



Rewarding Learning

ADVANCED
General Certificate of Education
January 2011

Health and Social Care

Assessment Unit A2 9

assessing

Unit 9: Providing Services

[A6H31]

WEDNESDAY 19 JANUARY, AFTERNOON

**MARK
SCHEME**

- 1 (a) Identify one example of each of the following needs of clients with mental health problems and explain how it may be met by a voluntary organisation. (AO1, AO2)

AVAILABLE MARKS

An emotional need

Example

[1] for appropriate example such as self-esteem, emotional support, therapy, sense of stability and belonging, feeling loved or valued, feeling safe and secure, having a sense of control/empowerment

(1 × [1])

[1]

Explanation

[1] for key phrase(s), [2] for fuller explanation of how the need identified could be met. Explanation of how need could be met **must** be appropriate to the type of need identified

- by developing a supportive relationship where the client is empowered
- by providing counselling/therapy services
- by supporting the clients to make their own decisions
- by reassuring the client that he/she is safe and secure in the setting
- by supporting the client and the family through provision of information regarding client's condition
- through praise and encouragement of efforts made by clients.

(1 × [2])

[2]

A social need

Example

[1] for appropriate example such as the need for interpersonal interaction, friendship and relationships with others

(1 × [1])

[1]

Explanation

[1] for key phrase(s), [2] for fuller explanation of how the need identified could be met. Explanation of how need could be met **must** be appropriate to the type of need identified

- by encouraging client to mix with others
- by organising a range of activities which interest and engage the client with others
- by talking to clients and spending time with them
- by encouraging clients to engage in social activities where they need to use social skills like going to a restaurant, the cinema or the leisure centre
- by supporting the development of friendships with others
- by providing day centres
- by running befriending schemes.

(1 × [2])

[2]

A physical need

Example

[1] for appropriate example such as the need for medical care or treatment, e.g. medication need for warmth, clothing, shelter and nutritional needs, hygiene needs, exercise, safety.

(1 × [1])

[1]

Explanation

[1] for key phrase(s), [2] for fuller explanation of how the need identified could be met. Explanation of how need could be met **must** be appropriate to the type of need identified

- by providing a safe environment
- by providing food and drink
- by administering medication
- by supporting clients with making appointments for doctor
- by bathing clients
- by providing clothing where necessary
- by providing exercise activities to promote physical health and well-being.

(1 × [2])

[2]

- (b)** Explain three different types of barriers clients with mental health problems may experience when accessing health and social care services. (AO1, AO2)

[1] for identifying types of barriers, [2] for explanation

- psychological barriers, e.g. stigma/denial/fear/embarassment/ impact of mental illness
- physical barriers, e.g. transport – unable to drive, opening hours inflexible for client
- financial barriers, e.g. lack of money to attend setting or supported employment opportunity or to attend outings organised, etc.
- geographical barriers, e.g. distance – unable to access the service because client lives too far away and public transport is unreliable or client is afraid to use it
- communication barrier, e.g. literacy barriers not being able to read or concentrate because of mental health problems, not being able to understand jargon, sensory impairment
- knowledge barrier, e.g. having no awareness of the services available perhaps because the client or client's family have never had anyone who required these services in the past or because of a condition such as dementia
- language or cultural barriers, e.g. English as a second language.

(3 × [2])

[6]

AVAILABLE
MARKS

- (c) Write down two **different** ways services for people with mental health problems in the following sectors are funded. (AO1)

Voluntary sector services

- lottery
- street collections
- bequests
- fundraising events
- government contracts
- sponsorships
- donations
- proceeds from charity shops
- grants from businesses or government.

(2 × [1])

[2]

Private sector services

- private health insurance
- direct payment by the individual or their family or friends
- payment by government through a contract
- GP may pay for private treatments such as aromatherapy, massage, etc.
- owner investment
- shareholder investment.

(2 × [1])

[2]

- (d) Discuss three advantages **and** three disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems. (AO1, AO2, AO3, AO4)

Answers may address any three of the following points:

Advantages of relying on the voluntary sector to provide care and support for clients with mental health problems

- voluntary organisations are usually quite responsive to need – they can set up and provide support for clients practically overnight
- voluntary organisations are less bureaucratic and so can meet needs of clients more quickly
- voluntary organisations are quite flexible – less need to rigorously check if clients are entitled to access services provided as is the case in the statutory sector
- voluntary organisations provide valuable opportunities for clients to get support the statutory sector is unable to provide because of cost – social outings, support groups, hobbies, breaks, training and employment opportunities and various activities, e.g. swimming, exercise
- voluntary organisations can provide 24 hour emotional support for clients who may be feeling desperate, e.g. the Samaritans which may not be available in the statutory sector
- voluntary organisations are often staffed by volunteers who have personal experience of the range of issues affecting clients and so they are usually very sympathetic to the needs of clients and their families

AVAILABLE
MARKS

- voluntary organisations can provide information, e.g. in leaflets which supports clients to develop an understanding of their condition and of the treatment and support available
- usually local provision, meaning easier access for many individuals and so getting the care they need in their own community
- voluntary organisations reduce stigma and increase acceptance of clients with mental illness in the community
- voluntary organisations campaign to raise awareness of the needs of clients with mental health problems and in doing so improve experience and standard of care and treatment for clients
- services are usually free, or for a very nominal cost, so clients can enjoy holistic therapies which they might otherwise not be able to afford.

Disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems

- volunteers who work in voluntary sector organisations are often not trained and this can be a problem particularly when dealing with clients who have mental health problems – they may not pick up on key indicators of well-being that trained staff in the statutory sector may pick up on, e.g. indicators of potential to self-harm
- the state should be providing services for all clients on the basis of need – no one should have to rely on a voluntary organisation to meet their needs, as quality of care for clients may be compromised where staff may be less skilled
- voluntary organisations may be unreliable because of funding difficulties or because of personnel difficulties and so may be available one month but not the next and this can leave clients feeling very let down
- there can be a lack of accountability in some voluntary sector organisations because they are subject to less scrutiny than public sector services and this can mean that services are not properly managed so clients needs may not be met
- provision of services by voluntary sector organisations may be “patchwork” this means the service may be available in some areas but not others and this is unfair for those who live in the areas not serviced
- clients may be at greater risk of being abused as a result of accessing voluntary sector organisations which are not as closely regulated as services in the statutory sector might be
- voluntary sector is not in a position to meet the needs of clients with serious mental illness
- clients using the voluntary sector may feel stigmatised and labelled affecting uptake of services and clients view of themselves.

All other valid responses will be given credit

[0] will be awarded to responses not worthy of credit.

AVAILABLE
MARKS

Level 1 ([1]–[3])

Overall impression: basic understanding

- displays limited knowledge of the advantages and disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems
- there is limited discussion
- answers which focus **only** on the advantages **or only** on the disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems cannot achieve beyond this band
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([4]–[6])

Overall impression: adequate knowledge and understanding

- displays adequate knowledge of the advantages and disadvantages of relying on the voluntary sector provide care and support for clients with mental health problems
- there is adequate discussion
- at the top of this mark band candidates should discuss two advantages **and** two disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([7]–[9])

Overall impression: competent knowledge and understanding

- displays very good to excellent knowledge of the advantages and disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems
- there is competent discussion
- at the top of this mark band candidates should discuss three advantages **and** three disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems – there must be a clear focus on clients with mental health problems to score in this band
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

AVAILABLE MARKS

Level 4 ([10]–[12])

Overall impression: highly competent knowledge and understanding

- displays excellent knowledge of the advantages and disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems
- there is in-depth discussion
- at the top of this mark band candidates should discuss three advantages **and** three disadvantages of relying on the voluntary sector to provide care and support for clients with mental health problems – there must be a clear focus on clients with mental health problems to score in this band
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear. [12]

AVAILABLE MARKS
31

- 2 (a) Use the table below to identify three stipulations which might be contained in a “charter of rights” in a day care setting for clients with mental health problems and their benefits for the clients. (AO1, AO2, AO3)

[1] for each stipulation identified

Answers may include any three of the following:

- the right to quality care
- the right to be treated as an individual
- the right to maintain independence through making own decisions
- the right to have affairs dealt with confidentially/privacy respected
- the right to be treated with respect and courtesy
- the right to choice
- the right to equal treatment/not to be discriminated against on the grounds of age, disability, gender, religion, race or sexuality
- the right to have their care discussed and evaluated at regular intervals through care planning
- the right to be cared for by appropriately trained and qualified staff
- the right to be given information about their condition
- the right to a key worker who is responsible for their care
- the right to advocacy
- the right to have their needs met
- the right to dignity
- the right to feel safe and secure

All other valid responses will be given credit.

(3 × [1])

[3]

[1] for each benefit (must be clearly linked to the stipulation identified)

Answers may include some of the following:

- clients are able to make informed decisions about their care and treatment
- clients will feel valued and this increases their self-esteem
- clients will feel empowered and in control of their care
- clients are likely to receive better care
- clients are more likely to experience fair treatment
- clients are likely to be more independent
- clients are likely to experience quality care delivered by properly qualified professionals

All other valid responses will be given credit.

(3 × [1])

[3]

- (b) Explain two **different** ways each of these three practitioners could provide care for clients with mental health problems. (AO1, AO2, AO3)

No repetition allowed – candidates must explain one different way each practitioner could provide care for clients with mental health problems.

[1] for key phrase(s), [2] for explanation of each way

Psychiatric nurse/Mental health nurse

- assessing clients' needs for nursing care
- responsible for the care planning process while the client is hospitalised or in community
- liaising with the multi-disciplinary team to ensure needs of clients are properly met
- monitoring client's progress and recording all relevant data in the client's nursing care plan
- providing counselling and emotional support for clients
- may request assessments by other members of the multi-disciplinary team
- may advocate on behalf of clients
- administering medication as prescribed by a doctor or can prescribe if specialist nurse practitioner
- reporting any concerns regarding a client to the nursing and medical team
- to hand over in a thorough way to staff coming on duty
- provide information and advice for the client or their family about their illness and its treatment
- contribute to care conferencing

(2 × [2])

[4]

AVAILABLE
MARKS

Psychiatrist

- makes initial diagnosis
- prescribes medication
- makes referrals for other treatment such as CBT by psychologist
- provides counselling or other therapy
- liaises with the mental health team and may refer clients to other health professionals or organisations
- contributes to the care plan for the client
- provides medical assessment
- writes reports/update records on client's condition
- may be involved in research activities
- may be involved in compulsory detention of clients under mental health legislation after a period of time in hospital
- provide information about appropriate support for clients with mental health problems to clients and their families
- contributes to the guardianship process.

(2 × [2])

[4]

Social worker

- assessing needs for care or intervention
- responsible for organising and managing the care planning process
- liaising with other members of the multi-disciplinary team
- organising case conferences
- monitoring client's progress
- visiting clients in their own homes
- providing counselling and emotional support for clients and their families
- carry out inspections of facilities providing care and support for clients with mental health problems
- may advocate on behalf of clients
- may refer clients to other services such as voluntary services or OT services within the statutory sector
- may be involved in detaining/sectioning clients with mental health problems
- may be required to attend court hearings where client have committed criminal offences
- organising accommodation
- supporting applications for benefits

All other valid responses will be given credit.

(2 × [2])

[4]

- (c) Discuss how the following policies can contribute to the provision of quality care in day care settings for vulnerable clients with mental health problems. (AO1, AO2, AO3, AO4)

[1] for use of key phrase(s), [2] for explanation, [3] for discussion of how the policy contributes to the provision of quality care in day care settings for vulnerable clients with mental health problems

AVAILABLE
MARKS

Staff training policy

Answers may include:

- helps staff to understand their job roles and hence to provide appropriate care for the clients in the setting
- promotes a sense of responsibility so that staff are aware of the importance of implementing all policies related to the setting, e.g. equal opportunities, confidentiality – this enhances the quality of service provided for the clients
- gives staff confidence to do their job properly – this should promote confidence among clients
- enables staff to develop skills to assist them in dealing with clients, e.g. skills to deal with challenging behaviour
- training empowers staff to provide a safe environment for vulnerable clients
- supports the development of team working skills – this should result in the provision of better quality care
- supports staff to maintain knowledge and expertise and allows them to keep up to date in relation to key issues
- staff are more likely to know about clients' rights and try to ensure they are met
- staff are more likely to promote anti-discriminatory practice
- staff are more likely to be aware of signs and symptoms of abuse and be able to act.

(1 × [3])

[3]

Confidentiality policy

Answers may include:

- gives clients confidence that their privacy will be respected
- informs staff of the requirement to maintain confidentiality
- makes clear when information can be passed on – this can protect the client
- sets out procedures for staff to follow, e.g. in storing clients' records, in discussing information about clients with others
- sets out disciplinary procedures if confidentiality is breached.

(1 × [3])

[3]

Protection from abuse of vulnerable clients policy

Answers may include:

- helps care workers to identify abuse
- outlines procedures for reporting abuse
- protects clients
- promotes sense of security for clients/families
- allows for legislation to be implemented
- helps to prevent abuse
- outlines procedures for vetting prospective staff.

(1 × [3])

[3]

AVAILABLE
MARKS

Whistle blowing policy

Answers may include:

- gives staff who are concerned about poor practice a framework for doing something about it thus helps to expose bad practice and protect clients
- protects clients who are very vulnerable and may be unable to protect themselves
- helps to guard against inappropriate treatment because staff know inappropriate behaviour may be reported thus it promotes high standards of care
- helps to expose unsuitable practitioners – these practitioners may be convicted and thus prevented from working with vulnerable clients
- gives staff the confidence to challenge inappropriate attitudes or behaviour by others, even those senior to them.

(1 × [3])

[3]

30

- 3 (a) Discuss two ways each of the following pieces of legislation promotes the care of clients with mental health problems. (AO1, AO2, AO3)

[1] for key phrase(s), [2] for explanation [3] for full discussion

The Care Standards Act 2000

Answers may include:

- set up the National Care Standards Commission, a new regulatory body to monitor standards of care in care homes on a national basis – aimed to ensure high standards in all care homes
- required all care homes to be registered – all registered homes can be inspected – encourages homes to maintain high standards as results of inspection reports which are published
- inspections can be planned or unannounced and cover all aspects of care, e.g. staff trained, working within their codes of conduct and to agreed policies and procedures, and that they are providing suitable care and activities for clients with mental illnesses – can be prosecuted or closed down on inspection
- gave the government the power to set out minimum care standards – helps providers of care homes to understand the level of service required
- set out a broad range of regulation making powers covering the management, staff, premises and conduct of social care and independent healthcare establishments and agencies
- established the General Social Care Council to register social care workers and to set standards for training as well as for their codes of practice – makes clear the standards expected from all staff in care homes
- National Minimum Standards for registered care services were identified by the Act – these included requirements regarding the competence of the workforce including their suitability to work in care and their experience and qualifications, this was in a bid to set standards and thus benefit the clients

- required each registered care service to have a registered manager who is responsible for service and resources, including staff – a key role for the manager is to monitor the quality of the service provided by the care home
- the Act required each registered care manager to know about the National Minimum Standards for the service they manage and to treat the quality of service provision as a priority within the service provided by the home.

(2 × [3])

[6]

The Mental Health Order 1986 (amended 2004)

Answers may include:

- the Order identified that named professionals/relatives could be involved in the sectioning process
- the Order empowered clients and encouraged voluntary admission for assessment and treatment – admission and treatment without compulsion is a key principle
- the Order details the rights of people who have a mental disorder and the procedure that must be followed in order to provide them with appropriate care so safeguarding the client
- the Order clearly defines mental disorder – it excludes immoral conduct, personality disorder, promiscuity, sexual deviancy, dependence on alcohol or drugs
- grounds for compulsory admission to hospital are clarified thus ensuring only those clients who meet specific criteria can be detained/sectioned therefore protecting clients
- the Order established mental health review tribunals to ensure those who challenge detention can have their argument heard
- the Order places a responsibility on area boards for securing the treatment and care needed by clients with mental health problems – this means clients are more likely to have their needs met
- the Order sets out an assessment period which clients do not have to declare, e.g. for insurance or to emigrate – lessens likelihood of discrimination
- introduced guardianship to help clients move into the community
- introduced Approved Social Workers to support the rights of people with mental illness and their relatives
- it established the Mental Health Commission to review the care and treatment of patients
- it allows clients to be detained for assessment for 72 hours and detained for up to 28 days at the second stage and six months at the final stage
- it sets out conditions for appeal for clients
- it makes clear that clients have a right to a tribunal.

(2 × [3])

[6]

AVAILABLE MARKS

- (b) Codes of practice ensure standards in relation to care provision. Evaluate the reality of this statement. (AO1, AO2, AO3, AO4)

[0] is awarded for responses not worthy at credit.

Answers may address the following points:

- codes of practice reduce confusion about the roles and responsibilities of staff
- they inform and guide practice so that clients receive appropriate care and treatment
- they facilitate disciplinary action by regulatory bodies
- they reflect legislative requirements for appropriate standards of care
- codes of conduct sets standards – promotes good quality of care
- code of conduct informs clients and their families about what they can expect to receive – allows action to be taken against poor practice
- codes of conduct regulates practice within a profession – this promotes high standards
- codes of conduct help to promote fair treatment for all individuals
- codes of conduct set ethical standards for practice
- codes of conduct contribute to improving quality of care

However –

- codes of practice may be ignored by staff/codes of practice do not guarantee standards
- codes of practice may not be implemented/it is difficult to monitor compliance
- codes of practice may be ignored by managers
- codes of practice may not be understood by clients.

Also accept specific examples from codes, e.g. confidentiality, need to gain informed consent, anti-discriminatory practice

- respect patients/clients as individuals
- obtain consent before giving treatment or care
- protect confidential information
- co-operate with others in teams
- maintain professional knowledge and competence
- be trustworthy
- minimise risk to clients

All other valid points will be given credit.

Level 1 ([1]–[3])

Overall impression: basic understanding

- displays limited knowledge of how codes of practice ensure standards in relation to care provision
- there is little or no evaluation
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

AVAILABLE
MARKS

Level 2 ([4]–[6])

Overall impression: adequate knowledge and understanding

- displays adequate knowledge of how codes of practice ensure standards in relation to care provision
- candidates may focus only on how codes help to ensure standards
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([7]–[9])

Overall impression: competent knowledge and understanding

- displays very good knowledge of how codes of practice ensure standards in relation to care provision
- there is competent evaluation
- to achieve in this band candidate must recognise the statement is unrealistic
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

Level 4 ([10]–[12])

Overall impression: highly competent knowledge and understanding

- displays very good to excellent knowledge of how codes of practice help to ensure standards in relation to care provision
- there is highly competent evaluation
- to achieve in this band candidates must recognise the statement is unrealistic
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear. [12]

- (c) Analyse the impact of ineffective team working on clients with mental health problems **and** the staff who are responsible for their care. (AO1, AO2, AO3, AO4)

The impact of ineffective team working on clients

Answers may include some of the following points:

- clients suffer because information is not passed on
- care is not given to clients and so needs are not properly met
- clients may end up offending and thus have a criminal record; may end up in jail

- clients can become very ill or deteriorate; clients may die, e.g. commit suicide
- creates fear about mental illness and clients become targets of violent attacks
- clients may become “revolving door” clients
- clients feel isolated because of lack of support, may feel let down/ may affect the trust relationship
- clients become frustrated, agitated and may be violent towards carer
- clients may face repetitive questioning – can be frustrating
- mistakes may be made, e.g. in medication
- clients’ needs may not be identified and met
- clients may not want to access help in the future
- clients may be in danger.

The impact of ineffective team working on staff

Answers may include some of the following points:

- staff may be disciplined/struck off – lose income
- staff may be demoralised/frustrated/experience lack of job satisfaction
- staff may lose their jobs/leave their jobs/high turnover of staff
- staff may suffer illness, such as depression, stress, anxiety, insomnia, anorexia
- staff may be overworked because others are not doing their job
- staff may need to take time off work
- staff may be used as scapegoats
- legal consequences – court appearances
- may affect family life in a negative way
- may mean their time is wasted repeating tasks
- staff may make flawed decisions
- staff may experience violence
- staff may experience an unpleasant working environment.

Level 1 ([1]–[4])

Overall impression: basic understanding

- displays limited knowledge of the impact of ineffective team working on clients and staff
- there is limited analysis
- answers may focus **only** on clients **or only** on staff in this band
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate knowledge and understanding

- displays adequate knowledge of the impact of ineffective team working on clients and staff or excellent knowledge if they focus on only clients or only staff
- candidates must discuss the impact on both clients **and** staff to achieve at the top of this mark band
- there is adequate analysis
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent knowledge and understanding

- displays good knowledge of the impact of ineffective team working on clients **and** staff
- there is competent analysis
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

Level 4 ([13]–[15])

Overall impression: highly competent knowledge and understanding

- displays very good to excellent knowledge of the impact of ineffective team working on clients **and** staff
- there is highly competent in-depth analysis
- quality of written communication is excellent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

[15]

39

Total**100**AVAILABLE
MARKS