

CAMBRIDGE NATIONALS

Examiners' report

SPORT SCIENCE

J802, J812

R041 Summer 2022 series

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Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates.

The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. A selection of candidate answers is also provided. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

A full copy of the question paper and the mark scheme can be downloaded from OCR.

Advance Information for Summer 2022 assessments

To support student revision, advance information was published about the focus of exams for Summer 2022 assessments. Advance information was available for most GCSE, AS and A Level subjects, Core Maths, FSMQ, and Cambridge Nationals Information Technologies. You can find more information on our [website](#).

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R041 series overview

R041: Reducing the risk of sports injuries is the mandatory examination component for the OCR Level 1/2 Cambridge National Award (J802) and Cambridge National Certificate (J803) in Sport Science.

This component prepares candidates on how to reduce the risk of injuries occurring when participating in physical activity, how to react to common sports injuries and how to recognise the symptoms of some common medical conditions.

Candidates need to be prepared for a range of different question types so that they can respond equally well to true/false, multi-choice, completion of tables, short answer questions (ranging from a choice of command words such as identify, describe and explain) and the 'extended levels' response Question 15. Candidates who do well on this paper are also able to apply knowledge and have a good understanding using practical examples from different sports and physical activities.

Centres are reminded that mark schemes are used as a basis for judgements and each examiner's professional judgement is used in finally deciding the marks credited based on a rigorous standardised procedure. Examiners use ticks to indicate the number of marks given for Questions 1 – 14.

Question 15 is always the extended response. This is assessed against the 'levels' part of the mark scheme. The mark scheme for this final question has a number of criteria separated into three levels. These levels also include statements related to the quality of written communication. The levels scheme also includes indicative content that and this content is taken into consideration when awarding mark with examiners using the following annotations – KU = knowledge point, DEV = development of knowledge, EG = use of applied practical example.

Candidates who did well on this paper generally did the following:	Candidates who did less well on this paper generally did the following:
<ul style="list-style-type: none"> recognised the difference between acute and chronic injuries: Question 1 (a)/(b) used relevant sporting examples relating to the named activities in the question: Question 1 (a)/(b) – marathon running, Question 9 (b) – gymnastics/football and Question 15* – contact sports), and applied their own relevant sporting examples (Question 11 (b)) when required gave responses that focused on the command words in the question in relation – explaining how further injury can be caused (Question 3 (b)), describing to reduce chances of injury (Question 5), describing different causes of fracture (Question 9 (b)) and describing the difference (Question 11 (a)) offered alternative responses other than those given in the question and therefore did not repeat wording: Question 3, Question 5, Question 7 (c), Question 13 (a)/(b) and Question 14 gave concise responses and clearly had the knowledge and application for specific questions: Question 3 (a)/(b), Question 5 and Question 15* used acronyms to help recall aspects such as RICE (Question 7 (a)) and SALTAPS (Question 10) used specific terminology from the specification, for example mobility and dynamic movements (Question 13 (a)) showed evidence of planning for the level Question 15* and gave clear responses to both parts (psychological benefits for warm up and physiological benefits of cool down). 	<ul style="list-style-type: none"> confused acute and chronic injuries: Question 1 (a)/(b) did not apply relevant sporting examples to named activities in question or use their own sporting example when required to do so gave descriptions rather than examples: Question 13 (a)/(b) did not follow the command words of the question – for example, no explanation of how round shoulder could cause further injury (Question 3 (b)) repeated answers or offered equivalent responses to those already given in question or question stem: Question 3, Question 5, Question 7 (c), Question 13 (a)/(b) and Question 14 repeated answers within same context: Question 6, Question 14 were unable to use descriptions other than repeating the wording in some questions: Question 11 (b) (repeating getting cut/graze rather than describing how they could occur) gave responses that were often too vague and/or did not answer the question (NR = no response) did not offer responses for both parts of the level Question 15* and/or gave responses for both the physiological <u>and</u> psychological benefits of a warm up and/or cool down with some responses relating to benefits of cool down TV (too vague), for example, a cool down lowers heart rate with no reference to 'gradually' or equivalent.

Most successful topic/question/set texts	Least successful topic/question/set texts
<ul style="list-style-type: none"> Q1 (a)/(b): Acute injuries and chronic injuries. Q2: Helmet causing injury to players wearing it and others. Q4: Maintenance stretching. Q6: Extrinsic factors. Q7a-c: RICE. Q8: Emergency personnel. Q9 (a)/(b): Fractures. Q10: SALTAPS. Q12 (a)-(c): Epilepsy. Q13 (a): Warm up components and examples. Q14: Symptoms of asthma. 	<ul style="list-style-type: none"> Q3 (a): Causes of poor posture. Q3 (b): Explanation of how round shoulder can cause further injury. Q5: Description of how individual variable can be used by a coach to help reduce injury. Q11 (a)/(b): Grazes and cuts. Q12 (d): Purpose of emergency care plan. Q15: Psychological benefits for warm up and physiological benefits of cool down.

Question 1 (a)

1 (a) Name **one** acute and **one** chronic injury that a marathon runner may suffer from.

Acute:

Chronic:

[2]

Many candidates demonstrated excellent knowledge of the different acute and chronic injuries and applied this to marathon running. Some candidates related injuries that did not apply to marathon running such as tennis and golfer's elbow for chronic. A small number of candidates also confused acute and chronic injuries.

The most common acute injuries were sprains, strains, cuts and bruises although a wide range of different acute injuries from the specification were also used including abrasions, fractures and contusions.

The most common chronic injuries were shin splints, tendonitis and blisters. Other candidates scored a mark for using relevant chronic injuries that are not named in the specification such as runner knee.

Question 1 (b)

(b) Describe how acute and chronic injuries may occur during a marathon.

Acute:

.....

Chronic:

.....

[2]

Many candidates were able to describe how both acute and chronic injuries could occur during a marathon. The most common responses for acute injuries tended to be the marathon runner falling/slipping over or colliding into other runners. A lot of responses referred to the fact that the marathon involved running long distances in relation to chronic injuries and there was also good use of specific terminology with chronic injuries occurring through 'repeated/continuous stress or overuse'. Those candidates that offered 'blisters' as a chronic injury in Question 1 (a) then often referred to 'friction or rubbing of the skin' from running long distances and scored a mark.

Exam command words and scenarios

Candidates are reminded that when specific activities are given in a question their responses need to link to that activity. Question 1 (a) and 1 (b) were concerned with marathon running.

Question 2

2 Describe how an ice hockey helmet may cause injury to the player wearing it and how it may cause injury to other players.

Player:

.....

Other players:

.....

[2]

Candidates showed good knowledge of how sporting equipment (ice hockey helmet) could cause injury to both the player wearing it and how it may cause injury to other players. The most common responses for the player wearing the helmet were broken/faulty or poorly fitting. Candidates often referred to players throwing the helmet at other players or it becoming a trip hazard in relation to how it could cause injury to others.

Question 3 (a)

3 Poor sitting position and stance can cause sports injuries.

(a) Describe **three** other causes of poor posture that can cause sports injuries.

- 1
-
- 2
-
- 3
-

[3]

A number of candidates were able to refer to the specification and gave responses such as lack of exercise, feeling fatigued and having low self-esteem. Some candidates simply repeated the wording in the stem of the question with poor stance and sitting positions such as slumping/slouching which were too vague. Other candidates had some knowledge but were again too vague in their descriptions as they only offered clothing/footwear or emotional factors. These types of responses scored no marks as they were too vague. In order to answer the question there needed to be a description of these causes, so responses such as 'poorly fitting footwear' or 'low emotional factors' were required.

It is important that candidates recognise the importance of command words and often one-word responses will not gain marks for describe/explain questions. Some candidates simply listed the other sports injuries relating to poor posture in the specification such as lordosis and kyphosis which on their own is not a description of a cause of poor posture.

Question 3 (b)

(b) Explain **three** ways how round shoulder can cause further injury when playing sport.

- 1
- 2
- 3

[3]

The majority of candidates struggled to score marks on this question with very few scoring maximum marks. The candidates that did not score marks on this question were either too vague in their explanations by not linking their response to how round shoulder might actually cause further injury when playing sport. For example, simply stating that the performer was unbalanced is too vague and needed to be developed by linking it to the increased chances of falling over – this example was also the most common mark awarded. Candidates appear to find this concept more difficult and struggled with a similar question in Jan 2019 but in relation to pelvic tilt rather than round shoulder.

Exam command words

Candidates are reminded that they need to focus on the command word. For Question 3 (b) this was an 'explain' question therefore responses required a need to state how round shoulder could cause further injury rather than simply giving a description such as limited flexibility.

Question 4

4 At the end of a hockey match stretching should be performed to help prevent injuries.

Circle your chosen option to indicate which type of stretching should be performed at the end of a hockey match.

Maintenance stretching

Dynamic stretching

[1]

This was a very well answered question with the majority of candidates being aware that maintenance stretching is a type of stretching that should be performed as part of the cool down.

Question 5

5 Nutrition is an individual variable that a coach must be aware of when planning a training programme for a games player.

Other than nutrition, identify and describe **three** individual variables a coach needs to consider to reduce the chances of injury when planning a training programme for a games player.

Individual variable 1:

Description:

.....

Individual variable 2:

Description:

.....

Individual variable 3:

Description:

.....

[6]

Many candidates were able to use other individual variables and did not repeat 'nutrition' as an individual variable. The most common correct responses were age, gender, fitness/health variables. A lot of candidates then struggled to apply the variable to a coach considering what needs to be done in order to help reduce the risk of injury. The more able candidates were able to describe the importance of the individual variable towards planning a training programme. For example, a hockey coach needs to be aware of the ages of the group and make sure adults and children are training against their own ages and not against each other or a basketball coach needs to be aware of their players' medical conditions such as asthma and allow them to rest and use their inhaler when required.

Some candidates appear to be unfamiliar with the terminology of individual variables and/or are getting them mixed up with extrinsic factors.

Exemplar 1

Individual variable 1: age

Description: you can't make a 13 year old do the same workouts as a 24 year old person

Individual variable 2: gender

Description: ~~yo~~ boys are typically stronger, you could put a girl and a boy against each other

Individual variable 3: ability

Description: you can't put a new and advanced person against each other in boxing as it would be unfair and lead to injury and would be safe. [6]

This response has clearly given three correct individual variables with age, gender and ability. They have then correctly given a description of the consideration a coach would need to consider to reduce the chances of injury when planning a training session. The most common vague response with this question was around age with many responses simply stating young and old. This response has offered actual ages that clearly puts them at the age ranges of children (13-year-old) and an adult (24-year-old) and the need for them to not do the same workouts.

Specification – LO1 – Individual variables

An understanding of the technical vocabulary that is stated in the specification is crucial if candidates are to perform well in this examination.

Question 6

6 Identify **three** different types of extrinsic factors that can influence injury in a sporting activity.

- 1
- 2
- 3

[3]

Generally candidates scored at least 1 or 2 marks on this question. The main issue for candidates' not scoring maximum marks occurred when they repeated similar examples of the extrinsic factor. The main extrinsic factor this occurred with was for the environment. Candidates would often score a mark for environment but then would give other examples of the environment such as weather and other players. Candidates that scored maximum marks often used the 'different' types of extrinsic factor as stated in the specification – type of activity, coaching, environment, equipment and safety hazards.

Question 7 (a)

7 R.I.C.E. is an acronym for a treatment method that can be used when responding to a sports injury.

(a) Complete the following table.

R	Rest
I	Ice
C	Compression
E

[1]

Most candidate had the knowledge for the RICE acronym. Some candidates incorrectly gave 'evaluation' as their response.

Question 7 (b)

(b) Identify **two** benefits of using ice to treat a sprain.

1

2

[2]

Candidates need to make sure their wording is correct when responding to questions as some responses were referring to ice being able to stop or prevent swelling and pain which is too vague. The application of ice to a sprain can only help reduce (or equivalent) the swelling and pain rather than stopping it altogether.

Question 7 (c)

(c) A bandage can be used to compress a cut to help stop blood loss. Describe another reason for using a bandage to treat a cut.

..... [1]

This was a very well answered question with the majority of responses correctly referring to helping to prevent infection/bacteria to the cut. Some candidates described the bandage as a support which would be useful for a sprain but not for a cut.

Question 8

8 Emergency action plans contain vital information, including the personnel involved during emergencies.

Give **two** examples of emergency personnel.

1

2

[2]

Many candidates scored the maximum 2 marks with first aider, coach and paramedic often used. Some responses were too vague as they referred to just 'first aid' which is the treatment not the personnel or 'ambulance' which is the vehicle not the personnel. Other candidates gave the other two components of the EAP (communication and equipment) rather than examples of personnel.

Question 9 (a) (i)

9 (a) (i) Using the X-ray images below identify the type of fracture in each X-ray.



X-ray A:

X-ray B:

[2]

Most candidates were able to distinguish the two different types of fracture from the X-ray images. Some incorrect responses referred to 'intrinsic' and 'extrinsic' fractures or even dislocations.

Question 9 (a) (ii)

(ii) Justify your answer.

.....
..... [1]

Candidates that scored 2 marks in Question 9 (a) (i) generally scored the mark in (ii) for correctly stating the bones in X-ray A were broken and not sticking out of the skin/arm or in X-ray B the bones were broken and sticking out of the skin/arm.

Question 9 (b)

(b) Describe a different cause of a fracture occurring in gymnastics and football.

Gymnastics:

.....
.....

Football:

.....
.....

[2]

The majority of candidates offered a range of different responses for this question and scored maximum marks. The most common responses for gymnastics tended to be 'falling from a beam or equivalent' and for football it was 'in a tackle' that often scored the mark. Some candidates did not offer different causes and only scored one mark. For example, responses that described a gymnast and a football player falling over or using equivalent wording would only score one mark. It is important that candidates read the wording in the question and it is good practice to always offer different ways even if the question does not ask for it.

Question 10

10 SALTAPS is an on-field assessment routine used to respond to injuries in sport.

Name the part of SALTAPS when a player is able to stand up and apply weight to the injury.

..... [1]

This was a well answered question although some candidates using some responses that are not even part of SALTAPS such as 'support' indicating a lack of knowledge of the acronym. The most common incorrect responses tended to be the 'active' or 'passive' parts of SALTAPS.

Question 11 (a)

11 (a) Describe the difference between grazes and cuts.

.....

.....

.....

..... [2]

A number of candidates were able to give detailed descriptions of the differences between grazes and cuts with the most common differences relating to the surface of the skin and/or the amount of blood loss. Some responses that were too vague for grazes stated the skin being 'ripped or torn off' indicating the skin surface was broken (cuts).

Question 11 (b)

(b) Using a sporting example, describe **one** way a performer may get the following injuries:

Cut:

.....

.....

Graze:

.....

.....

[2]

Many candidates scored at least one for this question mainly due to using a practical example of a 'football tackle' or equivalent as a sporting example that could cause a cut. Some responses that were too vague used the same wording of the injuries rather than describing the actual way a performer may receive those injuries. For example, an ice skater cutting themselves on a blade does not describe the way it could happen and has simply reused the wording of 'cutting'. This response would need to show the blade of the ice skate coming into contact with the performers' skin by being caught or hit with skate during a lift.

Fewer candidates scored the sporting example mark for a graze as their responses lacked specific detail in describing the need for the skin to be scraped or sliding across a 4G hockey pitch after a trip/fall. Some responses gave no sporting example at all and scored no marks.

Exam command words

Candidates are reminded to use specific sporting examples when asked to do so. Often this needs to be more than simply naming a sport within the response. It is good practice for candidates to give detail within sporting examples. For example a player getting a cut in football for Question 11 (b) is too vague.

A cut to a football player can occur when they get hit with an opponents' studs during a tackle provides more detail and ensures the mark is given.

Question 12 (a), (b) and (c)

12 Read each of the following statements on epilepsy. Circle your chosen option to indicate whether each statement is True or False.

- (a) It is important to restrain a performer if they are having an epileptic seizure to prevent further injury.

True

False

[1]

- (b) Epipens are used to treat someone having a seizure.

True

False

[1]

- (c) A symptom of epilepsy is flashing lights.

True

False

[1]

These questions were generally well answered but there were a number of candidates who didn't score maximum marks for all three 'true and false' questions. Question 12 (b) and (c) seemed to cause those candidates not scoring maximum marks the problem highlighting some gaps in knowledge in relation to epilepsy. A very small number of candidates are still leaving such questions blank and not offering an attempt at a true or false question.

Question 12 (a) If a person suffering from epilepsy was restrained this may cause injury to them or the person treating them. It is important to let the seizure run its normal course.

Question 12 (b) Epipens can help stop an anaphylactic reaction becoming life threatening. Candidates should have knowledge on how seizures should be treated by referring to this [NHS page on seizures](#).

Question 12 (c) Flashing lights can be a trigger for epilepsy not a symptom. The main symptoms of epilepsy can be found on this [NHS page on epilepsy](#).

Question 12 (d)

- (d) Describe the purpose of an emergency care plan for someone that has been diagnosed with epilepsy.

.....
.....
.....
..... [2]

Candidates struggled to gain maximum marks on this question. Those that did score one mark generally referred to the emergency care plan providing knowledge of what to do that is specific to the individual rather than the generic way of treating a seizure. Many candidates mentioned many of the different ways of treating a seizure such as putting in the recovery position which were too vague.

Question 13 (a)

13 Stretching is a component when warming up before exercise and cooling down after exercise.

- (a) Other than stretching, name **two** components of a warm up, giving an example for each.

Component 1:

.....
.....

Example 1:

.....

Component 2:

.....
.....

Example 2:

..... [4]

Many candidates scored at least 2 marks for this question. Candidates that did not score maximum marks often repeated stretching or used different types of stretching with examples and/or scored marks for giving components of mobility and dynamic movement but would then get the examples confused for these two specific components. For example, a candidate giving open and closing the gates for mobility and then lunges for dynamic movement would score 3 marks or a candidate giving shuttle runs for mobility and arm circles for dynamic movement would score 2 marks.

Exemplar 2

Component 1:

Pulse raiser
Jogging

Example 1:

.....

Component 2:

Dynamic movement

Example 2:

Arm circles

[4]

This response has scored 3 marks for two correct components of a warm up and one correct example. A common error that is often made by candidates is mixing up the components of dynamic movement and mobility. As this response used dynamic movement then an appropriate example would have been shuttle runs, running in out of cones or an equivalent. The candidate has used arm circles which is an example of mobility so no mark was awarded.

Question 13 (b)

- (b) Other than stretching, describe another component of a cool down and give an example of this component.

Description:

Example

[2]

Most candidates were able to score 2 marks for this question demonstrating knowledge of the other cool down component in the specification of a pulse lowering activity such as gentle/light jogging.

Question 14

14 A tight chest can be a symptom that a performer is suffering from asthma.

Identify **three** other symptoms of asthma.

- 1
- 2
- 3

[3]

Many candidates showed a very good knowledge of asthma symptoms. Some candidates did not score maximum marks for their symptom responses as they simply repeated 'tight chest' (in question) or equivalent or gained one mark for a response relating to breathing difficulties but then repeated this response using similar wording such as 'shortness of breath' or 'feeling breathless'.

Candidates scoring maximum marks often used the other three symptoms stated in the specification of coughing, wheezing and shortness of breath. Many other candidates demonstrated further knowledge of asthma symptoms by giving responses from the NHS such as faster heartbeat, blue lips/fingers and dizziness.

Some candidates gave responses linked to specific symptoms for diabetes (e.g. going to the toilet lots) and epilepsy (e.g. fitting) and gained no marks.

Exemplar 3.

- 1 Heavy breathing
- 2 loss of breath
- 3 dizziness

[3]

This response has scored 2 out of 3 marks. The candidate has given a similar response of heavy breathing with loss of breath. It is important that candidates are aware that repeating similar responses will not score a mark.

Exam command words and exam technique

Candidates are reminded the need to read questions carefully. Any responses given in the stem of the question need to be omitted from candidates' responses altogether otherwise they will be unable to score maximum marks. In Question 14 any responses that simply repeated the wording of 'tight chest' or equivalent would not be given a mark.

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