



Rewarding Learning

ADVANCED
General Certificate of Education
2017

Health and Social Care

Assessment Unit A2 9

assessing

Unit 9: Providing Services

[A6H31]

FRIDAY 2 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.

- 1 (a) Complete the table below to explain one different way each of the sectors of the mixed economy could contribute to supporting service users with a learning disability such as Autistic Spectrum Disorder or Down's Syndrome. (AO1, AO2)

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Statutory

- conducts assessments to reach a diagnosis, e.g. a paediatrician carrying out screening test for autism
- provides access to a range of professionals, e.g. referrals to speech therapist, psychologist
- ensures provision of IEP to meet needs in line with SENDO
- provides day centres which provide activities to meet needs
- designs care plan to meet individual needs
- monitors and updates care plan according to changes in situation
- funds and arranges residential care and other services/equipment

(Accept answers that focus on the services provided by particular practitioners such as GPs)

Private

- provides private assessment and diagnosis which means treatment and management can begin sooner
- may provide treatments not available from Trusts or for which waiting list may exist, e.g. speech therapy, Applied Behaviour Therapy (ABA), holistic therapies
- may provide trained professionals for one-to-one treatment/support
- may provide opportunities for respite care
- may provide supported living accommodation and associated services

Voluntary

- may provide information and advice via specialist websites or helplines – e.g. Autism NI
- may provide practical support at home for individual and their family, e.g. Mencap
- may support families to access benefits to which they are entitled
- may provide opportunities for respite care – this may involve arranging holidays or other recreational activities for the individual with a learning disability which allows them opportunities to socialise and interact with others
- may provide day centres where service users can enjoy a range of activities such as gardening
- may support applications to gain access to training schemes
- may provide training and employment
- may provide support groups for service users and their families
- may lobby government leading to legislation which improves the lives of people with disabilities, e.g. equality legislation

Informal

- may provide 24-hour care in own home environment
- may make appointments for specialist care and treatment and follow-up care
- may advocate to other professionals/agencies on behalf of the service user to ensure needs are properly met
- may provide transport to appointments
- may meet wide range of physical needs

All other valid responses will be given credit.

[1] for key phrase/s, [2] for explanation

(4 × [2])

[8]

(b) Explain three reasons for the increasing numbers of service users with learning disabilities in Northern Ireland. (AO1, AO2)

- definition of learning disability has widened leading to increased numbers being diagnosed
- increased survival rates at birth of babies with complex disabilities which lead to learning disability
- increased life expectancy amongst older adults with learning disability, e.g. due to improvements in nutrition
- improved health and social care leading to increase in life expectancy of individuals with a learning disability
- improved screening tests before and after birth which leads to diagnosis
- improvement in understanding conditions which leads to referral and diagnosis, e.g. better understanding of Autistic Spectrum Disorder (ASD) leading to diagnosis
- greater recognition of impact of learning disability has led to more training for professionals such as GPs, teachers and this has led to increase in diagnosis
- availability of funding to support individuals with learning disability has also led to increase in diagnosis so that available funding can be utilised
- reduced stigma means more people willing to come forward to be diagnosed, so higher numbers

All other valid responses will be given credit.

[1] for key phrase/s, [2] for explanation

(3 × [2])

[6]

(c) Discuss how the following needs of a young child with a learning disability such as Autistic Spectrum Disorder may be met by staff in a mainstream school. (AO1, AO2, AO3)

Social needs

Answers may address some of the following:

Social needs such as the need for communication/interaction and friendship with others can be met by creating opportunities to mix with others in the classroom environment and at break times by:

- organising group activities so that the child gets the opportunity to interact
- ensuring the individual learning plan (IEP) recognises the need to support the child in the area of social needs
- providing appropriate curriculum to ensure social needs are addressed

All other valid responses will be given credit.

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

(1 × [3])

[3]

Emotional needs

Answers may address some of the following:

Emotional needs such as esteem needs, the need for a sense of belonging, the need for a sense of autonomy, or emotional well-being and the need to feel respected can be met by:

- helping the child maintain records of achievement
- ensuring a bullying policy is implemented by all staff
- using systems to record positive comments, e.g. SIMs
- rewarding achievement

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- staff spending time talking and listening to the child/liasing with family
- offering activities and training to help the child deal with frustration/ anger associated with learning disability
- involvement of multi-disciplinary teams to ensure needs are properly met
- by ensuring routines are maintained so the child does not experience undue stress

All other valid responses will be given credit.

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

(1 × [3])

[3]

Intellectual needs

Answers may address some of the following:

Intellectual needs such as need to reach full potential, need to engage in appropriate activities to prevent frustration, manage anger etc. and maximise independent skills, need to develop language/communication skills can be met by:

- encouraging and supporting a child through appropriate curriculum provision to learn skills such as taking turns, completing activities
- provision of speech therapy or other techniques to maximise ability to communicate with others
- provision of an IEP to enable children to reach full potential
- classroom assistant support
- appropriate activities and games to stimulate thought, e.g. puzzles

All other valid responses will be given credit.

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

(1 × [3])

[3]

- (d) Discuss three advantages of a multi-disciplinary approach to the care of service users with learning disabilities. (AO1, AO2, AO3, AO4)

Answers may address any three of the following points:

- holistic care is more likely to occur and so service users' needs are more likely to be met because there is a wide range of professionals with different specialisms working together to meet needs, e.g. OT, speech therapist, GP, learning disability nurse etc.
- as a service user's condition changes over time, the composition of the team can change to reflect the changing physical and psychosocial needs of the service user so other professionals can join the team when needed – team working makes it more likely that the involvement of other professionals is smooth and timely
- problems can be identified and dealt with thus avoiding delays which may be damaging for the service user
- more efficient use of resources as it is less likely that care is duplicated by practitioners or that questions are asked repetitively
- improved outcomes and enhanced satisfaction for service users
- enhanced job satisfaction for team members due to greater likelihood of delivery of quality care for the service user and so staff morale boosted
- makes it less likely that service users fall through the net and needs go unmet
- information can be passed on more easily which can lead to better quality care provision

- the expertise of a range of professionals likely to improve quality of care a service user receives
- from an operational point of view all team members are aware of progress and decisions meaning if sickness or annual leave happens the service user's care does not stop
- makes it more likely that seamless care is achieved – this is particularly relevant where service user progresses through from children to adult services
- the service user is less likely to experience abuse or discrimination as many professionals/carers are involved and so more likely to be identified

All other valid responses will be given credit.

[0] will be awarded for a response not worthy of credit.

Level 1 ([1]–[3])

Overall impression: basic

- Displays limited knowledge of the advantages of a multi-disciplinary approach to the care of service users with learning disabilities
- May list points or discuss only one
- There is limited discussion
- 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 the advantages of a multi-disciplinary approach to the care of service users with learning disabilities
- At least two advantages must be discussed to achieve at this level
- 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.
- Quality of written communication is adequate

Level 3 ([7]–[9])

Overall impression: competent

- Displays very good knowledge of three advantages of a multi-disciplinary approach to the care of service users with learning disabilities
- There is competent discussion
- At the top of this mark band candidates should discuss three advantages of a multi-disciplinary approach to the diagnosis and care of individuals with a learning disability
- 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]

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- 2 (a) Write down three ways a service user with a learning disability might gain access to the services they require. (AO1)

- self-referral – service user may refer themselves if they have a mild learning disability
- third-party referral, e.g. by family member
- emergency referral, e.g. police or social services referral
- professional referral, e.g. by GP
- recall, e.g. by dentist
- compulsory referral

(3 × [1]) [3]

- (b) Explain one way the barrier of geographical location might be broken down for service users with learning disabilities. (AO1, AO2)

Geographical barrier

Answers may include:

- by telephone help lines where service users (as appropriate) and/or their relatives may get advice about issues they are dealing with
- by information on the internet, chat rooms or blogs giving advice about issues of concern
- by providing transport to facilities such as schools, after school clubs, day centres, work training schemes etc., e.g. free taxi service or bus pass provision
- by provision of health care in service user's own home or community, e.g. visit from learning disability nurse, speech therapist, domiciliary visits by speech therapist or OT

All other valid responses will be given credit.

[1] for key phrase/s, [2] for explanation

(1 × [2]) [2]

- (c) Analyse the role of the learning disability nurse in supporting service users with learning disabilities. (AO1, AO2, AO3, AO4)

Answers may address some of the following points:

- may help the service user to access medical care – may contact the GP or other professionals on service user's behalf
- may draw up a care plan which identifies needs and review and update accordingly
- may support service user to make decisions about going to college, going on holiday or engaging in leisure activities
- may plan activities, social events and holidays with service users living in supported accommodation
- may organise respite care for service user and their family to relieve burden of care
- may observe and interpret behaviour and well-being of service user and act accordingly – this may mean that a referral to another professional may be required and so learning disability nurse would organise this, e.g. concerns about abuse
- may liaise with hospital staff to arrange admission – to help ensure seamless transition and seamless care and minimise impact on service user
- may prescribe medication
- use appropriate communication methods to support service users to be understood

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- may advocate on behalf of service user to ensure wishes are considered and needs properly met
- may assist with and/or carrying out assessments including diagnostic tests and observations to reach a diagnosis or change in service user's condition
- may organise emergency admission to hospital
- may organise home visits to check on well-being of service user and that they are being properly looked after or coping themselves depending on extent of learning disability/promoting safety of SU/reducing risk of abuse
- may co-ordinate health care reviews in conjunction with other professionals to ensure service user's needs are being properly addressed
- may support staff and carers in the community to ensure their needs and needs of the service user are being addressed
- may make a range of referrals, e.g. to day centres, voluntary organisations
- may advise service users and their families, e.g. on finances and benefits
- may organise for a support worker
- works with SU and family to promote independent living skills, e.g. cooking and financial management
- may be involved in health promotion and disease prevention with SU's, e.g. healthy eating, STI advice

All other valid responses will be given credit.

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

Level 1 ([1]–[4])

Overall impression: limited

- Displays limited knowledge and understanding of the role of the learning disability nurse in supporting service users with learning disabilities
- There is limited analysis
- 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 and understanding of the role of the learning disability nurse in supporting service users with learning disabilities
- 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

- Displays good to excellent knowledge and understanding of the role of the learning disability nurse in supporting service users with learning disabilities

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- 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. [12]

(d) Discuss four ways codes of practice influence standards of care for service users with learning disabilities. (AO1, AO2, AO3, AO4)

Answers may address any four of the following points:

- set out the standards expected of workers and inform service users and the public about the standards of conduct they can expect so they can challenge standards of care which fall below this
- regulate practice within a profession – each code requires staff to follow rules and regulations and those who do not can be disciplined by their regulatory body
- help to promote fair treatment for all service users – codes require staff to treat service users in their care equitably and not show favour or give preferential treatment
- inform and guide practice so that staff know what to do in any given situation and service users receive appropriate care and treatment
- reflect legislative requirements for appropriate standards of care, e.g. the need to maintain confidentiality as outlined in the Data Protection Act 1998
- reduce confusion about the roles and responsibilities of staff so that service users are cared for appropriately and safely
- set ethical standards for practice
- inform staff about the part they are expected to play in the regulation of appropriate standards
- encourage staff to review their own standards of practice and update their knowledge and skills

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

- respect patients/service users 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 service users
- promote the independence of service users while protecting them as far as possible from danger or harm
- honour work commitments, agreements and arrangements and, when it is not possible to do so, explain why to service users and carers

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 codes of practice influence standards of care for service users with learning disabilities

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- There is limited discussion
- May list ways or discuss one way
- 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 codes of practice influence standards of care for service users with learning disabilities
- There is adequate discussion
- Must discuss at least two ways to achieve at 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 ([7]–[9])

Overall impression: competent

- Displays good knowledge of how codes of practice influence standards of care for service users with learning disabilities
- There is competent discussion
- Must discuss at least three ways to achieve at this level
- At the top of this mark band candidates should discuss three ways codes of practice influence care for service users with learning disabilities
- 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 codes of practice influence standards of care for service users with learning disabilities
- There is highly competent discussion
- At the top of this level candidates should discuss in detail four ways codes of practice influence standards of care for service users with learning disabilities
- 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) Outline the following political ideologies with regard to the provision of health and social care services. (AO1, AO2, AO3)

Social democracy

Answers may address any of the following points:

- values collective responsibility – everyone should contribute to health and care service provision through national insurance and the existence of a welfare state
- supports state involvement – where the government controls health and care services which should be free at point of delivery
- charitable and private health and welfare provision is acceptable only if it is a matter of choice – the overriding ideology is that the state system must be comprehensive and provide a high standard of health and social care services
- social justice – everyone should be equally entitled to state support, e.g. universal benefits like state pensions
- a strong belief that citizens have the right to be free from poverty therefore the state should provide for those with disabilities or illnesses who cannot work in a bid to reduce inequality and prevent poverty

All other valid responses will be given credit.

[1] for key phrase/s, [2] for adequate outline, [3] for detailed outline
(1 × [3]) [3]

Liberalism

- emphasises personal and family responsibility for health – look after your own where possible and don't expect the government to take full responsibility for the provision of health, care and welfare of you and your family
- believes that health and care services should be targeted at those in need of additional support, not everyone – they support means testing
- too much state involvement leads to a 'dependency culture' – the State should provide services for the relatively small numbers of deserving citizens who cannot otherwise provide for themselves all others should make provision for themselves
- private companies should be involved in delivering health and social care services as the competition this creates leads to a much more cost effective outcome and reduces the costly bureaucratic government agencies
- there should be a mixed economy of welfare provision (state, voluntary and private), with the state providing services where private companies cannot profit or where charities cannot undertake the task
- strong support for the idea of lower taxation to allow people more choice and independence enabling them to purchase private pensions or private healthcare

All other valid responses will be given credit.

[1] for key phrase/s, [2] for adequate outline, [3] for detailed outline
(1 × [3]) [3]

- (b) Explain three ways rationing care and treatment might affect a service user with a learning disability. (AO1, AO2, AO3)

- PIES impact – explanation of any three of these is acceptable
- may have to move house to another area – post code lottery
- may not reach their full potential/condition may deteriorate

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- may have difficulty communicating/expressing words
- may have behavioural problems due to frustrations associated with lack of appropriate support
- may become isolated due to lack of care and support being provided
- may lead to waiting lists which can cause problems such as changes in behaviour
- needs may not be met

All other valid points will be given credit.

[1] for key phrase/s, [2] for explanation

(3 × [2])

[6]

- (c) Discuss four ways the Carers and Direct Payments Act (NI) 2002 can support informal carers who provide care for individuals with learning disabilities. (AO1, AO2, AO3)

- the Act places a requirement on Trusts to inform carers of their right to a carer's assessment and gives Trusts the power to supply services directly to carers to help the carer in their caring role. This assessment can be carried out even where the person cared for has refused an assessment or the provision of personal social services
- the Act also allows Trusts to make direct payments to carers aged 16 and over for the services that meet their own assessed needs; to people with parental responsibility for disabled children; to disabled people with parental responsibility for a child; and to 16- and 17-year-old disabled children for services that meet their own assessed needs
- the Act enables an HSS Trust to provide services directly to carers following a carer's assessment. A decision is taken as to whether the carer has any needs in relation to the care that he provides for the person cared for. The HSS Trust must then decide whether or not it can provide services to meet those needs
- the Act empowers an HSS Trust to provide any services that in its view will help the carer care for the person cared for. These services may take the form of physical help, for example assistance around the house, or other forms of support such as training or counselling for the carer
- the Act provides carers with the opportunity to request respite care for the service users – this allows them to have a break from caring which may help to relieve stress associated with providing effective informal care. The Act allows HSS Trusts to issue vouchers for short-term breaks. Vouchers are defined in section (2) and will enable the carer or person cared for to arrange for someone to provide services for him or her, in place of the care which would otherwise have been provided to him or her by the carer (either at home or in a residential setting) while the carer takes a break from the caring role. It is intended that the regulations will include provision for vouchers expressed either in terms of money, or for the delivery of a service for a period of time, or both.
- the Act provides carers with the right to have an assessment of their own ability to provide care which means that any assessment must ensure that the individual providing care is up to the role. This assessment will enable HSS Trusts to decide what services, if any, should be provided direct to the carer
- it enables carers to be paid for work that they do and it recognises the contribution made by informal carers which for many years was ignored and neglected by government thus attaching some value to the work they do

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All other valid responses will be given credit.

[1] for key phrase/s, [2] for adequate discussion, [3] for fuller discussion of each way

(4 × [3])

[12]

- (d) Discuss four advantages and four disadvantages of the informal sector providing care for individuals with learning disabilities. (AO1, AO2, AO3, AO4)

Advantages of informal sector providing care may include:

- the individual is more likely to get one-to-one attention whereas this can be more difficult to achieve in more formal care settings
- care is likely to be more consistent as often the same person/people provide the care over a long period of time which can be reassuring for service users with a learning disability such as autism who often struggle with meeting new people
- much more likely that a sense of trust is established between the individual and the carer which is likely to lead to better quality care
- informal care is much more cost effective – a lot less expensive than private care or statutory care
- greater flexibility, e.g. no opening and closing times unlike other more formal care providers meaning care is available 24/7
- due to the close relationships which often exist between the carer and the individual being cared for, e.g. may be mother/father caring for son, good relationships between the carer and the individual are more likely to exist which can lead to greater understanding of needs, in turn leading to better quality of care
- the familiar home environment can reduce anxiety which often service users with learning disability can experience if they are introduced to a new setting and new people
- the individual can have regular contact with family and friends – this can promote a sense of well-being and happiness and prevent anxiety and stress associated with meeting new people and new routines
- individuals are being looked after by people they know and love such as parents/siblings which makes it more likely that quality of care will be appropriate
- informal carers perform a range of tasks to meet a variety of needs and are often not as rigid about care provision as workers in the statutory or private sector might be
- more likely to be given opportunities to develop independence, e.g. cooking – this can be difficult in stat. sector due to health and safety legislation

All other valid responses will be given credit.

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

Disadvantages of informal sector providing care may include:

- due to the nature of informal care it is largely unregulated – meaning no checks on the quality of care provided
- no requirement for criminal check so greater potential for neglect or abuse
- carers are often untrained – may not be equipped to provide quality care and so needs may not be appropriately met
- individuals may miss out on opportunities to socialise with others as they would be able to do while receiving care in other sectors of the mixed economy

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- may be unreliable – there may be no backup if carer becomes ill or needs time off and so the individual may be left without adequate support
- the home environment may be unsafe – lack of security may leave individuals vulnerable to crime etc.
- carers could experience stress and not cope well, so the individual being cared for informally may suffer

Level 1 ([1]–[4])

Overall impression: basic

- Displays limited knowledge of the advantages and disadvantages of the informal sector providing care for individuals with a learning disability
- There is limited discussion
- 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 informal sector providing care for individuals with a learning disability
- There is adequate discussion
- Answers which focus **only** on the advantages **or only** on the disadvantages of the informal sector providing care for individuals with a learning disability 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 advantages and disadvantages of the informal sector providing care for individuals with a learning disability
- There is competent discussion
- At the top of this mark band candidates should discuss a minimum of three advantages and three disadvantages
- 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 informal sector providing care for individuals with a learning disability
- There is highly competent discussion

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- At the top of this mark band candidates should discuss all four advantages and all four disadvantages in detail with clear application to the service user group
- 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]

Total**AVAILABLE
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100