

Health and Social Care

Advanced Subsidiary GCE

Unit **F913**: Health and Safety in Care Settings

Mark Scheme for June 2012

OCR (Oxford Cambridge and RSA) is a leading UK awarding body, providing a wide range of qualifications to meet the needs of candidates of all ages and abilities. OCR qualifications include AS/A Levels, Diplomas, GCSEs, OCR Nationals, Functional Skills, Key Skills, Entry Level qualifications, NVQs and vocational qualifications in areas such as IT, business, languages, teaching/training, administration and secretarial skills.

It is also responsible for developing new specifications to meet national requirements and the needs of students and teachers. OCR is a not-for-profit organisation; any surplus made is invested back into the establishment to help towards the development of qualifications and support, which keep pace with the changing needs of today's society.

This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

All examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

OCR will not enter into any discussion or correspondence in connection with this mark scheme.














© OCR 2012

Any enquiries about publications should be addressed to:

OCR Publications
PO Box 5050
Annesley
NOTTINGHAM
NG15 0DL

Telephone: 0870 770 6622
Facsimile: 01223 552610
E-mail: publications@ocr.org.uk

Annotations used in the detailed Mark Scheme (to include abbreviations and subject-specific conventions)

Annotation	Description
	Good response/positive
	Negative
	Benefit of doubt
	Cross
	Level 1
	Level 2
	Level 3
	Repeat
	Noted but no credit given
	Tick
	Too vague
	Omission mark
	Development of point

Question			Answer	Mark	Guidance
1	(a)	(i)	1 mark for identification of sign (3 required) A Eyewash B Fire Extinguisher C First Aid (box / room)	3x1	
		(ii)	Safe condition	1x1	Accept 'safety'
		(iii)	Green	1x1	
		(iv)	Health and Safety (Signs and Signals) Regulations	1x1	Do not accept <i>Symbols</i>
	(b)	(i)	Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations	1x1	Accept RIDDOR

Question			Answer	Marks	Guidance	
					Content	Levels of response
1	(b)	(ii)	<ul style="list-style-type: none"> regulates reporting of certain serious accidents – ensures workers are protected from hazardous working practices lists diseases which must be notified – aims to reduce infection spreading uncontrollably / epidemic – safeguards health of users / general public regulates serious injuries which must be reported – gives protection to employees ensures investigation follows any seriously harmful incident – prevents future occurrences prosecution of employers possible – encourages compliance with safe practice reporting rules – give protection to employees (sick pay safeguarded) 	8	<p>Any reportable diseases quoted by candidates should be checked against the current published list of notifiable diseases, as this is liable to change.</p> <p>Use of all negates the validity of any point.</p>	<p>Level 3: 7–8 marks Candidates can give a full explanation of at least two key features of the RIDDOR legislation which shows a conceptual overview. Answers will be developed logically and show evidence of application of knowledge skills. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 4–6 marks Candidates will attempt to explain at least two key features of the RIDDOR legislation. Answers will show some evidence of application of knowledge. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 4 for 1 key feature described well and in great detail.</i></p> <p>Level 1: 0–3 marks Candidates can give a basic account of possibly only one key feature of the RIDDOR legislation. They may provide a simple list of what the legislation says. Answers are likely to be muddled and show little understanding. Answers at this level may simply list incidents which must be reported. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Mark	Guidance
2	(a)	<p>1 mark for identification of piece of information – 3 required 1 mark for description of importance – 3 required</p> <p>Information</p> <ul style="list-style-type: none"> • date & time of accident - to ensure correct records for RIDDOR / in case of legal action / investigation • place where accident occurred – to look for patterns or trends / to check if area has particular hazard • details of what happened – reasons below • when help was called and what type – for RIDDOR / in case of legal action • names and contact details of witnesses – to ensure corroboration of facts / in case of investigation • details of any first aid treatment given and by whom – informs later treatment • details of injured person – to ensure correct records / in case of legal action / identify trends • details of person who completed the accident form <p>Reason (each of these may relate to a number of different pieces of information)</p> <ul style="list-style-type: none"> • it is a legal requirement • may be needed in the case of a claim being made • informs later treatment of casualty in case of delayed reaction • can be used to spot patterns in accidents (places, people, times, activities) so informs risk assessment 	6	The reason must be different for each piece of information for the second mark to be awarded.

Question			Answer	Mark	Guidance
2	(b)	(i)	Hoist / slide board / slide sheet / wheelchair / evacuation chair	1x1	No credit for naming an item of self-help equipment such as a bed ladder
		(ii)	<p>1 mark per step identified (4 required) 1 mark per explanation (4 required)</p> <ul style="list-style-type: none"> • carry out a risk assessment / planned lift – ensure that move is essential and will not harm pwus • check maintenance log – ensure equipment has been serviced / checked and will be unlikely to fail • check no loose clothing / flat shoes / jewellery etc – prevent catching in machinery / no slipping, tripping • ensure another practitioner is present – to ensure correct staffing ratios / make manoeuvre safer • check brakes are on – so machinery does not move suddenly causing accident • check surrounding area is clear – to prevent collisions / slips or falls • ensure pwus understands and agrees to manoeuvre – reduces risk of struggling or unexpected movements causing accident • check stability / comfort / dignity of pwus – reduces risk of slips / struggles on part of pwus • sling is correct colour / size for pwus – prevents failure / breakage of sling during operation 	4x1 4x1	<p>Vague answers such as 'to keep the pwus safer' will not be credited. The second mark requires a specific answer that links directly to the check outlined.</p> <p>Not posture</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
3	(a)	<ul style="list-style-type: none"> pond in back garden – danger of young child falling in and drowning – ensure pond is covered / fenced off / filled in (supervision is not a satisfactory remedy) front door opens near to road – child could run out of door and be run over / lost / abducted – ensure door cannot be opened by child (high handle / chain etc) alley at side of house leads to front and road – child could run out onto road and be hurt – have locked gate to prevent children escaping stairs to upper floor – young child could climb up and fall down causing harm – stair gate at foot (and top?) of stairs to prevent child exploring alone kitchen (with three doors) – child could enter and cut themselves on knife / scald on kettle / burn on cooker etc – child-proof gates / high handle needed to prevent access of children unless with childminder first aid kit in toilet – may cause delay in treatment if someone is using toilet when first aid required – could place in communal room / kitchen no fire extinguisher – danger if fire breaks out to everyone from flames / smoke inhalation / trapped – should have an extinguisher or fire blanket especially in kitchen where fire most likely to break out 	15	<p>It is possible that candidates may consider several hazards within the kitchen separately. Credit should be given for these individually at whatever level the response is written.</p> <p>Accept any other reasonable suggestion, bearing in mind that lists of hazards are only level 1 responses.</p>	<p>Level 3: 11–15 marks Candidates make detailed and well argued judgements showing clear links between at least two identified hazards, the pwus and /or care workers that are at risk, and indicate sound consideration of precautions that are already in place. Answers will be developed logically and show evidence of application of knowledge skills. There will be few, if any, errors of grammar punctuation and spelling.</p> <p>Level 2: 6–10 marks Candidates identify hazards and make sound links between the pwus (and possibly care workers) and the risks. They will show some consideration of precautions already in place. Answers will show some evidence of application of knowledge. There may be some errors of grammar punctuation and spelling.</p> <p>Level 1: 0–5 marks Candidates identify hazards but make few links between the pwus and the specific risks. The work may consist of a simple list of hazards with little awareness shown of the precautions already in place. Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
3	(b)	<p>Positives: Provides a source of reference to staff</p> <ul style="list-style-type: none"> • for answering uncertainties • for training of new staff <p>Provides evidence of what has already been done</p> <ul style="list-style-type: none"> • useful for evidence after accident • starting point for review process <p>Gives staff confidence that risk has been minimised</p> <ul style="list-style-type: none"> • likely to feel safer / more secure in their job – increased job satisfaction <p>Ensure can be compared to best practice / current guidelines.</p> <p>Negatives:</p> <ul style="list-style-type: none"> • time taken / required • skills or recorder / not done accurately / limited skills • could be challenged / misunderstood 	5		<p>Level 3: 5 marks Candidates demonstrate a balanced evaluation (at least one positive and one negative) of the importance to practitioners within the setting of documenting the findings. Answers will be developed logically and show evidence of application of knowledge skills. There will be few, if any, errors of grammar punctuation and spelling.</p> <p>Level 2: 3–4 marks Candidates give an explanation of the value to practitioners of documenting the findings of the risk assessment. Answers will show some evidence of application of knowledge. There may be some errors of grammar punctuation and spelling. <i>Sub-max of three for only positives / negatives.</i></p> <p>Level 1: 0–2 marks Candidates show limited understanding of the value to care workers of documenting the findings. Answers are likely to be muddled and show little understanding. Errors of grammar punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
4	(a)	<ul style="list-style-type: none"> • fire closing doors / closing doors or windows manually – reduces oxygen available to flames – thus reducing fire’s ability to spread • sprinkler system (linked with smoke alarm) – puts out smouldering before fire proper breaks out – prevents fire becoming larger and spreading • fire retardant doors – take a long time to burn through, thus slowing the fire’s spread into adjacent rooms • fire retardant furniture – to prevent rapid combustion and spread • fire extinguishers / fire blanket – allows extinguishing of fire before it becomes too large • good housekeeping eg keeping exits clear, not storing flammables under stairs etc – reduces availability of flammable material to fuel fire • no smoking policies / restricted area in which residents may smoke – reduces risk of smouldering cigarettes starting a fire 	10	<p>Do not accept explanations linked to making escape easier or allowing more time for escape.</p> <p>Accept Smoke free policy or smoking policy.</p> <p>Accept any other reasonable and reasoned argument.</p>	<p>Level 3: 8–10 marks Candidates will give a comprehensive explanation of precautions that could be taken to reduce the spread of fire in a care setting. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 5–7 marks Candidates will give a sound explanation of precautions that could be taken to reduce the spread of fire in a care setting. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max 5 marks for ONE covered very well.</i></p> <p>Level 1: 0–4 marks Candidates will give a description of precautions that could be taken to reduce the spread of fire in a care setting. List-like answers may be included in this level. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
		This will clearly depend on the setting named.		Content	Levels of response
4	(b)	<p>Residential home</p> <ul style="list-style-type: none"> residents slow to react and move – may need assistance to leave building pwus may have hearing loss – need additional warning to alert them residents may be confused at alteration to routine and be uncooperative – more care workers needed to encourage and assist those with limited mobility or wheelchair users may need additional support to get out vulnerable individuals – need sheltered area to congregate or may need blankets etc <p>Hospital</p> <ul style="list-style-type: none"> patients in bed / unconscious / in plaster etc cannot get themselves out – need high staffing ratios - particular visitors of unknown number / no way to check for missing people operations / procedures underway cannot easily be stopped – may need to leave people inside / emergency power supplies safe areas with additional fire protection need for use of lifts to evacuate bed-ridden patients, babies in incubators etc – or move to safer areas (see above) vulnerability of patients to infection / extremes of temp – need blankets / electricity supplies outside for incubators / machinery / monitoring equipment heavy duty fire doors / shutters to isolate sections of the hospital because of these and other difficulties setting is likely to have zoned evacuation procedures 	10	Any other reasonable and reasoned suggestion.	<p>Level 3: 8–10 marks] Candidates will analyse ways in which a standard fire evacuation policy might need to be amended to match the needs of the pwus in a named care setting. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 5–7 marks Candidates will explain ways in which a standard fire evacuation policy might need to be amended to match the needs of the pwus in a named care setting. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max 5 marks for generic answers not linked to setting.</i></p> <p>Level 1: 0–4 marks Candidates will describe ways in which a standard fire evacuation policy might need to be amended to match the needs of the pwus in a named care setting. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
		This will clearly depend on the setting named.		Content	Levels of response
		<p>Candidates may describe these in some detail – this is likely to produce a higher level response</p> <p>Nursery</p> <ul style="list-style-type: none"> • children may not understand– may not cooperate – dedicated staff needed to look after individuals • children may think it is a game – may hide or run from care workers – care workers need to be very vigilant • children may panic – lack of cooperation or refusal – strategies in place for care workers to use • alarm may cause unusual reactions in children – inability to move etc – previous practices should have allowed preparations to be made • children may have short attention span – lose track of what they are doing mid evacuation – care workers to watch out for • children may wander from assembly point / want to return – special vigilance required / maybe activities ready to occupy them 			

Question		Answer	Marks	Guidance	
				Content	Levels of response
5	(a)	<ul style="list-style-type: none"> wear disposable gloves – prevent contamination of hands by microbes from waste – microbes can enter through cuts in skin or by hand to mouth cross-contamination – remove gloves by turning inside out so outside surface is not exposed wear disposable apron – prevent contamination of clothes by microbes from waste / bodily fluids – microbes could then be transferred home keep waste in sealed, labelled containers – prevents accidental exposure by opening bag in error – inhaling of airborne pathogens dispose of soiled waste in correctly coloured / labelled containers – prevents accidental contamination since labelling cannot be missed fluid spillages cleaned with disinfectant plus absorbent material – prevents spread further / prevents airborne spread wearing face masks if dealing with serious infection that is air-borne – prevents accidental inhalation sharps placed immediately after use in suitable bin – ensure not over-filled - prevents accidental injury to care worker including needle-stick injuries ask advice / follow instructions relating to specific contaminants which hold particular risks – follow best practice & reduce infection risk however caused wash hands after handling – prevents spread through hand to mouth transfer or via cuts in skin etc in case some transfer to hands has occurred 	8		<p>Level 3: 7–8 marks Candidates will comprehensively explain at least two measures that a practitioner would take to maintain their personal safety when dealing with clinical waste and instruments. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 4–6 marks] Candidates will attempt to explain at least two measures that a practitioner would take to maintain their personal safety when dealing with clinical waste and instruments. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 4 marks for one done well.</i></p> <p>Level 1: 0–3 marks Candidates will describe measures that a practitioner would take to maintain their personal safety when dealing with clinical waste and instruments. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
5	(b)	<ul style="list-style-type: none"> • hand washing – arguably the most important precaution – prevents bacteria on skin being passed to next person / thing / article of food being touched – this may prevent oral transmission of food poisoning, or transmission of bacteria that may infect wounds etc • cover cuts with plasters – prevents bacterial transfer • cleanliness of environment – regular cleaning / disinfecting of surfaces / floors may prevent build up of bacteria – reducing the impact of high bacterial loading into people’s systems • regular changing of bedding / towels - also single person use of such items – prevents bacterial build up and hence reduces infection via touch (or possibly inhalation) • washing hands after / wearing gloves to deal with bodily fluids (soiling / toileting / changing nappies / vomit – prevents contamination of hands etc <p>Accept any other reasonable suggestion.</p>	7	<p>Level 3 response requires some information regarding mode of transmission of infective agent.</p> <p>Examples given for many of these may be about general hygiene in any care setting. Candidates may focus on issues connected with food hygiene which are perfectly valid. In this case accept things such as tying hair back and wearing aprons (but not specialist headgear etc).</p> <p>No credit is given for descriptions of PPE linked to care of pwus.</p>	<p>Level 3: 6–7 marks Candidates will comprehensively analyse how standard precautions including hand washing, reduce the risk of cross infection in a care setting. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 4–5 marks Candidates will explain how standard precautions reduce the risk of cross infection in a care setting. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max 4 marks for ONE covered very well.</i></p> <p>Level 1: 0–3 marks Candidates will describe how standard precautions reduce the risk of cross infection in a care setting. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
6	(a)	<ul style="list-style-type: none"> pwus should be protected from unsuitable visitors - Monitoring of people coming in or out of setting – CCTV / visitors' book etc – ensure practitioner knows who has visited in case of problems pwus should be protected from unknown people entering setting (to abduct / steal etc - locked doors / restricted entry eg pin code on door – prevents free access to all and sundry pwus should be protected from unsuitable practitioners – CRB check to reduce risk of inappropriate practitioners pwus should feel confident in their care – staff wearing identification badges – ensure all are confident that practitioners are genuine (especially in a large establishment pwus should have opportunity to keep personal property safe – lockable cupboards in hospital – locks on bedrooms in residential care or safe for valuables data protection – keep information secure eg passwords on computers, office locked, filing cabinets locked etc <p>Accept any other reasonable suggestion.</p>	7	<p>For marks in level 3, some understanding of the vulnerability of the pwus must be shown.</p> <p>As the question did not specify that a care setting should be named, it is acceptable for candidates that come from more than one setting.</p> <p>If suggestions are made regarding privacy in a residential home, these answers should be allowed. There is no penalty for omitting this detail.</p>	<p>Level 3: 6–7 marks Candidates will give a comprehensive explanation of at least two ways the security of pwus should be protected in a care setting. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 4–5 marks Candidates will attempt to explain at least two ways the security of pwus should be protected in a care setting. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max 5 marks for ONE covered very well.</i></p> <p>Level 1: 0–3 marks Candidates will give a description of how the security of pwus should be protected in a care setting. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
6	(b)	<ul style="list-style-type: none"> • upholding Health and Safety legislation – can enter premises to inspect and question staff • may issue improvement notices to bring workplace up to standard – this may have a time limit on it • will give advice (asked for or otherwise) to improve practice • in severe situations will close workplaces • prosecute employers who are in serious breach of the law • website contains current recommendations and guidelines on best practice • publish leaflets etc for employers and employees • undertake research to improve safety – liaising with industry to set standards and legislation • monitor trends in accidents etc (link to RIDDOR) to see where changes needed • update guidance according to changing situations <p>Accept any other reasonable suggestion.</p>	8	<p>For marks in level 3 there must be consideration given to the wider role of the HSE in training, informing, researching etc., and not simply enforcement.</p> <p>Candidates including information linking the work of the HSE to specific examples or pieces of legislation are likely to be showing high level understanding.</p>	<p>Level 3: 7–8 marks Candidates will give a thorough discussion of the role of the Health and Safety Executive. There will be evidence of synthesis within the work. Answers will use appropriate terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: 4–6 marks Candidates will give some discussion of the role of the Health and Safety Executive. There will be evidence of coherence within the answers. There may be some errors of grammar, punctuation and spelling. <i>Sub-max 5 marks for ONE covered very well.</i></p> <p>Level 1: 0–3 marks Candidates will describe the role of the Health and Safety Executive. Answers are likely to be muddled, demonstrating little knowledge or understanding. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

OCR (Oxford Cambridge and RSA Examinations)
1 Hills Road
Cambridge
CB1 2EU

OCR Customer Contact Centre

Education and Learning

Telephone: 01223 553998

Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

www.ocr.org.uk

For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored

Oxford Cambridge and RSA Examinations
is a Company Limited by Guarantee
Registered in England
Registered Office; 1 Hills Road, Cambridge, CB1 2EU
Registered Company Number: 3484466
OCR is an exempt Charity

OCR (Oxford Cambridge and RSA Examinations)
Head office
Telephone: 01223 552552
Facsimile: 01223 552553

© OCR 2012

