

Cambridge Technicals

Health and Social Care

Unit 3: Health, safety and security in health and social care

Level 3 Cambridge Technical in Health and Social Care **05830 - 05833 & 05871**

Mark Scheme for June 2024

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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.

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PREPARATION FOR MARKING ON-SCREEN

- 1. Make sure that you have accessed and completed the relevant and training packages for on-screen marking: RM Assessor Online Training and the OCR Essential Guide to Marking.
- 2. Make sure that you have read and understood the Instructions for On-Screen Marking and the mark scheme and the question paper for this unit. These are posted on the RM Cambridge Assessment Support Portal http://www.rm.com/support/ca
- 3. Log-in to RM Assessor and mark the **required number** of practice responses and the **required number** of standardisation responses.

PREPARATION FOR PAPER BASED MARKING

- 1. Make sure that you have accessed and completed the relevant training for paper based marking.
- 2. Make sure that you have read and understood the Instructions for Specialist Marking and the mark scheme and the question paper for this unit.
- Before the Standardisation meeting you must mark at least 10 scripts from several centres. Use pencil and follow the mark scheme. Bring these marked scripts to the meeting

MARKING INSTRUCTIONS - FOR MARKING ON-SCREEN AND FOR PAPER BASED MARKING

- 1. Mark strictly to the mark scheme.
- 2. Marks awarded must relate directly to the marking criteria.
- 3. The schedule of dates is very important. It is essential that you meet the RM Assessor 50% and 100% (traditional 40% Batch 1 and 100% Batch 2) deadlines. If you experience problems, you must contact your Team Leader (Supervisor) without delay.
- 4. If you are in any doubt about applying the mark scheme, consult your Team Leader by telephone or the RM Assessor messaging system, or by email.
- 5. Crossed Out, Rubric Error (Optional Questions) and Multiple Responses

Crossed Out Responses

Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

Rubric Error Responses – Optional Questions

Where candidates have a choice of question across a whole paper or a whole section and have provided more answers than required, then all responses are marked and the highest mark allowable within the rubric is given. (The underlying assumption is that the candidate has penalised themselves by attempting more questions than necessary in the time allowed.)

Multiple Choice Question Responses

When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate). When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.

Contradictory Responses

When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only **one mark per response**)

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. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. (The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)

Short Answer Questions (requiring a more developed response, worth two or more marks)

If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

Longer Answer Questions (requiring a developed response)

Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first response.

- 6. Always check the additional pages (and additional objects if present) at the end of the response in case any answers have been continued there. If the candidate has continued an answer there then add a tick to confirm that the work has been seen. The 'link page' check box should be used on scoris to link candidate responses in additional objects to the corresponding question number.
 - a. Where additional objects are present, all pages must contain an annotation, or scoris will not allow you to submit the script. Where no response is given by a candidate on a whole page the 'BP' annotation **must** be applied.
 - b. Where generic answer booklets are used, all pages must contain an annotation, or scoris will not allow you to submit the script. Where no response is given by a candidate on a whole page the 'BP' annotation **must** be applied.
 - c. Where structured answer booklets are used, the 'BP' annotation **must** be applied to all pages where no response is given by a candidate.
- 7. There is a NR (No Response) option. Award NR (No Response)
 - if there is nothing written at all in the answer space
 - OR if there is a comment which does not in any way relate to the question (e.g. 'can't do', 'don't know')
 - OR if there is a mark (e.g. a dash, a question mark) which isn't an attempt at the question

Note: Award 0 marks - for an attempt that earns no credit (including copying out the question)

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- 8. The RM Assessor **comments box** is used by your team leader to explain the marking of the practice responses. Please refer to these comments when checking your practice responses. **Do not use the comments box for any other reason.**If you have any questions or comments for your team leader, use the phone, the RM Assessor messaging system, or e-mail.
- 9. For answers marked by levels of response:
 - a. **To determine the level** start at the highest level and work down until you reach the level that matches the answer
 - b. To determine the mark within the level, consider the following:

| Descriptor | Award mark |
|---|---|
| On the borderline of this level and the one below | At bottom of level |
| Just enough achievement on balance for this level | Above bottom and either below middle or at middle of level (depending on number of marks available) |
| Meets the criteria but with some slight inconsistency | Above middle and either below top of level or at middle of level (depending on number of marks available) |
| Consistently meets the criteria for this level | At top of level |

These are the annotations to be used when marking Unit 3.

| Annotation | Meaning |
|------------|---|
| ₩ | Tick – correct answer |
| × | Cross – incorrect answer |
| LI | Level 1 |
| L2 | Level 2 |
| L3 | Level 3 |
| BOD | Benefit of doubt (This does count as a mark – so do not 'tick' as well) |
| ^ | Omission mark |
| TV | Too vague |
| REP | Repeat |
| SEEN or | Noted but no credit given |

| Question | Answer | Marks | Guidance |
|----------|---|----------------|--|
| 1 (a) | One mark for an identification of a hazard. Two required. One mark for identifying the impact. Two required. Examples will link to Iifting and handling; or DSE (display screen equipment). Do not credit just 'lifting and handling' or 'DSE' – candidates must give a specific example. | 4 (4x1) | Annotation: The number of ticks must match the number of marks awarded. For incorrect answers use the cross or appropriate annotation from the following: |
| | Hazard examples: Bending / lifting boxes of food/lifting boxes unpacking food deliveries picking something up from the floor carrying heavy boxes chair at the incorrect height using the computer screen at incorrect height using computer sitting at a computer for long periods of time Examples of impacts Injury Harm – accept any relevant Musculo-skeletal injuries, e.g., strained back / slipped disc joint pain muscle aches and pains | | Award: One mark for identifying an example of a musculoskeletal hazard in a lunch club One mark for identifying an impact If example is incorrect mark can still be awarded for the impact Accept: injury impact - injured back pain |
| | RSI from using DSE – aches and pains due to incorrect posture / or badly positioned screen Loss of earnings if off work due to injury Re-training on lifting and handling Change of role within the kitchen e.g. more food preparation to avoid lifting and handling | | Do not accept; Repeat impacts hazards such as falling boxes and trips impacts that are vague e.g. back problems, musculoskeletal problems broken limbs |

| Que | estion | Answer | Marks | Guidance |
|-----|--------|---|----------------|---|
| 1 | (b) | One mark for any two of the following actions: Correct storage of food e.g. keep containers closed, store food in appropriate conditions e.g. refrigeration, label food with the date Protect against contamination e.g. raw food must not come into contact with cooked food, clean all containers in between use, use colour-coded / separate chopping boards / be aware of allergies Personal hygiene e.g. hand washing, clean clothes, no nail varnish, disposable / | 2 (2x1) | Annotation: The number of ticks must match the number of marks awarded. For incorrect answers use the cross or appropriate annotation from the following: |
| | | Label hazardous or inedible substances e.g. cleaning products Prevent spread of diseases, e.g. do not work in the kitchen if you are carrying a disease that could be transmitted through food, use blue plasters to cover wounds | | Accept alternative wording. Answers must be explicitly related to the Food Safety Regulations. |
| | | Wear protective clothing, e.g. hair nets, aprons Correct disposal of waste food e.g. do not leave waste food lying around, make sure pests can't get into refuse, arrange for waste to be removed from the premises | | Only allow one example for each category; all subsequent answers must be annotated with repeat. |
| | | Keep all surfaces clean and if necessary disinfected Keep all equipment clean and if necessary disinfected Keep records of where food is sourced | | Do not accept: • answers that are too vague, e.g. 'wear gloves' or 'good hygiene', must have a food hygiene |
| | | Prepare and serve food at the correct temperature Identify food safety issues / risk assess and minimise e.g. checking dates on food | | certificate, food cooked appropriately, safety equipment, ensure food is safe to be eaten; washing fruit and vegetables |

| Question | Answer/Indicative Content | Marks | Guidance |
|----------|--|-------|---|
| 1 (c)* | Responding to aggressive and potentially dangerous individuals. Darcie's response needs to involve: Assess the situation being calm speaking firmly and clearly – ask them to leave alert other staff for assistance / support contact management keep other service users safe – move away from the intruder to a separate space or to another room keep other service users away from the incident call the police if they persist and refuse to leave or become threatening keep herself safe – Darcie should not put herself at risk evacuate individuals and staff internally instigate lockdown procedures write up a report for the manager report the incident to the manager after the 'incident' | 8 | Level 3 (7–8 marks) There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. detailed explanation of the responses. explicitly relevant to the scenario with clear understanding of the situation. Level 2 (4-6 marks) There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. sound explanation of the responses mostly relevant to the scenario understanding of the situation will be evident but may be implicit. Level 1 (1–3 marks) There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. limited or basic attempt at a brief explanation information may be list like and presented in an unstructured way. may not be specifically linked to the scenario. O marks No response or no response worthy of credit. Annotation: The number of ticks will not necessarily correspond to the marks awarded. |
| | | | Do not credit informing service user families, give them a meal / give them what they want / review security arrangements |

| Que | estion | | Answer | Marks | Guidance |
|-----|--------|-------------------|--|----------------------|---|
| Que | (d) | Co 1 2 3 | me mark for each step. Five required. rrect order: G Look for hazards associated with the activity. D Identify who might be harmed and why. B Consider the level of risk – decide on precautions needed. F Keep a written record of the findings. | Marks 5 (5x1) | Annotation: The number of ticks must match the number of marks awarded. For incorrect answers use the cross or appropriate annotation from the following: |
| | | 5 | A Carry out a review of the risk assessment regularly. | | |

| Question | Answer/Indicative Content | Marks | Guidance |
|----------|---|-------|---|
| 2 (a)* | Roles and responsibilities – to meet with Head Teachers/ managers and observe practice to ensure that: managers/Head Teachers are complying with health and safety legislation, e.g. carrying out regular fire drills, first aiders on site overseeing safer recruitment practices, e.g. participating on interview panels, ensuring DBS checks and reference checks are completed managers and staff are carrying out their health and safety duties effectively, e.g. ensuring staff are provided with PPE there are adequate resources for health and safety staff and children are not being exposed to unreasonable risks, e.g. staff are trained risks are being controlled adequately, e.g. risk assessments are in place and updated policies and procedures are in place and being followed policies and procedures are reviewed and updated regularly serious incidents are reported to HSE/Local authority/Ofsted addressing any actions provided in Ofsted reports carry out reviews of incidents/injuries and management's response spot checks on health and safety to ask questions of relevant staff about health and safety to protect the health and safety of primary school staff, children, visitors (including parents) and contractors ensure the premises are safe (as far as is reasonably practicable) ensure standards of care are met to ensure disciplinary action is taken for non-compliance of managers with health and safety processes/policies/legislation oversight and scrutiny, e.g. observations, attend meetings promoting, maintaining and enforcing health and safety policies and procedures Do not accept: answers regarding safeguarding other than DBS, food hygiene or governors giving training, governors creating risk assessments or creating policies and procedures | 10 | Level 3 (8–10 marks) There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. Explicit understanding that the role of Governors is an overview detailed description of roles and responsibilities of a Board of Governors for health and safety links to a primary school are clear Level 2 (5-7 marks) There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. sound description of the duties of a Board of Governors for health and safety may lack clarity regarding their precise responsibilities and roles answers are mostly relevant to a primary school Level 1 (1–4 marks) There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. answer provides a limited or basic attempt at a brief description of the duties of a Board of Governors for health and safety answers may identify roles or responsibilities but with little or no description there may be no reference to a primary school marks No response or no response worthy of credit. Annotation: The number of ticks will not necessarily correspond to the marks awarded. |

| Question | Answer | Marks | Guidance |
|----------------|---|------------|--|
| Question 2 (b) | Three marks for an explanation. Applies to professionals such as midwives, doctors, physiotherapists, social workers who are 'registered to practice' do not credit professions listed in question Professionals who have failed to meet the standards of professional practice required can happen due to 'fitness to practice' concerns, for example due to poor or inaccurate record-keeping, poor health and safety, serious errors or a failure to assess risks effectively can be 'struck off' - not being allowed to practice at all can have practice restricted / suspended— may be limited in what they can do remains on work record | 3 (1x3) | Annotation: The number of ticks must match the number of marks awarded. For incorrect answers use the cross or appropriate annotation from the following: ACCEPT: Any three points or detailed explanation of one. Do not accept: Show on a DBS An explanation of what a professional register is Named professionals listed in the question Qualifications no longer valid 'Removed from the register' Unsafe to work |
| | cannot return to same profession / job role licence to practice removed | | |
| | loss of professional status – temporary or permanent loss of reputation | | |

| Question | Answer | Marks | Guidance |
|----------|--|------------|--|
| 2 (c) | One mark for an example. Three required. Electrical safety checks: small electrical appliances tested / PAT tested regularly no use of extension cables only one plug per socket all faults recorded and electrical equipment removed correct fuse used plug sockets / electrical appliances are not near water Visual checks for: broken socket covers damage to cables damaged or worn equipment damaged plugs overloaded sockets trailing cables/loose wires hazardous electrical equipment is appropriately labelled plug sockets protected when not in use e.g. socket covers | 3 (3x1) | Annotation: The number of ticks must match the number of marks awarded. For incorrect answers use the cross or appropriate annotation from the following: Do not accept: Repeat answers good working order / working safely appliances are working correctly check plug sockets / plugs work / plug sockets turned off |

| Question | Answer/Indicative Content | Marks | Guidance | |
|----------|---|-------|--|--|
| 3 (a)* | Examples how the Manual Handling Operations Regulations promote health, safety in health and social care settings: Reduces risk of injury, such as back injuries, to workers / residents / service users Steps have to be taken to reduce the risk of injury to the lowest practicable level e.g. at least two people assist in moving individuals Reduces the need for staff to undertake manual handling unless it is completely necessary, avoids any hazardous manual handling Staff will be informed about the weight of loads they will be handling Staff must follow the correct procedures for manual handling at all times / staff must be fully trained in manual handling procedures e.g. the use of a hoist / use of PPE Employers have to carry out risk assessments on all manual handling tasks Employers must provide equipment e.g. hoist where it will reduce the risk of injury Employers need to write policies which explain the correct procedures and/or equipment to use The resident/service user feels more secure in professional hands and staff feel more confident when manual handling Checking of equipment | 6 | Level 3 (5–6 marks) There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. • detailed discussion • clear understanding of key aspects and how the regulations promote health and safety • relevant to care settings Level 2 (3-4 marks) There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. • sound discussion • understanding of key aspects and how they promote health and safety will be evident but may be implicit. • mostly relevant to care settings Level 1 (1–2 marks) There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. • limited or basic attempt at a brief discussion. • information may be list like and presented in an unstructured way. • may not be specifically linked to care settings or the MHOR regulations O marks No response or no response worthy of credit. Annotation: The number of ticks will not necessarily correspond to the marks | |
| | All of the above points can be expressed as negatives, e.g. If manual handling regulations are not followed there is increased risk of injury excessive use of manual handling equipment is not checked or provided | | awarded. Do not accept: Vague answers relating to un-named equipment Inspections of equipment harm | |

| Question | Answer | Marks | Guidance |
|----------|---|----------------|---|
| 3 (b) | One mark for a consequence. Three required. Potential consequences for a care home manager if the Manual Handling Operations Regulations are not followed: | 3 (3x1) | Annotation: The number of ticks must match the number of marks awarded. |
| | Prosecution – if a resident is seriously injured | | The focus must be consequences for the care home manager. |
| | Supervision of care home manager | | Do not accept demoted, imprisonment, injury, accidents, loss of profit, loss of staff / staff shortages |
| | Disciplinary action, such as a warning, suspension, dismissal | | For incorrect answers use the cross or appropriate |
| | Removal from professional register / loss of licence if applicable | | annotation from the following: |
| | Difficulty finding a job elsewhere | | A TV REP SEEN |
| | Required to undertake further training | | |
| | Job loss due to closure of home | | |
| | Financial loss/ costs, such as legal costs, fines, loss of income due to | | |
| | time off | | |
| | Compensation claims | | |
| | Poor reputation of the manager | | |
| | Complaints | | |
| | Carry out more risk assessments | | |
| | Retraining of staff | | |
| | Investigation/ inspection by Local Authority/private owners/CQC | | |
| | Credit other appropriate consequences. | | |

| Question | Answer | | Marks | Guidance |
|----------|--|---------------------------|----------------|---|
| 3 (c) | One mark for a correct statement. Three required. | | 3 (3x1) | Annotation: The number of ticks must match the number of marks awarded. |
| | Statement | Tick (√) three only | e | For incorrect answers use the cross or appropriate annotation from the following: |
| | A written Health and Safety policy is provided to all staff. | ✓ | | TY REP SEEN |
| | Lifting and handling equipment is checked to ensure it is in good working order. | ✓ | | |
| | Optional health and safety training is provided for staff. | | | |
| | Staff are told they are only responsible for their own safety. | | | |
| | Staff must pay for their own PPE. | | | |
| | The Health and Safety Law poster is displayed | ✓ | | |
| | | | | |

| | Answer/Indicative Content | Marks | Guidance |
|--------|---|-------|---|
| 4 (a)* | Reasons for poor standards of care can be caused by employees who: • feel tired, exhausted, overworked / long hours of working • forget to give medication on time • forget to provided fluids or food • lack concentration • lack enough time to do their job properly / staff shortage • are poorly monitored or not supervised • are stressed, ill or depressed • lack empathy / understanding / don't think about what they are saying / not listening • lack knowledge / skills / training / equipment / poor funding / faulty equipment • have poor working conditions / practices • lacks motivation Unintentional abuse may occur causing the following impacts: • bed sores and pressure ulcers • bruising due to poor handling • dehydration • illness gets worse • malnutrition • injury – not noticing when someone needs help to move safely • illness spreads due to poor standards of hygiene • neglect – a person's physical or emotional needs are not met • fear, an individual does not feel safe and well-cared for • feeling vulnerable / not respected / loss of trust Credit other appropriate examples. Do not credit: definitions of unintentional abuse | 7 | Level 3 (6–7 marks) There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated. • detailed explanation of reasons for poor standards of care • explicitly linked to unintentional abuse • impacts on individuals of unintentional abuse • balanced Level 2 (4-5 marks) There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence. • sound explanation of reasons for poor standards of care • some links to unintentional abuse, though may be implicit • understanding will be evident • impacts will be mostly relevant • may not be balanced Level 1 (1–3 marks) There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. • limited or basic attempt at a brief explanation • information may be list like and presented in an unstructured way. • may not be specifically linked to poor standards of care or unintentional abuse. O marks No response or no response worthy of credit. Annotation: A tick for a reason for poor standards of care • for impacts The number of ticks will not necessarily correspond to the marks awarded. |

| Question | Answer/Indicative Content | Marks | Guidance |
|----------|---|-------|--|
| 4 (b)* | How a storage and dispensing of medicines policy helps to reduce risk Procedures in place to control storing and dispensing of medicines Staff trained in policies and procedures Medicines should be stored securely, for example in locked cabinets Access to medicines should be controlled so only qualified / named staff should have access medicines should be signed for, residents are appropriately supervised when taking medicines / not spitting out when staff leave Correct storage conditions, for example medicines are kept at correct temperature Regular checks, to ensure out-of-date medicine is disposed of, all medicines are accounted for Recording procedures when dispensing medicine - to ensure individuals receive correct medication/dosage receiving the correct dose receiving the correct medication receiving medication at the right time never receiving out-of-date medicine preventing overdose (accidental or deliberate) preventing the theft of medication using original packaging and labels rotation of stock prevents overdose accidental or deliberate medicine stock checks to ensure no loss | 6 | Detailed analysis of how a storage and dispensing of medicines policy helps reduce the risks to residents in a residential care home. • The answer is balanced between storing / dispensing and ways of reducing risks • Reasoned comments will be detailed and explicit • completely relevant to the storage and dispensing of medication in a residential care home • There is a well-developed line of reasoning which is clear and logically structured Level 2 (3-4 marks) • Sound analysis of how a storage and dispensing of medicines policy helps reduce the risks to residents in a residential care home but may lack balance • mostly relevant to the storage and dispensing of medication in a residential care home Sub max of 4 for only storage and / or dispensing OR ways of reducing risk Level 1 (1-2 marks) Basic analysis of how a storage and dispensing of medicines policy helps reduce the risks to residents in a residential care home. • May lack balance • May identify only risks or only ways of reducing risks • May be a list of ways to store and administer medication There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant. O marks No response worthy of credit. Annotation: + for how the policy helps reduce risks for reasoned comment The number of ticks/+ will not necessarily correspond to the marks awarded. |

 Two people to be involved when dispensing medicines / supervision / wearing of tabard to denote administering medication

Reasoned comments

- Results of incorrect dosages / incorrect medication adverse effects; allergic reaction, inability to control pain, ineffective in controlling symptoms, overdose, death reduced recovery time
- When checking stock can identify any missing medications and take appropriate action
- Checking stock will enable re-ordering effectively
- In date medicine remains effective
- Incorrect storage regarding temperature, light could lead to degeneration of medication
- Storage facilities being left unlocked residents could take incorrect medicine

Do not credit:

- Disposal unless qualified with out of date.
- Do not credit 'very ill'
- store out of reach / high place
- enhance trust and confidence in residents

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