



*Rewarding Learning*

**ADVANCED SUBSIDIARY (AS)**

**General Certificate of Education**

**2011**

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**Health and Social Care**

Assessment Unit AS 5

*assessing*

Unit 5: Adult Client Groups

**[A3H51]**

**FRIDAY 20 MAY, MORNING**

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**MARK  
SCHEME**

1 Jean is 86 years old and has lived by herself since her husband's death 10 years ago. She sees her son once a week, as he lives 50 miles away and can only provide limited support. Recently Jean fell down the stairs at home and broke her arm. She experienced confusion for a few days after the fall and was kept in hospital. She is keen to return home and a multidisciplinary team is involved in drawing up a care plan.

(a) Explain the following terms: (AO1)

Impairment

Answers may address some of the following points:

- Damage or loss of a physical function in the body, i.e. lack of balance and poor co-ordination
- Impairment limits ability to complete everyday tasks e.g. visual impairment limits the ability to see
- Lacking in physical functions / mental functions
- A term used to describe the 'physical' state of the body

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

(1 × [2])

[2]

Vulnerable adult

Answers may address some of the following points:

- An adult who is, or may be, in need of community care services or a resident in a continuing care facility by reason of mental or other disability, age or illness
- An adult who is, or may be, unable to take care of themselves or unable to protect themselves against significant harm or exploitation
- Adult 'at risk' due to any form of actual or suspected abuse ('abuse' can include financial, institutional, physical, sexual, emotional and psychological abuse and neglect)
- Person with complex health and social needs
- Adults with particular need for protection as a result of disadvantage related to language, cultural or communication barriers
- A person with a physical or mental need which affects ability to carry out daily living activities

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

[2]

## Empowerment

Answers may address some of the following points:

- Supporting a person or group of people to take actions on their own behalf
- Sharing relevant knowledge and/or expertise with individuals or groups so that they can make informed decisions
- Involvement of clients and carers in the planning and/or decision-making processes regarding the services they use
- To give clients power to be involved in or make decisions which affect them
- Principles of working in total partnership with clients and of sharing or handing over power traditionally held by professionals
- Development of needs-led client-centred services

All other valid points will be given credit

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

(1 × [2])

[2]

- (b)** Jean is now categorised as a user of services for older people. Explain two disadvantages of categorising clients. (AO1, AO2)

Answers may address two of the following points:

- Individuals needs not always addressed – focus on general needs of group
- Impact of attitudes – potential for stereotyping, prejudice and stigma to be negatively associated with specific client groups;
- Labelling theory – relevance to self-concept and ‘sick role’;
- Potential for institutional discrimination and oppression
- Access to services dependent on ‘diagnostic’ label
- Resources allocated to wider range of client groups and needs rather than directed at individual need

All other valid points will be given credit

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

(2 × [2])

[4]

- (c) Explain two **different** ways each of the following professionals contribute to the provision of care for clients such as Jean. (AO1, AO2)

Answers may address any two of the following points:

#### Occupational Therapy (OT)

- Provides needs assessment of clients
- Supports and teaches clients skills needed for maximum independence
- Assesses clients' homes and identifies need for adaptations, e.g. hand rails or chair ramp in client's home
- Provides aids, e.g. special cutlery, dressing aids
- Liaises with multi-disciplinary team
- Designs individualized programmes to promote employment skills
- Contributes to research
- Teaches dressing practice
- Does activities with clients, e.g. art therapy
- Contributes to the care planning process
- Writes reports

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

(2 × [2])

[4]

#### Physiotherapist

- Provides assessment of clients e.g. of mobility and treatment needed
- Supports mobility/helps people to walk again
- Prevents muscle wastage/builds strengths
- May use massage treatment e.g. chest massage
- Provides information and advice for families regarding how to support clients
- May do home visit to assess
- Provides aids, e.g. wheelchairs, walking frames etc
- Liaises with multi-disciplinary team
- Develops care plan e.g. provides individualized programmes of exercise
- Develops confidence and provides encouragement regarding mobility

All other valid points will be given credit

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

(2 × [2])

[4]

- (d) Jean's needs have been assessed and a care plan drawn up. Write down the six stages of the care planning cycle. (AO1)

One mark for each of the following:

- Assessment
- Planning
- Implementation
- Monitoring
- Evaluation
- Modifying

(6 × [1])

[6]

(e) Analyse the range of needs Jean may have and how they could be met.

Answers may include:

Physical: medication; nutrition, shelter; warmth, exercise

- Meeting medical needs by nurse or GP monitoring health & providing medication;
- Meeting nutrition needs by provision of meals and wheels, care worker or family providing meals;
- Meeting shelter needs by remaining at home or moving into sheltered or residential accommodation if she cannot cope at home;
- Meeting warmth needs by attaining fuel allowances in winter to help with heating or home care worker or family member checking she has oil and her house is kept warm;
- Meeting mobility needs by her family calling and taking her out or nurse checking her mobility or referred to day centre so they can encourage her to keep mobile; being provide with mobility aids by OT or physiotherapist

Intellectual: stimulation through learning activities, hobbies; knowledge about her condition

- Meeting needs through referral to befriender who encourages activities to keep her mind active e.g. crosswords, asking them about news programmes, encourages hobbies such as chess
- Family members may also encourage intellectual stimulation in the above areas
- Could be referred to day centre to encourage intellectual development e.g. to take part in hobbies, quizzes, crafts

Emotional: positive encouragement and reminding them that they have valuable life experience so building on their self esteem, need to feel loved, valued and respected

- Family visiting more often and taking extra time with her to let her know she is valued
- In the day centre or library making new friends, people she has much in common with and talk about her past and current life experiences and so building her self esteem and enabling her to feel positive about herself

Social: building and maintaining relationships; friendship; routine

- Going on outings with the day centre so building up her social network
- Joining local church group or group for senior citizens so she can meet like minded people who enjoy similar interests and come from a similar background and are at a similar stage in life
- Gaining a routine by going to reading groups, day centre so she can reduce her isolation and develop new friendships or build on old ones as she needs friends from her past

Communication: talking to people, having others listen, be supported to interact with others

- Care workers/professionals spending time with her to try to understand her thoughts, concerns, needs
- Advocacy services being provided
- Family being consulted
- Care workers and professionals using straightforward language to talk about her condition and solutions
- Encourage her to take part in more activities in the community so she can talk to others

All other valid points will be given credit

### Level 1 ([1]-[4])

Overall impression: basic understanding

- Displays limited understanding of the range of needs Jean may have and how they could be met
- At least two types of needs/how they may be met should be discussed to achieve the top of this band
- Little or no evidence of analytical writing
- 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 & understanding

- Displays adequate knowledge and understanding of the range of needs Jean may have and how they could be met
- Adequate evidence of analysis – at least three types of needs/how they may be met should be discussed to achieve at the top of this band
- Some evidence of analytical thinking
- 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 & understanding

- Displays a competent knowledge and understanding of the range of needs Jean may have and how they could be met
- Answers at the top of this band should discuss four types of needs **and** how they may be met
- Good evidence of analysis - there must be clear application to clients such as Jean
- 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.

[0] is awarded for a response not worthy of credit

[12]

36

- 2 (a) People with Multiple Sclerosis may be discriminated against. Explain what is meant by the term discrimination. (AO1)

Answers may address some of the following points:

- Treating people unequally/unfairly on the basis of their religion, gender, race, etc
- Activities or actions that deny to the members of a group resources or rewards which are obtained by others

All other valid points will be given credit

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

(1 × [2])

[2]

- (b) Those with Multiple Sclerosis are often categorised when receiving health and social care services.

Explain two advantages of categorising clients. (AO1, AO2)

Answers may address any two of the following points:

- Existing services developed appropriately to meet specific needs
- New services planned according to need
- Access to services – eligibility criteria met
- Access to social security benefits – entitlement according to specified need
- Informal support network of other people within same client group
- Lobbying potential to organizations and government bodies
- Influence in policy making decision and legislation
- Funding arrangements clearer – these include grant applications, voluntary contributions and statutory funding
- Encourages clients to use the services provided as they perceive them as geared specifically to their needs
- Staff are trained in specialist care for the client group
- May reduce stigma as enables greater understanding of condition

All other valid points will be given credit

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

(2 × [2])

[4]

- (c) Discuss three ways health and social care organisations can challenge discrimination displayed by care workers. (AO1, AO2, AO3)

Answers may address any three of the following points:

- Ensuring staff are trained in policies and procedures e.g. whistle-blowing and know how to implement effectively; help clients/ staff to understand the effects of discrimination on others
- Ensure staff have the opportunity to update training so they are kept up to date with new legislation and policies and their responsibilities
- Monitoring the effectiveness of policies such as whistle blowing, to aid the exposure of poor practice by staff
- Promote care value base and its application in contact with adult clients e.g. promote equality through displaying posters
- Ensure all clients are informed of relevant policies so they can use them if required, e.g. complaints policy
- Have regular team meetings to provide forums for discussions so any poor practice can be quickly identified and action taken
- Ensure there are clear lines of responsibility and all staff know who to report to should they witness discriminatory practice
- Ensure that inexperienced staff are supervised
- Ask for feedback from clients and act on it
- Encourage the establishment of client or service users feedback groups
- Implement disciplinary procedures if required, ensuring staff are aware of the consequences of discriminatory practice towards clients
- Directly challenge discriminatory comments
- Invite representatives of MS society to the hospital to talk to staff to encourage understanding
- Encourage advocates for clients so they can feel supported to speak out about discrimination

All other valid points will be given credit

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

(3 × [3])

[9]

- (d) Health and social care professionals adhere to a social model of disability. Discuss one strength of the social model. (AO1, AO4)

Answers may address one of the following points:

- Disability is socially constructed so it is society's responsibility to change not the individual's therefore using legislation to make changes required, e.g. to have facilities designed in such a way as to facilitate their needs
- The model does not focus on the 'impairment' but rather on the person and how they can be supported to live a fully integrated lifestyle
- Emphasis on need for society to be educated about disability to change the culture of negativity towards those with disabilities to a positivity, embracing everyone into society, each having their talents built on and developed (holistic response to the individual)
- The individual should be supported to follow chosen lifestyle and employment, e.g. live in the community and attain gainful employment
- Emphasis on need for empowerment of clients
- Focuses on the individual rather than the 'label' given to them
- Range of professional services offered – these include psychological therapies, alternative and complementary therapies and social services

All other valid points will be given credit

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

(1 × [3])

[3]

- (e) The Multiple Sclerosis Society is a voluntary organisation. Explain two ways voluntary organisations are funded. (AO1, AO2)

Answers may address any two of the following points:

- Fundraising - sponsored walks, events such as coffee mornings, street collections
- Commercial sponsorships
- Contracts with government agencies
- Government grants
- Donations made by individuals or companies
- Bequests / wills
- Lottery funding
- Partly paid for by clients

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

(2 × [2])

[4]

- (f) People with MS often use voluntary services. Discuss the role of the voluntary sector in providing services for adult clients.  
(AO1, AO2, AO3, AO4)

Answers may address some of the following points:

- Provides a wide range of services such as complimentary therapies and community support that fill the gaps left by both the private & statutory sector
- Responds to needs of clients e.g. setting up lunch clubs, carer groups
- Provides support at short notice such as advocacy services in the hospital, driver services
- Generally has an 'open door' policy and clients can refer themselves and talk to someone immediately or very quickly & so get help for their problem
- Provides counselling services e.g. people who have recovered from cancer often volunteer in the hospice so helping others to feel they can be understood
- Provision of services that have nominal charge or are free so that everyone has access to supports available
- Provides families with support services e.g. respite, carers support groups
- Provides clients with more detailed information about their illness or condition – often through good web sites
- Provides 24 hour helplines or mobile support services so that people in rural areas can access support
- Fund treatments through donations – often pioneering treatments
- Raise awareness of issues through television or radio campaigns
- Often lobby government to increase allocation of government funding to a specific illness or condition
- Helps clients to get in contact with others who have gone through the same difficulties; support groups
- Focus on one client group/illness/condition so meets a range of specialised needs
- Often provide specialist training to staff so they become specialist in the field & can help more complex needs e.g. Macmillan nurse
- Organises health checks e.g. mobile screening units
- Carries out research e.g. new treatments for Alzheimer's disease
- Supports people to return to or to gain employment

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

**Level 1 ([1]-[4])**

Overall impression: basic understanding

- Displays limited understanding of the role of the voluntary sector in providing care to adult clients such as those who suffer from multiple sclerosis.
- Limited analysis evidenced in writing
- 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 role of the voluntary sector in providing care to adult clients such as those who suffer from multiple sclerosis.
- 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 competent knowledge of the role of the voluntary sector in providing care to adult clients such as those who suffer from multiple sclerosis
- 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.

[12]

34

- 3 The Carers and Direct Payments Act (NI) 2002 / Carers Recognition Act 1995 aims to support clients to be cared for at home. Evaluate the effectiveness of the legislation in supporting both carers and clients. (AO1, AO2, AO3, AO4)

(a) Carers

Answers may address some of the following points:

- It recognises carers rights for the first time and strengthens their position to request services and support in their own right
- Supports carers e.g. they can request services such as respite breaks and other forms of support so they can continue to care, e.g. a sitter to stay with their loved one while they go shopping or to meet friends
- It gives carers the right to have their own independent assessment completed to examine their needs – helps carers to feel valued
- Carers may feel the assessment is only a ‘paper exercise’ as their needs do not have to be met by Trusts, i.e. can be recorded as ‘unmet need’
- Assessment of carers is not automatic, carers must request assessment, so assumes knowledge of rights
- If Trusts cannot afford or do not have the services required they may put the carer on a waiting list and it may take a long time for the carer to access services
- Trusts may have a right to charge for services provided to carers which could hinder carers accessing services
- Waiting process can be very stressful for clients

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

(3 × [2])

[6]

**Level 1 ([1]-[2])**

Overall impression: basic understanding

- Displays limited knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 relating to carers
- Limited, if any, attempt to evaluate the effectiveness of the legislation for carers
- 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 ([3]-[4])**

Overall impression: adequate knowledge & understanding

- Displays adequate knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 on carers
- An adequate evaluation of the effectiveness of the legislation for carers
- 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 ([5]-[6])**

Overall impression: competent knowledge & understanding

- Displays a very good knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 on Carers
- A good to excellent evaluation of the effectiveness of the legislation for carers
- 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. [6]

**Clients**

Answers may address some of the following points:

- Direct payments allow money to be given to the client to enable them to purchase their own support package following an assessment of their needs.
- Gives clients more choice of how they want to use payments to buy in their care, i.e. go to course in technical college rather than day centre, fund a course, driving lessons
- Allows clients more flexibility, i.e. who they employ, times when employees come to them
- Can expect a tailor-made and more responsive service because they are in control.
- Gives clients more freedom and convenience
- The package of support will only be as good as the quality of the staff recruited, and therefore, if the client finds it hard to attract good workers they may have a poor service, so affecting their health & well-being
- Clients who apply for Direct Payments may have to go on waiting list while they wait for the Trust to allocate the funds (this may mean waiting for another client to die or no longer need the service)
- Waiting process can be very stressful for clients
- It can be hard to retain care workers due to low pay, conditions or pay
- It will also be necessary to meet the Trust/local authority's auditing requirements, for which support is provided.
- Clients may be worried they cannot get carers or if carer sick they cannot replace them quickly
- Clients must run the scheme like a business so need to take out special insurance, they may find this process difficult and feel there is too much responsibility on them
- If client lives in an rural area or an area where it is difficult to attract staff they may employ poor quality of staff, rather than have no support

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

**Level 1 ([1]-[2])**

Overall impression: basic understanding

- Displays limited knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 on clients requesting direct payments
- Limited, if any, attempt to evaluate the effectiveness of the legislation for clients
- 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 ([3]-[4])**

Overall impression: adequate knowledge & understanding

- Displays adequate knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 on clients requesting direct payments
- An adequate evaluation of the effectiveness of the legislation for clients
- 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 ([5]-[6])**

Overall impression: competent knowledge & understanding

- Displays a very good knowledge and understanding of impact of Carers and Direct Payments Act (NI) 2002 on clients requesting direct payments
- A good to excellent evaluation of the effectiveness of legislation for clients
- 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.

- (b) Discuss how the following aspects of the Care Value Base may be applied by staff working with patients in hospital (AO1, AO2, AO3)

#### Maintain Confidential Information

Answers may address some of the following points:

- Should share information on a need to know basis only
- Staff are never at liberty to keep secrets between themselves and the patient – staff work for organization and must inform other staff of critical information
- Staff must always follow the confidentiality policy e.g. files locked away, passwords used on computer
- Staff need to be careful not to breach confidentiality, particularly in informal chats at coffee/ travelling to work
- All reports must be typed on secure systems at work to retain privacy of information – staff cannot complete reports at home or transport files
- Staff should get agreement from patients to speak to family members
- Staff should speak to clients and/or family members in a private area when appropriate

#### Respect individuals beliefs and identity

Answers may address some of the following points:

- Staff accepting patients without judging them or making assumptions about them – expected to accept unconditionally the patients they care for
- Acknowledge a patient's beliefs and their right to exercise their beliefs, as far as possible within the hospital setting- as this relates very closely to person's identity
- Listen to their cultural needs and try and facilitate these as much as possible, e.g. dress, food, modesty
- Respect the patient's views and give them an opportunity to discuss them when necessary
- Show support and care for their beliefs & identity listening skills, body language and making constructive comments
- Listen to their religious beliefs and needs as these may be central to the patients view of themselves and facilitate the practice of their beliefs within the hospital setting, e.g. enabling ministers, rabbis, priests to visit and give as much privacy as possible
- Provides a translator or interpreter if needed

All other valid points will be given credit

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

(2 × [3])

[6]

- (c) Discuss how three policies in health and social care settings help maintain high standards of care for clients.

#### Whistle blowing

- Helps to identify and eliminate inappropriate practice, e.g. disciplinary action can be taken
- Helps to protect clients from abuse
- Helps to ensure client needs are met
- Helps to ensure standards are maintained
- Helps to ensure safer environment as staff are more careful about their practice
- Sets out clearly responsibilities of staff

#### Staff training

- Helps to ensure staff are appropriately qualified and informed
- Helps to ensure clients are cared for safely
- Keeps staff up to date with changes and developments
- Promotes quality care including anti-discriminatory practice
- Improves knowledge of policies and procedures
- Promoting rights, such as the right to safety
- Promotes confidence in carers and clients

#### Confidentiality Policy

- Protects clients' personal information
- Helps ensure medical information is not shared with unnecessary persons
- Encourage disclosure – helps ensure clients get appropriate treatment
- Promotes trust and confidence between carer and client
- Promotes mutual respect
- Helps clients to feel safe- staff will be disciplined if confidentiality is breached
- Allows for legislation to be implemented, e.g. Data Protection Act
- Promotes clients rights e.g. access to files

#### Health & Safety policies

- Help to ensure clients are in safe environment
- Outlines reporting procedures for accidents, hazards etc.
- Risk assessment
- Equipment checked and updated
- Makes staff aware of health & safety issues
- Sets out a schedule for staff training on health and safety

#### Protection from abuse of vulnerable adults

- Helps carers to identify abuse
- Outlines procedure for reporting abuse
- Protects clients
- Promotes sense of security for clients / families
- Allows for legislation to be implemented
- Helps to prevent abuse

Answers given must be clearly linked to how the policies maintain standards of care for clients in health and social care settings.

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

### Level 1 ([1]-[4])

Overall impression: basic understanding

- Displays limited knowledge and understanding of how the policies maintain standards of care for clients in health and social care settings
- Lists policies or discusses only one policy
- 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 & understanding

- Displays adequate knowledge and understanding of how the policies maintain standards of care for clients in health and social care settings
- Discusses three policies - analysis of policies adequate
- Answers which address fewer than three policies cannot achieve beyond this level
- 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 & understanding

- Displays competent knowledge and understanding of how the policies maintain standards of care for clients in health and social care settings
- At the top of this band an excellent analysis of three policies is required
- 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. [12]

**Total**

AVAILABLE  
MARKS

30

**100**