

Cambridge NATIONALS LEVEL 1/2



CHILD DEVELOPMENT

Combined feedback on the June 2017 exam paper
(including selected exemplar candidate answers and
commentary)

Unit R018 – Health and well-being for child development

Version 1

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INTRODUCTION

This resource brings together the questions from the June 2017 examined unit (Unit R018), the marking guidance, the examiners comments and the exemplar answers into one place for easy reference.

We have also included exemplar candidate answers with commentary for questions 2c, 4c and 5a.

The marking guidance and the examiner's comments are taken from the Report to Centre for this question paper.

The Question Paper, Mark Scheme and the Report to Centre are available from:

<https://interchange.ocr.org.uk/>

OCR
Oxford Cambridge and RSA

**Level 1/2 Cambridge National in
Child Development**
R018/01 Health and well-being for child development

Thursday 15 June 2017 – Morning
Time allowed: 1 hour 15 minutes

No additional materials required for this Question Paper

First name
Last name
Centre number
Candidate number

INSTRUCTIONS

- Use black ink. You may use an HB pencil for graphs and diagrams only.
- Complete the boxes above with your name, centre number and candidate number.
- Answer all the questions.
- Write your answer to each question in the space provided. If additional space is required, use the lined page(s) at the end of this booklet. The question number(s) must be clearly shown.
- Do not write in the barcodes.

INFORMATION

- The total mark for this paper is 80.
- The marks for each question are shown in brackets []
- The quality of extended responses will be assessed in questions marked with an asterisk (*).
- This document consists of 16 pages.

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Child Development**

Unit R018/01: Health and well-being for child development
Level 1/2 Cambridge National Certificate in Child Development

Mark Scheme for June 2017

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**Cambridge National
Child Development**

Level 1/2 Cambridge National Certificate in Child Development J818

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GENERAL EXAMINER COMMENTS ON THE PAPER

This was the first series of the examination unit R018. The majority of candidates answered all the questions and a wide spread of marks was achieved. Marks ranged from candidates achieving Level one through to those gaining over 70 marks.

Time appears to have been used effectively. Longer answer questions were fully attempted suggesting that candidates had enough time to produce their responses. Most candidates were able to complete all of the questions on the examination paper itself with few using the extra pages at the back of the script or requiring additional answer books.

Many candidates had been well prepared for the examination and were able to apply their knowledge to produce appropriate, well-structured, responses correctly using terminology from the specification. For Section A questions, that are context based, many candidates produced quality responses that clearly related to the context provided. This enabled them to achieve high marks.

The candidates achieving higher marks demonstrated an understanding, and familiarity with, the question command verbs combined with appropriate knowledge of the specification content. It was however evident that some candidates seem to lack key knowledge and terminology for aspects such as children's intellectual needs, pain relief when giving birth, delivery methods, reflexes and safety labelling. This knowledge is necessary for the unit and candidates should be familiar with, at the very least, key facts about these topics.

Many candidates did not respond to the command words in the question. Although it was clear that they possessed knowledge some were unable to gain high marks as they did not do what the question asked. Centres need to guide candidates about the command verbs in the questions – identify, describe, explain, analyse etc. For example, producing a list of ways parents can teach a child to cross the road safely, when an 'explanation' of ways has been asked for, will not achieve level 3 marks.

A number of scripts proved challenging to mark due to the poor handwriting. This can be difficult for examiners to decipher and candidates should be encouraged to write as clearly as possible so that they can gain full credit for their responses.

Resources which might help address the examiner comments:

From the link below, you'll find 'The OCR guide to examinations' (along with many other skills guides)

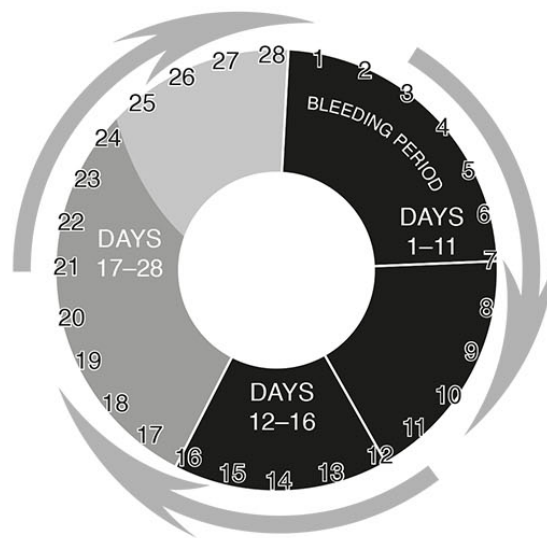
<http://www.ocr.org.uk/i-want-to/skills-guides/>

Questions 1(a) and (b)

Section A

Answer **all** the questions.

- 1 Hardeep and Gemma have been married for 3 years. They have decided that they would like to start a family. Up until now Gemma has been having a contraceptive injection to prevent pregnancy.
- (a) How long can it take for Gemma's fertility to return to normal after the contraceptive injection wears off?
- One** mark.
- up to 1 year
- ... [1]
- (b) The picture below shows the menstrual cycle.



During which part of the menstrual cycle is Gemma most likely to become pregnant?

Tick the appropriate box in the table below.

Part of the menstrual cycle	Tick ✓ one only
Days 1 – 11	
Days 12 – 16	✓
Days 17 – 28	

[1]

Questions 1(c), (d) and (e)

(c) Identify **three** signs or symptoms of pregnancy that Gemma should look out for.

1 .. **Three** signs or symptoms required, **one** mark each:

Signs/symptoms of pregnancy:

- 2 ..
- missed period/periods stop
 - breast changes – enlarged breasts/darkened skin around nipples/tenderness
- 3 ..
- passing urine frequently
 - tiredness
 - nausea/sickness/morning sickness
 - constipation
 - feeling dizzy or faint
 - sudden dislike of previously enjoyed food
 - metallic taste in her mouth

[3]

(d) Gemma is now pregnant and thinks she might be expecting twins.
Give **one** reason why Gemma may be expecting twins.

One reason required, **one** mark.

- twins run in her family/family history of twins
- she is bigger than she should be for her dates
- she has had fertility treatment/IVF
- she is an older mother

[1]

(e) Gemma's twins could be identical or non-identical.

Explain how identical and non-identical twins are formed at fertilisation.

Identical: **Four** points, **one** mark each.

Identical twins:

- one egg is released
- a single egg is fertilised and then divides in two
- each develops into an individual
- the twins are always the same sex
- have identical inherited genes

Non-identical:

Non-identical twins:

- two eggs are released instead of one
- both are fertilised by separate sperm
- twins are no more alike than any other children in the family
- can be the same sex or a boy and a girl
- are called 'fraternal' twins

[4]

Mark Scheme Guidance

Question 1(a):

Accept 10 months – 1 year.

Question 1(b):

This is the only acceptable answer.

If more than one answer is ticked:

No mark should be awarded.

Question 1(d):

2 marks for identical twins.

2 marks for non-identical twins.

Examiner comments

Question 1(a) – There were a large number of incorrect responses which ranged from 2 days to 3 years. Many thought that fertility would return straight away or within a matter of days. A definite gap in candidates' knowledge.

Question 1(b) – Correctly answered by the majority of candidates. A few candidates ticked two boxes and so did not gain the mark.

Question 1(c) – Excellent responses with many candidates gaining full marks. A topic that candidates seemed to be confidently knowledgeable about.

Question 1(d) – A mixed response to this question. Many gave a correct response, for example twins run in the family and bigger than she should be. Incorrect responses included details of when the eggs are released or fertilised, taken from question 1(e).

Question 1(e) – Candidates who knew this answered well gaining 3 or 4 marks. Other answers were muddled, for example cells splitting and sperm splitting into two. There were a number 'no responses' suggesting candidates lacked knowledge of this topic.

Questions 2(a) and (b)

- 2 Kelly is 4 years old. She is going into hospital next week. To help prepare for her stay in hospital, Kelly's parents have given her a stethoscope to play with.



- (a) Explain how playing with the stethoscope will help to prepare Kelly for her stay in hospital.

- 1 . **Two** explanations required, **two** marks each.
- **familiarisation** – helps overcome fear of the unknown/learning what's going to happen to her
 - **Kelly can act out what might happen** – so she is prepared
 - **Kelly can act out fears** – helps reduce anxiety/less scary
- 2 . **role-play being a nurse/doctor** – helps Kelly understand what they will do/ doctors do the same
- **Gets Kelly used to the idea of going into hospital** – familiarisation with type of equipment they use
 - **Prompts questions about what it will be like** – parent can answer these to reassure her
- [4]**

- (b) State **three** other ways that Kelly's parents could help to prepare her for staying in hospital.

- 1 . **Three** ways required, **one** mark each:
- Ways parents could prepare Kelly for hospital:**
- take her on a hospital/ward visit/meet doctors and nurses
 - be honest in explanation of why she has to go into hospital
- 2 .
- be honest in explaining what her treatment will involve
 - watch dvd with her about going into hospital
 - pack her case with her – get her involved
- 3 .
- talk about it with her – encourage questions
 - dressing up and playing doctors and nurses/role play
 - read books/stories about staying in hospital
 - reassure/comfort her they will stay with her
 - pack her favourite toy/blanket that reminds her of home
- [3]**

Mark Scheme Guidance

Question 2(a):

Two explanations required:

One mark – for a statement plus.

One mark for the explanation.

Do not credit repeated explanations.

Question 2(b):

Do not credit:

Repetition of stethoscope or similar hospital toys.

Answers must be preparation for a hospital stay.

Question 2(c):

Level 3 checklist

- detailed explanation
- 2 or more examples
- linked to intellectual needs
- understanding of Kelly's situation is evident
- Quality Written Communication (QWC) – high

Level 2 checklist

- sound explanation
- at least 2 examples
- link to intellectual needs
- some understanding of Kelly's situation
- sub-max if just examples
- QWC – mid

Level 1 checklist

- basic explanation
- likely to identify examples with little or no explanation
- basic information
- may not be specifically linked to Kelly's situation
- list like/muddled
- QWC – low

Levels of response**Level 3 (7–8 marks)**

Answers will provide a detailed explanation of examples of how Kelly's parents could meet her intellectual needs. There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant. There will be few errors, if any, of grammar, punctuation and spelling.

Level 2 (4–6 marks)

Answers will provide a sound explanation of examples of how Kelly's parents could meet her intellectual needs. There is a line of reasoning presented with some structure. The information presented is in the most part relevant. There may be some errors of grammar, punctuation and spelling.

Sub-max of 4 if just examples.

Level 1 (1–3 marks)

Answers will provide a basic description of how Kelly's parents could meet her intellectual needs. List like answers should be placed in this level. Answers may be muddled, demonstrating little knowledge or understanding. Errors of grammar and spelling may be noticeable and intrusive.

Examiner comments

Question 2(a) – The majority of candidates gained half marks with answers that suggested familiarisation and having a better idea of what equipment would be used. Many candidates did not develop their answers, for example by saying how it would prevent Kelly being scared, just giving basic statements and not explaining in more detail. This prevented them from gaining full marks as the question command verb is 'explain'.

Question 2(b) – Well answered, with the majority of candidates achieving marks and many gained full marks. Common correct responses were 'take her on a hospital visit', 'let her help pack her case', 'pack her favourite toy/blanket' and 'parents reassure her'. Incorrect answers focussed on when she was actually in hospital, when the question refers to preparation for the hospital stay; and repetition of answers given for part (a).

Question 2(c) – Well answered by candidates who read the question carefully and related their answers to the context provided. These responses gave explanations of what Kelly's parents could do to help meet her intellectual needs during a week's bed rest after her hospital stay. High level responses gave specific examples such as quizzes, jigsaws, drawing and colouring books, along with an explanation of how these activities meet Kelly's intellectual needs. For example mental stimulation, conversation, creativity and imagination.

However, many candidates gave responses that did not link to the context of the question, suggesting walks in the park and outside activities to get fresh air. This type of response did not gain any marks as the activity was not linked to bed rest or to intellectual needs. Other answers that were inappropriate for four year old Kelly included references to completing or catching up with missed school work and doing homework tasks. Some answers referred to meeting social or physical needs such as seeing friends, nutritional meals, medication, bathing etc. when the question required intellectual needs to be met. These responses did not gain any marks.

Exemplar candidate work

Question 2(c) – Low level answer

(c)* When Kelly returns home from hospital, she will have to stay in bed and rest for a week.

Explain what Kelly's parents could do to help to meet her intellectual needs during the week she has to stay in bed.

Your answer must:

- include examples of what her parents could do
- explain how Kelly's intellectual needs would be met.

When Kelly is in bed for a week her parents could help her with making her food and drinks so she can stay healthy. Make her laugh when she's bored because then she could be irritated and moody. Give her love and care so she's not on her own a lot. Play game to keep her occupied and happy.

[8]

Commentary

This answer does not respond to the question in sufficient detail as this is a levelled response 'explain' question worth 8 marks. The number of lines provided gives an indication of approximately how long the answer should be, based on a candidate with average sized handwriting such as this one.

The answer also incorrectly refers to meeting the child's physical and emotional needs, which is not required and so does not gain any marks, as the question focus is on intellectual needs. There is only a brief mention of intellectual stimulation at the very end of the answer, and this is not explained in any detail.

To improve and become a medium level answer this response requires specific practical examples of what Kelly's parents could do to meet her intellectual needs, such as quizzes, watching a TV programme together and then talking about it, providing colouring books etc. The answer should then include some explanation of how these activities meet Kelly's intellectual needs. Examples could be developing her interest in the topic of the TV programme or quiz; providing mental stimulation and preventing boredom by having conversations about what Kelly has watched on TV and developing creativity with the colouring books.

Exemplar candidate work

Question 2(c) – Medium level answer

(c)* When Kelly returns home from hospital, she will have to stay in bed and rest for a week.

Explain what Kelly's parents could do to help to meet her **intellectual** needs during the week she has to stay in bed.

Your answer must:

- include examples of what her parents could do
- explain how Kelly's intellectual needs would be met.

One thing that Kelly's parents can do help her intellectual needs is ask her school for any work / homework that she could do. Secondly, they could get her work that she could do throughout the day which they can get from the internet. Another thing they could do is let her watching informative T.V shows so she can learn information about different types of things facts and information. Further more, they can let her play on intellectual apps which can make it fun but it still keeps her brain stimulated. Finally, they can ask her questions of or things that she has learnt throughout the day or things she has learnt in the past to keep her engaged. This also might help her retain information.

[8]

Commentary

This answer begins with suggestions of activities that are not really appropriate for the scenario where 4 year old Kelly is recovering at home from treatment in hospital. Contacting the school to set work, keeping up with schoolwork and doing homework tasks, would be more appropriate for a much older child. Also the question is asking about meeting Kelly's intellectual needs; the suggestions given do not meet her needs.

The answer goes on to suggest some suitable activities such as to watch an informative TV programme which involves facts and information, playing with 'intellectual apps' and asking Kelly questions about what she has learned. This is clearly related to intellectual development but perhaps not so much to Kelly's needs in the circumstances. The response overall focusses too much on a 'schoolwork' approach providing information for Kelly to learn and then be asked questions about, which is why this is a medium level answer.

To become a higher level answer the response needs to relate more to the scenario provided and answer the question more accurately. The question was not 'ways to maintain Kelly's intellectual development and skills', it was about meeting the 'intellectual needs' of a child recuperating from a stay in hospital. The answer should include an explanation of how the activities would keep Kelly occupied with a view to providing mental stimulation, entertainment and interaction in order to avoid boredom, structure her day and keep her interested. Puzzles, having a story read to her and talking about it, a jigsaw, and colouring book are suitable activities that would meet her intellectual needs in this situation.

Exemplar candidate work

Question 2(c) – High level answer

(c)* When Kelly returns home from hospital, she will have to stay in bed and rest for a week.

Explain what Kelly's parents could do to help to meet her intellectual needs during the week she has to stay in bed.

Your answer must:

- include examples of what her parents could do
- explain how Kelly's intellectual needs would be met.

In order for Kelly's parents to meet her intellectual needs they will have to provide her with things she loves. They could read a book to her, by sitting next to Kelly and reading a book they can socialise and show their love as well as make sure she doesn't get bored, but she will be picking up words and stories helping her be imaginative. They could let her watch some T.V. programs e.g. cartoon or educational shows where she can learn as well as laugh and enjoy the program. The parents could sit by her and ask her questions about the show to get her thinking this will help her in concentration.

The parents could bring her puzzles or word games where she will participate and think how to solve the puzzle. Physically she can play and move objects e.g. letters to make words. This will help her socialise and learn at the same time. [8]

Q2c) They could also let her play with maths, letters or number games on a phone or tablet where she can interact and be educational at the same time, learning new things as well as helping with her problem solving skills.

Commentary

This 8 mark levelled question requires 'examples' and candidates should give two or more examples with a detailed explanation of how they meet intellectual needs in the context provided.

The candidate's response is in context, clearly relating to Kelly and her intellectual needs during a week of bed rest. Several appropriate practical examples of activities have been given along with some explanation of how they meet Kelly's intellectual needs. The response is also well organised using a paragraph for each specific example of what Kelly's parents could do, along with an explanation of how this meets Kelly's intellectual needs. The candidate has addressed all aspects of the question enabling high level marks to be achieved.

The first paragraph suggests parents reading a book with her, explaining this would prevent boredom, help her pick up new words and she could use the stories to feed her imagination. Using terminology such as 'interaction' rather than 'socialise' would have taken this to a higher mark within the level.

The second paragraph focuses on TV programmes and gives an explanation of how this could be educational as well as entertaining, by parents sitting with her and getting her to think about what she is watching. The third and fourth paragraphs suggest a range of puzzles, word and number games. All the suggestions are completely appropriate for Kelly to engage in while she is in bed, and relevant to meeting intellectual needs. The explanations relate to imagination, concentration, participation and solving puzzles and problems.

In order for this to be a full mark high level answer just a little more terminology or technical vocabulary could have been used in the explanations. For example mental stimulation, interaction and conversation. This response is, however, a very good attempt at the question.

Questions 3(a) and (b)

3 Read the case study below.

Skye is 3 years old. She enjoys going to the supermarket with her grandparents. They always let her choose some sweets or chocolate.

When Skye goes to the supermarket with her mum (Jayne) she asks for sweets but is told she cannot have any. Skye has started having tantrums when she is refused the sweets. She cries, sobs and stamps the floor.

Jayne is embarrassed so she gives in to Skye and buys the sweets to calm her down.

(a) Give **two** explanations as to why Skye might have had a tantrum.

- 1 **Two** explanations required. **Two** marks each.
- Reasons Skye has a tantrum:**
- • **she is used to having sweets and chocolate from her grandparents** – and does not understand why she has none
 - • **Skye is confused** – she isn't usually refused sweets/chocolate
 - 2 • **frustration** – she doesn't like being told 'no'/can't have what she wants
 - • **attention seeking** – due to boredom with the shopping
 - • **Skye is tired or hungry** – less likely to handle emotions

.....

[4]

(b) State **two** reasons why giving in and buying the sweets is **not** a good way to deal with Skye's tantrum.

- 1 Why giving in is not a good way to deal with a tantrum:
- • reinforces Skye's bad behaviour/getting her own way all the time
 - • leads to repeating the behaviour
 - • Skye learns she gets what she wants if she makes a fuss
 - 2 • rewarding bad/un co-operative behaviour/will keep having tantrums
 - • Skye will not learn that sometimes she cannot have what she wants
 - • Skye continues to associate supermarket shopping with sweets and chocolate
 - • Skye needs to learn bad behaviour will not get rewards

[2]

Question 3(c)

(c) Describe **two** ways that Jayne could prevent Skye from having tantrums when shopping.

1 **Two** ways described. **Two** marks each.

Distract

- ... • point to something Skye will be interested in
- ... • direct her attention to something else
- ... • so Skye will forget about the sweets
- 2 • praise for something else (good) that Skye has done/reward chart
- ... • avoid the sweets aisle
- ... • get Skye involved in the shopping/prevents boredom

... **Ignore**

- just carry on with the shopping (but checking Skye is ok)
- the more attention given the longer the tantrum can last
- when Skye realises Jayne's not interested the tantrum will stop
- praise as soon as she behaves nicely again to reinforce the idea that good behaviour = praise and attention

[4]

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Give choices

- give Skye a choice of something else that Jayne knows she likes
- makes Skye feel she has some control

Stay calm

- Skye will react if Jayne shows anger/stress/embarrassment
- Jayne should smile, take a deep breath
- talk calmly to avoid making the situation worse
- can diffuse the situation

Be consistent with rules

- no sweets or chocolates – stick to this to avoid confusion
- speak to grandparents and suggest healthy alternatives Skye could have instead of sweets

Create some consequences

- Jayne could say Skye will not be allowed to go shopping if she behaves like this
- must follow through for it to work

Question 3(d)

- (d) Providing food is a responsibility of parenthood.
Jayne wants Skye to eat a healthy diet and has prepared the following meal for her lunch.

- grilled home-made beef burger
- peas
- boiled new potatoes
- glass of milk to drink
- an apple

Give **five** different reasons why you think this is a healthy choice of meal for Skye.

1 **Five** reasons. **One** mark each.

General

- • it is part of a balanced diet
- • it follows healthy eating guidelines
- 2 • has incorporated most of the main food groups
- • eatwell guide
- • government guidelines/healthy tips

3

Grilled Home-made beef burger

- • Jayne controls what is in it, e.g. The amount of added salt
- • no chemical additives
- 4 • can use lower/lean fat beef
- • can use organic, beef
- • source of protein for growth/repair
- 5 • source of iron/ needed to make haemoglobin
- • High Biological Value (HBV) – protein containing all of the essential amino acids
- • grilling removes or reduces fat content

[5]

Peas

- source of B vitamins/vitamins – prevents diseases
- source of fibre for healthy digestive system
- part of your 5-a-day
- sources of protein (LBV)

Boiled new potatoes

- lower fat than chips/are not fried
- (starchy) carbohydrate for energy
- source of B vitamins/vitamin C

Glass of milk

- source of calcium for bones and teeth
- no added sugar
- no chemical additives
- source of protein (HBV)

Apple

- source of vitamins – prevention of disease
- part of your 5-a-day
- source of fibre for healthy digestive system
- no added sugar
- no fat

Mark Scheme Guidance

Question 3(a):

Two explanations required:

1 mark – for a statement

plus

1 mark for the explanation

Do not credit repeated explanations.

Question 3(c):

For each way:

Two marks:

- appropriate, realistic, way described
- clearly shows understanding of the situation.

One mark:

- a way identified
- limited or no description.

Question 3(d):

Any five **different** appropriate reasons.

Do not accept:

- repeats e.g. only accept: 'part of your 5-a-day' once.

Detailed nutritional knowledge is not required, but can be credited.

If multiple answers are given, credit the first one on the line.

Examiner comments

Question 3(a) – The majority of candidates gave two reasons but explanations were limited and so only gained half marks. These responses were based on the child being used to having sweets from her grandparents, attention seeking and 'does not like to be told no'. Candidates who developed their answer to gain full marks included being 'frustrated as the child cannot have what she wants', and suggesting confusion as grandparents give her sweets and she is not usually refused them.

Some repetition was evident. Some incorrect responses focussed around sugar making children hyperactive and too many sweets being unhealthy.

Question 3(b) – Most candidates gained some marks for this question. Well answered by many who gained full marks. Repetition was evident in weaker responses.

Question 3(c) – Some good suggestions were provided linking to distracting Skye by getting her involved in the shopping, avoiding the sweet aisle and praise linked to reward systems. Also being consistent with no sweet rules, including getting grandparents to do the same. Weaker responses attempted a way but lacked description of how it would work to achieve the intended effect.

Question 3(d) – Many candidates gained 3 marks based around peas and apples linked to part of your 5 a day, milk providing calcium for bones and teeth, and the meal was balanced and meets healthy eating guidelines, with some candidates referring to the eatwell guide. Some candidates provided too vague a response even though detailed nutritional knowledge was not required, for example, 'healthy', 'vegetables are good', 'a drink is better than fizzy pop' and 'it is a nutritious meal'.

Questions 4(a) and (b)

Section B

Answer **all** the questions.4 (a) Give **three** advantages of having a home birth.1 **Three** advantages. **One** mark each.**Advantages of a home birth:**

- • familiar surroundings mean the mother is more relaxed and in control
- • medical intervention is less likely
- 2 • can have as many people present, or not, as liked
- • partner can spend more time with her and their baby
- • privacy guaranteed before, during and after the birth
- 3 • mother and baby not disturbed by other babies crying
- • can follow own routine not that of a hospital ward
- • other children in the family are less disrupted, as their mother is not separated from them **[3]**
- • more personalised care
- • likely to know the midwife better
- • can still have pain relief – gas and air, pethidine, use of TENS machine provided by midwife
- • quiet/calm environment/can sleep/rest

(b) Give **three** reasons why a woman might be advised to have a hospital birth.1 **Three** reasons. **One** mark each.**Reasons a hospital birth may be advised:**

- • if there have been complications during pregnancy
- • women with placenta praevia
- 2 • women who will need a caesarean section
- • if there has been a difficult birth in a previous pregnancy
- • babies likely to be born prematurely
- 3 • babies who are likely to need special care
- • if the woman has a very small pelvis – as a caesarean section may be needed
- • if the woman has existing health problems, such as diabetes or obesity
- • high blood pressure/pre-eclampsia **[3]**
- • if there is more than one baby
- • if the mother lives a long way from the hospital, in case of emergencies/quick response to emergencies
- • if an epidural is wanted for pain relief – has to be administered by an anaesthetist
- • if the medical staff believe the baby should be induced
- • very young mothers – under 16 years
- • first baby
- • baby in breech position

Questions 4(c), (d) and (e)

(c) Give **three** reasons why TENS would be used for pain relief during labour.

1. **Three** marks for a description.

Why TENS is used for pain relief:

- • it provides an electrical stimulus that interferes with passage of pain signals to the brain/relieves pain
- 2. • may help the body to produce endorphins – natural pain-killing hormones
- • hand held control which the mother can use to vary the strength of the stimulus
- 3. • has no side effects for mother or baby/drug free
- • can be used at home or in hospital
- • the mother is in control of the pain relief
- • the mother can move around freely
- • quick and easy to use

[3]

(d) Identify **two** situations when an emergency Caesarean section would be carried out.

1. **Two** situations identified, **one** mark each.

Situations when an emergency Caesarean section would be carried out:

- • when induction of labour has failed
- • when there is severe bleeding
- 2. • when the baby is too large
- • when the baby is in breech position
- • in placenta praevia – when the placenta is covering the cervix
- • in cases of foetal distress/baby stuck in birth canal/baby has medical problems
- • if the mother is too ill to withstand labour/too tired
- • cord around baby's neck
- • baby stopped breathing
- • twins/multiple births

[2]

(e) Identify the term used to describe a baby born before 37 weeks.

Term identified. **One** mark.

- premature

[1]

Exemplar candidate work
Question 4(c) – Low level answer

(c) Give three reasons why TENS would be used for pain relief during labour.

1 They dont have side effects.....

.....

2 They can be worn under clothes.....

.....

3 They dont need to be given via a needle.....

.....

[3]

Commentary

This is a low level answer as only one reason is correct.

The first reason is correct, there are no side effects as a result of using TENS.

The second reason is not related to providing pain relief, which is a requirement of the question.

The third reason is not a reason why TENS would be used. This answer is an irrelevant point.

To gain more marks the candidate needs to provide correct factual information about the use of TENS for pain relief. Examples could include quick and easy to use and the mother is in control of the pain relief.

Exemplar candidate work

Question 4(c) – Medium level answer

(c) Give three reasons why TENS would be used for pain relief during labour.

- 1 Because it sends out endorphins (bodies own Painkillers)
- 2 Shock of electricity might take mind off pain from labour
- 3 It will make things less painful because the electrical impulses will get rid of the contraction pain slightly.

[3]

Commentary

This is a medium level answer as two reasons are correct.

The first reason is correct, TENS may help the body to produce endorphins which are natural pain-killing hormones.

The second reason is not accurate as it refers to giving an electric shock which takes the mind off the pain.

The third reason is correct as it describes the electrical impulses which relieve pain.

To gain more marks the candidate needs to provide three correct factual information about the use of TENS for pain relief. Examples could include quick and easy to use or the mother is in control of the pain relief.

Exemplar candidate work

Question 4(c) – High level answer

(c) Give three reasons why TENS would be used for pain relief during labour.

1 because it doesn't effect the mother or baby

2 because it's easy to use and is accessible to all mothers.

3 quick pain relief and doesn't give any side effects.

[3]

Commentary

This is a high level answer with three clear and correct reasons why TENS would be used for pain relief.

The first reason is correct, there are no side effects for the mother or baby as a result of using TENS.

The second reason is correct as TENS is easy to use.

The third reason is correct as TENS does provide pain relief quickly.

Question 4(f)

(f) Babies are born with reflexes.

Complete the chart below to describe **two different** reflexes that babies are born with. An example has been done for you.

Two reflexes named. **One** mark each.

Two descriptions. **One** mark each.

Name of reflex	Description
startle (Moro)	When startled by noise / bright light the arms move outwards
grasping (grasp)	When an object is put into the baby's hand, it is automatically grasped.
rooting	When gently touched on the cheek, the baby's head turns in search of its mother's nipple.
Walking (stepping)	When held upright with the feet touching a firm surface, babies will make forward stepping movements.
sucking	When anything is put in the baby's mouth, the baby immediately sucks and swallows.

[4]

Mark Scheme Guidance

Question 4(c):

Any three points.

Not 'how' TENS works – must be 'why' it is used.

Question 4(e):

Do not accept:

- prem
- early.

Question 4(f):

For the description, wording does not have to exactly match that on the mark scheme.

For a named reflex or an accurate description award one mark. Must match correctly for both marks.

Do not accept:

- 'falling' this is Moro (startle) which is in the question
- 'head turns' on its own for rooting.

Examiner comments

Question 4(a) – Well answered by the majority of candidates. The three most common correct responses included reference to familiar surroundings enabling the mother to be more comfortable and relaxed, she can have as many people present as she wants and less disruptive as the rest of the family can stay with the mother. Some gave links to privacy and a quieter environment. Weaker responses were statements that are too vague such as 'comfortable', 'less busy' and inappropriate ideas that the mother will be able to 'carry on normal life e.g. cooking and hoovering'.

Question 4(b) – Generally well answered with many candidates gaining 3 or 4 marks. Vague statements did not gain a mark, such as 'when there are problems' and 'there are more doctors available'.

Question 4(c) – Mixed responses to this question. Some candidates were not familiar with TENS and did not attempt the question, others made what seemed to be a guess. Weak responses were based around less stress, stops all the pain, shock helps labour pains. A few candidates stated that it numbs from the waist down, confusing TENS with an epidural.

There were, however, many good correct answers with candidates stating that there are no side effects for mother or baby, a drug free method, the mother is in control and can move around freely. A small number of candidates provided correct terminology – provides an electrical stimulus that interferes with pain signals to the brain and in consequence relieves pain and helps the body to produce endorphins.

Question 4(d) – Very well answered with the majority of candidates gaining full marks. Common responses were 'baby is in breech position', 'baby is too large', 'severe bleeding', 'cord around baby's neck' and the 'mother is too tired to push'. Vague or incorrect responses surrounded 'premature babies' and 'problems' with mum or baby.

Question 4(e) – The majority of candidates knew the term 'premature' and gained the mark.

Question 4(f) – Some candidates were unfamiliar with reflexes and did not attempt the question, indicating a gap in their knowledge. However a good number of candidates gained full marks with correctly named reflexes and descriptions. Common incorrect answers included 'falling' which is a repeat of the example given in the question and so gained no marks, and 'eating', 'crying' and 'turning its head'. Some candidates mixed up the 'rooting' and 'sucking' reflexes; a few wrote correct descriptions but were unable to give a name for the reflex.

Question 5(a)

5 (a)* Explain ways parents/carers can teach their child about road safety.

Examples of ways parents can use to teach road safety

Look for ways such as:

- explain
- tell
- show them
- demonstrate
- encourage/discourage

Set a good example:

- Young children copy adults so roads should always be crossed in a careful way – e.g. Avoid crossing between parked cars.
- Always use a zebra or light-controlled crossing if there is one – explain to child why this is important.
- Encourage the child to be aware of hidden entrances or driveways crossing the pavement

Provide guidance and explanation:

- Teach them the Green Cross Code – always go through it every time the road is crossed so the child knows it
- Talk about road safety when out walking with the child – helps them learn about negotiating roads safely
- Make sure the child can be seen, light-coloured, reflective clothing – explain to the child why this is necessary
- Put reins or a wrist strap on a younger child to control where they go
- Use road safety worksheets and games available from the Government 'Think!' website
- Use DVDs/games/cartoons/books/songs about road safety

.....

.....

.....

.....

.....

[6]

Exemplar candidate work

Question 5(a) – Low level answer

5 (a)* Explain ways parents/carers can teach their child about road safety.

Talk about it to them.

[6]

Commentary

This is a very basic answer which gives one brief statement ‘talk about it to them’. This is a valid point but only worthy of a minimal mark as the question command verb is ‘explain’ and no explanation has been provided.

To gain marks the answer needs developing by suggesting relevant methods, that is the ‘ways’ that parents/carers could use to teach their children about road safety. Examples could include parents/carers being good role models by demonstrating crossing the road carefully in a safe place, or by teaching them the green cross code. Some additional explanation such as always going through the green cross code every time the road is crossed so the child knows the procedure well, would help to move the answer into Level 2.

For levelled response questions such as this one, where ‘ways’ are required, to produce a medium level answer candidates should focus on one or two ways and provide at least some explanation of those ways. If the candidate does not do this marks can only be achieved in the lowest mark band. A sound explanation of only one way would achieve the sub-max mark of three for this question.

Exemplar candidate work

Question 5(a) – Medium level answer

5 (a)* Explain ways parents/carers can teach their child about road safety.

They could teach them with the 'stop, look, listen' posters. Make sure that you are being very serious when approaching the subject.

Explain what they can do and can't do, and what they shouldn't do.

Show them clips of what can happen, (not too graphic) that might explain it in a scary way but they'll remember what to do and what not to do.

[6]

Commentary

This response has more than two ways of teaching a child about road safety. The ways are appropriate to some extent. The answer lacks detail in the explanations and so is just about a medium level answer.

The first way suggested is appropriate, using a 'stop, look, listen' poster and formally teaching the child so that they realise it is important or 'serious' as stated by the candidate. The next point is valid 'explaining what they can do, can't do, and what they shouldn't do', but this explanation lacks specific detail about what they should and should not do. The answer needs to be more explicit about what and how they are learning in order to gain more marks.

The final suggestion of showing them 'clips of what can happen (not too (sic) graphic) that might explain it in a scary way' is perhaps not the best example of how to warn children of dangers on the roads, but showing YouTube clips of how to cross the road safely would be an acceptable way.

Exemplar candidate work
Question 5(a) – High level answer

5 (a)* Explain ways parents/carers can teach their child about road safety.

They teach them about road safety by telling them to hold your hand when you cross the road.

Making sure they stop, look, listen. Make sure they know what the red and green man are and what you do when it's shown.

Practise with them and always remind them.

Look when a car is coming.

[6]

Commentary

This response gives three different ways of teaching a child about road safety, these are 'telling them', 'practice with them' and 'remind them'. The 'ways' are relevant and developed with some additional detail about what the child should do and what the parent/carer should check the child knows or is aware of.

The candidate would have been able to gain a higher mark if the answer had been written in paragraphs with each paragraph focussing on a specific way, giving an explanation what it involves in a little more detail than in this answer. For example the last way, 'practise with them', could have been developed by explaining that regular practice gets the child used to the routine and so checking for cars becomes a habit so that every time they go out the child will automatically look around to check. Additionally the explanation of 'making sure they know what the green and red man are' could have been developed by saying how the parent/carer would 'make sure', perhaps by asking the child every time they were at a crossing so they are sure the child understands.

Questions 5(b) and (c)

- (b) Identify **four** ways that parents/carers could reduce the risk of their child having an electric shock in the home.

Four ways, **one** mark each.

Reducing the risk of electric shock in the home:

- fit socket covers to all electric sockets/safety guards
- check plugs are all wired correctly and safe
- check plugs are not cracked
- check cables are not frayed or worn/cracked along their length
- use cable holders/tidies to make electric cables too short for children to grab/hide cables away
- coiled flexes are safer
- don't let the child plug things in
- place electrical items out of reach
- supervision
- do not overload plug sockets
- switch off plug sockets when not in use
- warn children of electrical dangers
- no electrical toys in the bathroom

.....

 [4]

- (c) The safety label below can be found on items of children's clothing:

**LOW FLAMMABILITY
TO BS5722**

- (i) Name the item of children's clothing that must have this label.

One identification required. **One** mark.

- sleepwear
- bathrobes
- pyjamas
- onesie
- nightwear made from 100% terry towelling

.....
 [1]

- (ii) Give the meaning of 'LOW FLAMMABILITY'.

Meaning of 'Low Flammability'. **One** mark.

- it means that the garment is slow to burn
- it means that the garment has passed the low flammability test
- low risk of catching fire

.....

[1]

- (iii) How must the label be attached to the item of clothing?

How the label should be attached. **One** mark.

- the label must be permanent
- sewn into the garment
- must be securely attached
- printed on

.....

[1]

Mark Scheme Guidance

Question 5(a):

Content

Level 3 – checklist

- detailed explanation
- at least two ways
- relevant information
- Quality Written Communication (QWC) – high

Level 2 – checklist

- sound explanation
- one or more ways – but not fully developed
- relevant information
- QWC – mid

Level 1 – checklist

- basic explanation
- one or more ways
- likely to identify ways with little or no explanation
- list like/muddled
- QWC – low

Do not credit:

Descriptions of how to cross the road safely.

Levels of response

Level 3 (5–6 marks)

Answers will provide a detailed explanation of at least two ways parents can teach children about road safety. There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant. There will be few errors, if any, of grammar, punctuation and spelling.

Level 2 (3–4 marks)

Answers will provide a sound explanation of one or more ways parents can teach children about road safety. There is a line of reasoning presented with some structure. The information presented is in the most part relevant. There may be some errors of grammar, punctuation and spelling.

Sub-max of 3 if just one way done well.

Level 1 (1–2 marks)

Answers will provide a basic explanation of ways parents can teach children about road safety. List like answers should be placed in this level. Answers may be muddled, demonstrating little knowledge or understanding. Errors of grammar and spelling may be noticeable and intrusive.

Question 5(b):

Do not accept vague responses such as:

- cover electrical sockets
- cover up wires.

Examiner comments

Question 5(a) – This question was not well answered due to candidates not reading the question carefully, and just listing a number of examples of how to cross the road safely, consequently only a small number gained Level 3 marks. A number of candidates gained Level 1 or a sub max of 3 marks due to limited ways and examples.

In good responses candidates clearly stated parents should 'explain', 'tell', or 'show' children how to use the green cross code, how the green man works, how to use zebra crossings, the importance of wearing bright coloured clothing, and taking them out demonstrating how to use the aforementioned correctly and safely. In addition other ways suggested included showing them aspects of road safety through reading books, playing games and watching DVDs.

Question 5(b) – Reasonably well answered, many candidates achieving 3 marks, often repetition prevented full marks being awarded. Common correct responses included not overloading sockets, using safety covers on sockets, supervision at all times, no damaged or worn cables, and keeping electrical items out of reach.

A number of candidates wrote about 'keeping water away from electrics', and made vague suggestions such as to 'cover all sockets', 'unplug everything' and 'turn off all appliances and switches'.

Question 5(c)(i) – A majority of candidates did not know the children's nightwear safety label and all possible forms of clothing were suggested.

Question 5(c)(ii) – Some candidates had a clear understanding that low flammability meant that the garment is at low risk of catching fire and is slow to burn. A number of candidates incorrectly stated the complete opposite, that either the garment cannot set on fire or that it goes into flames quickly.

Question 5(c)(iii) – Many candidates clearly and correctly stated the label should be permanently and securely fixed into the garment, 'sewn in' was the most common correct answer.

Questions 6(a), (b) and (c)

6 (a) Describe a **ventouse** delivery.

Two description points, **one** mark each.

- a ventouse delivery is an assisted birth
- used when the contractions are not strong enough to push baby out
- involves a suction cup being placed on a baby's head to assist with delivery
- the rubber cap provides gentle suction
- sometimes called a vacuum extraction
- may bruise the baby's head but it soon returns to normal

[2]

(b) Give the meaning of the term 'postnatal'.

One definition. **One** mark.

Postnatal:

- The first days and weeks after the birth of the baby.
- Post = after, natal = birth.

[1]

(c) Reflexes are checked on new born babies.

List **four** physical postnatal checks, **other than reflexes**, carried out on a new born baby.

1 **Four** checks required. **One** mark each.

Physical postnatal checks:

- 2 • abdomen
- 3 • APGAR score (Appearance, Pulse, Grimace, Activity, Respiration)
- 3 • breathing
- 4 • ears
- 4 • eyes
- feet/toes
- fingers
- fontanelle
- genitals
- head circumference/size
- heartbeat
- hips
- length
- mouth/cleft palate
- muscle tone
- neck
- skin (vernix, lanugo) colour
- spine
- temperature
- tongue
- weight

[4]

Question 6(d)

(d) Give four advantages of breastfeeding a baby.

1. Four advantages. One mark each.

Advantages of breast feeding:

- | | | |
|------|--|-------|
| .... | • milk is sterile – clean and safe | ..... |
| .... | • milk is at the correct temperature | ..... |
| 2 | • contains the right amounts of all necessary food ingredients a baby needs/natural nutrients/all the nutrients needed | ..... |
| .... | • easy for the baby to digest and absorb | ..... |
| 3 | • no need for bottles to be sterilised and feeds mixed/quicker/saves time | ..... |
| .... | • breast milk contains antibodies protecting baby from infection/immune system | ..... |
| .... | • less risk of diarrhoea, vomiting, gastro-enteritis | ..... |
| .... | • baby less likely to develop allergies – asthma, eczema | ..... |
| 4 | • baby is less likely to become overweight | ..... |
| .... | • no risk of over-feeding as can happen with formula | ..... |
| .... | • promotes bonding | ..... |
| .... | • relaxing – if qualified | [4] |
| .... | • cheaper | |
| .... | • mother's uterus returns to pre-pregnancy state more quickly | |
| .... | • helps mother to lose weight | |
| .... | • more convenient when out and about/going to work (not having to carry bottles/kit) | |
| .... | • can be expressed for father to feed | |
| .... | • possible link to reduced risk of cancer for mother | |
| .... | • reduces the risk of sudden infant death syndrome (SIDS) | |

Mark Scheme Guidance

Question 6(a):

One mark for attaching to head.

One mark for helping to 'pull out'.

Question 6(c):

Checks must be **physical**.

Do not credit:

- reflexes
- height
- blood tests
- hearing test
- eyesight test.

Examiner comments

Question 6(a) – There were a number of 'no responses' to this question. This method of delivery seems to be a gap in some candidates' knowledge.

Question 6(b) – Very well answered with most candidates clearly understanding the term post-natal – after the birth. A very small number suggested conception and pregnancy or left it blank not attempting an answer.

Question 6(c) – Most candidates understood appropriate postnatal checks which included; weight, breathing, head size, heartbeat, length, and cleft pallet. Incorrect answers included reference to tests such as eyesight and hearing, height and blood tests.

Question 6(d) – A good number of candidates gave two correct advantages of breast feeding making links to bonding, it being cheaper, helps the mother to lose weight, milk is at the correct temperature, and contains all the nutrients required. Weaker responses were vague, too brief or incorrect and included 'quicker', 'easier', and 'better than tinned'.



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