

2006 Modern Studies – Higher

Paper 2 – DME 2

Finalised Marking Instructions

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DECISION MAKING EXERCISE 2

MARKING SCHEME

Questions 1 to 3 are based on Sources A to C on pages 2 – 5. Answer Questions 1 to 3 before attempting Question 4.

In Questions 1 to 3 use only the Sources described in each question.

Question 1

Use **only** Source A and Source B.

Contrast the views of the Editor and Euan Ross on the effects of treatment centres on waiting lists.

The Editor states that *centres have had a huge effect on waiting lists* whereas Euan states their *overall effect has been slight*.

2 Marks

Question 2

- (a) Use **only** Source C1(a), C1(b) and Source A.
To what extent does the evidence support the editor?

The Editor states that *despite spending more per person on health care, the Scottish NHS has achieved none of its waiting time targets* (1).

Source C1(a) shows that Scotland does spend more (1) but Source C1(b) shows that – though others have not – the target for day patient care has been met (1).

3 Marks

- (b) Use **only** Source C2(a), C2(b) and Source B.

To what extent does the evidence support Euan Ross?

Euan Ross states that *in Scotland there has been no rise in emergency admissions* and that *the Scottish NHS is better off for beds than the English NHS* (1).

Source C2(a) shows that emergency admissions have risen (1) but Source C2(b) shows that Scotland has higher bed provision per 1000 people than England (1).

3 Marks

Question 3

Use **only** Source C3 and Source B.

Why might Euan Ross be accused of exaggeration?

Euan Ross states that *people totally reject the notion that having more choice over where they are treated is important* (1).

Source C3 shows that 63% of the public say it is very/fairly important (1).

**2 Marks
(10)**

Question 4

You are a health policy expert. You have been asked to prepare a report for a health care pressure group in which you recommend or reject the proposal to involve privately run treatment centres in the Scottish NHS.

Credit

- An introduction that indicates an awareness of the role to be adopted and makes a clear recommendation.
- Developed arguments in support of the recommendation.
- Identification of, comment on and rebuttal of counter arguments.
- Synthesis of Source material.
- Provision and use of appropriate background knowledge.
- A style appropriate to a report (sub-headings, chapters, etc).
- An overall conclusion.

Arguments for the proposal may feature:

- Need to improve NHS efficiency, reduce waiting lists, give taxpayers best value.
- English experience of these centres has been positive.
- Continues theme of public-private co-operation.
- Centres likely to bring new staff from abroad.
- Allows NHS hospitals to concentrate on the more difficult problems.
- Costs are cheaper than conventional private hospitals.

Arguments against the proposal may feature:

- Around half of operations done by new centres could have been carried out by NHS hospitals.
- Loss of case load has a negative effect on the NHS.
- NHS staff effectively forced into the private sector.
- Creeping privatisation of the NHS.
- Increase in health inequalities.
- Private providers 'cherry pick' the NHS.
- Does not answer the real problems that confront the NHS.

Credit, but do not 'check list', background knowledge, developed from source material references to:

Source A:

- *free at the point of use* (Line 3)
- *another beneficial example of co-operation between the NHS and private sector* (Lines 9/10)
- *waiting time targets* (Lines 26/27).

Source B:

- *privatisation of health care* (Line 15/16)
- *inequality of health care* (Lines 20)
- *health care efficiency, ... management, ... investment* (Line 27/28).

“Original” background knowledge may feature:

- Issue of waiting lists and waiting times in Scotland. Claims by the Scottish Executive that it has been successful in dealing with these disputes by opposition parties.
- Political detail – different priorities for Blairites in England compared to traditional Labour in Scotland.
- Argument that Scotland has different health needs compared to England – relatively more poverty/effects of remoteness/scattered population – and other priorities.
- Evaluation of other English NHS reforms.
- Other relevant points.

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| <ul style="list-style-type: none">• Zone Mark: D award = 9-9.5 C pass = 10-11.5 B pass = 12-13.5 A pass = 14+• Use the full range of marks up to and including 20/20• Do not over credit answers that simply paraphrase the source information in isolation• The report must feature background knowledge to pass |
|--|

(20)

Total 30 marks

[END OF MARKING INSTRUCTIONS]