

GCSE

Health and Social Care

Unit **A914**: Safeguarding and Protecting Individuals

General Certificate of Secondary Education

Mark Scheme for June 2016

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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.

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Annotations

Used in the detailed Mark Scheme (including abbreviations), which are used when marking:

Annotation	Meaning of annotation
	Blank Page – this annotation must be used on all blank pages within an answer booklet (structured or unstructured) and on each page of an additional object where there is no candidate response.
	Tick – correct response
	Cross – incorrect response
	Development of point
	Level 1
	Level 2
	Level 3
	Positive
	Negative
	Benefit of doubt (This does count as a mark – so do not ‘tick’ as well)
	Omission mark
	Too vague
	Repeat



SEEN	Noted but no credit given
EG	Example

ADDITIONAL OBJECTS: You **must** annotate the additional objects for each script you mark. If no credit is to be awarded for the answer on the additional object, please use the annotation 'seen'. If the page is blank use 'BP'.

Question	Answer	Mark	Guidance												
1	<p>One mark for each correct answer. Five required.</p> <table border="1" data-bbox="392 288 1169 1102"> <thead> <tr> <th data-bbox="392 288 642 357">Hazardous Waste</th> <th data-bbox="642 288 1169 357">Method of disposal</th> </tr> </thead> <tbody> <tr> <td data-bbox="392 357 642 488">Clinical waste / dressings</td> <td data-bbox="642 357 1169 488">Yellow bags. Incinerated / burnt.</td> </tr> <tr> <td data-bbox="392 488 642 608">Body fluids / urine / faeces</td> <td data-bbox="642 488 1169 608">Flushed down toilet / sluice.</td> </tr> <tr> <td data-bbox="392 608 642 743">Out of date medication</td> <td data-bbox="642 608 1169 743">Take to local pharmacy / hospital / doctor / GP / surgery.</td> </tr> <tr> <td data-bbox="392 743 642 874">Needles, sharps, syringes</td> <td data-bbox="642 743 1169 874">Yellow (sharps) box / rigid box. Contact local council to collect.</td> </tr> <tr> <td data-bbox="392 874 642 1102">Soiled linen</td> <td data-bbox="642 874 1169 1102">Red bags put direct into laundry / washing machine. To be kept separate from other bedding. Washed at high temperature</td> </tr> </tbody> </table>	Hazardous Waste	Method of disposal	Clinical waste / dressings	Yellow bags. Incinerated / burnt.	Body fluids / urine / faeces	Flushed down toilet / sluice.	Out of date medication	Take to local pharmacy / hospital / doctor / GP / surgery.	Needles, sharps, syringes	Yellow (sharps) box / rigid box. Contact local council to collect.	Soiled linen	Red bags put direct into laundry / washing machine. To be kept separate from other bedding. Washed at high temperature	<p>5 (5x1)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>Answers must be factually correct.</p> <p>Accept:</p> <ul style="list-style-type: none"> • incinerate bag • bag incinerated/washed/laundered <p>Do not accept:</p> <ul style="list-style-type: none"> • body fluids down a sink / drain; area disinfected • medicines flushed down the toilet / sluice / sink • needles sharps syringes – take to chemist/surgery • bag without named colour (if no method given) • negatives i.e. ‘do not flush down toilet’ etc • needle box
Hazardous Waste	Method of disposal														
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Question		Answer	Mark	Guidance																		
2		<p>One mark for identification. Three required.</p> <table border="1"> <thead> <tr> <th></th> <th>Must be reported (✓)</th> </tr> </thead> <tbody> <tr> <td>Bronchitis</td> <td></td> </tr> <tr> <td>Salmonella</td> <td>✓</td> </tr> <tr> <td>Anorexia nervosa</td> <td></td> </tr> <tr> <td>Meningitis</td> <td>✓</td> </tr> <tr> <td>Legionnaire's Disease</td> <td>✓</td> </tr> <tr> <td>Osteoporosis</td> <td></td> </tr> <tr> <td>Appendicitis</td> <td></td> </tr> <tr> <td>Tonsillitis</td> <td></td> </tr> </tbody> </table>		Must be reported (✓)	Bronchitis		Salmonella	✓	Anorexia nervosa		Meningitis	✓	Legionnaire's Disease	✓	Osteoporosis		Appendicitis		Tonsillitis		<p>3 (3x1)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>These are the only acceptable answers.</p> <p>If more than three ticks only credit the first three.</p>
	Must be reported (✓)																					
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Question		Answer	Mark	Guidance	
				Content	Levels of response
3		<p>General cleanliness to reduce bacteria:</p> <ul style="list-style-type: none"> • clean worktops / cookers / floors / equipment • wipe spillages immediately • ensure free from infestation of pests • disposal of rubbish safely and regularly <p>Correct food preparation practices: <i>To prevent cross contamination:</i></p> <ul style="list-style-type: none"> • use correct coloured chopping keep raw food separate from cooked food • correct food storage methods <p><i>To prevent food poisoning:</i></p> <ul style="list-style-type: none"> • check 'use by' / 'eat by' dates • thorough cooking to kill bacteria • wash fruit / vegetables before use • cover food to protect from insects <p>Good personal hygiene to prevent the spread of infection:</p> <ul style="list-style-type: none"> • tie hair back • avoid preparation if you have any illness • wash hands before / after handling food • do not cough / sneeze over food • cover sores / cuts / spots with high colour adhesive dressing • wear PPE – apron, disposable gloves • not wearing jewellery – transfers bacteria <p>Follow legislation:</p> <ul style="list-style-type: none"> • Food Safety Act • The Food Safety (General Food Hygiene) Regulations 	6	<p>The number of ticks will not necessarily correspond to the marks awarded.</p> <p>This is a levels of response question – marks must be awarded on the quality of the response given. The focus of the question is description.</p> <p>Level 3 – Check List</p> <ul style="list-style-type: none"> • detailed description • at least 2 food hygiene practices • relevant to the care setting • QWC high <p>Level 2 – Check list</p> <ul style="list-style-type: none"> • basic description • one or two food hygiene practices • QWC-mid – may have some errors <p>Level 1 – Check list</p> <ul style="list-style-type: none"> • limited description • list like answers • QWC - likely to be poor 	<p>Level 3 (5-6 marks) Candidates will give two detailed descriptions of food hygiene practices staff should follow. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 2 (3-4 marks) Candidates will give one or two basic descriptions of food hygiene practices staff should follow. Answers will be factually accurate. There will be evidence of coherence within the answers. There will be noticeable errors of grammar, punctuation and spelling.</p> <p>Sub-max 3: for one food hygiene practice described in detail with example(s) relevant to a care setting.</p> <p>Level 1 (1-2 marks) Candidates will give a limited description. Answers are likely</p>

Question			Answer	Mark	Guidance
					<p>Answers must be factually correct.</p> <p>Annotations:</p> <p> = food hygiene practice identified</p> <p> = additional detail</p> <p>0 marks = no response worthy of credit</p> <p>NR = no response</p>

Question			Answer	Mark	Guidance
4			<p>One mark for each correct answer. Two required.</p> <p>Health and Safety (First Aid) Regulations – requirements for employers:</p> <ul style="list-style-type: none"> • carry out risk assessments to identify the level of first aid provision required • provide appropriate first aid equipment and facilities • train and appoint staff to give first aid should employees get injured or fall ill at work • have an effective means of recording accidents or incidents that require first aid intervention • number of first aiders required 	<p>2 (2x1)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>Wording of answers does not have to exactly match that of the mark scheme.</p> <p>Do not accept:</p> <ul style="list-style-type: none"> • type of first aid needed • specified contents of first aid box

Question		Answer	Mark	Guidance																							
5		<p>First aid procedure – fall resulting in hip pain and shock</p> <table border="1"> <thead> <tr> <th>Action (what)</th> <th>Explanation (why)</th> </tr> </thead> <tbody> <tr> <td>Assess – casualty is talking so is conscious / ABC check</td> <td>establishes casualty is conscious and breathing</td> </tr> <tr> <td>Ensure casualty is safe on the floor – nothing is posing a further risk</td> <td>to avoid further injury</td> </tr> <tr> <td>If position on floor allows, keep casualty's head low</td> <td>to restore blood to vital organs maintains consciousness</td> </tr> <tr> <td>Obtain medical help – dial 999</td> <td>for professional assistance</td> </tr> <tr> <td>Do not elevate the legs</td> <td>may cause further internal damage if hip is broken</td> </tr> <tr> <td>Give plenty of reassurance</td> <td>to manage shock to maintain consciousness</td> </tr> <tr> <td>Loosen tight clothing around the neck, chest, waist</td> <td>reduces constriction makes breathing easier</td> </tr> <tr> <td>Keep as still as possible</td> <td>to avoid further injury</td> </tr> <tr> <td>Keep a check on the casualty's breathing, pulse and level of consciousness</td> <td>monitors level of response shock can result in loss of consciousness</td> </tr> <tr> <td>Be prepared to resuscitate</td> <td>if breathing stops due to shock</td> </tr> </tbody> </table>	Action (what)	Explanation (why)	Assess – casualty is talking so is conscious / ABC check	establishes casualty is conscious and breathing	Ensure casualty is safe on the floor – nothing is posing a further risk	to avoid further injury	If position on floor allows, keep casualty's head low	to restore blood to vital organs maintains consciousness	Obtain medical help – dial 999	for professional assistance	Do not elevate the legs	may cause further internal damage if hip is broken	Give plenty of reassurance	to manage shock to maintain consciousness	Loosen tight clothing around the neck, chest, waist	reduces constriction makes breathing easier	Keep as still as possible	to avoid further injury	Keep a check on the casualty's breathing, pulse and level of consciousness	monitors level of response shock can result in loss of consciousness	Be prepared to resuscitate	if breathing stops due to shock	6	<p>The number of ticks will not necessarily correspond to the marks awarded. This is a levels of response question – marks must be awarded on the quality of the response given. The focus of the question is explanation.</p> <p>Level 2 – Check List</p> <ul style="list-style-type: none"> • detailed explanation • correct priority – with reasons • reference to hip + shock • use of technical language • QWC high <p>Level 1 – Check list</p> <ul style="list-style-type: none"> • descriptive (upper end), list like (low end) • minimal or no reasons • errors in priority • QWC mid – low <p>It is not expected that every action listed in the mark scheme will be given by the candidate. However the order of priority for the actions provided must be</p>	<p>Levels of response</p> <p>Level 2 (4-6 marks) Candidates will give a detailed explanation of the first aid procedure for the casualty. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1 (1-3 marks) Candidates will give a limited explanation of the first aid procedure for the casualty. Answers are likely to be descriptive or at the bottom end list like. Answers may be muddled, demonstrating little knowledge or understanding. There may be errors in the priority of treatment. Errors of grammar and spelling will be noticeable and intrusive.</p> <p>0 marks = no response worthy of credit</p> <p>NR = no response</p>
			Action (what)	Explanation (why)																							
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Question			Answer		Mark	Guidance	
			Do not allow any food or drink	an anaesthetic may be needed		appropriate. Appropriate order of priority is required for level 2.	
			Cover with a blanket	To keep warm, manage shock			


Question			Answer		Mark	Guidance	
6			<p>One mark for each correct answer. Two required.</p> <ul style="list-style-type: none"> • avoid direct contact with open wounds and blood • use disposable plastic gloves • covering cuts/wounds with appropriate sterile dressing/bandage • clean a dirty wound under running water • tweezers used to remove small objects such as grit or glass • washing hands before and after treating any wound • try not to touch the part of a dressing that is going to have contact with a wound • do not cough or sneeze over the wound • dispose of contaminated waste into a yellow biohazard bag /correctly 		<p>2 (2x1)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>Do not accept:</p> <ul style="list-style-type: none"> • 'gloves' on its own – must state disposable / plastic / rubber etc • plaster <p>Washing hands must be before and after</p>	


Question		Answer	Mark	Guidance										
7		<p>One mark for each correct answer. Five required.</p> <table border="1"> <tr> <td>1</td> <td>Danger</td> </tr> <tr> <td>2</td> <td>Response</td> </tr> <tr> <td>3</td> <td>Airway</td> </tr> <tr> <td>4</td> <td>Breathing</td> </tr> <tr> <td>5</td> <td>Circulation</td> </tr> </table>	1	Danger	2	Response	3	Airway	4	Breathing	5	Circulation	5 (5x1)	<p>The number of ticks must match the number of marks awarded.</p> <p>This is the only acceptable answer.</p> <p>Note: Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. (see page 4 for further guidance.)</p>
1	Danger													
2	Response													
3	Airway													
4	Breathing													
5	Circulation													

Question		Answer	Mark	Guidance
8	(a)	<p>One mark for each correct answer. Two required.</p> <p>Types of ill-treatment:</p> <ul style="list-style-type: none"> • being emotionally ill-treated by being deprived of love or physical contact / emotional abuse • verbal abuse by being regularly shouted at • having to witness violent scenes eg. at home • having parents who are unable to put the child's needs before their own • being physically neglected eg lack of food, personal hygiene • being left to look after himself without adult protection • psychological ill-treatment by carer – humiliation, swearing 	<p>2 (2x1)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>Wording of answers does not have to exactly match that of the mark scheme.</p> <p>Do not accept: physical abuse</p>

Question		Answer	Mark	Guidance
8	(b)	<p>Two marks for each correct description of effects. Two required.</p> <p>His clothes are dirty and smelly</p> <ul style="list-style-type: none"> • feels embarrassed – <i>may not want to go to school</i> • bullied by other children – <i>become withdrawn / upset</i> • not have any friends – <i>feels isolated / alone / unwanted</i> • low self-esteem/low self-concept – <i>so may not want to go to school</i> • low self-confidence – <i>because he feels different to other children</i> <p>He is always hungry</p> <ul style="list-style-type: none"> • unable to concentrate in lessons - <i>lack of progress/achievement</i> • lack of nutrition – <i>affects growth / make him ill / malnutrition lack energy</i> • loses friends – <i>because he takes their food</i> • stops communicating – <i>because he feels devalued/unwanted</i> • feels depressed – <i>due being unloved/uncared for/unwanted</i> <p>Sees his mother having violent rows with her boyfriend</p> <ul style="list-style-type: none"> • may regress/bedwetting – <i>because he feels worried about the situation</i> • frightened/scared – <i>worried about his mum because she gets shouted at/injured</i> • blame himself/feel guilty – <i>because he thinks it is his fault she gets shouted at</i> 	<p>6 (3x2)</p>	<p>The number of ticks must match the number of marks awarded.</p> <p>A full description that clearly shows knowledge and understanding of the possible effects should be awarded two marks.</p> <p>A limited description that lacks clarity should be awarded one mark.</p> <p>Do not credit repeats – must be three <u>different</u> effects.</p>

Question	Answer	Mark	Guidance
	<ul style="list-style-type: none"> • will not trust people – <i>will be unable to form friendships with other adults/children</i> • may become aggressive himself – <i>become angry and take it out on others</i> • embarrassed – <i>not want to have friends over</i> <p>The list is not exhaustive accept other valid effects. Effects may be interchangeable but be aware of repetition.</p>		



Question		Answer	Mark	Guidance	
				Content	Levels of response
9		<p>Features of the Children Act in bold.</p> <p>Aims to protect children at risk/keep them safe: Protection from harm May involve taking children away from family – care orders / emergency protection orders – if there is a crisis situation Duty of practitioners who work with children to follow safeguarding procedures</p> <p>Paramourncy principle: Children’s welfare is the most important thing. Children’s needs must come first, ie. taking him away from family may upset mum but may be in children’s best interests Gives children rights</p> <p>Children should be consulted: If a child is mature enough they should be consulted with giving them the right to speak out / have a voice / to be heard</p> <p>ECM – 5 outcomes Practitioners (GP, teachers, social worker) to improve children’s well-being relating to the 5 outcomes Children should be able to stay safe, be healthy, enjoy and achieve, make a positive contribution and achieve economic well-being.</p> <p>Encourages partnership working Duty of care practitioners who work with children to ensure information is shared</p>	6	<p>The number of ticks will not necessarily correspond to the marks awarded.</p> <p>This is a levels of response question – marks must be awarded on the quality of the response given. The focus of the question is explanation.</p> <p>Level 2 – Check List</p> <ul style="list-style-type: none"> • detailed explanation • at least two features of the Children Act • linked to safeguarding • QWC high - mid <p>Level 1 – Check list</p> <ul style="list-style-type: none"> • basic/limited explanation • one or two features of the Children Act, may be list like • may not link to safeguarding • QWC – low <p>Annotations:</p> <p> = aspect of the Children Act identified</p>	<p>Level 2 (4-6 marks) Candidates will give a detailed explanation of key features of the Children Act that contribute to safeguarding. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1 (1-3 marks) Candidates will give a basic explanation of key features of the Children Act that contribute to safeguarding. Answers are likely to be list like. Understanding will be superficial. Answers may be muddled, demonstrating little knowledge or understanding. Errors of grammar and spelling may be noticeable and intrusive.</p> <p>0 marks = no response worthy of credit</p> <p>NR = no response</p>

Question			Answer	Mark	Guidance	
			Example answer: <i>Every Child Matters states that children should 'enjoy and achieve'. This will help to make children happy and feel good about themselves, safeguarding them from depression or feeling undervalued.</i>		 = link to safeguarding	

Question	Answer	Mark	Guidance
10	<p>Three marks for an outline.</p> <p>Care Quality Commission:</p> <ul style="list-style-type: none"> • registers services • monitors and inspects services • regulates services: hospitals, GP practices, walk-in centres, out-of-hours services and care homes • sets out the standards of care required • checks that services meet the required standards of quality and safety • publishes inspection reports • awards ratings: outstanding/good/requires improvement/inadequate • by law service providers have to display their CQC rating <p>Action the CQC can take:</p> <ul style="list-style-type: none"> • issue ‘requirement notices’ or ‘warning notices’ to set out what improvements the care provider must make and by when • placing a provider in ‘special measures’ to closely supervise the quality of care to help them improve within set timescales • hold the care provider to account for their failings by: <ul style="list-style-type: none"> – issuing simple cautions – issuing fines – prosecuting cases where people are harmed or placed in danger of harm. 	3	<p>The number of ticks must match the number of marks awarded.</p> <p>Three marks: An outline that clearly shows knowledge and understanding of the role of the CQC.</p> <p>Two marks: A sound outline that demonstrates some knowledge of the role of the CQC.</p> <p>One mark: A limited outline that lacks knowledge and clarity</p> <p>Further information can be found at: http://www.cqc.org.uk/content/about-us</p>

Question		Answer	Mark	Guidance	
				Content	Levels of response
11		<p>Fire evacuation procedure:</p> <ul style="list-style-type: none"> • raise the alarm – alert people in the immediate area, activate alarm system, call 999 • all staff to remove people from their immediate area – direct them to the fire assembly point, use designated fire exits, never use lifts • designated staff assist residents with: <ul style="list-style-type: none"> – mobility difficulties (use of evac chairs / wheelchairs) – hearing difficulties (may not hear alarm) – dementia patients (may be confused/unaware of what is happening) • staff to close doors and windows, switch off lights as they leave • staff evacuating the building must check their locality is clear • everyone to assemble at designated external assembly point to await further instructions • do not re-enter the building until told it is safe to do so • carry out head count to ensure everyone is accounted for • senior staff to inform fire brigade if anyone is left in the building 	6	<p>The number of ticks will not necessarily correspond to the marks awarded.</p> <p>This is a levels of response question – marks must be awarded on the quality of the response given. The focus of the question is description.</p> <p>Level 2 – Check List</p> <ul style="list-style-type: none"> • detailed description • correct procedure in appropriate order • reference to care home / older adults • use of technical language • QWC high <p>Level 1 – Check list</p> <ul style="list-style-type: none"> • limited description • may be list like (low end) • may not make reference to care home/older adults • errors in priority • QWC mid – low <p>Must have some reference to older adults to achieve full marks.</p>	<p>Level 2 (4-6 marks) Candidates will give a detailed description of the fire evacuation procedure for older residents in a care home. Answers will be factually accurate, using appropriate terminology. There will be evidence of synthesis within the work. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1 (1-3 marks) Candidates will give a limited description of the fire evacuation procedure for the care home. Answers are likely to be list like. Answers may be muddled, demonstrating little knowledge or understanding. There may be errors in the priority of the procedure. Errors of grammar and spelling will be noticeable and intrusive.</p> <p>0 marks = no response worthy of credit</p> <p>NR = no response</p>

Question		Answer		Mark	Guidance	
					Content	Levels of response
12				8	<p>The number of ticks will not necessarily correspond to the marks awarded. This is a levels of response question – marks must be awarded on the quality of the response given.</p> <p>Level 3 Check List:</p> <ul style="list-style-type: none"> at least 3 hazards linked to risks consideration of at least one precaution already in place – adequate? explanation of at least one additional precaution QWC – high <p>Level 2 Check List</p> <ul style="list-style-type: none"> sound links – hazards linked to risks some consideration of precautions – existing &/or additional QWC –mid-likely to be some errors. 	<p>Level 3 (7-8 marks) Candidates will make detailed and well-argued judgements of at least 3 hazards with clear links to why and how people might be at risk. They will consider precautions that are already in place and explain additional precautions. Answers will be factually accurate, using appropriate terminology. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 2 (4-6 marks) Candidates will describe hazards making sound links between the hazards and how people might be at risk. They will give some consideration of the precautions needed. Answers will be factually accurate. Limited use of technical terminology. There will be evidence of coherence within the answers. There may be noticeable errors of grammar, punctuation and spelling.</p>
		Hazard:	Risk:			
		Hot drinks machine by the family room and main doors	<i>people with hot drinks may collide with others entering/leaving the ward resulting in scalds / burns from spilled hot drinks</i>			
		Stack of chairs behind ward doors	<i>doors may not open fully and so risk of staff bringing food/drinks from the kitchen colliding with service users moving in and out of ward scalds / burns from spilled hot drinks / food spillage</i>			
		Stack of chairs by the fire exit causing an obstruction	<i>trip hazard / obstructing fast exit in an emergency</i>			
		Table and chairs in the middle of the main route through the ward	<i>people leaving ward in an emergency may trip over chair or table</i>			
		No fire extinguisher in the kitchen	<i>most likely area for a fire to break out</i>			
		No ramp at fire exit	<i>people with disabilities or mobility difficulties unable to access fire exit steps risk of falls / not a safe emergency exit</i>			
		Carers / relatives / visitors / service users and staff – all at risk				

Question	Answer	Mark	Guidance			
12 ctd	Are existing precautions adequate?:		Content	Levels of response		
	Precaution:	Adequate?			Level 1 Check List <ul style="list-style-type: none"> • identification of hazards/risks • may be list-like • limited awareness of precautions • QWC – low Annotation:  = hazard / risk identified EG = identifying existing precaution OR additional precautions  = explanation of hazard / risk / precaution Do not credit hazards or precautions that are not shown on the plan.	Sub max 4 – if no consideration of precautions (existing or additional) Level 1 (1-3 marks) Candidates will identify hazards/risks but make few links between the why people might be at risk and the precautions needed. Answers may be list like. Understanding will be superficial. Answers may be muddled, demonstrating little knowledge or understanding. Errors of grammar and spelling will be noticeable and intrusive. 0 marks = no response worthy of credit NR = no response
	Fire blanket in kitchen	<i>good practice / good location</i>				
	Ramp outside reception area	<i>safe, easy access especially for wheelchair users and those with mobility difficulties</i>				
	First aid box	<i>situated in kitchen for easy access</i>				
	Fire extinguisher by every exit	<i>good practice / good location / easy access</i>				
	Round table	<i>no sharp corners to cause injury</i>				
	Separate play area	<i>good practice, reduces risk of tripping</i>				
	Suggested additional precautions:					
	Additional precaution:	Why?				
	Ramp outside fire exit	<i>easy access, in the event of an emergency, for wheelchair users and those with mobility difficulties</i>				
	Removal of spare chairs from behind ward doors and by fire exit	<i>easier access to ward reduces risk of people colliding etc safer in in an emergency</i>				
	Fire extinguisher in the kitchen	<i>good practice – area most likely to catch fire</i>				
	Fire exit in kitchen	<i>reduces risk of people getting trapped in the kitchen</i>				
Remove hot drinks machine	<i>removes risk of spillages, scalds etc</i>					
Remove table and chairs from centre of ward	<i>Leaves a clear route through the ward for staff/visitors/patients and to fire exit in an emergency</i>					

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