



2008 Care

Higher – Paper 2

Finalised Marking Instructions

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Section 3

Read the case study and answer the following questions.

Omar is a 12 year old boy who lives with his father, Basheer and his 8 year old sister, Shamina, who has autism. Omar's mother recently died from cancer. There were only a few months between the cancer being diagnosed and her death. Shamina's family have always cared for her without any help from care services.

Shamina's autism means that she benefits from a well established daily routine and throughout her mother's illness Omar and his father maintained this as much as possible. Shamina can wash, dress and feed herself but needs encouragement and supervision as she becomes easily distracted and has no sense of danger. Communication is difficult for Shamina. She has poor eye contact, is unable to interpret body language and is unmoved by other people's emotions or feelings. She finds it difficult to say what she thinks or feels and is slow to respond to questions.

Faye is a support assistant, who works with Shamina at school, helping her to develop her communication and social skills.

Omar attends the local high school which is near Shamina's primary school and he walks Shamina to school each morning. Shamina attends an after school club and Omar calls there after school to collect his sister and walk her home. He is already finding that his friends don't want to walk with him and his sister, as Shamina needs a lot of attention. He is upset when he feels he has to choose between wanting to care for his sister and wanting to be with his friends. Omar enjoys sport and he is a talented swimmer. He is in the local club team but has been unable to attend the early morning team training sessions since his mother became ill.

Basheer returned to work a few weeks ago but both he and Omar have taken time off because Shamina has been ill. Relatives and friends tried to help but this unsettled Shamina and she became increasingly withdrawn. Basheer reluctantly contacted social services for help.

George, a social worker, carried out an initial visit to the family and then arranged a meeting to discuss future plans. As a result of the meeting, home care support and respite care services are being arranged. Initially Basheer was unsure about respite care. Although it would give the family a break from caring for Shamina, he was worried about the quality of care that foster carers or care homes might offer. However Basheer has been reassured because George has informed him about the care standards and codes of conduct that workers have to adhere to.

- (a) One of the principles underpinning the National Care Standards is ‘realising potential’.

Describe what ‘realising potential’ means and explain how Faye could use her communication skills to help Shamina realise her potential. You should use information from paragraphs 2 and 3 in the case study.

6 **2 KU**
4 App

The KU marks are allocated for describing realising potential only, not for describing communication skills. To achieve 2 KU marks the explanation given should contain a minimum of two details. Answers may contain any of the following details or other relevant points.

- Realising potential is the ability to achieve all that it is possible for an individual to achieve
- To realise potential a person needs information about resources and the opportunity to make full use of available resources
- Achievement is dependent on opportunities being made available to develop an individual’s potential
- Barriers to realising potential include discrimination and lack of opportunity
- Maslow’s Hierarchy of Needs suggests that realising potential is only possible when deficiency needs are met. Growth needs can then be developed. Maslow called this Self-Actualisation
- Carl Rogers’ theory suggests that the ability to realise potential is a feature of a healthy person. Realising potential includes the experience freedom and creativity. Rogers describes this type of individual as a fully functioning person.

Communication issues raised in the case study include:

- Shamina has poor eye contact
- is unable to interpret body language
- is unmoved by other people’s emotions or feelings
- finds it difficult to say what she thinks or feels
- is slow to respond to questions.

Provide an explanation of how Faye could use communication skills to address any of the above issues. Answers must relate to Faye using communication to support Shamina to realise her potential.

The following paragraphs give examples of how the bullet points can be expanded

- Achieving eye contact is an essential part of communication. To enable Shamina to realise her potential it is important to support her in developing the ability to interact with other people as communication is important for Shamina's social and cognitive development. It says in the case study that Shamina is easily distracted and so Faye should be aware of environmental distractions and do what she can to reduce these. She could make sure that every time she speaks to Shamina that she makes eye contact with Shamina. If Shamina is speaking then Faye should stop what she is doing and position herself so that it is easier for Shamina to make eye contact. If Shamina does make eye contact then Faye could reward her in some way.
- Faye should be aware of her own body language and make sure that body language supports verbal communication in all her interactions with Shamina. In the case study, it mentions that Shamina is unable to interpret body language and so it is important to make sure that Faye begins to work on establishing some obvious body language signals and link these with meanings. For example when saying hello in the morning, she could always smile and wave to Shamina in the same way. It also mentions in the case study that Shamina likes routine, so if Faye does the same things in the same way, then Shamina will feel more confident and secure. By helping Shamina to understand body language Faye is supporting Shamina to develop communication skills which will be an important part of Shamina being able to realise her potential.
- Because Shamina is unmoved by other people's emotions or feelings she may be unable to tell the difference between situations which are safe and where there is danger, for example a situation where there is violence or a threat. This would become a barrier to her being able to reach her potential. Faye could use her verbal and non-verbal communications skills to help to develop Shamina's understanding. Verbal skills would include speaking clearly and always using the same words to describe emotions. Non verbal skills could include using facial expressions to demonstrate these emotions, eg happy, sad and angry.
- To enable Shamina to realise her potential it is important that she can let others know her likes and dislikes and to be able to make her own choices. Shamina finds it difficult to say what she thinks or feels. Faye can help her by using her own verbal skills and non-verbal communication skills to help to give Shamina a vocabulary to help her communicate. This could include words, pictures or signals that will convey meaning. Faye should demonstrate patience in her interactions and should be able to read Shamina's body language without assuming that she understands Shamina's thoughts or feelings. She should reflect back her understanding to Shamina, by repeating what she thinks Shamina is saying, and giving Shamina the opportunity to let her know if she has understood correctly.
- Faye should demonstrate listening skills when Shamina is slow to respond to questions. Faye can show that she is listening by making eye contact and leaning forward to hear, nodding and encouraging Shamina. Faye should be patient and not hurry Shamina by finishing off sentences for her or suggesting words. She should make sure that she fully understands what Shamina is wanting to say by reflecting back Shamina's words and asking Shamina to confirm her understanding. Using her communications skills in this way will ensure that Faye is demonstrating that she values Shamina's comments. It is important for Shamina to have the opportunity to express her needs and wants so that she can realise her potential.

- (b) As a young carer, Omar also has needs.

Why would it be useful to use the PROCCCESS model to understand Omar's needs?

4 2 KU
2 AE

The candidate does not need to describe the PROCCCESS model in detail to gain full marks. The answer should focus on how the model can be used to understand Omar's needs, rather than just listing those needs.

The PROCCCESS model means that when Omar's needs are assessed a range of possible needs will be considered: Physical needs, Relationships with others, Organisational and operational needs, Communication needs, Cultural needs, Cognitive needs, Emotional needs, Social needs and Spiritual needs. This model enables the worker to consider Omar's needs in a holistic fashion, given that all these needs are inter-related.

- His physical needs appear to be partially met, as he walks to school but hasn't been able to attend swimming training.
- His relationships with his friends and sister may need to be supported.
- Organisational and operational considerations may include providing some early morning support for the family to enable Omar to go to his swimming training.
- The case study doesn't suggest that Omar has particular communication, cultural or cognitive needs.
- He does appear to have emotional and social needs as he finds it upsetting to feel that he is choosing between showing that he cares for his sister and being with his friends. One of his needs is therefore to have the opportunity to make and maintain friendships. He is a member of a swimming team but hasn't been able to go to the early morning training sessions.

For example:

To help Omar to maintain the friendships that he has with others in the swimming club a strategy is required to achieve the goal of helping Omar to attend swimming training and to spend time with his friends. To make this possible a number of options could be explored. A care worker could be introduced to support the family. He/she would be able to get to know Shamina and her family and could come to the house early in the morning to allow Omar to attend the training sessions. Transport to the training sessions will need to be discussed and the possibility of Omar's father participating in a rota with other parents could be encouraged. The increased contact Omar would have with others when travelling to training and swimming events could facilitate friendships.

- (c) How might a knowledge of current legislation help George to work effectively with the family? **6 4 KU**
2 AE

Candidates are not required to name any specific piece of legislation, but there should be a clear application between legislation and George's practice to gain full marks.

- George should be aware of legislation because there are links between legislation and a care organisation's policy and practice. Eg they should know about care standards (Regulation of Care (Scotland) Act 2003) and the right of service user to make a complaint (NHS and Community Care Act 1990). This knowledge has helped him reassure Basheer that there are checks on the quality of the care services that Shamina might use, and that they could complain if they were unhappy with the service they received.
- George is accountable for his own practice and so he should know what the law states so that he can comply with legislation. For example, on issues to do with assessing need (NHS and Community Care Act 1990) or keeping information confidential (Data Protection Act 1998). George has used this knowledge to assess the family's needs and arrange a package of care for the family.
- George would be most effective in helping the family if he was familiar with current policy and legislation. He would know, for example, what rights service users can expect under equality legislation. George would be aware that under the Race Relations Act 1976 and Race Relations Amendment Act 2000, that Omar and his family should not be discriminated against because of their race and could make a complaint if they felt they had been discriminated against.

(d) Evaluate Person Centred Planning as a way of helping this family.

9 5 KU
4 AE

*Candidates do not need to include strengths **and** weaknesses in order to gain full marks. They can choose to discuss strengths only and gain full marks if the evidence supports their opinion.*

Features of person centred planning include:

Moving away from

Clinical descriptions of people
Professionals being in charge
Professionals inviting people to meetings
Meetings in offices at times convenient to staff
Meetings being chaired
Not asking what the person wants
Assuming inability
Filing plans away
Writing notes of meetings
Professionals putting plan into action

Moving towards

Seeing people as human beings
Sharing power
The person choosing who attends meetings
Meetings in a venue chosen by the person when it suits her/him
Meetings being facilitated
Encouraging the person to dream
Looking for gifts in people
Giving the plan to the person
Graphic facilitation of meetings
All team members having some responsibility for implementing plan

Evaluation

Advantages may include:

- it encourages professional care workers to recognise the power imbalance that exists between them and the service user. Using this model helps to address this by empowering the service user to make decisions relating to who will attend meetings and where and when the meetings should be held.
- the person is encouraged to dream and so reach their potential rather than be constrained by the low expectations that other people might have for them.
- any point developed from the 'moving towards' column at the top.

Disadvantages may include

- because responsibility for the care plan is shared between all team members the success of the plan is dependent on their ability to communicate and co-operate with each other.
- each family member should have their needs recognised and so it is difficult to know who exactly should be the client at the centre of this model.

Section 4

Maintaining professional knowledge and competence is an essential requirement for all professional care workers. Using knowledge gained from the Care Higher Course, answer the following questions.

- (a) Explain the role of one organisation in maintaining the rights of service users in a care home.

5 3 KU
2 App

Organisations might include the Scottish Commission for the Regulation of Care (the Care Commission), The Scottish Social Services Council (The Council), The Commission for Racial Equality (CRE), the Equal Opportunities Commission (EOC), the Disability Rights Commission (DRC) or the Health and Safety Executive (HSE). Other relevant organisations, such as the Social Work Department or an advocacy service, are also acceptable.

Possible answers might include:

- The Care Commission was established by the Regulation of Care (Scotland) Act 2001 to register and inspect all care organisations in Scotland. Previously, Local Authorities carried out inspections in their own area. The Care Commission inspects organisations on the basis of whether they meet National Care Standards and the 6 principles which underpin them (dignity, choice, realising potential, equality and diversity, privacy and safety) and will make suggestions about what the organisation has to do in order to improve their service. The Care Commission ensures that a number of requirements have to be met before an organisation is able to register as a care provider.

The Care Commission ensures the rights of staff and service users are met by asking them for their opinion when an inspection is carried out. Inspections can be unannounced, and this ensures that organisations can't cover up bad practice, thus ensuring that staff and service users experience a positive care environment in the care home. The Care Commission also ensures rights by responding to complaints they receive about an organisation, by carrying out an investigation.

- The Equal Opportunities Commission was established by the Sex Discrimination Act 1975. Its role is to deal with sex discrimination and inequality related to gender and marital status. They provide advice and information to the public about their legal rights, what options they have, and the next steps they can take. They take legal cases in the areas of pay, pensions and caring, under the Sex Discrimination Act and the Equal Pay Act. They publish research and statistics about women's and men's lives. These show clearly and simply where change is needed. They run high-profile campaigns to change public opinion and the law and they investigate organisations or areas of life where sex discrimination is common. They have legal powers of enforcement to ensure that organisations make any proposed changes.

The EOC would ensure the rights of staff and service users were met because it produces guidance to organisations on how to write and implement an equal opportunities policy. If an organisation has a good equal opportunities policy, then they are less likely to unconsciously discriminate against someone on the basis of their gender. This is very important in care homes where men are underrepresented in the workforce, and many women work part time and so don't always have the same terms and conditions as full time workers. A good equal opportunities policy will also consider the needs of the service users and ensure that they are not stereotyped as to what kind of activity they may like, just because of their gender. People would be seen as individuals and have their unique needs catered for. Although the EOC doesn't take up every case of sex discrimination, they will give advice about how to go about making a complaint of sex discrimination and they might take your case to court or an employment tribunal if it tests a certain legal point.

- (b) Explain the role of legislation in challenging social inequality. **10 5 KU**
5 AE

Social inequality exists where some people experience limitations in their life chances, due to socially constructed factors. This is based on a macro-sociological point of view, looking at how the systems and structures in society affect the chances of an individual, rather than a psychological view – which looks at individual difference in personality or motivation for instance – as a way of explaining why some people achieve in society and others don't. Social inequality exists when people from an affluent neighbourhood live longer and enjoy better health, better educational opportunities and are more likely to gain well paid employment than people who live in areas of poverty. There are many reasons for this, but conflict sociologists would say that it is because society is structured in such a way that maintains the status quo, because this suits the overall working of society, and this results in cycles of poverty and deprivation in some communities. Groups which experience social inequality are often marginalised and can face discrimination, oppression, powerlessness and social exclusion.

Legislation sends a message to society that a situation such as social inequality is no longer tolerable and needs to be tackled. Changes need to be made in the way society operates, at a general, organisational and individual level in order for progress to be made. Legislation is a reflection of the values current in society, values which are associated with human rights. It safeguards human rights and should bring benefits to the individuals who are discriminated against or experience social inequality. Legislation is a response by the government to private problems which have become significant enough to become a public issue, such as the fact that many children still live in poverty, or that people from some communities are likely to live 10 years more than their neighbours in a deprived area. Legislation sets conditions that local authorities and other organisations have to comply with, and quite often a piece of legislation establishes an organisation which will monitor whether the legislation is being adhered to or not. Legislation to challenge social inequality might cover areas such as employment, benefits, childcare, the health service, social services and discrimination. Legislation lays down guidelines on promotion (what organisations/people should do), prevention (what organisations/people should do to avoid situations arising) and protection (what actions people can take if they are still discriminated against/abused, etc).

Legislation can only tackle certain issues. Social Inequality needs to be challenged in a number of ways before change will take place. Legislation makes it unlawful to act in certain ways, but it can't make people change their attitudes. Changing public attitudes towards marginalised groups who experience inequality is dealt with through a number of anti-stigma initiatives such as 'seemescotland' and by organisations such as the Disability Rights Commission (which was established by a piece of legislation).

- (c) In your opinion, which is it more important for a care worker to have an understanding of – sociology or psychology? Justify your answer. **10**

5 KU
5 AE

Candidates who choose only to discuss either sociology or psychology can still gain full marks if their argument is valid and has enough detail.

Suggested answer

Psychology:

- provides underpinning knowledge as to the reasons people might act in certain ways.
- sees behaviour as part of a pattern or process which may be anticipated in advance.
- provides care workers with a range of tools and strategies with which to respond to a situation.
- is based on research evidence which is being constantly updated and responds to new situations.

Sociology

- Helps a care worker develop an objective awareness of some of the wider social influences that can impact on individuals receiving a care service.
- Recognises that individuals and groups can also shape the society in which they live and influence the way in which care services develop.
- Sociological thinking describes the relationship between private problems and public issues.
- Sociological thinking makes the distinction between common sense and sociological knowledge, focussing on the importance of understanding society rather than merely describing it.

Which is more important?

- Psychology is more important for a care worker because it helps them work more effectively with service users on a day to day basis. It provides detailed guidance about the reasons why people behave in the ways they do, and how a care worker can respond to them as an individual, using at times quite detailed information about stages they may be going through or ways of helping someone change some behaviour they are unhappy with.

OR

- Sociology is more important to a care worker because it places the service user in context. It reminds the service user and staff that external conditions influence our behaviour and opportunities, and that although direct work with a service user enables a person to develop, changes at an organisational and structural level are essential for longer term change to occur. The person will find it difficult to move on from their circumstances if changes in the way society is organised doesn't also occur.

[END OF MARKING INSTRUCTIONS]