

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 January 2025

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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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MARKING INSTRUCTIONS

PREPARATION FOR MARKING

RM ASSESSOR

1. Make sure that you have accessed and completed the relevant training packages for on-screen marking: *RM Assessor Online Training: OCR Essential Guide to Marking*.
2. Make sure that you have read and understood the mark scheme and the question paper for this unit. These are available in RM Assessor
3. Log-in to RM Assessor and mark the **required number** of practice responses (“scripts”) and the **required number** of standardisation responses.

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, email or via the RM Assessor messaging system.

5. 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. Enter a mark for each question answered into RM Assessor, which will select the highest mark from those awarded. *(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 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 the annotation 'SEEN' to confirm that the work has been seen and mark any responses using the annotations in section 11.
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 is not an attempt at the question.

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

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.**
9. *Assistant Examiners will send a brief report on the performance of candidates to their Team Leader (Supervisor) via email by the end of the marking period. The report should contain notes on particular strengths displayed as well as common errors or weaknesses. Constructive criticism of the question paper/mark scheme is also appreciated.*

10. For answers marked by levels of response: Not applicable in F501

To determine the level – start at the highest level and work down until you reach the level that matches the answer

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

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

Annotation	Meaning
	Tick – correct answer
	Cross – incorrect answer
	Level 1
	Level 2
	Level 3

	Benefit of doubt (This does count as a mark – so do not ‘tick’ as well)
	Omission mark
	Too vague
	Repeat
	To acknowledge additional pages/ notes were read
	Blank Page
	Not Relevant - ‘noted but no credit given’

Question		Answer	Marks	Guidance								
1	(a)	<p>One mark for an identification. Three required</p> <table border="1"> <thead> <tr> <th>Type of hazard</th> <th>Example</th> </tr> </thead> <tbody> <tr> <td>Physical</td> <td>noise radiation / x ray overcrowding</td> </tr> <tr> <td>Working conditions</td> <td>temperature / too hot , cold noise travel lighting / no windows hygiene / PPE</td> </tr> <tr> <td>Working practices</td> <td>working hours supervision hygiene / PPE training / lack of training risk assessments</td> </tr> </tbody> </table>	Type of hazard	Example	Physical	noise radiation / x ray overcrowding	Working conditions	temperature / too hot , cold noise travel lighting / no windows hygiene / PPE	Working practices	working hours supervision hygiene / PPE training / lack of training risk assessments	<p>3 (3x1)</p>	<p>Do not accept</p> <p>Physical: asbestos</p> <p>Working conditions:</p> <p>Working practices: staff shortages, lone working , heavy workload (TV) , manual handling</p>
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Question	Answer	Marks	Guidance																												
1 (b)*	<p>Level 3 (5 – 6 marks)</p> <ul style="list-style-type: none"> Detailed explanation of how chemical hazards and lack of security systems could impact residents in a nursing home <p>AND</p> <ul style="list-style-type: none"> Clear understanding of impacts demonstrated with explicit reference to both chemical and lack of security. <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated</i></p> <p>Level 2 (3 – 4 marks)</p> <ul style="list-style-type: none"> Sound explanation of how chemical hazards and lack of security systems could impact residents in a nursing home <p>AND</p> <ul style="list-style-type: none"> Mostly relevant information about impact demonstrated but may not be balanced to both chemical and lack of security <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Sub-max 3 for either chemical or lack of security done well</p> <p>Level 1 (1 – 2 marks)</p> <ul style="list-style-type: none"> Basic explanation of how and impacts <p>AND</p> <ul style="list-style-type: none"> information about impacts may be generic and not related to the situation <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks - No response worthy of credit.</p>	6	<p>Indicative content could include: How and Impacts for chemical hazards</p> <p><u>Medicines</u></p> <table border="1" data-bbox="1339 347 2074 759"> <thead> <tr> <th>How</th> <th>Impacts</th> </tr> </thead> <tbody> <tr> <td>Unlocked medicine cabinet</td> <td>Take unprescribed medicine – could conflict with their medication</td> </tr> <tr> <td>Given an incorrect dose</td> <td>Too low / high – consequences</td> </tr> <tr> <td>Given an incorrect medicine</td> <td>Side effects</td> </tr> <tr> <td>Given out of date medicine</td> <td>Reduced effectiveness</td> </tr> <tr> <td></td> <td>Overdose</td> </tr> <tr> <td></td> <td>Death</td> </tr> <tr> <td></td> <td>Cause harm</td> </tr> <tr> <td></td> <td>Hospitalisation</td> </tr> </tbody> </table> <p><u>Cleaning materials</u></p> <table border="1" data-bbox="1339 863 2074 1171"> <thead> <tr> <th>How</th> <th>Impacts</th> </tr> </thead> <tbody> <tr> <td>Not locked away – easy access / unsupervised</td> <td>Burns</td> </tr> <tr> <td>Spillages</td> <td>Skin irritation</td> </tr> <tr> <td>Stored in incorrect containers, e.g. drink bottles – mistaken identity / not labelled</td> <td>Drinking – may need to be hospitalised</td> </tr> <tr> <td></td> <td>Breathing difficulties /</td> </tr> </tbody> </table> <p>Do not accept</p> <ul style="list-style-type: none"> slip and trip hazards vague answers, e.g. chemicals not stored correctly emotional effects 	How	Impacts	Unlocked medicine cabinet	Take unprescribed medicine – could conflict with their medication	Given an incorrect dose	Too low / high – consequences	Given an incorrect medicine	Side effects	Given out of date medicine	Reduced effectiveness		Overdose		Death		Cause harm		Hospitalisation	How	Impacts	Not locked away – easy access / unsupervised	Burns	Spillages	Skin irritation	Stored in incorrect containers, e.g. drink bottles – mistaken identity / not labelled	Drinking – may need to be hospitalised		Breathing difficulties /
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Question	Answer	Marks	Guidance												
			<p>How and Impacts for lack of security systems <u>door locks / window restraints / no monitoring of visitors</u></p> <table border="1" data-bbox="1339 316 2074 592"> <thead> <tr> <th data-bbox="1339 316 1709 352">How</th> <th data-bbox="1709 316 2074 352">Impacts</th> </tr> </thead> <tbody> <tr> <td data-bbox="1339 352 1709 592">Lack of door locks / unlocked doors – intruders could access No window restraints – intruders could access No monitoring of visitors / no receptionist</td> <td data-bbox="1709 352 2074 592">Could exit and get lost / cause confusion harm to residents theft / financial loss Emotional effects of knowing that door locks don't work – fear, scared</td> </tr> </tbody> </table> <p><u>Alarm systems – not working or not in place</u></p> <table border="1" data-bbox="1339 659 2074 799"> <thead> <tr> <th data-bbox="1339 659 1709 695">How</th> <th data-bbox="1709 659 2074 695">Impacts</th> </tr> </thead> <tbody> <tr> <td data-bbox="1339 695 1709 799">Not working / faulty Not installed / no CCTV</td> <td data-bbox="1709 695 2074 799">No alerts if Intruders enter – harm or abuse / theft</td> </tr> </tbody> </table> <p><u>Other accepted security measures</u></p> <table border="1" data-bbox="1339 900 2074 1007"> <thead> <tr> <th data-bbox="1339 900 1709 936">How</th> <th data-bbox="1709 900 2074 936">Impact</th> </tr> </thead> <tbody> <tr> <td data-bbox="1339 936 1709 1007">No staff identification / no lanyards</td> <td data-bbox="1709 936 2074 1007">Residents not clear on who the staff are</td> </tr> </tbody> </table> <p>Any other appropriate response to be accepted</p> <p><u>Do not accept</u></p> <ul data-bbox="1339 1145 2042 1257" style="list-style-type: none"> • Fire alarms and subsequent impacts – the focus is on security • Data access / Data protection / GDPR 	How	Impacts	Lack of door locks / unlocked doors – intruders could access No window restraints – intruders could access No monitoring of visitors / no receptionist	Could exit and get lost / cause confusion harm to residents theft / financial loss Emotional effects of knowing that door locks don't work – fear, scared	How	Impacts	Not working / faulty Not installed / no CCTV	No alerts if Intruders enter – harm or abuse / theft	How	Impact	No staff identification / no lanyards	Residents not clear on who the staff are
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Question	Answer	Marks	Guidance
1 (c)	<p>Two marks for a description. Two required</p> <p>Financial loss for the employer</p> <ul style="list-style-type: none"> • Direct costs – claims on employers and public liability insurance / sick pay, fines • Indirect costs – recruitment costs, overtime payments, low staff morale • HSE / CQC / inspections – issuing fines • Compensation / being sued / legal costs – death / worsening health of a patient could occur and family may go to court to seek compensation • increase in insurance premiums – due to a higher death rate and poor ratings this could increase insurance premiums • sick pay and having to pay for ‘locum’ staff – due to staff succumbing to the infectious disease and subsequently not being able to work • Additional training costs – reinforcing hygiene rules and infection control / having to pay for cover whilst staff are being trained • Employing more cleaning staff – to ensure that all areas are deep cleaned more regularly • Purchasing more PPE – to ensure that all staff use these constantly and in all medical situations • Purchasing more resources, e.g. increase hand washing facilities / anti-bacterial handwash • Recruitment costs – staff may leave due to poor management of infection control 	<p>4 (2x2)</p>	<p>One mark for each financial consequence relevant to the scenario</p> <p>One mark for each further relevant detail described</p> <p>Do not accept</p> <ul style="list-style-type: none"> • Being shut down • Bad reputation • Buying more medication • ‘due to poor hygiene practices’ – this is part of the question

Question	Answer	Marks	Guidance
2 (a)*	<p>Level 3 (7 – 8 marks)</p> <ul style="list-style-type: none"> Detailed description of how the Food Safety Act promotes health, safety and security in a nursing home <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated</i></p> <p>Level 2 (4 - 6 marks)</p> <ul style="list-style-type: none"> Sound description of how the Food Safety Act promotes health, safety and security in a nursing home <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Level 1 (1 – 3 marks)</p> <ul style="list-style-type: none"> Basic description of how the Food Safety Act promotes health, safety and security in a nursing home <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks <i>No response worthy of credit.</i></p> <p>Any other appropriate response to be accepted</p>	8	<p>How the Food Safety Act promotes health, safety and security in a nursing home</p> <ul style="list-style-type: none"> Safe food preparation: the use of different coloured chopping boards to reduce cross contamination (allergies) Safe food storage: any high risk foods to be stored in a refrigerator set to below 5c Safe food serving: temperature of the food Personal hygiene for all involved in food preparation is maintained at a high standard – washing of hands/hair nets (PPE), no jewellery, the use of blue plasters etc. Food hygiene practices linked to the preparation, cooking and cleaning of the food prep area: the use of anti-bacterial spray on surfaces, cooking to the appropriate temperature Registration of business – this includes care homes Environmental Health Officers can – seize food thought unfit for human consumption / can close premises, inspect, issue improvement notices The CQC has requirements that the food is prepared, stored and delivered to meet the requirements of the Act All employees must be trained in food safety Records must be kept of where food is from so that it is traceable Correct labelling of food: ingredients listed Illegal to sell or serve food past its sell by date Disposal of food that is no longer fit for human consumption / past its sell by date

Question	Answer	Marks	Guidance
2 (b)*	<p>Level 3 (8 – 10 marks)</p> <ul style="list-style-type: none"> Detailed discussion of the need for safeguarding and must apply to a child care environment <p>AND</p> <ul style="list-style-type: none"> To include who needs to be safeguarded, what safeguarding issues could arise and what safeguarding procedures could be put in place. Must address all three <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated</i></p> <p>Level 2 (4 – 7 marks)</p> <ul style="list-style-type: none"> Sound discussion of the need for safeguarding and reference is made to a child care environment <p>AND</p> <ul style="list-style-type: none"> Mostly relevant information about who needs to be safeguarded, what safeguarding issue(s) could arise and what safeguarding procedure(s) could be put in place but may not be balanced. May only address two <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Sub-max 4 for one discussion point done well</p> <p>Level 1 (1 – 3 marks)</p> <ul style="list-style-type: none"> Basic discussion of the need for safeguarding <p>AND</p> <ul style="list-style-type: none"> information about safeguarding may be generic and not related to a child care environment 	10	<p>The need for safeguarding</p> <p><u>Who needs to be safeguarded</u></p> <ul style="list-style-type: none"> all children children with learning disabilities children with a physical disability children who have a sensory impairment, e.g. communication difficulties children who are neuro divergent, e.g. autistic children looked after children all employees / staff <p><u>What safeguarding issues could arise</u></p> <ul style="list-style-type: none"> Abuse – physical, mental, psychological, sexual Neglect Bullying Malnourishment FGM – Female genital mutilation Forced marriage Child exploitation – community lines / grooming Radicalisation Unexplained absences – no valid reasons given Child unexpectedly being taken out of school; lack of contact with family / guardians Perceived unsafe home environment, e.g. drug / alcohol misuse

Question	Answer	Marks	Guidance
	<p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks</p> <p><i>No response worthy of credit.</i></p> <p>Do not accept</p> <ul style="list-style-type: none"> • Answers linked to security measures, e.g. specific procedures for collecting children • Answers linked to data protection • Answers linked to risk assessments unless specifically linked to safeguarding 		<p><u>What safeguarding procedures could be put into place by the employer</u></p> <ul style="list-style-type: none"> • Safeguarding training / training • DBS checks on all / identification of being on the barred list • Designated Safeguarding Lead – DSL / named individual • Investigation to be carried out on disclosure / concerns • Robust system of reporting concerns • Knowing how to respond when listening to any disclosures – only stating the facts, never an opinion • Visitors are not left alone with children / are always accompanied by someone who is DBS checked • Referral to social services (e.g. safeguarding / child protection team) / Police if a child is seen to be at risk <p>Any other appropriate response to be accepted</p>

Question	Answer	Marks	Guidance
3	<p>(a)*</p> <p>Level 3 (7 – 8 marks)</p> <ul style="list-style-type: none"> Detailed description of the responsibilities of both employers and employees in a hospital AND Clear understanding of the different responsibilities for employer and employee <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated</i></p> <p>Level 2 (4 – 6 marks)</p> <ul style="list-style-type: none"> Sound description of the responsibilities of both employers and employees in a hospital AND Mostly relevant information about the responsibilities but may not be balanced to both employer and employee <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Sub-max 4 for either employer or employee done well</p> <p>Level 1 (1 – 3 marks)</p> <ul style="list-style-type: none"> Basic description of responsibilities AND Reference to only employer or employee or not specifying who AND information about responsibilities may be generic <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks</p>	8	<p>Responsibilities of employers related to health, safety and security in a hospital</p> <ul style="list-style-type: none"> The development and implementation of security measures, data protection processes, safeguarding processes Recruitment: checking on qualifications, DBS checks The implementation of health and safety – risk assessments and control measures <u>promoting</u>, e.g. the use of PPE, ensuring data protection policies are followed, raising awareness through the use of posters, e.g. avoidance of cross contamination <u>maintaining</u>, providing training in different aspects – manual handling, safeguarding, infection prevention <u>enforcing</u>, mandatory mentoring and monitoring, supervision, appraisal, the enforcement of disciplinary procedures the development and review of all policies and procedures, e.g. food safety, chemical and biological health hazards, storage and dispensing of medicines, fire safety Assigning roles to personnel, e.g. Health and Safety Officer, fire marshals, first aider <p>Do not accept</p> <ul style="list-style-type: none"> Responsibilities made to care being provided

Question	Answer	Marks	Guidance
	<p><i>No response worthy of credit.</i></p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> If responsibilities are not assigned to either the employer or the employee then the answer must be placed into level 1 </div>		<p>Responsibilities of employees related to health, safety and security in a hospital</p> <ul style="list-style-type: none"> • Follow all policies and procedures • Attend relevant training / meetings • Wearing the correct PPE; disposable gloves when disposing of biological waste • Conform to any security measures; wearing lanyards • using any equipment or substance according to training, e.g. the use of a hoist for manual handling • reporting of any serious or imminent danger in the hospital, e.g. witnessing physical abuse by another employee, identifying possible hazards • reporting any shortcoming in the employers health and safety arrangements, e.g. not having a sufficient quantity of PPE, other employees carrying out tasks when they have not received any training • carry out risk assessments <p>Do not accept</p> <ul style="list-style-type: none"> • Responsibilities to providing care <p>Any other appropriate response to be accepted</p>

3	(b)*	Question	Answer	Marks	Guidance
			<p>Level 3 (6 – 7 marks)</p> <ul style="list-style-type: none"> Detailed assessment of consequences for the Care Manager <p>AND</p> <ul style="list-style-type: none"> Clear understanding of consequences demonstrated with explicit reference to a nursing home <p><i>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated</i></p> <p>Level 2 (3 – 5 marks)</p> <ul style="list-style-type: none"> Sound assessment of consequences for the Care Manager <p>AND</p> <ul style="list-style-type: none"> Mostly relevant information about consequences demonstrated but may not always be explicitly linked to a nursing home <p><i>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</i></p> <p>Sub-max 3 for one consequence done well</p> <p>Level 1 (1 – 2 marks)</p> <ul style="list-style-type: none"> Basic assessment of consequences <p>AND</p> <ul style="list-style-type: none"> information about consequences may be generic and not related to the situation <p><i>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</i></p> <p>0 marks</p> <p><i>No response worthy of credit.</i></p>	7	<p>Possible consequences for the Care Manager</p> <ul style="list-style-type: none"> Direct costs, e.g. if a resident were to be injured through accessing used needles, then there could be claims made – compensation / being sued Indirect costs e.g. if a member of staff left hazardous biological waste in a place where residents could access this then this could result in that member of staff being dismissed or suspended – additional recruitment costs, having to pay overtime payments and low staff morale Disciplinary action, e.g. the failure to have set procedures for example to have designated coloured bins for the disposal of different waste, then this could result in a first written warning, final written warning, suspension and dismissal Criminal prosecution, e.g. the Care Manager has been completely negligent in not implementing a policy and this could result in a resident ingesting waste due to not having procedures in place for disposal of waste – being sent to prison Being removed from professional registers, this will mean that they can no longer be in their profession due to their negligent inaction Causing harm or injury – to the residents in their care – the consequence of this could be criminal prosecution Poor / damaged reputation for the Care Manager Directed to complete more training / enhanced monitoring / supervision More inspections from CQC / HSE Proportional emotional impact <p>Do not accept – Care home being shut down Any other appropriate response to be accepted</p>

Question		Answer	Marks	Guidance
3	(c)	<p>One mark for each responsibility. Two required</p> <p>Responsibilities of individuals when attending a hospital appointment</p> <ul style="list-style-type: none"> • Follow procedures / instructions that are displayed, e.g. not smoking, use of hand sanitiser / hand washing • Report any hazards / safeguarding concerns that they may come across • To respond to any evacuation procedures / take part in fire drills • Treating all health care staff / other patients in a reasonable courteous manner / not to be rude or aggressive • To provide accurate information about their health condition, symptoms and status / provide documentation • To keep appointments or cancel appointments within a reasonable time / to arrive on time / check in on time • To follow the course of treatment which they have been prescribed • Reading any literature provided by the health care professional • Wear assigned PPE if directed, e.g. face mask • Listen / take part in relevant discussions with professionals <p>Any other appropriate response to be accepted</p>	<p>2</p> <p>(2x1)</p>	

Question			Answer	Marks	Guidance
4	(a)	(i)	<p>One mark for each action. Two required</p> <p>Actions that should be taken by a manager of a health centre in the event of loss of water supply</p> <ul style="list-style-type: none"> • Report issue to the water board / water services / water company / water supplier • Alert all staff at the GP surgery / alert staff • Close the health centre • Contact patients (service users) due to attend that their appointment has been cancelled / re schedule appointments • Place 'do not use signs' on toilets / lock if needed to prevent access 	<p>2 (2x1)</p>	<p>Do not accept:</p> <ul style="list-style-type: none"> • Contact the local authority • Contact a plumber • Call the emergency services • Contact the 'correct authorities' • Evacuate the premises
4	(a)	(ii)	<p>One mark for identified incident or emergency. One required</p> <p>Incidents and emergencies that could occur in a GP surgery:</p> <ul style="list-style-type: none"> • Accidents • Exposure to infections / infection • Exposure to chemicals / chemicals • Spillages • Intruders • Aggressive and dangerous encounters • Fire • Flood • Other critical incidents – power cut (loss of electrical power), bomb threat and gas leak • Patient medical emergencies – a patient having a heart attack / stroke 	<p>1 (1x1)</p>	

Question		Answer	Marks	Guidance
4	(b)	<p>Two marks for each description. Two required.</p> <p>Residents being given the incorrect medicine</p> <ul style="list-style-type: none"> • Double checking the name of the medicine being given • Always having two members of staff when dispensing medicine to residents • Matching the name of the resident to the medication – checking residents medical records • Documenting every action taken before and after administering the medicine • Label the medicine – name / DOB • Training in medicine administration – checking medication against patient records / how to administer medication • Use of MAR sheet (medicine admissions records) <p>Treating residents who have sickness and diarrhoea</p> <ul style="list-style-type: none"> • Isolate residents and move away from people who have not contracted the ‘bug’ / for a specified time period • PPE for every intervention with the resident and renew between residents • Disposal of waste in the correct bin • Ensure resident remains hydrated – lots of water / fluids • Effective hand washing with soap and water – for both staff and residents • Enhanced cleaning of equipment and environment / disinfect • A sign of “contact isolation” should be placed in front of the door to warn visitors • Training in infection control / the correct use of PPE 	4 (2x2)	<p>One mark for identifying a control measure for each risk</p> <p>One mark for further relevant detail described for each</p> <p>Do not accept</p> <ul style="list-style-type: none"> • Reasons for the actions provided <p>Any other appropriate response to be accepted</p>

Question			Answer	Marks	Guidance
4	(c)	(i)	<p>One mark for identifying the first aider responsibility.</p> <p>Prevent further harm / injury / deterioration</p>	<p>1 (1x1)</p>	<p>This is the only accepted answer</p> <p>Do not accept</p> <ul style="list-style-type: none">• PPP

Question			Answer	Marks	Guidance
4	(c)	(ii)	<p>Two marks for identifying and describing a responsibility of a first aider. Two required</p> <p>Assess for danger</p> <ul style="list-style-type: none"> • Check for any potential hazards / risks, e.g. slip hazard due to blood loss <p>Promote recovery</p> <ul style="list-style-type: none"> • Dressing and disinfecting the wound <p>Preserve life</p> <ul style="list-style-type: none"> • Check for any further physical injuries <p>Keeping themselves and the area safe</p> <ul style="list-style-type: none"> • Cordon off the area • Wearing of PPE for the first aider – face mask • Removal of hazards if able to do so • Clear the blood from the floor and disinfect – if unable to do this, call for cleaning assistance <p>Maintain respect and dignity</p> <ul style="list-style-type: none"> • Speak clearly and with empathy to the patient • Make sure that they are covered • Send any bystanders away <p>Get help</p> <ul style="list-style-type: none"> • A porter may be needed to transport the patient back to their ward • Call for a doctor if more assistance is needed <p>Stay with an individual until help arrives</p> <ul style="list-style-type: none"> • Remain calm and confident • Reassure the patient that help is on the way • Make eye contact 	4 (2x2)	<p>One mark for identifying the responsibility</p> <p>One mark for relevant description</p> <p>Credit can be given for the description if the identified responsibility is incorrect / missing</p> <p>Do not accept</p> <ul style="list-style-type: none"> • 'prevent further harm' • Perform CPR • Place into recovery position <p>Any other appropriate response to be accepted – these must be relevant to the scenario</p>

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