

3625-30 Level 3 Advanced Technical Diploma in Health and Care June 2018

Qı	uestion	Acceptable answer(s)	Guidance	Max marks
1	Identify three key developments in the history of the welfare state.	One mark for each answer up to a maximum of three marks. The Poor Law Liberal reforms The Beveridge Report The NHS and Community Care Act The Care Act The Care Act The Children and Family's Act		3
2	Explain one impact of an ageing population on health and care provision.	Maximum one mark for identifying one impact and additional one mark for relevant explanation. • More individuals are likely to be suffering from debilitating/long-term conditions (1) leading to a greater demand in health and care service provision (1) longer waiting times (1) • Funding long term care is a problem as more individuals require support (1) stretching resources (1) • Increase in the specific complex needs of older people (1) therefore the service provision will need to change to meet the needs		2

3	Identify four possible effects of discrimination	 More people require care and support at home (1) therefore there will be an increase of local provision to support care in the community (1) Increase in co-morbidities (1) therefore individuals are likely to need multiple care service provision (1) Medical staff must make decisions on the likelihood of treatment improving quality of life (1) Any other appropriate response. One mark awarded for any of the following up to a maximum of four marks. 	4
	faced by travelling communities.	 disempowerment disenfranchisement lack of access to services limited life chances marginalisation/isolation. 	
4	Tammy works as a health care assistant on a busy ward in a large hospital. She is keen to develop her knowledge of different cultures. Explain why being 'culturally competent' can improve Tammy's care practice.	Maximum one mark available for a definition of cultural competence without an application to care practice. To gain maximum marks candidates must describe cultural competence and link it with application to care practice. Definition • Culturally competent practice involves workers having knowledge and understanding of their own culture and any cultural bias they have (1) • Cultural competence affects beliefs and behaviours of self and others (1)	4

		 can be used in making an assessment off need and in the care provision offered (1) ensure stereotypical views are challenged (1) help to promote positive attitudes towards different cultures. (1) Helps meet the social needs (1) Helps to meeting linguistic needs (1) Ensures carers do not impose their own values on others (1) Helps to meet personal care support preferences (1) Helps to enable spiritual needs to be met (1) 	
5	The Equality Act 2010 identifies protected characteristics which include age, disability, race and sex. Identify two further protected characteristics.	Identify any two protected characteristics to a maximum of two marks: • gender reassignment • marriage and civil partnership • pregnancy and maternity • religion and belief • sexual orientation.	2
6	Hanzi is a recent immigrant and a member of an ethnic minority group. He wants to support himself economically and fully participate in British life. Describe two types of equality that may benefit	One mark per identification of equalities to a maximum of two marks. Candidates must provide a description of two types of equality to gain full marks. Political equality – he has the right to have his political views heard and	4

Hanzi in his efforts to
integrate into society.

- respected by having access to official representatives and people in authority (1) He has the right to form a political party and contest in elections (1)
- equality of outcome he has genuine access to income and wealth (1) He is not just offered an opportunity but enabled to take advantage of that opportunity (1) Barriers are removed which might prevent him participating in society (1)
- equality of opportunity –
 he has an equal chance of
 getting opportunities to
 achieve his goals and
 improve his life (1)
 opportunities are
 available through open
 and fair competition with
 no unfair
 discrimination(1) he has
 equal access to welfare
 support (1)
- equality of treatment –
 he is not treated
 differently or adversely
 on the basis of any
 protected characteristic
 or perceived
 characteristic (1) Any
 unfair practices or
 procedures are
 eliminated (1)
- equality of membership in society – he has the same opportunities to take up roles in society and contribute to events as everyone else (1) his fundamental human rights are upheld (1)
- equality in employment he does not receive less favourable treatment in employment on grounds

	of protected characteristics (1), in employment the best person for a promotion is the one who has the best qualifications, skills experience and knowledge to carry out the job role (1). Recruitment processes give applicants the opportunity to demonstrate their abilities regardless of their protected characteristic(1)	
State three effects of illness on an individual's ability to communicate.	Identification of any three of the following to a maximum of three marks. Difficulty with speaking Difficulty with writing Difficulty with reading Difficulty/unable to understanding / processes information/communicati on signals Difficulty in remembering/ recall Loss of hearing Loss of sight Loss of verbal communication Difficulty in using the right words in context Difficulty/inability to express feelings/moods Reluctance to communicate Differences in interpreting surrounding and current situation. Tiredness/lack of energy Effects of medication taken for the illness	3

Eleanor has an appointment with her GP. She arrived on time but her appointment was delayed by 50 minutes. When she was seen by the doctor, she felt it was rushed and impersonal. This made her feel unsatisfied and increased her anxiety levels about her health problem.

Describe how the humanist and behaviourist theories contribute to understanding the interpersonal communication between the GP and Eleanor.

Candidates must make reference to humanist and behaviourist theories with explanations to gain full marks.

Maximum one mark for identifying a theorist per theory. A maximum of four marks may be achieved for one theory.

Humanistic

- Carl Rogers / Abraham
 Maslow / Gerard Egan (1)
- The underlying principle of the innate human need to communicate is not being met (1).
- Humans tend to use and misuse their communication abilities.
 (1)
- Each of the parties is functioning as a unique being responding to their
- environment so they may not act in the expected way. (1)

Behaviourist

- Ivan Pavlov, B.F Skinner, R.M Gagne (1)
- Previous learnt behaviour (1)
- Previous life experiences /expectations (1)
- Responding to stimuli (1)
- The GP could have shown more sensitivity to Eleanor / The GP could have asked her if she had any more questions / made sure she understood / demonstrated more nonverbal communication skills / The GP could have apologised for keeping her waiting /the GP could have helped to reduce her anxiety / They could

6

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		have had a longer consultation time / the GP could have made her feel more informed/answered her questions / explained the waiting time (1). • Eleanor could have been more assertive / asked more questions / expressed how she felt (1)		
9	State three factors that influence written communication within health and care practice.	Identify any three of the following to a maximum of three marks: • Legislation – current data protection requirements / confidentiality • Recording and reporting policies and procedures /accurate • Use of technology • Types of written communication / use of medical terms that are difficult for reader to understand/ misuse of punctuation changing meaning of message • Legibility.		3
	Connie is an 84-year-old patient awaiting discharge from hospital. She is due to attend a multidisciplinary team meeting to discuss her discharge plan. Explain two possible communication barriers that may occur between Connie and the professionals during the meeting. (4 marks)	One mark each for identifying a barrier up to a maximum of two marks. One mark for each explanation of each barrier up to a maximum of two marks. • Attitude and behaviours — all participants are influenced by their personality, background and culture (1) therefore there may be different behaviors within the group (1). • If there is more than one person talking at a time (1) professionals may not	Note to marker: do not award marks for repeated explanations for different communication barriers.	4

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	pay attention to Connie or each other (1) Sensitivity – Connie may have difficulty expressing herself/some communication topics may be taboo (1) therefore may prevent her from contributing to the discussion (1) Connie may experience stereotyping / Connie is a victim of the halo effect (1) as professionals may make assumptions based on visible characteristics such as her age (1) Professional priorities may be different to each other / Connie's expectations (1) which may lead to conflict between Connie and the professionals (1) Language – use of medical jargon (1) affects understanding of communication (1) English may not be a first language so misunderstanding of communication (1) generation difference in use of term of reference (1) Physical and cognitive impairment – Connie may have additional communication needs (1) therefore may not be able to access the information provided / make a contribution (1)	
State four reasons why providers of health and care services have policies and procedures.	Candidates must include 'legal compliance' to achieve maximum marks. Identification of any 4 of the following:	4

	 Legal compliance (1) Consistent practice (1) Managerial accountability (1) Best practice (1) More efficient and/or effective service delivery (1) Help maintain professionalism (1) To prevent ambiguity in the way issues are managed (1). Ensuring safety of service users/staff (1) 	
Describe five access and security measures used to help protect staff and people in a health and care setting.	One mark awarded for any of the following measures up to a maximum of five marks. • Signing in processes allow all staff and visitors to be recorded as present so they are accounted for in case of emergencies (1). • Routine stop-checks of individuals are carried out / Identification badges / should be worn at all times so staff can be identified from unauthorised persons / staff wear uniforms for identification (1) • Secure systems for managing keys, key distribution and issue of master keys to ensure safe access to private areas and secure storage / named personnel holding master keys promotes security (1) • Security procedures in care receivers' properties e.g. keypads, padlock coding, key safes to protect personal belongings (1)	5

13 Explain the difference between a hazard and a risk.	/burglar alarms/ security gates (1) Personal safety - staff have procedures to follow when confronted with defensive behaviours of animals / when working night shifts / when lone working (1) issuing personal alarms to staff who work in potentially unsafe environments (1) Conflict resolution training for working with people who have behaviour's that challenge Use of CCTV cameras Use of restrictive window/door openings Answer to include the following to a maximum of 2 marks. a hazard is something that can cause harm and is present when there is an object or situation	2
	present that may have an adverse effect on the surrounding (1) and a risk is the chance, high or low that any hazard will actually cause somebody harm (1)	
14 Staff in a hospital are required to move diagnostic laboratory equipment safely.	Maximum one mark for identifying one or more risks. To achieve full marks, candidates must provide relevant ways to reduce the risks.	5

Describe how to reduce potential risks when moving equipment under current legislation.	Risk may include any one of the following:		
Oscar is 7-years-old and is due to join a mainstream school. He has mild cognitive impairment. He is not able to stand and uses a self-propelled wheelchair to get around. He also requires support with personal care. Staff at the school want to	Band 1: 1 – 3 marks Basic discussion showing minimal breadth of considerations, supported with little or no analysis. Some accurate basic knowledge of Oscar's likely needs and the ways in which they may be met. Limited or no reference to legislation/regulation which impact on Oscar and the school	Indicative content • Reasons why Oscar needs health care and support with reference to mobility, cognitive impairment and personal care issues	9

support him and meet his needs.

Discuss how the school could meet all of Oscar's needs.

environment. May make basic reference to the importance of maintaining dignity and respect when supporting care needs. Basic discussion of safe working practices. Provided little or no justifications for points made. The response lacked structure and coherency. Where facts were provided, these were sometimes incorrect.

To access higher marks in the band the response will include some attempt of meeting Oscar's individual needs with a satisfactory range of considerations.

Band 2: 4 - 6 marks

Clear and relevant discussion which makes a reasonable attempt to cover some considerations displaying good breadth of knowledge and understanding. This was supported by brief analysis. The discussion included attempts to link Oscar's needs, some areas may be more detailed than other areas but may include reference to inclusive practice, maintaining dignity and respect, health and safety and communication. Reference to legislation/regulation/codes of practice impacting on Oscar and the school environment were evident. Throughout the discussion recommendations and opinions were offered with some justification and the use of a few examples. The overall discussion is presented in a clear format and the use of terminology is mostly appropriate. Content is factually accurate.

To access higher marks in the band, the discussion will be

- Staffing to support care needs, integrated approach to support consistency in care
- Current legislation and regulations impacting on Oscar's situation with reference to Equality Act, health and safety, manual handling operations regulations, Data Protection Act, etc.
- Current national standards and codes of practice with reference to equality and inclusion
- Applying inclusive practices
- Methods of verbal and nonverbal communication to best meet Oscar's level of understanding
- The purpose and use of risk assessments in relation to supporting Oscar
- Systems for handling, storing and disposing of hazardous substances that may be involved in personal care support
- Infection control procedures

mostly detailed and contain some justifications and strong links to legislation/regulation/codes of practice. The overall discussion will be presented clearly and with logical structure.

Band 3: 7-9 marks

Comprehensive and clear discussion showing breadth of understanding across the main considerations which were supported by effective analysis and conclusions that displayed depth of understanding. Detailed analysis of Oscar's likely needs and the ways in which they may be met in relation to inclusive practice, maintaining dignity and respect, health and safety and communication were evident. A range of examples are used to illustrate points. Robust reference to legislation/regulation/codes of practice impacting on Oscar and the school environment. Throughout the discussion wellreasoned justifications for recommendations and opinions were offered. Relevant use of accurate terminology was evident. The entire discussion was coherent, relevant and factually accurate.

To access higher marks in the band the response will be coherent, balanced and structured in a logical way. There will be a range of recommendations offered with strong links to legislation/regulation, codes of practice and theories which are fully justified.

- The importance of maintaining Oscar's dignity and respect when supporting him
- The types of equipment that may be used in supporting Oscar's personal care needs
- Procedures that are in place to maintain accurate records with reference to accidents and incidents, meetings, learning development, etc.
- Maintaining safety of Oscar, staff, other children and visitors
- Regular meeting with Oscar's parents/carers/g uardians
- Working with other health and care professionals involved in Oscar's support plan.
- Theories –
 cognitive,
 behavioural,
 humanistic