Rewarding Learning

ADVANCED
General Certificate of Education
2013

Health and Social Care

Assessment Unit A2 15

assessing

Unit 15: Human Nutrition and Dietetics

[A6H71]

THURSDAY 20 JUNE, AFTERNOON

MARK SCHEME

General Marking Instructions

Introduction

Mark schemes are published to assist teachers and students in their preparation for examinations. Through the mark schemes teachers and students will be able to see what examiners are looking for in response to questions and exactly where the marks have been awarded. The publishing of the mark schemes may help to show that examiners are not concerned about finding out what a student does not know but rather with rewarding students for what they do know.

The Purpose of Mark Schemes

Examination papers are set and revised by teams of examiners and revisers appointed by the Council. The teams of examiners and revisers include experienced teachers who are familiar with the level and standards expected of students in schools and colleges.

The job of the examiners is to set the questions and the mark schemes; and the job of the revisers is to review the questions and mark schemes commenting on a large range of issues about which they must be satisfied before the question papers and mark schemes are finalised.

The questions and the mark schemes are developed in association with each other so that the issues of differentiation and positive achievement can be addressed right from the start. Mark schemes, therefore, are regarded as part of an integral process which begins with the setting of questions and ends with the marking of the examination.

The main purpose of the mark scheme is to provide a uniform basis for the marking process so that all the markers are following exactly the same instructions and making the same judgements in so far as this is possible. Before marking begins a standardising meeting is held where all the markers are briefed using the mark scheme and samples of the students' work in the form of scripts. Consideration is also given at this stage to any comments on the operational papers received from teachers and their organisations. During this meeting, and up to and including the end of the marking, there is provision for amendments to be made to the mark scheme. What is published represents this final form of the mark scheme.

It is important to recognise that in some cases there may well be other correct responses which are equally acceptable to those published: the mark scheme can only cover those responses which emerged in the examination. There may also be instances where certain judgements may have to be left to the experience of the examiner, for example, where there is no absolute correct response – all teachers will be familiar with making such judgements.

AVAILABLE MARKS

1 (a) Complete the table below to include two functions and a rich source of each of the nutrients. (AO1, AO2, AO3, AO4)

Fat
Answers may address two of the following functions:
- concentrated source of energy
- formation of adipose tissue to insulate the body, warmth/heat
- protects vital organs
- provides body with fat soluble vitamins (A and D)
- provides body with essential fatty acids
- forms part of the structure of the cell membranes throughout the body, especially in the brain.

One of the following sources:
Meat, fish, butter, margarine, cooking fats, oils, milk, cream and cheese, baked goods, i.e. pastries, cakes, biscuits and breads, eggs, poultry, game, high fat snacks.

Riboflavin
Answers may address two of the following functions:
- needed for healthy skin, hair and nails
- nervous system
- normal growth and development
- forms part of the enzyme system
- involved in the oxidation of glucose
- release of energy in body cells and in the body's use of CHO, fats and protein for energy.

One of the following sources:
Fortified breakfast cereals, milk and milk products, meat, liver, kidney, eggs and green vegetables, fortified bread.

Vitamin D
Answers may address two of the following functions:
- absorption of calcium
- formation and development of teeth and bones
- uptake of calcium and phospherous by the bones and teeth.

One of the following sources:
Milk, cheese, yogurt, sunlight, egg yolk, liver, oily fish, fish liver oil, margarine, butter, fortified cereals.
[1] for source, [2] for two functions of each
[0] is awarded for a response not worthy of credit
(3 × [3]) [9]

(b) It has been recommended by the Chief Medical Officer that all women planning to become pregnant should increase their folate (folic acid) intake.

Discuss why the above recommendation has been made. (AO1, AO2, AO3)

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Answers may address the following points:
All women of childbearing age are advised to make sure their diet contains adequate supplies of folic acid before and during pregnancy especially in the first twelve weeks. Supplements containing 400 microgram (µg) folic acid have also been recommended because the first few weeks are the most important for the development of the neural tube. Studies have shown that to take folic acid may reduce the risk of the baby being born with neural tube defects such as spina bifida, cleft lip and palate. Folate deficiency can lead to anaemia as folic acid works with Vitamin B12 for red blood cell formation.
[1] for key phrase(s), [2] for explanation, [3] for discussion
(1 × [3]) [3]

(c) (i) Write down three factors that may influence Pauline's requirements for energy. (AO1)

Any three of the following:
- age
- gender
- physical activity level/exercise/occupation
- body mass.

[1] for each valid point
(3 × [1]) [3]

(ii) Discuss the impact on Pauline's health if her intake of the three nutrients remains at their current level. (AO1, AO2, AO3, AO4)

Answers may address the following points:

- Energy – Pauline's energy exceeds her recommended daily amount. This can be an advantage as she will have energy reserves that can be used for warmth and will provide her muscles with energy at times of exertion. The negative aspect of her daily intake is that, if she does not burn or use the energy up, it can result in weight gain and over a period of time could eventually lead to other risk factors associated with obesity, i.e. diabetes, heart disease.

- Iron – Pauline's intake is below her recommended daily intake for iron which could result in anaemia. Signs and symptoms of anaemia. Iron is essential for the formation of haemoglobin in red blood cells; haemoglobin binds oxygen and transports it around the body, this may not take place if Pauline does not increase iron intake. Iron is necessary for normal immune function.

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- Protein – Pauline's protein intake is below the recommended level which could result in Pauline's overall health and wellbeing suffering. Nitrogen balance will be affected. Proteins are the main constituents of the cells of the body and are therefore required for growth and maintenance. Pauline may experience poor wound healing and be lacking in energy. Hair may thin or stop growing.

All other valid points will be given credit.
[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion
(3 × [3]) [9]

(d) Ryan, aged 12, visits his grandmother Pauline every week and stays for lunch. Pauline always makes Ryan his favourite pasta dish followed by a treat of sweets and a fizzy drink.

This meal is comprised of carbohydrates, both starch and sugars.

Discuss how these two types of carbohydrates may affect Ryan's health. (AO1, AO2, AO3, AO4)

Starch
Answers may address the following:

- If Ryan focuses on starchy, high-fibre, wholegrain cereals and does not receive his carbohydrate from the rapidly absorbed, refined cereals and sugary foods this will all help to lower the GI of his diet. Low GI help maintain Ryan's blood sugar levels. Starchy carbohydrates are usually foods with a lower glycaemic index (GI). A high-fibre diet may reduce the risk of developing Type 2
- Starchy foods such as potatoes, breads and pasta provide other nutrients also. Ryan will therefore be meeting his requirements for protein and B group vitamins and minerals such as calcium and iron which are vital throughout the adolescent period
- Starch in the diet can help cut down on the amount of fatty foods that Ryan may include in his diet. Starch in foods can help fill him up and keep him feeling fuller for longer, therefore Ryan is less likely to eat high fat snacks such as fast food, doughnuts and crisps
- The slow and steady digestion of food through the gut helps control blood sugar and assists with weight maintenance
- Starchy foods higher in fibre/NSP promotes bowel regularity and keeping the gastrointestinal tract clean to help reduce the risk of developing and constipation
- A high fibre diet may reduce the risk of developing Type 2 diabetes
- Carbohydrate acts as a protein sparer so that protein will be used for its primary function which is growth
- May also reduce cholesterol levels.

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Sugars

Answers may address the following:

- Sugars are the main dietary component associated with dental caries
- If Ryan continues to eat too much sugar, this will have a negative impact on his oral health as the greater the time during which the tooth is exposed to the low pH (acid) levels at which demineralisation occurs
- Diets high in sugar can result in later years of Type 2 Diabetes and increased blood pressure, heart disease, stroke and kidney disease
- Diets high in sugar raise blood sugar and insulin production and can result in later years in Type 2 Diabetes
- Sugars can also impact on Ryan's weight control, if they are not burned off as energy, the sugars will be stored as fat and contribute to obesity.

All other valid points will be given credit.

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

Level 1 ([1]–[3])

Overall impression: basic

- displays limited knowledge of how both starch and sugar may affect Ryan's health
- there is limited discussion.

Level 2 ([4]–[6])

Overall impression: adequate

- displays adequate knowledge of how both starch and sugar may affect Ryan's health or competent discussion of one achieves at this level
- there is adequate discussion of both starch and sugars or the discussion of one may be stronger than the other.

Level 3 ([7]–[9])

Overall impression: competent

- displays good knowledge of how both starch and sugar may affect Ryan's health
- there is competent discussion of both
- starch and sugars are both competently discussed to achieve at the top of this band. [9]

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2 (a) Using the headings below, discuss the dietary advice Tania should consider when planning meals for her son Isaac. (AO1, AO2, AO3, AO4)

Milk and dairy

Answers may address two of the following:

- Tania should encourage Isaac to consume full fat milk and dairy products such as cheese, yogurt and fromage frais as these are particularly good sources of bio-available calcium, which is important for bone development, as well as providing a range of other nutrients
- Tania should ensure Isaac consumes at least 300ml of milk or two servings of dairy foods daily. It is better to give whole milk and full fat dairy products to children under the age of 5
- If Tania decides to give Isaac reduced fat milk she should consider government advice which indicates that skimmed or 1% fat milk should not be given to a child under age 5, and that semi-skimmed milk should not be given to a child under age 2
- Milk and diary products also contain Vitamin D which works along with calcium to promote the absorption of calcium
- Milk and dairy products are important sources of Vitamin A required for the normal growth of children. Vitamin A is also needed for 'visual purple' and healthy retina.

[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion

Fruit and vegetables

Answers may address two of the following:

- Tania should encourage Isaac to eat a variety of different fruit and vegetables, gradually working up to five portions a day
- There are no specific guidelines for portion sizes of fruit and vegetables for young children, but portions will be smaller than for adults
- Tania could puree fruit and vegetables and make smoothies and nutritious soups for Isaac. This will ensure all the essential vitamins and minerals are received in the diet
- NSP required for healthy digestive system.

[1] for key phrase(s) [2] for adequate discussion, [3] for fuller discussion

Foods high in fat and sugar

Answers may address two of the following:

- Pre-school children require plenty of high energy, nutrient dense foods to help them meet their nutritional requirements
- Tania should consider that foods such as chips, some crisps, cakes, biscuits and fried foods that are high in fat should not be given too often, to help encourage good eating habits from an early age
- Most toddlers enjoy sweet foods and drinks and a small amount of sugar at mealtimes is fine however, Tania should not offer foods and drinks containing sugar in-between meals, as this is more likely to cause tooth decay

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- Dried fruit and fruit juice can also cause decay if consumed too frequently, so these are also best kept to mealtimes
- Too many sugary foods will result in poor oral health
- Too many fatty foods will result in the development of obesity in later life
- Tania could also offer alternatives to high fat and sugar food such as carrot sticks, cheese sticks and frozen fruit
- Tania should offer foods which contain natural, intrinsic sugar, e.g. fresh fruit and vegatables in preference to foods high in extrinsic sugars.

[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion

(3 × [3]) [9]

(b) The daily recommended maximum salt intake for children aged 1–3 is 2g.

Write down three tips for reducing children's salt intake. (AO1, AO2, AO3)

Any three of the following:

- Check food labels for salt content
- Avoid manufactured or processed foods, such as crisps, bacon, ham, sausages and other meat products, ready meals and ready prepared sauces
- Balance meals with high potassium foods such as fresh fruit, vegetables, if it is thought the meals are high in sodium
- Limit intake of salty snacks, such as crisps, which encourage an increased liking for salty foods
- Use low salt or reduced salt alternatives (e.g. reduced salt bread, baked beans and ready meals)
- Avoid adding salt to foods during cooking
- Avoid adding salt to food at the table
- Use herbs and spices instead of salt in cooking.

(3 × [1]) [3]

(c) Discuss the potential effects of anorexia nervosa on Judith. (AO1, AO2, AO3, AO4)

Answers may include the following:

- Anorexia will weaken the immune system
- Irregular periods – many people with anorexia have irregular periods as hormone levels can be affected by poor diet. Her periods may even stop all together in the longer term she may become infertile (unable to have a baby)
- Chemical imbalances in the body – these are caused by either repeated vomiting or excess use of laxatives, for example, a low potassium level which may cause tiredness, weakness, abnormal heart rhythms, kidney damage, kidney stones and failure, and convulsions. Low calcium levels can lead to tetany (muscle spasms)

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- Thinning of the bones (osteoporosis) – this is caused by a lack of calcium and vitamin D and can lead to easily fractured bones
- Bowel problems – these may occur if you take a lot of laxatives. Laxatives can damage the bowel muscle and nerve endings. This may eventually result in permanent constipation and also sometimes abdominal pains. Digestive system damage
- Swelling of hands, feet and face – this is usually due to fluid disturbances in the body
- Teeth problems – these can be caused by the acid from the stomach rotting away the enamel with repeated vomiting
- Dramatic weight loss and emaciation, malnutrition and dehydration
- Nervous system is affected resulting in a variety of psychological effects
- Anaemia – having a diet low in iron can lead to anaemia. This could make Judith feel weaker and more tired than normal. Dizzy spells and feeling faint can also occur due to low blood pressure
- Judith could become moody, irritable or depressed – negative psychological and emotional effects, e.g. anxiety and a compulsive relationship with both food and exercise
- Decrease in body temperature – cold hands and feet – inability to regulate °C
- Decrease in metabolism and slower heart rate – possible heart problems
- Judith may die
- Hair and skin problems – Judith may find she has downy hair on her body and also the hair on her head may become thinner. She may also have dry, rough skin, bruise easily, get cold easily, skin can be yellow in colour and nails become brittle.

All other valid points will be given credit.
[0] is awarded for a response not worthy of credit

Level 1 ([1]–[3])
Overall impression: basic

- displays limited knowledge of the potential effects of anorexia nervosa on Judith
- there is limited discussion or effects are listed
- 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.

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Level 2 ([4]–[6])
Overall impression: adequate

- displays adequate knowledge of the potential effects of anorexia nervosa on Judith
- there is adequate discussion
- 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

- displays good knowledge of the potential effects of anorexia nervosa on Judith by discussing a wide range of effects
- there is competent discussion
- 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. [9]

(d) Discuss how adults can reduce the risk of becoming obese by following a healthy diet. (AO1, AO2, AO3, AO4)

Answers may address the following:

- Follow a regular meal pattern
- Following a low fat and low energy diet
- Eating more water-rich foods such as fruits and vegetables
- Choosing more starch and high fibre foods is also important because fibre helps to keep energy density low, will fill you up and keeps you feeling fuller for longer
- Considering the calorie cost of alcoholic drinks and the fact that alcohol can stimulate appetite and encourage people to eat more
- Reducing the amount of food eaten each day
- Eating fresh food rather that processed and preserved foods, i.e. pastries, pies, etc.
- Eating more chicken, fish, lean meat or meat alternatives
- Having smaller portion sizes
- Using lower fat dairy products such as semi or skimmed milk and replacing butter and hard margarines with soft margarines and low fat spreads
- Grilling, boiling, steaming, dry frying or microwaving foods rather than frying them
- Using liquid oils for cooking rather than lard or hardened cooking fats
- Reducing the amount of NMES, i.e. manufactured cakes, biscuits, sweets, etc.

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- Avoiding adding fat during the cooking process
- Cutting down on high sugar/fatty snacks, e.g. chocolate bars or crisps between meals
- Drinking water
- Check fat and sugar content of food labels.

All other valid points will be given credit.
[0] is awarded for a response not worthy of credit

Level 1 ([1]–[3])
Overall impression: basic.

- displays limited knowledge of how adults can reduce the risk of becoming obese by following a healthy diet
- there is limited discussion, may list several ways or use bullet points
- 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.

- displays adequate knowledge of how adults can reduce the risk of becoming obese by following a healthy diet
- there is adequate discussion
- 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.

- displays good knowledge of how adults can reduce the risk of becoming obese by following a healthy diet
- there is competent discussion
- 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

- displays very good to excellent knowledge of how adults can reduce the risk of becoming obese by following a healthy diet
- there is highly competent discussion
- 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]

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3 **(a)** Explain why each of the following is good practice when preparing food in the canteen. (AO1, AO2)

Tying back long hair and covering it with a protective cap
Answers may address the following points:
- hairs and danruff do not fall into food and may be a source of contamination
- cap will prevent hair from being trapped in food preparation machinery
- cap will ensure levels of personal hygiene are maintained
- prevents food handler touching hair and transferring bacteria from hair to hands to food.

Removing rings from fingers and then washing hands
Answers may address the following points:
- this will ensure bacteria caught under the jewellery will be washed away
- whole hands and creases between fingers will be thoroughly sterilised
- this will prevent rings falling into food and prevent dirt on the ring coming into contact with food.

[1] for key phrase(s), [2] for full explanation
(2 × [2]) [4]

(b) Temperature affects the growth of bacteria. Write down three other factors that affect the growth of bacteria. (AO1)

- time
- moisture
- food
- oxygen
- pH.

[1] for each of any three
(3 × [1]) [3]

(c) Using the following headings, discuss the procedures which the canteen staff should follow to ensure optimum standards are maintained when storing food. (AO1, AO2, AO3)

Stock rotation
Answers may address the following:
- check the date mark on stored foods and throw away food that is out of date
- keep oldest food to front
- FIFO system.

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Temperature control
Answers may address the following:
- store perishable food in a refrigerator that is operating at 5°C; this can be checked by using a refrigerator thermometer
- store frozen food in a freezer that is operating at –18°C or below
- check operating temperatures
- keep food out of the danger zone 5–63ºC.

All other valid points will be given credit.
[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion
(2 × [3]) [6]

(d) Discuss how the following factors may influence an older person's food choice. (AO1, AO2, AO3)

Labelling
Answers may address the following:
- User friendly labels
- The ingredients list can help people work out how healthy the product is or if it is a risk to their health, e.g. if they have a nut allergy
- Nutrition information on labels can help people choose between products, and keep a check on the amount of foods high in fat, salt and added sugars that they are eating
- Some nutrition labels on the back or side of packaging also provide information about Guideline Daily Amounts (GDAs) and additional information on saturated fat, sugars, sodium, salt and fibre. If individuals are trying to make healthy choices this can influence their choice of food
- Advertising labels, e.g. "meal for one" will influence choice
- Cooking instructions can attract people, e.g. microwaving is perceived as quick and easy
- Ready meals cooking time
- How long the food will keep
- How the food should be stored.

[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion

Availability
Answers may address the following:
- Local shops that older people can access easily may have a limited range of foods available
- Some foods are only available in amounts that older people may perceive as too much for them, e.g. family size packs
- Seasonal availability influences choice.

[1] for key phrase(s), [2] for adequate discussion, [3] for fuller discussion
(2 × [3]) [6]

(e) Analyse the nutritional needs of older people and the risks to their health should their nutritional needs not be met. (AO1, AO2, AO3, AO4)

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Answers may include:
Nutritional needs

- Diet should be high in calcium and vitamin D to help prevent decalcification of bones and teeth
- Protein is important to maintain and renew cells
- Protein requirements may also be increased in some older people due to illness
- Omega 3 – fatty acids found in fish oils, eye, heart and brain health
- Fibre/NSP levels need to increase to prevent constipation caused by the slowing of the digestive system and reduced mobility
- Iron is required to prevent anaemia, formation of red blood cells and transport of oxygen to tissue
- Important need at this stage in life cycle for nutrient dense foods
- Older people need regular frequent intake of small portions
- Vitamin A – maintenance of mucous membranes and eyes adaptation to light; antioxidant may help prevent cancers, cataracts and heart disease
- Vitamin C – assists absorption of iron, anti-oxidant action, good wound healing
- Carbohydrate – need reduced due to changes in energy requirements
- Vitamin E Important role as an anti-oxidant. Vitamin E protects lipids against free radical change – this means that cell membranes can be damaged leading to increased risk of inflammatory diseases such as rheumatoid arthritis. Free radicals can cause other damage therefore vitamin E is thought to give some protection against some forms of cancer
- Thiamin – older people require this for the release of energy within the body
- Vitamin B12 – required in older people to work with folic acid for red blood cell formation
- A sufficient intake of fluids

Health risks

- If a healthy balanced diet is not supplying a range of nutrients then deficiencies may occur, e.g. iron deficiency anaemia
- Bone/joint disorders/osteoporosis/osteomalacia and fractures – calcium and vitamin D
- Malnutrition – older people who do not meet their nutritional needs may risk becoming malnourished this could be due to older person being in care, hospital or living alone
- Bowel/digestive disorders – if older people do not meet their RDA for fibre and fluid the risk may be of diverticular disease/ constipation/certain forms of cancer
- Dehydration
- Weakened immune system which can make fighting off viruses, bacteria and diseases difficult

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- Cancer, dementia and heart disease – inadequate intakes of folate and Vitamin B12.

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

- displays limited knowledge of the nutritional needs of older people and the risk to their health if not adequately met
- there is limited analysis
- answers may focus on only needs or only risks
- 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

- displays adequate knowledge of the nutritional needs of older people and the risk to their health if not adequately met
- there is adequate analysis
- candidate who fail to address both needs and risks cannot achieve beyond this band
- 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

- displays good knowledge of the nutritional needs of older people and the risk to their health if not adequately met
- candidates need to produce a competent analysis of both the nutritional needs and the health risks to achieve at the top of this band
- 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

- displays very good to excellent knowledge of the nutritional needs of older people and the risk to their health if not adequately met.
- there is highly competent analysis of all the nutritional needs and a wide range of health risks
- 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]

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Total | **100**