Social care services

1. State what is meant by social care services.

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2. a) State **three** reasons why a child or a young person may need social support.


1.
2.
3.

- b) Listed below are three types of support available to children and young people. Match each type of support to its correct definition.

Foster care	Tends to be for older people and young people.
Residential care	Support for young people with social and emotional needs.
Youth work	A stable family home for people who are homeless.

3. Read the scenario and then list the **learning disabilities, sensory impairments and conditions** which the residents of the group home live with.

The ABC Group Home is a group home with four adult residents who have support workers. George moved in a year ago and likes to go for walks with his guide dog. Brian has equipment to help him manage his diabetes. Jodie has an active social life, she is in a theatre company for people with Down's syndrome. Shanika has been a victim of a riding accident and she has had depression for three years. Kieren sustains help to wash and dress. The head injury also affected his hearing, short-term memory, and he finds it very difficult to learn now.

Learning disabilities	Sensory impairments
	

4. Describe the following different types of care which are available for individuals.

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- i) Domiciliary care.....
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- ii) Respite care.....
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- iii) Residential care.....
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5. Read the case study below and answer the question.

Betty was a piano teacher for many years. When she was in her sixties, she asked her daughter to have power of attorney, so they could make decisions for her if she was unable to do so for herself, which has now happened. Betty is now 90 years old, and she has dementia. Betty's domiciliary care workers have reported that Betty keeps forgetting to take her medication. Her family members work and have other commitments, so they cannot visit her often. Betty's son has bought her a residential home with regular musical activities. His sister is worried that their mother will deteriorate quickly if she leaves home. Betty's carer works in the street without shoes and occasionally gets lost.

Evaluate the possible advantages and disadvantages of residential care for Betty.

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6. State what is meant by 'informal care'.

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7. Read the case study below and answer the questions.



Edna is 73 years old. She lives on her own and her husband died eight years ago. She is a wheelchair user, so it makes it easier. Occasionally she goes to a shopping centre but she has now learnt how to do an online shop. She lives in a different city and can only visit during the summer holidays when school started.

a) Suggest **one** local informal carer that Edna could have.

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b) Describe how this informal carer could support Edna.

.....

c) Describe **two** benefits and **two** challenges of being an informal carer.



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8. Define 'voluntary care services' and give **two** examples of organisations which provide voluntary care services.

Definition:

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Example 1:

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Example 2:

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9. Discuss the role of voluntary organisations in providing services out of hours.

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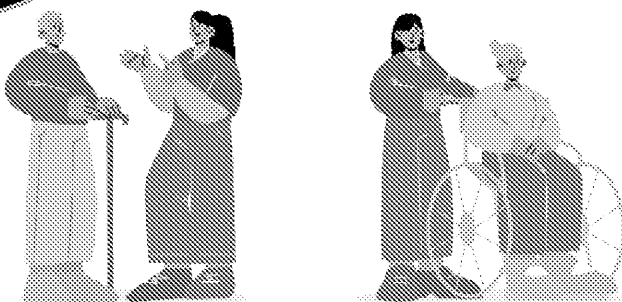
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3. Barriers to accessing services: Part 1

1. a) State what is meant by a barrier to accessing services.

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- b) Outline what is meant by a physical barrier.

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2. Identify which of the following statements is **not true** about sensory barriers.
- a. Hearing loss can affect both adults and children.
 - b. People can use glasses to help them function if they suffer with vision problems.
 - c. A person with hearing loss can use Braille to communicate.
 - d. Having a hearing impairment can make the individual feel lonely and isolated.

3. Read the scenario below.



Mavis is partially deaf and has gone to the chemist for her new medication for her blood pressure.

Describe two ways in which the pharmacist can ensure her communication is effective.

- i)
-
-

- ii)
-
-



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4. The factors given below can potentially act as a barrier in accessing health and social care. Identify the type of barrier (**social** or **psychological**) and explain how it acts as a barrier.

- a) *The opening hours of a diabetic clinic are 9am to 1pm.*

Barrier:

How it acts as a barrier:

.....

- b) *A man suffering from depression is embarrassed.*

Barrier:

How it acts as a barrier:

.....

- c) *A female who attended drugs therapy had a judgemental counsellor.*

Barrier:

How it acts as a barrier:

.....

5. The charity Rethink Mental Health reports that about one in ten people will experience voice hearing. This is hearing voices which are in the person's mind, not other people talking. Look at the table below on different cultural beliefs about voice hearing and answer the questions that follow.

Cultural belief A	Cultural belief B	Cultural belief C
Voice hearing can be caused by a mental illness which needs medical treatment.	Voice hearing indicates that the person has special powers, such as having contact with people who have died.	Voice hearing indicates that the person has a bad spirit living inside them.

- a) Identify which of the cultures view voice hearing as positive and which as negative.

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b) Explain how these cultural beliefs may affect whether an individual sees hearing voices.

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6. Read the sentences below.



Graham can walk but has difficulty with walking long distances so has limited use of his hands. His daughter has brought help him outdoors as she is not always able to visit him.

Graham has a hospital appointment on the other side of town, and it will take him 25–30 minutes to get there.

Explain the physical barriers that Graham could encounter on his journey to the hospital, and suggest how these could be reduced.

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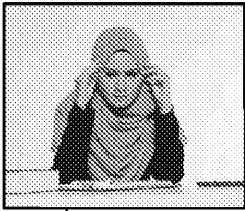
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7. Read the case study below.



Rehana is 28 years old and has been living in England with her two-year-old son and is now pregnant with her second child. She is away from home and she doesn't have any family support. She is Muslim and has strict requirements that she must eat halal food, speak little English and is under the care of the midwifery team. Her appointment next week is to undergo her scan.

a) Explain **two** cultural factors that could prevent Rehana from accessing the service.

i)



ii)

b) Describe **two** ways to overcome the cultural barriers experienced by Rehana.

i)

ii)



c) Suggest **two** ways the healthcare service provider can support Rehana to overcome the barriers she may experience.



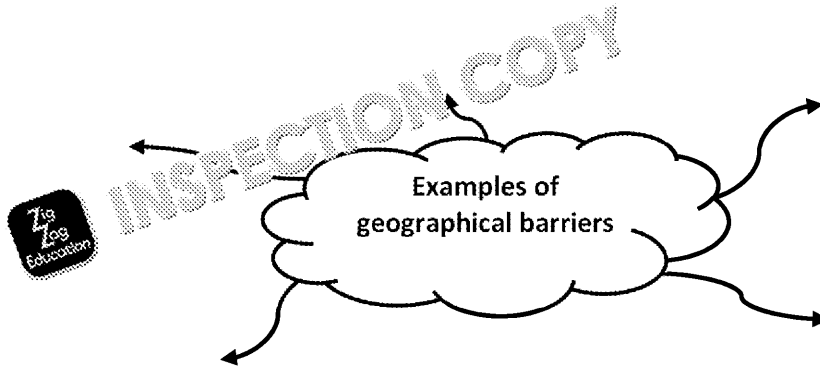
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4. Barriers to accessing services: Part 2

1. There may be different reasons why someone may experience difficulties with accessing services. Complete the spidergram below by stating **five** examples of potential geographical barriers to accessing a hospital appointment.



2. a) Learning disability can be a result of a number of different factors.

Which of the following is **not** a reason why someone may have a learning disability?

- | | | |
|------------------------|--------------------------|---------------------------------|
| a. Genetic inheritance | <input type="checkbox"/> | c. Drug misuse during pregnancy |
| b. Language barrier | <input type="checkbox"/> | d. Head injury during childhood |

- b) Explain how having learning disabilities can be a barrier to using health services.

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- c) Health passports and 'All About Me' documents are used to support individuals with learning disabilities to access services.

State the purpose of each document and explain how each can help support individuals with learning disabilities to access healthcare services.

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d) Suggest **three other** ways in which service providers can support individual access services.

1.
2.
3.

3. Complete the table to outline how each of the named professionals can help with social care for individuals who have learning disabilities.

	How this professional can reduce barriers to health and social care for people with learning disabilities
Citizens' Advice Bureau advocate	
Support worker	
Registered nurse for people with learning disabilities (RNLD)	

4. a) Describe **one** role of quiet clinics and quiet waiting areas in helping to reduce barriers to social care for people with learning disabilities.

Quiet clinics:

Quiet waiting areas:

b) Describe the benefits to people with learning disabilities of:

i) The Accessible Information Standard

ii) Easy read and picture-only health information

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5. Some individuals can receive free prescriptions to overcome financial barriers they may face.

Complete the table below to identify four groups of people who are entitled to free prescriptions.



Free prescriptions	

6. a) Explain why access to NHS dental services is important in reducing financial barriers to attending health and social care appointments and services.

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- b) Explain how charitable schemes such as community transport can help overcome financial barriers to attending health and social care appointments and services.

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7. Read the following case studies. For each case study, describe the potential individual could experience and suggest how it can be overcome.

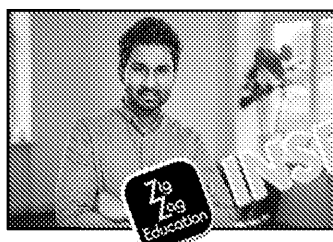
Case study 1: Beryl struggles with walking and uses a rollator (a walking frame with wheels) to help her. She likes to visit her friend in a neighbouring town once

Potential barrier:

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Suggestion for overcoming barrier:

.....



Case study 2: Akito is 45 years old and has recently lost his job. He is struggling financially and is now living below the poverty line. He has to go to the hospital for regular eye examinations as he has not yet been confirmed. He drives to the hospital a long distance.

Potential barrier:

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Explain how the NHS Low Income Scheme, NHS vouchers and NHS Healthcare Fund may help Akito to overcome this barrier:

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5. Skills and attributes in health and social care

1. Describe the difference between a skill and an attribute.

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2. George, a care worker, is called to assist Andy, who has fallen off the roof of a shed and is lying between a wall and the shed. The man has hurt his head and is unable to move.

- a) Outline why George will need to use his observation skills in this situation.

i)

ii)

- b) State **two** ways that Andy could assist George by using problem-solving skills.

i)

ii)

3. a) Dealing with difficult situations is common in health and social care work. Select **one** situation which could be an example of a difficult situation.

- a. A support worker helping a resident drinks at a day centre.
- b. A service user needing physiotherapy following a stroke.
- c. A family visiting a care home resident who is close to death.
- d. A nurse checking medication supplies.

- b) State **four** examples of difficult situations which may arise in health and social care.

i)

ii)

iii)

iv)

4. Read the scenarios. Complete the table by describing why these require organisational skills.

	Why organisational skills are needed
a) A nurse managing a large number of staff for a health centre.	
b) A medic checking equipment before going out to emergencies.	
c) A domiciliary care worker deciding in which order to attend clients' homes.	

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5. a) Outline what it means for a staff member to have 'empathy' within a health and social care setting.

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- b) Describe **two** benefits to service users when health and social care professionals demonstrate empathy.

i)



ii)

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- c) Give **one** example of a staff member demonstrating 'trustworthiness' and 'honesty' in health and social care.

Trustworthiness:

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Honesty:

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- d) Explain the importance of 'trustworthiness' and 'honesty' in health and social care.



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6. If a health and social care practitioner makes a mistake, it is best for them to:

- a. Blame someone else for their mistake.
- b. Be honest about their mistake.
- c. Cover up the mistake.
- d. Pretend the mistake didn't happen.

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7. Read the case study below.



Amara is 59 years old and recently lost her husband as it was she who suffered from health issues. She spends a lot of time together and regularly went to the gym. However, now Amara suffers from arthritis and cannot walk. She has a care worker who comes to her home to help with some of her daily activities. She feels lonely now without her husband and with her friends as she did before. Amara confides in her care worker. She is often very depressed and hopeless, but her years of experience in working with people with mental health issues has helped her to see the good in people.

- a) Do healthcare workers can effectively communicate with Amara to de

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- b) Discuss how Amara's care worker could demonstrate trustworthiness and responding to Amara's disclosure that she is feeling very depressed and

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6. Values in health and social care

1. State what is meant by 'values' in health and social care.

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2. Outline what is meant by the following terms in a health and social care setting

- Care



- Compassion

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- Competence

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- Communication

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- Collaboration



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- Commitment

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3. Complete the table below to outline how a care worker or a support worker shows care values in their care.

Care value	How to show care value
Care	
Compassion	
Communication	
Courage	
Commitment	

4. Read the case study below.

Alison is a nurse on a ward for service users who are recovering from heart surgery. During a busy shift, Alison realises that she has given too high a dose of a prescribed drug to Tom, one of the service users. Alison explains what has happened to Tom, then carries out checks for signs that Tom may have been affected by the overdose of the drug, and informs his family. Alison documents the error in line with hospital policy and continues to monitor Tom. Senior staff review the drug error incident and recommend that Alison attends safe administration of medicines refresher training, which she agrees to do.

- a) Explain why Alison's drug dosage error may lead to senior staff questioning the administration of prescribed drugs to service users.

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- b) State how Alison demonstrates each of the six Cs after realising that she has taken the wrong drug dosage.

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7. The obstacles individuals requiring care may

1. State what is meant by 'obstacles' in the context of receiving health and social care.

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2. a) State **three** examples of emotional or psychological obstacles to accessing health and social care.

1.
2.
3.

- b) Listed below are three sorts of obstacles to improving health. Match each sort of obstacle to the correct example.

Time	Expectation to lose a week of work
Resources	Missing screening or tests
Unachievable targets	High level of local clinic appointments

3. a) Describe how lack of family support can be an obstacle to a frail elderly person.

- i) (It) is difficult to attend medical appointments.....

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- ii) Recovery from illness or injury.....

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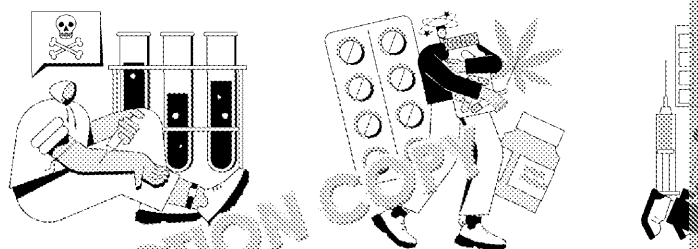
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- b) Describe **three** possible impacts of drug or alcohol addiction on an individual's health and social care services.



- i) 

 ii)

 iii)

4. Read the study below.

Henry is thirty years old and has moderate learning disabilities. He attends people with learning disabilities carried out by his GP. His mother Angela goes that Henry has lost a lot of weight and has a persistent cough. The GP advises a chest X-ray to try to find out why this is. Henry is afraid of hospitals and

- a) Explain the obstacles that Henry faces in following the doctor's advice and

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b) Explain the importance of Henry having his mother Angela's support to

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c) Outline **two** strategies that could be used to support Henry if Angela is

i)

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ii)

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8. Benefits to individuals of the skills, attributes and values in health

1. Give **two** ways how skills, attributes and values in health and social care practice

a) Overcome personal obstacles

i)

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ii)

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b) Receive high-quality care

i)

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ii)

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2. a) State what is meant by person-centred care.

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b) Give **two** examples of ways to provide person-centred care.

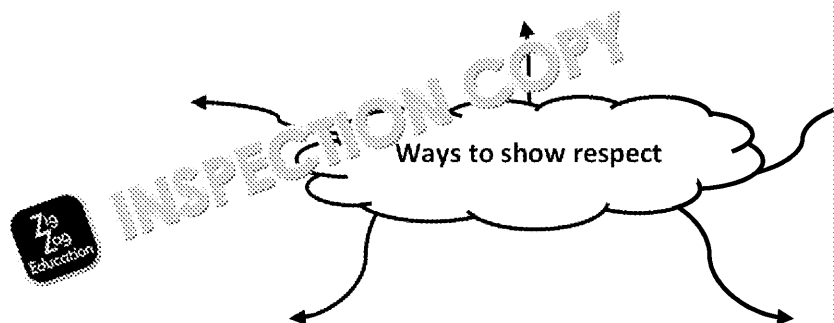
i)

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ii)

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3. Skills, attributes and values in health and social care help to ensure that service users receive respect. Complete the spidergram below by stating **five** examples of ways to show respect to service users.



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4. a) Outline what it means for a service user to have 'empowerment' within

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- b) Describe what an advocate is and why an advocate is important for a service user

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(2)

- c) Explain the importance of a service user and their family caregiver being

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5. Give **two** examples of how a health and social care practitioner can demonstrate (6Cs) to protect a service user from harm.

- i)

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- ii)

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6. Describe how skills, attributes and values in health and social care can help
- ensure service users feel comfortable in raising complaints
 - respond positively to complaints
 - learn from service users' complaints to improve care and support



7. a) Outline what it means to maintain a service user's dignity within a health



- b) State **two** examples of ways to maintain the dignity of service users in health

i)

ii)



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8. Complete the table below by reading the scenarios and describing how to respect

	How to respect
a) A greetings card addressed to a service user has come through the post.	
b) A service user's husband has come to visit her at the care home she is staying in.	
c) A service user's file which contains their medical information has been left on the receptionist's desk.	

9. a) Sharing private information about a service user breaches confidentiality if it is necessary.

Select **one** situation when private information may need to be shared.

- a. On social media for public records.
- b. A friend of the service user is concerned.
- c. The service user is at risk of harm.
- d. The service user has a friend working in the health sector.

b) Explain why wrongly sharing confidential information could have negative

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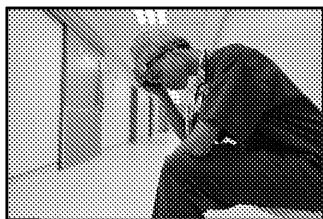
10. Complete the table below to outline how the laws and principles require care of service users in their care.

Law/Principle	How law/principle promotes the rights of
Equality Act 2010	
Data Protection Act 2018	
Duty of Candour	

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11. Read the case study below.



Katie started working for Grange Hill Hospital and she feels that her colleagues are discriminating against her. Katie feels that they make her look silly in front of the patients, which is really affecting her confidence.

a) State **two** examples of discriminatory behaviour which Katie could have experienced.

1.

2.

b) Explain how the discriminatory behaviour at Katie's workplace could affect her.

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1. Healthcare services

1. Match each health condition in the table below with the correct description. One has been done for you.

1. Coronary heart disease	A. A group of health conditions that affect the heart and joints
2. Deep vein thrombosis	B. A health condition where a blood clot forms in one of the deep veins in the leg
3. Asthma	C. Health condition of the lungs (characterised by chronic inflammation and narrowing) which causes difficulty breathing
4. Stroke	D. Chronic (long-term) condition of the lungs leading to breathlessness
5. Sensory impairment	E. A form of disability where a person has difficulty with mobility
6. Physical disability	F. Medically defined condition where a person has a general learning difficulty combined with a specific learning difficulty
7. Learning disability	G. General term covering a range of conditions including balance, taste and smell

2. Complete the following sentences about COPD, filling in the gaps.

Chronic obstructive pulmonary disease (COPD) affects the lungs so is a form of chronic disease. It is a long-term condition that it becomes worse over time. One cause of COPD is smoking.

3. Obesity is a risk factor for developing type 2 diabetes.

- Outline what is meant by obesity.
- Outline what is meant by type 2 diabetes.

4. Complete the following sentences, filling in the gaps.

mobility	memory
----------	--------

Dementia can cause progressive loss of a) _____ and independence. The mental b) _____ speed and difficulty making decisions. Physical symptoms c) _____ may develop in the later stages of dementia.

5. Outline what is meant by each of the following terms.

- Primary care services
- Secondary care services
- Tertiary care services

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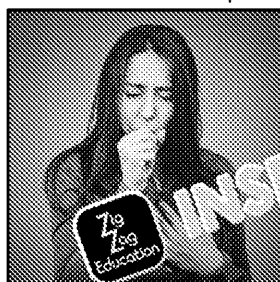
6. a) Define the term 'allied health professional'.
- b) Match each allied health professional to their role.

Physiotherapist	Supports individuals to maintain skills for
Occupational therapist	Can provide support with difficulties to
Speech and language therapist	Assesses and coun
	Treats people who and neu

- c) Give **one** more example of an allied health professional.

7. a) State what is meant by 'out of hours' care.
- b) Look at the following out of hours services and outline what each of the
- NHS 111 service
 - Accident and Emergency (A & E) department

8. Read the case study below.



Jenny has a persistent cough and is feeling breathless, having to stop for a rest when walking up the hill to her general practitioner (GP) who referred her to the hospital. Many less serious illnesses can cause a cough, but unfortunately scans confirm that Jenny has lung cancer. The consultant refers Jenny to an oncologist (a doctor who specialises in treating people who have cancer), who prescribes treatment for Jenny.

Explain how the GP, respiratory consultant and oncologist may support Jenny's treatment, and whether they are part of primary, secondary or tertiary health care.

General practitioner (GP)
Respiratory consultant
Oncologist

9. Select **one** health condition from the following list:

- Arthritis
- Asthma
- Diabetes
- Heart disease

- a) Explain how an individual with your chosen condition can self-manage their condition.
- b) Identify and briefly describe how a healthcare service can support the self-management of your chosen condition across various levels.
- Primary care
 - Secondary care
 - Tertiary care (if appropriate)

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10. Classify each of the following statements about multidisciplinary team (MDT) true or false by circling the correct answer.

- a) MDT working means two or more professions working together. **TRUE**
- b) MDT working is not as effective as one profession working alone. **TRUE**
- c) Everyone works in the same way, whatever their profession. **TRUE / FALSE**
- d) Multidisciplinary teams may include allied professions and social workers.

11. Read the case study below.



Edward was living on his own, but since he has been diagnosed with heart disease he has moved into a hospice. His illness is being supported by a multidisciplinary palliative care team.

The team includes a hospice doctor managing medication, nurses addressing physical symptoms, supporting family and friends, healthcare support workers providing essential support, a social worker assisting with practicalities, and allied health professionals including speech and language therapists, addressing specific issues. The palliative care team aims to support Edward's well-being and quality of life as he faces an incurable illness.

Discuss the **benefits** and **challenges** of multidisciplinary team working in the context of palliative care.




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2. Social care services


1. State what is meant by social care services.
2. a) State **three** reasons why a child or a young person may need social support.
b) Listed below are three types of support available to children and young people. Match each type of support with the correct definition.

 Residential care
Youth work

Tends to be for older people and young people
Support for young people with social and emotional needs
A stable family home for people who are unable to live with their family

3. Read the scenario and then list the **learning disabilities, sensory impairments and conditions** which the residents of the group home live with.

The Acorns is a group home with four adult residents who have support workers. George moved in a year ago and likes to go for walks with his guide dog. He has a pump and equipment to help him manage his diabetes. Jodie has an active social life. She is part of a theatre company for people with Down's syndrome. Shonika has been a victim of a serious riding accident and she has had depression for many years. Kieren sustains injuries that he needs help to wash and dress. The head of home also affected his hearing, speech and he finds it very difficult to read now.

 Learning disabilities	Sensory impairments

4. Describe the following different types of care which are available for individuals.
i) Domiciliary care
ii) Respite care
iii) Residential care

5. Read the case study below and answer the question.

Betty was a piano teacher for many years. When she was in her sixties, she asked her daughter to have power of attorney, so they could make decisions for her if she was unable to do so for herself, which has now happened. Betty is now 90 years old, and has dementia. Betty's domiciliary care workers have reported that Betty keeps forgetting to take her medication. Her family members work and have other commitments with them. Betty's son believes a residential home with regular musical activities would be best for her. He worries that their mother will deteriorate quickly if she leaves home. Betty sometimes walks in the street without shoes and occasionally gets lost.

Evaluate the possible advantages and disadvantages of residential care for Betty.

6. State what is meant by 'informal care'.

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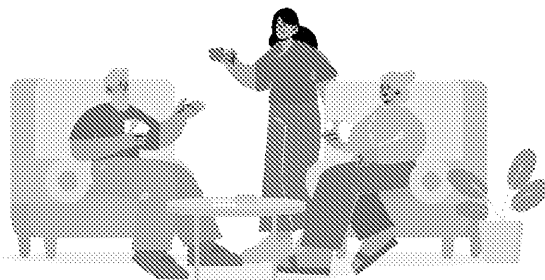
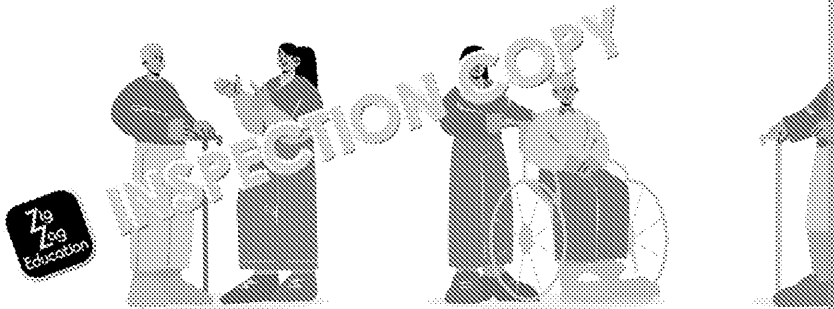


7. Read the case study below and answer the questions.



Edna is 73 years old. She lives on her own and her husband died eight years ago. She is a wheelchair user, so it makes it easier. Occasionally she goes to the shops but she has now learnt how to do an online shop. She has a family who visit during the summer but she started to feel lonely.

- Suggest **one** type of informal carer that Edna could have.
 - Describe how this informal carer could support Edna.
 - Describe **two** benefits and **two** challenges of being an informal carer.
8. Define 'voluntary care services' and give **two** examples of organisations which provide these services.
9. Discuss the role of voluntary organisations in providing services out of hours.



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3. Barriers to accessing services: Part 1

1. a) State what is meant by a barrier to accessing services.
- b) Outline what is meant by a physical barrier.
2. Identify which of the following statements is **not** true about sensory barriers.
 - a. Hearing loss can affect both adults and children.
 - b. People can use glasses to help them function if they suffer with vision problems.
 - c. A person with hearing loss can use Braille to communicate.
 - d. Hearing impairment can make the individual feel lonely and isolated.



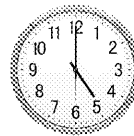
3. Read the scenario below.



Mavis is partially deaf and has gone to the chemist for her new medication for her blood pressure.

Describe **two** ways in which the pharmacist can ensure her communication.

4. The factors given below can potentially act as a barrier to accessing health services. Identify the type of barrier (**social** or **psychological**), and explain how it acts as a barrier.
 - a) *The opening hours of a diabetic clinic are 9am to 1pm.*
 - b) *A man suffering from depression is embarrassed.*
 - c) *A man who attended drugs therapy had a judgemental counsellor.*



5. The charity Rethink Mental Health reports that about one in ten people will experience voice hearing. This is hearing voices which are in the person's mind, not people talking. Look at the table below on different cultural beliefs about voice hearing and answer the questions that follow.

Cultural belief A	Cultural belief B	Cultural belief C
Voice hearing can be caused by a mental illness which needs medical treatment.	Voice hearing indicates that the person has special powers, such as having contact with people who have died.	Voice hearing indicates that the person has a bad spirit living inside them.

- a) Identify which of the cultures view voice hearing as positive and which as negative.
- b) Explain how the cultural beliefs may affect whether an individual seeks treatment for hearing voices.

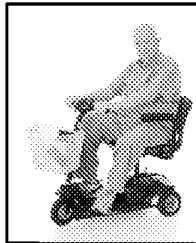


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6. Read the case study below.



Graham can walk but has difficulty with walking long distances so has limited use of his hands. His daughter has brought him outdoors as she is not always able to visit him.

Graham has a hospital appointment on the other side of town, and it will take him 25 minutes to get there.

Explain the physical barriers that Graham could encounter on his journey to the hospital, and suggest how these could be reduced.



7. Read the case study below.



Rehana is 28 years old and has been living in England for two years. She has a two-year-old son and is now pregnant with her second child. She is away from home and she doesn't have any family support. She is Muslim and has strict requirements that she must eat halal food. She has a little English and is under the care of the midwifery service. She has an appointment next week to attend her scan.

- Explain **two** cultural factors which could prevent Rehana from accessing the service.
- Describe **two** ways to overcome the cultural barriers experienced by Rehana.
- Suggest **two** ways the healthcare service provider can support Rehana to overcome language barriers she may experience.



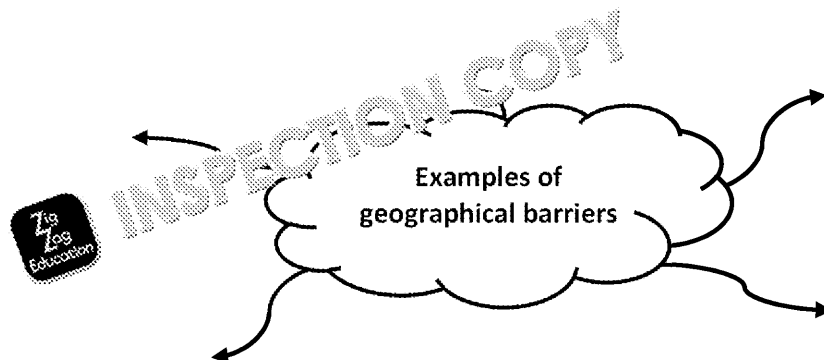
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4. Barriers to accessing services: Part 2

- There may be different reasons why someone may experience difficulties with accessing services. Copy and complete the spidergram below by stating **five** examples of potential barriers someone may experience when attending a hospital appointment.



- Learning disability can be a result of a number of different factors.

Which of the following is **not** a reason why someone may have a learning disability?

- Genetic inheritance
- Language
- Drug misuse during pregnancy
- Head injury during childhood

- Explain how having learning disabilities can form a barrier to using health services.

- Health passports and 'All About Me' documents are used to support individuals with learning disabilities to access services.

State the purpose of each document and explain how each can help support individuals with learning disabilities to access healthcare services.

- Suggest **three other** ways in which service providers can support individuals with learning disabilities to access services.

- Copy and complete the table to outline how each of the named professional roles can reduce barriers to health and social care for individuals who have learning disabilities.

	How this professional can reduce barriers to health and social care with learning disabilities
Citizens' Advice Bureau advocate	
Support worker	
Registered nurse for people with learning disabilities (RNLD)	

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4. a) Describe **one** role of quiet clinics and quiet waiting areas in helping to reduce barriers to health and social care for people with learning disabilities.
- b) Describe the benefits to people with learning disabilities of:
 - i) The Accessible Information Standard
 - ii) Easy read and pictures-only health information

5. Some individuals cannot afford to pay for prescriptions to overcome financial barriers. Complete the table below to identify four groups of people who are eligible for free prescriptions.

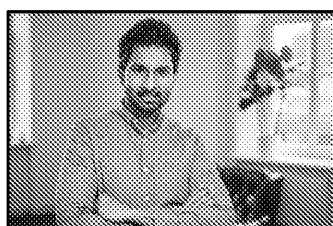
Free prescriptions		

6. a) Explain why access to NHS dental services is important in reducing financial barriers to health and social care.
 - b) Explain how charitable schemes such as community transport can help overcome barriers to attending health and social care appointments and services.
7. Read the following case studies. For each case study, describe the potential barrier to health and social care the individual could experience and suggest how it could be overcome.

Case study 1: Beryl struggles with walking and uses a rollator (a walking frame with wheels) to help her. She needs to visit her friend in a neighbouring town once a week.

Potential barrier:

Suggestion for overcoming barrier:



Case study 2: Akito is 42 years old and has recently lost his job. He is struggling financially and is now living in a temporary accommodation. He has regular eye examinations at the hospital as he has not yet been confirmed. He drives to the hospital for his appointments.

Potential barrier:

Explain how the NHS Low Income Scheme, NHS Tax Credits and NHS Health Insurance Scheme may help Akito to overcome this barrier.

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5. Skills and attributes in health and social care

- Describe the difference between a skill and an attribute.
- George, a paramedic, is called to assist Andy, who has fallen off the roof of a shed and is wedged between a wall and the shed. The paramedic has hurt his head and is unable to see.

 - Outline why George will need to use his observation skills in this situation.
 - State **two** ways that Andy could assist George by using problem-solving skills.

- Dealing with difficult situations is common in health and social care work. Select **one** situation which could be an example of a difficult situation.
 - A support worker handing out drinks at a day centre.
 - A service user having physiotherapy following a stroke.
 - A family visiting a care home resident who is close to death.
 - A nurse checking medication supplies.
 - State **four** examples of difficult situations which may arise in health and social care.
- Read the scenarios. Copy and complete the table by describing why these require the skills and attributes listed.

	Why organisation
a) A nurse manager arranging staffing for a hospital ward.	
b) A paramedic checking equipment before going out to emergency calls.	
c) A support worker deciding in which order to attend clients' homes.	

- Outline what it means for a staff member to have 'empathy' within a health and social care setting.
 - Describe **two** benefits to service users when health and social care professionals demonstrate 'empathy'.
 - Give **one** example of a staff member demonstrating 'trustworthiness' and 'honesty' in health and social care.
 - Explain the importance of 'trustworthiness' and 'honesty' in health and social care.
- If a health and social care practitioner makes a mistake, it is best for them to
 - Blame someone else for their mistake. ☐
 - Be honest about the mistake. ☐
 - Cover up the mistake. ☐
 - Practise the mistake did not happen. ☐

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7. Read the case study below.



Amara is 59 years old and recently lost her husband. She used to spend a lot of time together and regularly went to the gym. However, now Amara suffers from arthritis and can no longer do some of her daily activities. She feels lonely and is not as happy as she was with her husband as she did before. Amara comes to her home care worker and says she is feeling very depressed and hopeless, but she has no training or experience in working with people.

- Describe how care workers can effectively communicate with Amara to deal with her situation.
- Discuss how Amara's care worker could demonstrate trustworthiness and empathy when responding to Amara's disclosure that she is feeling very depressed and hopeless.

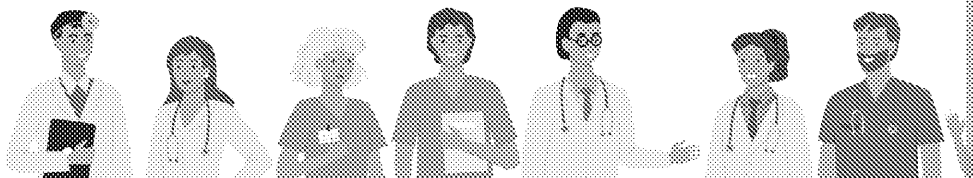
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6. Values in health and social care

1. State what is meant by 'values' in health and social care.
2. Outline what is meant by the following terms in a health and social care setting.
 - Care
 - Compassion
 - Competence
 - Communication
 - Courage
 - Commitment



3. Copy and complete the table below to outline how a care worker or a support worker can demonstrate these values in their care.

Care value	How to show care value
Care	
Compassion	
Competence	
Communication	
Courage	
Commitment	

4. Read the case study below.

Alison is a nurse on a ward for service users who are recovering from heart surgery. During a busy shift, Alison realises that she has given too high a dose of a prescribed drug to Tom, one of the service users. Alison explains what has happened to Tom, then carries out checks for signs that Tom's health may have been affected by the overdose of the drug, and reports what has happened to her nurse manager and Tom's doctor. Alison documents the error in line with hospital policy and continues to monitor Tom. Senior staff review the drug error incident and recommend that Alison attends the administration of medicines refresher training, which she agrees to do.

- a) Explain how Alison's drug dosage error may lead to senior staff questioning the administration of prescribed drugs to service users.
- b) State how Alison demonstrates each of the six Cs after realising that she made an error with Tom's drug dosage.

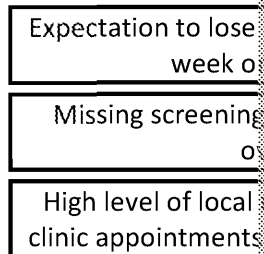
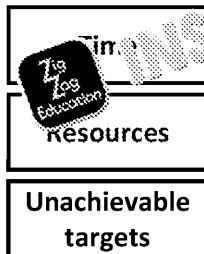
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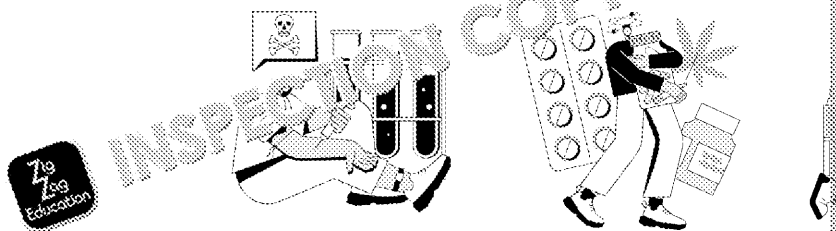


7. The obstacles individuals requiring care may

1. State what is meant by 'obstacles' in the context of receiving health and social care.
2. a) State **three** examples of emotional or psychological obstacles to accessing health and social care.
b) Listed below are three sorts of obstacle to improving health. Match each sort of obstacle to the correct example.



3. a) Describe how lack of family support can be an obstacle to a frail elderly person's health and social care needs.
 - i) Ability to attend medical appointments
 - ii) Recovery from illness or injury
- b) Describe **three** possible impacts of drug or alcohol addiction on an individual's health and social care services.



4. Read the case study below.

Henry is thirty years old and has moderate learning disabilities. He attends appointments with his GP. His mother Angela goes to appointments with him. The GP advises Henry that he has lost a lot of weight and has a persistent cough. The GP advises Henry to see a chest X-ray to try to find out why this is. Henry is afraid of hospitals and doctors.

- a) Explain the obstacles that Henry faces in following the doctor's advice and attending appointments.
- b) Explain the importance of Henry having his mother Angela's support to access health and social care services.
- c) Outline **two** strategies that could be used to support Henry if Angela is unable to support him.

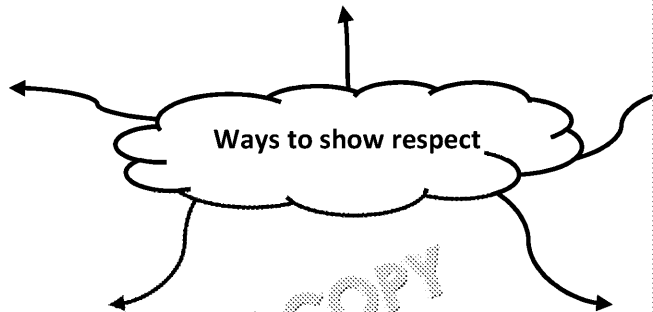


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8. Benefits to individuals of the skills, attributes and values in health

1. Give **two** ways how skills, attributes and values in health and social care practice:
 - a) Overcome personal obstacles
 - b) Receive high-quality care
2.
 - a) State what is meant by person-centred care.
 - b) Give **two** examples of ways to provide person-centred care.
3. Skills, attributes and values in health and social care help to ensure that service users are respected. Copy and complete the spidergram below by stating **five** examples of ways to show respect to service users.



4.
 - a) Outline what it means for a service user to have 'empowerment' within health and social care.
 - b) Describe what an advocate is and why an advocate is important for a service user.
 - c) Explain the importance of a service user and their family caregiver being involved in care decisions.
5. Give **two** examples of how a health and social care practitioner can demonstrate the care values (6Cs) to protect a service user from harm.

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6. Describe how skills, attributes and values in health and social care can help
- ensure service users feel comfortable in raising complaints
 - respond positively to complaints
 - learn from service users' complaints to improve care and support

7. a) Outline what it means to maintain a service user's dignity within a health

- b) State **two** examples of ways in which the dignity of service users in health

8. Copy and complete the table below by reading the scenarios and describing how individual privacy.

	How
a) A greetings card addressed to a service user has come through the post.	
b) A service user's husband has come to visit her at the care home she is staying in.	
c) A service user's file which contains their medical information has been left on the receptionist's desk.	

9. a) Sharing private information about a service user breaches confidentiality if it is necessary. Select **one** situation when private information may need to be shared.
- On social media for public records.
 - A friend of the service user is concerned.
 - The service user is at risk of harm.
 - The service user has a friend working in the health sector.

- b) Explain why violating confidentiality could have negative impacts on service users.

10. Copy and complete the table below to outline how the laws and principles relate to promote the rights of service users in their care.

Law/Principle	How law/principle promotes the rights of service users
Equality Act 2010	
Data Protection Act 2018	
Duty of Candour	

11. Read the case study below.



Katie started working for Grange Hill Hospital three years ago. She feels that her colleagues are discriminating against her because of her weight. Katie feels that the other staff make her look silly in front of the service users, affecting her confidence.

- a) State **two** examples of discriminatory behaviour which Katie could have experienced at her workplace.

- b) Explain how the discriminatory behaviour at Katie's workplace could affect her confidence.

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Answers

1. Healthcare services

1. Answer 1C is provided as an example.
1 mark for each of: 2A, 3D, 4B, 5G, 6E, 7F
2. **1 mark for each correct answer:** a) respiratory, b) progressive, c) smoking
3. **An accurate description of what each term means. Accept other suitable answers.**
 - a) **Obesity** – as defined by WHO is ‘an abnormal or excessive fat accumulation which may be a health risk between overweight and obese, as on BMI charts
 - b) **Type 2 diabetes** involves the underproduction of effective insulin, leading to (metabolic syndrome)
4. Missing words should be inserted in the correct order: a) memory, b) processing, c) perception
5. **1 mark for an accurate description of what each term means; answer may include definition. Accept other suitable answers.**
 - a) **Primary care services** refers to the first point of contact and continuing care within the healthcare system (NHS); for example, a GP can be regarded as a primary care service.
 - b) **Secondary care services** refers to specialist treatment or care which is referred to by a primary care service. An example of a secondary care service is the dermatology department.
 - c) **Tertiary care services** are providers of advanced specialist treatment or care which requires specialised knowledge and intensive health monitoring. An example is cancer care.
6.
 - a) **1 mark for an accurate definition of ‘allied health professional’.**
 - An allied health professional is a trained healthcare professional who isn't a doctor or nurse but enable individuals to manage physical or mental health.
 - b) **1 mark for each correctly identified role.**
 - **Physiotherapist** – Treats people who have problems with mobility and need help to move.
 - **Occupational therapist** – Supports individuals to develop, recover or maintain the highest possible level of independence in doing everyday activities.
 - **Speech and language therapist** – Provide support for individuals who have communication problems.
 - **Nutritionist** – Assesses and counsels individuals on nutritional eating.
 - c) **1 mark for any other example of an allied health professional (not mentioned above).**
Examples: radiographer, paramedic. *Accept other suitable examples.*
7.
 - a) **An accurate outline of out of hours care. Accept other suitable answers.**
Out of hours care involves health services offered out of usual ‘office hours’ (8am to 6pm).
 - b) **An accurate description of what each service does. Accept other suitable answers.**
 - i) **111** is an NHS phone service which operates 24 hours a day. People can report health or mental health concerns (for themselves or loved ones) not serious enough to go to hospital.
 - ii) **Accident and Emergency (A & E)** is a hospital department open 24 hours for people who are seriously ill or whose injuries cannot be treated in any other facility.
8. **2 marks for each type of care explained for Jenny. A further 1 mark for identifying a secondary or tertiary health service.**
Suggested answer:
 - **General practitioner** – primary care service (1); the initial point of contact for most health practitioners. Can refer Jenny to a pathologist for blood tests, physiotherapist, dietitian to diagnose and treat other health conditions which Jenny may have (1).
 - **Respiratory consultant** – secondary care service (1). Can arrange more specialist tests. Can refer to tertiary services such as oncology and work with them for Jenny's treatment.
 - **Oncologist** – tertiary care service (1). Can prescribe specialised cancer treatment (chemotherapy and radiotherapy). Oncologist may refer Jenny to other cancer specialists (Macmillan nurses / will liaise with the respiratory consultant (1).

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9. a) **2 marks for reasonable suggestions for self-care, for any one selected condition**
- Arthritis:
- Healthy diet and exercise as tolerated
 - Take prescribed medication
 - Rest when needed
- Asthma:
- Exercise
 - Take medication as prescribed
 - Do not smoke cigarettes or vape
- Heart disease:
- Healthy diet and exercise
 - Take prescribed medication
 - Surgery if advised
- b) **1 mark for identifying a service within each level and 1 mark for briefly describing how that service can help chosen health condition. Examples may include:**
- Primary care – GP for ongoing assessment, telephone services for repeat prescriptions
 - Secondary care – more specialised clinics and tests (e.g. cardiology for heart conditions)
 - Tertiary care – for severe/complex illness (e.g. heart transplantation)
10. a) TRUE
b) FALSE
c) FALSE
d) TRUE

11. **Max. 3 marks for benefits of multidisciplinary team working in the care of Edward**
- Students may suggest:

- The involvement of various professionals can support his holistic well-being by ensuring his physical, emotional and social needs are addressed.
- Each member of the team can bring their specialism, e.g. hospice doctor can manage his pain, nurses can provide hands-on care, and allied health professionals can support with specialist treatments.
- Through effective communication and coordination, everyone can ensure they are covering all of Edwards' needs and plan.
- The team can work together to cover all aspects of Edwards's well-being, allowing him to live through his final stages.

- Max. 3 marks for challenges of multidisciplinary team working in the care of Edward**
- Students may suggest:

- The different professions will have different training, expectations, opinions and approaches.
- There may be professional disputes, such as who will be the lead of the palliative care team.
- Professionals may not fully understand each other's roles.
- There may sometimes be misunderstandings and challenges in communication.

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2. Social care services

1. **1 mark for a correct statement of what is meant by social care services.**

For example:

Social care services are practical services which help people with day-to-day living, with an illness or a disability.

Accept other suitable answers.

2. a) **1 mark for each accurate reason why a child / young person may need social care.**

Accept other suitable reasons.

- The parent / carer of the child / young person is unwell.
- The child / young person may have behavioural/additional needs.
- The family environment may be hostile / parents of the child / young person are experiencing issues such as a divorce.

- b) **1 mark for each correctly matched definition.**

- **Foster care** – A stable family home to support children / young people with special needs.
- **Residential care** – Tends to be for older children, with trained carers and facilities.
- **Youth work** – Support for young people, helping individuals with social and emotional issues.

3. **1 mark for each correct from:**

Learning disability

- Jodie has Down's syndrome, which causes learning disability
- Kieren has developed a general learning disability due to sustaining a head injury

Sensory impairment

- George is visually impaired
- Kieren has a hearing impairment

Long-term health condition

- George has diabetes
- Shanika has depression

4. **2 marks for each correct description of each form of care. Accept other suitable answers.**

- **Daily care** – support for people with daily tasks in their own home (1), such as preparing meals (1).
- **Respite care** – this gives family caregivers a break (1) and may be provided in a residential facility (1).
- **Residential care** – provided in a care home or group care housing (1), this is often for people who need to ensure people with complex healthcare needs have their needs met (1).

5. **1 mark for each reasonable suggestion of advantages and disadvantages of residential care.**

Examples include:

Advantages (sub-max 3 marks):

- Support with daily activities, such as taking medication correctly
- Reduces risk of walking in street without shoes or getting lost
- Betty could benefit mentally from music events
- Betty would be less isolated with staff and other residents always available

Accept other suitable answers

Disadvantages (sub-max 3 marks):

- Upheaval of leaving own home may affect Betty's physical and/or mental health
- Standard of care at the home is unknown
- Cost/expense of residential care

Accept other suitable answers.

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6. **1 mark for a correct statement of what is meant by informal care. Accept other suitable answers.**
Unpaid care given by a family member, friend, neighbour or partner to a person who has health or social care needs.

7. a) Friend (1) or neighbour (1)

b) **1 mark for how the informal carer identified in part a) can help Edna, either physically or psychologically. A further 1 mark for expanding the point. Any one from (for 2 marks).**

- A neighbour can visit Edna throughout the day. By talking to her she may not go out or see friends as often as she did when her husband was alive, so she is feeling depressed. By talking to her neighbour she can boost her self-esteem as she is left out of the community (1).
- A friend can visit Edna and help to take her to hospital appointments. As Edna is a widow, she may need moral support (1). Having a good friend to talk to about any problems she may be experiencing and ask for help (1).

c) **Max. 2 marks for benefits of being an informal carer. Accept other suitable answers.**
Students may suggest:

- The right thing to do, a sense of duty towards a loved one
- Deepens the relationship and strengthens the bond between caregiver and loved one
- Sense of purpose and fulfilment in providing care to a loved one; it can be rewarding
- Improved priorities can lead to a deeper sense of purpose
- Learning skills, such as communication, problem-solving and time management, which are valuable in other aspects of life
- Pride and sense of accomplishment in providing a service to a loved one
- Helps to reduce the financial burden and saves costs associated with professional care

Max. 2 marks for challenges of being an informal carer. Accept other suitable answers.
Students may suggest:

- Caring can lead to physical and emotional strain, such as stress, fatigue and exhaustion
- Carer may lose income if they reduce their working hours or leave employment
- The responsibility; heavy burden, limit of freedom, particularly if an informal carer is a sole carer
- Sleep deprivation, etc. can be very stressful and may lead to burnout

8. **1 mark for each defining 'voluntary care services' and 1 mark for each example. Accept other suitable answers.**
Reasonable definition and examples.

- **Voluntary care services** include health and social care that is often free or provided by voluntary sector organisations such as charities and faith groups.
- **Examples (any two from):**
 - Rethink Mental Illness
 - Samaritans
 - Meals on Wheels
 - Macmillan Cancer Support
 - Age UK

Accept other suitable examples. Could include community groups and faith-based groups.

9. **Role of voluntary care services in providing services out of hours. Up to 4 marks can be awarded for discussion points from the resource and from students' research, such as:**

- Voluntary care organisations may plug gaps in services provided by the government and council (social care services).
- As organisations such as charities and faith groups rely on volunteers, they can provide services out of hours.
- Volunteer-reliant services may have a high turnover of volunteers, and staff turnover. This could impact on the quality of care.
- Voluntary care organisations can often give specialist support in their area of expertise.
- Students may give an example, e.g. Parkinson's UK can give detailed support and advice on Parkinson's disease.

Accept any other suitable answer.

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3. Barriers to accessing services: Part 1

1. a) **1 mark for a reasonable definition of a barrier to accessing services, such as:**
 - A barrier is a factor unique to the health and social care system that make person to access health or social care services.
- b) **1 mark for an accurate definition of a physical barrier. For example:**
 - A physical barrier is an obstacle which prevents people with physical difficulty to the services they need / are entitled to.
2. c) A person with long sight can use Braille to communicate.
3. **1 mark for a brief statement of how the pharmacist can communicate to Mavis, and 1 point. Any two from:**
 - The pharmacist should not cover her mouth or turn away her face when talking to help Mavis to lip-read if she can't hear every word the pharmacist is saying (1)
 - The pharmacist should try to move Mavis to a place which is a quiet – a small room with good light (1). Background noise or crowding may make it more difficult for additional hearing problems (1).
 - Use gestures where possible (1) – this can aid Mavis in understanding some sentences
 - Avoid use of jargon (1), which Mavis will not understand (1).
4. **1 mark for identifying the type of barrier, and a further 1 mark for explaining how this is an individual from accessing a health and social care service. Suggested answer:**
 - a) **Social** (1) – Many people may be unable to attend the diabetic clinic due to work being challenging for those who can't take time off during the specified hours (1).
 - b) **Social** (1) – The man suffering from depression may feel embarrassed and fearful, potentially leading to social stigma and discrimination, which could deter him from attending (1).
 - c) **Psychological** (1) – The negative experience with a judgmental counsellor during a previous session could create a psychological barrier, leading the individual to avoid further sessions to avoid the expectation that a similar experience will be similar (1).
5. a) **2 marks for identifying which of these cultures view voice hearing as positive:**
 - People from cultures A and C are likely to think and feel negatively about hearing voices
 - People from cultures B and D are likely to think and feel more positively about hearing voices
- b) **2 marks for identifying the impact of these cultural views on seeking medical help. Any two from:**
 - People from Culture A are most likely to seek medical advice as they believe that medical help can 'fix'.
 - Individuals from Culture C may also seek help, but students may suggest that they see a medical doctor but from a high-status person in their own community, such as a religious leader.
 - People from cultures B and D are least likely to see voice hearing as a problem and therefore are unlikely to seek medical help.

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6. Award marks based on which band the answer fits into most appropriately.

Assessment focus	Band 0	Band 1	Band 2	Band 3
Overcoming access difficulties	0 No rewardable content.	1–2 A few barriers are identified and outlined, but this has limited links to the scenario. No suggestions on how these could be minimised.	3–4 A basic explanation of the barriers is given with some links to the scenario. Basic suggestions are given for how barriers could be minimised.	5–6 A clear analysis of barriers encountered links to both parts of the scenario. Suggestions are given for how barriers could be minimised.

Note: This levelled mark scheme has been developed for the purpose of this resource of mark schemes used in the Component 3 exams and the assessment criteria for Component 3.

Potential barriers (physical):

- Bad weather, e.g. heavy rain or strong winds
- Battery/wheelchair might not be charged fully
- Overcrowding – too many people at the hospital
- Obstruction on the street, e.g. dustbins – route becomes difficult to navigate
- Taxi would need to be booked
- Lifts may not work
- Entrances/corridors may be narrow

Potential ways barriers could be overcome/reduced:

- Plan route carefully to avoid any roadworks
- Regularly maintain mobility equipment – make sure battery is fully charged
- Contact service beforehand – confirm lifts are working and they have suitable access (e.g. wide doors and ramps)

7. a) **1 mark for identifying the type of cultural barrier and a further 1 mark for an answer that relates to the case study.**

Any two from:

- Possibility of having a scan – a male radiographer/obstetrician may not be comfortable being examined by males as it goes against their religion (1);
- Risk of complications – as she is pregnant, she may be prescribed by the midwife vitamins which may be derived from animal tissue, which may go against her religion (1);
- She may feel embarrassed or worried (1) because she is assessed on her own and has to ask any questions which she has (1).

b) **1 mark for any two ways to overcome cultural barriers experienced by Rehana in the case study.**

Any two reasonable suggestions, such as:

- **Healthcare staff training in cultural awareness**, so staff are more likely to understand her barriers and help her to overcome them.
- **Offer female staff**, particularly for examinations.
- **Provide information on vitamins or medications** which may be advised so she can make an informed decision on whether or not to take them.

c) **Answer can give suitable suggestions to overcome the barriers which may have been experienced by Rehana. 1 mark for a suggestion, and a further 1 mark for elaboration. Any two from:**

- Rehana can be given a fact sheet translated into her native language (1) or a verbal explanation of information or advice; she can take this with her so she can understand it.
- Before the appointment, the service provider can find out what her needs are so that when she attends there is a translator (1) physically present or on the phone to help with the conversation and forth. This can be helpful for Rehana if she has someone to help her communicate through the translator (1).
- Training on awareness of and supporting individuals whose first language is not English (1) with effective communication strategies such as using visual aids or interpreters to ensure quality care (1).
- Offer longer appointments (1) – this allows sufficient time for communication.
- Use of advocates to help ensure Rehana can access the care she needs (1).

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4. Barriers to accessing services: Part 2

1. **Any five answers which show reasons for geographical barriers. 1 mark for each correct answer.**
- Can be expensive – cost of public transport, fuel for car, car parking charges
 - If walking, the pathway may have obstructions or be unsafe
 - Can be tiring for the service user, especially if there are multiple appointments
 - Specialist services may not be close / may be a considerable distance away
 - Public transport not always reliable – timing of services may not be exact, which may be a problem
 - Poor transport links for those living in rural areas
 - Those with mobility issues may struggle if they need to walk, e.g. from a bus stop
- Accept other suitable answers.

2. a) **1 mark for a brief outline about how someone with a learning disability may have health and social care services, and 1 mark for elaboration. Suggested answer:**
- A person with an intellectual disability may struggle to communicate with healthcare professionals. They may struggle to understand information and, therefore, won't be able to access services.

- c) **1 mark for outlining the purpose of each document, and a further 2 marks for support an individual with learning disabilities access healthcare services.**

- Health passports contain key information that can improve communication between caregivers and healthcare professionals, ensuring the service user gets the best possible care.
- All About Me documents are personalised profiles that give individuals' personal information, challenges and contain information beyond the medical aspects to allow healthcare professionals to provide holistic care.

Any 2 marks for how they help remove barriers:

- Improve communication by offering insights into preferences, communication needs and challenges
- Encourage person-centred care, allowing healthcare professionals to tailor services to the individual
- Reduce misunderstandings, ensuring healthcare providers make informed decisions
- Improves trust and comfort of the service user

- d) **Any three from:**

- Avoid jargon; keep sentences simple
- Provide large, easy-to-read leaflets
- Use visual aids, communication cards or gestures where possible
- Avoid noisy areas; quiet clinics; quiet waiting areas
- Be prepared for delayed responses; give the individual time to answer; have a waiting list
- Involve carer/advocate if possible, but focus should remain on the service user
- Provide learning disability nurses (LDNs) or support workers who are familiar with the individual

Accept other suitable answers. Do not accept health passports or All About Me documents.

3. **Any three answers which demonstrate understanding of the three sources of help. 1 mark for each bullet point.**

- Citizens' Advice Bureau advocate – can help speak up on a specific issue, such as a complaint
- Support worker – can help understand hospital letters, accompany the individual to appointments, simplify information, and give emotional support.
- Registered learning disability nurse – can liaise between the individual, service and healthcare professionals, particularly when complex care and support is needed.

Accept other suitable answers.

4. a) **Any one from:**

- Quiet clinics away from busy areas; use trained professionals and visual aids (1) can help improve communication and understanding (1).
- Quiet waiting areas with dim lighting, soundproofing and minimal sensory stimulation (1) reducing sensory overload and anxiety (1).

Accept other suitable answers.

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b) **2 marks for each accurate answer.**

- i) The Accessible Information Standard mandates that health and social care information in formats accessible to individuals with learning disabilities such as impaired vision (1). This ensures that communication is tailored to inclusivity and promoting better understanding among individuals with learning disabilities (1).
- ii) Both easy read and pictures-only health information formats offer simplified, uncluttered format, designed to be accessible to individuals with learning disabilities (1). This approach not only enhances understanding but also supports independence and reduces potential barriers to accessing crucial health information (1). *Accept other suitable answers.*

5. **1 mark for each accurate answer of the groups of people who can receive free prescriptions. Any four:**

- People over the age of 60
- People under 16 years of age
- People aged 16–18 who are in full-time education
- Pregnant women
- A woman who has had a baby in the last 12 months (with maternal exemption)
- Someone who has a specific medical condition, e.g. cancer, diabetes, epilepsy (with medical exemption certificate)
- A person with a physical disability that prevents them from going out without a wheelchair (with medical exemption certificate)
- An individual who may have a low income / An individual who is receiving benefits or who is under the age of 20 and is the dependant of an individual receiving benefits
- An NHS inpatient

6. a) **1 mark for up to three reasonable suggestions on why access to NHS dental services is a financial barrier to dental treatment. Students may answer:**

- NHS treatment is cheaper than private dental treatment (1)
- NHS treatment fees are standardised (1)
- NHS treatment bands 1-3 are set so that cost of treatment is clear, which helps patients make informed choices (1)
- Students may note that a reduction in the number of dental practices offering NHS treatment has led to reports of long waiting times for some families has led to reports of people seeking private treatment, such as pulling out their own teeth (1).

b) **1 mark for up to three reasonable suggestions on how charitable schemes can help to reduce financial barriers to accessing health and social services. Examples include:**

- Community transport schemes offer no-cost or low-cost transport for eligible individuals (1)
- The transport is often door to door with no additional travel costs incurred (1)
- There is often a volunteer to help individuals on and off the transport (1)
- The transport can be booked in advance (1)

7. **2 marks for a description of a potential barrier, and 3 marks for an explanation of the identified barrier. Accept other potential barriers and reasonable suggestions.**
Case study 1 (for example):

Potential barrier: Geographical (1) – as Beryl wants to travel regularly to the next town (1).
Suggestion for overcoming barrier: options include allowing plenty of time for the journey (1), such as the bus, know the timetable but be ready for delays/ know where seating is (1), request a black cab style rather than a car for more room to get in and out and carry shopping (1). It would be if a relative or friend could give her a lift (1). Beryl could use a community transport scheme (1).

Case study 2 (for example):

Potential barrier: As Akito is struggling financially he may not attend his appointments (1). It may also mean that he cannot afford the service which he can't afford; for example, he may not be able to afford the cost of travel (1).

Suggestion for overcoming barrier: The NHS Healthcare Travel Costs Scheme may help with parking (1), enabling him to attend his regular hospital appointments (1). If Akito is eligible, he will be entitled to NHS-funded eye care (1). As he is over 40 and has a family history of eye problems, he may be eligible for NHS-funded eye care. This reduces but does not eliminate some charges, so Akito may still need to pay for some costs (1). NHS Low Income Scheme (1), and the cost of new spectacles can be reduced by using a voucher (1).

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5. Skills and attributes in health and social care

1. **Learners may choose to answer by stating what is meant by skills (1 mark) and at correctly describing the difference between a skill and an attribute (2 marks).**

- Skill – a learnt and practised ability that enables us to carry out tasks and processes.
 - Attribute – an inherent quality or characteristic that a person possesses.
- Accept other suitable definitions.

2. a) **1 mark for up to two reasonable examples of why observation skills are needed by a paramedic.**

- To assess and monitor Andy's medical condition (1)
- To assess for a potential wedge between the shed and the wall (1)

Accept other suitable answers.

- b) **1 mark for up to two appropriate examples of why problem-solving skills are needed by a paramedic.**

- How to provide Andy with the immediate care he needs (such as pain relief) (1)
- How to safely move Andy to the ambulance (1)

Accept other suitable answers.

3. a) c. A family visiting a care home resident who is close to death.

- b) **1 mark for each reasonable example of difficult situations which may arise in a care home, such as:**

- Dealing with physical illness and injuries
- Dealing with distressed individuals
- Potential harm from infection, aggressive individuals
- Stress of low staffing, high responsibility
- Unsocial hours and difficult working conditions

Accept other suitable examples.

4. **1 mark for a description stating how organisational skills are needed. For example:**

Scenario	Why organisational skills are needed
a) A nurse manager arranging staffing for a hospital ward.	Nurse manager needs to consider the number of staff which staff are available for each shift. (1)
b) A paramedic organising equipment for use in emergencies.	Paramedic will need to know what equipment is available and where to put them, so they are easily accessible. (1)
c) A domiciliary care worker deciding in which order to attend clients' homes.	Domiciliary care worker will need to prioritise the urgency of each of the visits, the most efficient way of travelling there and whether they are doing multiple visits may require two care workers). (1)

Accept other suitable descriptions of why organisational skills are needed for each scenario.

5. a) **1 mark for any reasonable definition. For example:**

- Empathy within a health and social care service means being able to put yourself in someone else's shoes' and imagine how they might feel.

- b) **2 marks for each benefit of staff showing patience with service users. Any two benefits.**

- When healthcare professionals take the time to actively listen (1) it helps service users feel heard and understood.
- Helps service user feel respected (1), as it acknowledges the importance of their experiences, fostering a sense of respect and dignity.
- Creates an environment where service users feel comfortable sharing their concerns and needs to a comprehensive understanding of their needs (1), allowing them to feel more confident in the care they receive.
- Creates a calm and relaxed atmosphere (1), reducing stress and anxiety for service users during interactions with healthcare providers (1).
- Facilitates building trust between the service user and professional (1), which is essential for a positive relationship (1).
- Facilitates more effective and meaningful communication (1), promoting better collaboration (1).

Accept other suitable answers.

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c) **1 mark for any suitable example of a staff member demonstrating trustworthiness**

Trustworthiness (any one from):

- Trusted to keep confidential information private.
 - Seeking feedback and actively addressing concerns or issues raised by patients.
- Accept any other suitable examples.

Honesty (any one from):

- Admitting mistakes or errors promptly and transparently.
 - Providing accurate and truthful information about prognosis and expected outcomes.
 - Being honest about the limitations of medical knowledge or the uncertainty of certain treatments.
- Accept any other suitable examples.

d) **Any 2 marks for explanation of the importance of both attributes in healthcare**

- Trust is the foundation for building relationships and rapport with service users.
 - Trust, open communication helps service users make informed decisions.
 - Trust and honesty build confidence in the healthcare system.
 - Trust and honesty ensure patients are kept safe.
 - Trust and honesty are important for upholding ethical standards.
- Accept any other suitable examples.

6. b. Be honest about their mistake.

7. a) **Description of how to show empathy and patience. Answer could explain four (1 mark per point) or fewer points in more detail. For example:**

- Take time to listen to Amara – learners may suggest appropriate body language.
- Voice sympathy – for example, if Amara expresses physical pain due to her condition.
- Give Amara enough time to complete tasks as her mobility and dexterity may be affected.
- Provide time and encouragement for Amara to remain as independent as possible.

b) **Award marks based on which band the answer fits most appropriately.**

Assessment focus	Band 0	Band 1	Band 2
Overcoming access barriers	Very low awardable content.	1–2 A superficial account of the ways healthcare professionals can demonstrate the attributes, with few appropriate links to the scenario.	3–4 A partially detailed account of the ways healthcare professionals can demonstrate the attributes, with somewhat appropriate links to the scenario.

Note: This levelled mark scheme has been developed for the purpose of this resource. It is not intended to be used in place of the mark schemes used in the Component 3 exams and the assessment criteria for the exams.

Possible answers:

- Acknowledge Amara's disclosure of depression and how difficult this may be for her.
 - Communicate in a way that helps her to feel believed in and respected.
 - Explain the information is confidential unless there is an immediate risk.
 - Be honest with her about care workers' own lack of expertise in this area.
 - Explain that it would be best to seek advice from more senior staff.
 - Ask Amara how she would like to be supported (giving Amara the control).
 - Suggest support available to her, such as talking to the GP.
 - Communicate in a way that helps Amara feel valued and not a burden.
 - Record and report in line with workplace policies and procedures.
- Accept other suitable examples.

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6. Values in health and social care

1. **1 mark for a reasonable statement of what is meant by 'values' in health and social care.**
 - Values are principles to stand by, or a moral code.
2. **1 mark for each outline.**
 - Care – supporting the individual with their needs, enabling them to be as independent as possible.
 - Compassion – intelligent 'kindness'; how care is given based on empathy, respect and understanding.
 - Competence – having the knowledge, understanding, skill and authority to carry out a task.
 - Communication – giving information and receiving it from others through spoken or written words.
 - Courage – showing the bravery to do the right thing even though there may be opposition.
 - Commitment – a strong belief in the importance of care which drives health and social care workers to provide good-quality services.

Accept other suitable answers.

3. **1 mark for each appropriate way in which the care worker can show the care values.**

Care values	How to show care value (Award 1 mark for each)
Care	<ul style="list-style-type: none"> The care worker should provide individualised care which meets the needs of the service user (1). Care should be consistent and followed through (1).
Compassion	<ul style="list-style-type: none"> The care worker should show empathy towards their service users, showing sensitivity (1). Providing individuals with respect and dignity (1).
Competence	<ul style="list-style-type: none"> Safeguarding and protecting service users from any harm (1). Having skills and knowledge about the role (1).
Communication	<ul style="list-style-type: none"> Providing service users with clear information about the care they are receiving (1). Communicating with other members of staff / the care team to ensure the best care for the service user (1).
Courage	<ul style="list-style-type: none"> Protecting the individual by speaking up for them when someone is in danger (1). Willingly embracing new opportunities which can help develop the service (1).
Commitment	<ul style="list-style-type: none"> Having the service user's best interest at heart and carrying out their duties to the best of their ability (1). Support the vision of the care service and take on challenges (1).

Accept other suitable answers.

4. a) **1 mark for each reasonable point, up to 2 marks:**
 - Senior staff may question her competence because maintaining focus, even in a busy environment, is a crucial aspect of safe administration of drugs.
 - The oversight in checking dosage instructions suggests a lapse in observation, prompting questions about her competence.
 - The serious nature of a drug dosage error highlights concerns about patient safety, leading to doubts about Alison's competence.

Accept any other suitable answers

- b) **1 mark for each:**
 - Care – by checking for signs that the overdose may have caused Tom harm.
 - Compassion – by admitting her error to the service user.
 - Competence – by following the correct procedure following a medication error.
 - Communication – verbally and in writing by reporting the incident.
 - Courage – by admitting her mistake.
 - Commitment – by agreeing to attend safe administration of medication.

Accept other suitable answers.

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7. The obstacles individuals requiring care may

1. **1 mark for a reasonable statement of what is meant by 'obstacles' in health and social care.**
 - An obstacle is something personal to an individual that blocks a person moving forward, preventing or making it difficult.

Accept other suitable answers.
2. a) **1 mark for any three examples of emotional/psychological obstacles.**
 - Low mood/motivation
 - Low self-esteem
 - Anxiety
 - Stress
 - Lack of understanding about health needs
 - Specific fears such as needle phobia
 - Severe mental health issues such as agoraphobia
 - Concerns about safety of proposed medication/treatment such as vaccination

Accept other suitable examples.
- b) **1 mark for each correctly matched example of the obstacle:**
 - Time – missing screening appointments due to feeling overscheduled.
 - Resources – high level of local need, such as for child asthma clinic appointments, due to air pollution.
 - Unachievable targets – expectation to lose a large amount of weight even though it is not healthy.
3. a) **2 marks for each description. Accept any other suitable answers.**
 - i) Any one from:
 - Lack of family support may hinder the elderly person's ability to arrange medical appointments (1). Frail elderly individuals may face mobility issues and lack family assistance they rely on to reach healthcare facilities (1).
 - Family member support provides emotional and cognitive support, helps understand and follow medical instructions (1). The absence of this support can lead to confusion and misunderstandings, affecting the elderly person's ability to attend medical appointments (1).
 - ii) Any one from:
 - Frail elderly individuals may require assistance with daily activities due to physical limitations. Lack of family support means there may be challenges in getting help with meal preparation, medication management, and personal care, hindering their overall health and well-being (1).
 - Family support contributes to a social network that can positively impact an elderly person's health. The absence of family involvement may result in social isolation, negatively affecting the person's mental and emotional health, which is crucial for overall recovery (1).
- b) **2 marks for each described impact (can be negative or positive). Any three from the list.**
 - Addiction can lead to denial, stigma or shame (1), which can prevent individuals from acknowledging their problem and seeking help (1).
 - Fear of judgement, legal consequences of loss of employment (1) could deter individuals from seeking treatment (1).
 - Addiction can cause erratic behaviour (1), which may lead to missed appointments (1).
 - Addiction to drugs and alcohol can impair cognition, memory and communication skills. An individual may struggle to articulate their symptoms or treatment preferences (1).
 - Drug and alcohol addiction can be linked with physical and mental health issues, leading to decreased engagement with healthcare, due to hospitalisations (1).
 - Addiction can lead to social isolation, strained relationships and diminished support. Individuals may lack necessary support and encouragement to seek help (1).

Accept other suitable answers.

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4. a) **1 mark for each valid point (up to 4 marks) about the obstacles Henry faces in improving his health.**

- Henry's phobia of hospitals and needles poses a significant obstacle (1). The reluctance to undergo necessary tests, hindering the diagnostic process (1).
- Moderate learning disabilities may contribute to communication challenges. Understanding instructions and the importance of tests may be difficult for Henry, affecting his healthcare (1).
- Henry may face obstacles in making independent healthcare decisions due to relying on others, such as his mother, or decision-making may impact his health (1).
- Advocating for oneself in a healthcare setting requires certain skills (1). Henry's limited ability to do so effectively for his health needs during medical consultations poses an obstacle (1).

Accept other suitable answers.

b) **1 mark for each valid point (up to 6 marks) about the importance of Henry's mother, Angela.**

- Angela's presence provides emotional comfort to Henry, alleviating anxiety (1). Emotional support supports Henry's mental well-being, making him more receptive to healthcare (1).
- Angela can assist in facilitating effective communication between Henry and healthcare professionals. Her understanding of Henry's needs and learning disabilities can support the interpretation of information (1).
- Angela plays a vital role in advocating for Henry's health needs and supporting his involvement. Her advocacy helps address challenges related to Henry's limited advocacy skills, ensuring that Henry receives appropriate care (1).
- Angela's ability to arrange medical appointments and provide transportation overcomes practical obstacles, ensuring that Henry can attend appointments (1).

Accept other suitable answers.

c) **1 mark for each strategy outlined. Any two from:**

- Other relatives may be able to help with practical tasks such as arranging appointments, providing transportation, or supporting Henry to understand and cope with the situation (1).
- The services of an advocate or a learning disability support worker can help Henry navigate the healthcare system (1).
- Using visual aids, such as diagrams or simplified communication materials, can help Henry understand instructions and overcome challenges (1).
- Gradually introducing Henry to hospitals and medical procedures can help him become more comfortable (1).

Accept other suitable examples.

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8. Benefits to individuals of the skills, attributes and values in health and social care

1. **2 marks for outlining how skills, attributes and values in health and social care can benefit service users:**
 - a) **Overcome personal obstacles (any two from):**
 - Professionals with strong problem-solving skills can collaboratively work with service users to overcome personal obstacles and develop effective strategies for resolution.
 - The skill of observation allows healthcare professionals to keenly notice changes in service users' behaviours or conditions, aiding in identification and addressing personal obstacles.
 - The skill of handling difficult situations, combined with attributes of empathy, allows healthcare professionals to provide the necessary support and understanding during challenging situations.
 - Patience allows healthcare professionals to provide the necessary time and support to overcome personal obstacles, promoting a more positive and comfortable experience for service users.

Accept any other suitable answers covering skills, attributes or care values.
 - b) **Receive high-quality care (any two from):**
 - Professionals with strong problem-solving skills ensure that service users receive effective care by effectively addressing complex healthcare issues and tailoring solutions to individual needs.
 - Organisational skills contribute to efficient care coordination, ensuring that service users' needs are addressed promptly, leading to high-quality and well-managed care.
 - Empathising with service users' emotions allows tailored care plans that address their emotional needs.
 - Competent care providers possess skills, knowledge and expertise to deliver high-quality care.

Accept any other suitable answers covering skills, attributes or care values.
2. **1 mark for an accurate statement of what is meant by person-centred care.**
 - a) **1 mark for an accurate statement of what is meant by person-centred care.**
 - Holistic care approach that prioritises the service user's needs, preferences and values (including their medical condition) to tailor care to unique characteristics of the individual.
 - b) **Any two examples from:**
 - Identifying the person's needs, preferences and values.
 - Involving service users in care planning.
 - Offering flexible scheduling and appointments.
 - Actively listening to service users' concerns and preferences without judgement.
 - Respecting service users' cultural, religious and spiritual beliefs in care delivery.

Accept any other suitable examples.
3. **1 mark for five examples of ways to show respect to service users.**
 - Use preferred name and pronoun
 - Give care in line with cultural practices / value cultural diversity
 - Enable religious beliefs to be followed
 - Use inclusive language
 - Provide choices, and abide by them
 - Active listening
 - Maintain privacy / respect dignity
 - Seek consent

Accept other suitable examples.
4. **1 mark for an accurate outline of the meaning of 'empowerment' in health and social care:**
 - a) **1 mark for an accurate outline of the meaning of 'empowerment' in health and social care:**
 - Encouraging an individual to have the confidence and ability to take their own decisions.
 - b) **1 mark for describing what an advocate is and 1 mark for describing why an advocate is important to a service user.**
 - An advocate is a person who communicates a service user's wishes and needs to healthcare professionals. It would be difficult for the person to do so themselves.
 - An advocate is important to a service user as they help to empower them and ensure their voice is heard. Without an advocate, a service user would be unlikely to be able to access the specific care and support they need.

Accept other suitable examples.

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c) **1 mark for each valid point on the importance of the service user and their care decisions, up to 4 marks.**

- Allows for person-centred care, ensuring that the care plan is tailored to them and preferences.
- Empowers the service user to make informed choices about their care, dignity, independence, and allows them to make their own decisions.
- Ensures that care decisions align with the individual's values and lifestyle.
- Promotes a more 'joined-up' and coordinated approach, preventing gaps.
- The family caregiver knows the individual's history.
- The family caregiver often has valuable info about medical history and the individual's needs.
- The family caregiver sees the 'bigger picture' and can help health and social care by informing them of the involvement of other professionals and services.

Accept any other suitable answers.

5. **1 mark each. Any two examples of how using one of the 6Cs can enable a practitioner to prevent harm. Examples include:**

- **Care** – by caring, the practitioner is more likely to become aware of potential abuse.
- **Compassion** – a compassionate practitioner will listen carefully and enable the service user to express their concerns.
- **Competence** – a competent practitioner will know, notice and act on any signs of abuse.
- **Commitment** – commitment to high-quality services will ensure abuse is prevented.
- **Courage** – a practitioner needs to be courageous to speak up and act if they see signs of abuse.
- **Communication** – skilful communication can help to protect service users, as it can identify abuse which may be occurring and helps practitioners to report, record and act on it.

Accept other suitable answers.

6. **1 mark for each valid point (up to 6 marks):**

- **Dealing with difficult situations** is a skill which helps health and social care staff to manage complaints.
- The attributes of **empathy and patience** will help staff to 'take complaints seriously' and make service users feel respected and heard.
- Having the values of **care and compassion** will enable staff to see the service user's point of view and understand why they are making a complaint.
- The value of **competence** requires professionals to be open to ways of acknowledging mistakes and short and be keen to improve their practice.
- **Communication** skills help professionals deal with complaints.
- It takes **courage** to admit to failings.
- It takes **commitment** to make improvements to ways of working.

Accept any other suitable answers.

7. a) **1 mark for an accurate outline of what it means to maintain a service user's dignity.**

- Treating an individual as important and worthy of respect. (1)

Accept any other suitable answers.

b) **1 mark each for two valid examples, such as:**

- Ensuring privacy when using a commode by using a curtain.
- Ensuring confidentiality by discussing sensitive information in a private room.
- Using respectful language and not dismissing their opinions.
- Providing for all basic care needs in domiciliary care rather than rushing on to the next task.

Accept any other suitable answers.

8. **1 mark per section for a reasonable suggestion of how to protect privacy. Examples include:**

How to respect privacy (A)	
a) A greetings card addressed to a service user has come through the post.	Do not open the envelope and do not tell the service user asks you to do this for them.
b) A service user's husband has come to visit her in the care home she is staying in.	Offer a private space (such as the bathroom) for the husband to enter, for example to offer drinks.
c) A service user's file which contains their medical information has been left on the receptionist's desk.	Return the file to the secure storage or report the breach with the appropriate person.

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9. a) **1 mark for ticking correct answer:** c. The service user is at risk of harm.
 b) **1 mark (up to 2 marks) for each correct point about possible negative effects confidential information is wrongly shared. For example:**
- The information could cause embarrassment.
 - Potential exploitation if the information were to end up in the wrong hands.
 - It could breach trust between the service user and the service provider.
 - It could cause stigmatisation and discrimination if details of medical conditions are shared.
 - It may make the service user feel vulnerable, which could lead to stress and anxiety.
- Accept other suitable answers.

10. **1 mark (up to 3 marks) for each correct answer about how the laws and principles protect the rights of service users. For example:** Accept other suitable answers.

Law/principle	How law/principle promotes rights
Equality Act 2010	Protects service users from discrimination. (1)
Data Protection Act 2018	Protects right of confidentiality as it covers the safe storage and use of users' information. (1)
Duty of Candour	Requires health and social care services to be honest and to improve practices.

11. a) **1 mark for each example of discriminatory behaviour. Any two from:**
- Katie may not be given the correct information or colleagues could withhold information.
 - Colleagues could ignore her, especially during lunchtime / break times.
 - Colleagues could make negative comments about Katie.
- Accept other suitable examples.
- b) **1 mark for identifying the impact of discriminatory practice, and 1 mark for justifying the impact. Any two from:**
- Katie could feel isolated at work (1) which could lead to her feeling upset and stressed (1).
 - It could have a physical effect on her health, such as digestive problems, or mental health conditions such as heart problems (1). This could lead to long-term issues affecting aspects of her life (1).
 - Studies have shown that workplace bullying can lead to heavy alcohol use (1), which can affect concentration and decision-making at work (1).
 - Discriminatory behaviour may lead to loss of self-control (1), and Katie could experience further health issues (1).
- Accept other suitable examples.

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