



2012 Care

Higher – Paper 2

Finalised Marking Instructions

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2012 Care Higher Paper 2

Section 3: Values and Principles in Care

- (a) Describe **two** differences between informal carers and professional care workers.

4

2 KU
2 AE/App

Guidance to markers

KU marks could be awarded for explanations and/or examples of informal carers and professional care workers. To gain full AE /APP marks the candidate must discuss both informal and professional care workers with evidence of differences between the descriptions.

KU/AE marks can be awarded holistically to candidates who make a direct comparison which clearly conveys a depth of understanding of the differences between informal and professional carers in an integrated way.

Knowledge and Understanding (KU)

Informal carers

- Family members
- Friends
- Volunteers
- Usually unpaid
- Not bound by a professional code of conduct
- Not part of a line management structure

Professional care workers (formal carers)

- Nurses, social workers, physiotherapists, occupational therapists, home care workers, residential support workers, youth workers etc
- Usually paid
- Bound by a professional code of conduct
- Part of a line management structure (accountability)

Analysis/Evaluation & Application (AE/APP)

One difference is that professional care workers have a duty to demonstrate values as described in **professional codes** of conduct such as the SSSC Code of Practice or the NMC Code. These are a public statement about the values that workers are expected to hold and workers may lose their professional registration, and may even face criminal proceedings, if they breach them. Informal care workers do not have a code to uphold.

Professional care workers will have received **induction** from their organisation and will undertake **training** in issues such as health and safety or equality and diversity. Some care posts require workers to have completed suitable training, and an organisation is required by law to have a number of trained staff in post. Informal carers often have taken the role on because of their relationship to the person and although they may be able to access training from carers groups and other organisations, many are not in a position to do so.

Professional care workers are **legally accountable** for their actions and have to report to their manager and receive supervision to discuss their work and how to improve it. Informal care workers may receive support from family, friends and organisations but they are not legally bound to do this.

Or any other relevant answer.

Case Study – Nina and Craig

Nina is a 36 year old Polish woman who moved to Scotland to work as a teacher. She became a wheelchair user following a motorbike accident and now lives in supported accommodation. Nina is becoming more independent and is growing in confidence as a wheelchair user.

Craig has been assigned as Nina's care worker. One of his responsibilities is to assess her needs and support her to realise her potential. When Craig first met Nina he wondered if it might be better for her to return to Poland, to be close to her family. However, after getting to know her better, he now appreciates how important her independence is to her.

Craig knows that Nina still loves motorbikes, so he encouraged her to enrol for a motorcycle maintenance evening class. He helped her to organise funding so that she could afford to attend the course. Nina is really enjoying the class and the tutor is very positive about her progress.

Nina has been discussing her goals for the future with Craig. She would like to get a job again, but is not sure if she would like to return to full-time teaching. She worries about her poor concentration and the fact that she often feels tired. She would also like to move into a flat of her own.

- (b) Name the **two** core values in professional care work and explain how Craig demonstrates **one** value when working with Nina.

5 2 KU
3 AE/App

Guidance to markers

To gain 2 KU marks candidates must name the two core values.

Markers should use their discretion to award up to 3AE marks for explaining how one of the selected values is demonstrated by Craig. Marks could be awarded holistically if candidates provide good integration of knowledge and application.

Knowledge and understanding (KU)

Two core values for professional care workers:

- The value of respect for the worth and dignity of every individual
- The value of according social justice and promoting the social welfare of every individual

Analysis/Evaluation & Application (AE/APP)

The value of respect for the worth and dignity of every individual involves care workers recognising a person's importance as a human being with a set of unique characteristics and personality. Care workers should also show respect

for the worth and dignity of every individual by taking the time to understand the individual service user's unique social, physical, emotional, cognitive and cultural needs.

In relation to this core value, Craig has challenged his initial beliefs about Nina's ability to live independently. He has taken the time to get to know her as a unique individual, showing respect for her worth and dignity by reflecting on his assumptions and understanding her needs from her point of view.

The value of according social justice and promoting the social welfare of every individual refers to the idea that everyone in a society has a right to fair and correct treatment. It means that service users should have equal access to resources that should be allocated on the basis of need, and not given to people we like or who we think deserve the help. Welfare means wellbeing and so promoting social welfare is based on promoting social wellbeing.

In relation to this core value Craig is promoting Nina's social welfare by showing a good understanding of local resources that are available to her, in terms of the evening class, and helping to organise funds so that she can attend.

Or any other relevant answer.

(c) Explain how Craig could assess Nina's needs.

8 4 KU
4 AE/App

Guidance to markers

KU marks could be awarded in a range of ways dependent on how candidates answer the question. As a general rule 1KU mark should be awarded for any relevant point made relating to assessment of needs. Alternatively KU marks could be awarded more holistically.

Although candidates would be expected to make reference to a particular model of needs assessment such as those referred to below, markers should use their professional discretion for correct answers that do not directly refer to a specific model. (See 'Final Comment' under Knowledge and Understanding section.)

To gain up to 4AE/APP marks, candidates must relate their points directly to Nina's needs.

Candidates who provide an integrated response should have their answer marked holistically based on the 4KU 4AE/APP split.

Knowledge and understanding (KU)

Maslow's Hierarchy of Needs: Background to Maslow's Model

There are two main types of need, growth needs and deficiency needs. Maslow suggested that the lower levels of the hierarchy were deficiency needs. Only when these basic needs are at least partially satisfied can the person use their energy and motivation to meet their higher level (growth) needs which result ultimately in self-actualisation. People have commonly shared needs, but also have needs that are individual and unique to them. Using Maslow's model, general needs could be categorised as:

- Physiological - Breathing, food, water, sex, sleep, homeostasis, excretion, oxygen, temperature regulation.
- Safety - Security of body, of employment, or resources, or morality, of the family, of health, or property. Protection from potentially dangerous objects or situations, e.g. the elements, physical illness. The importance of routine and familiarity.
- Love/belonging - Friendship, family, sexual intimacy. Receiving and giving love, affection, trust and acceptance. Affiliating, being part of a group (family, friends, work).
- Esteem - Self-esteem, self-respect, confidence, achievement, respect of others, respected by others.
- Self-actualisation - Morality, creativity, spontaneity, problem solving, lack of prejudice, acceptance of facts. Realising your full potential, 'becoming everything one is capable of becoming'. Experiencing meaning, purpose and beauty.

PROCCCESS Model: Background information

The PROCCCESS model reminds care workers that they need to assess a wide range of holistic needs that relate to the service user's living situation and ways of effectively meeting identified needs including:

<u>Needs</u>	<u>Brief Examples/Explanation</u>
Physical needs	Healthy diet, medication, appropriate housing, exercise etc
Relationship needs	Building/maintaining personal and professional relationships
Organisational/ Operational needs	Knowledge and info about services and resources e.g. welfare benefits
Communication needs	Hearing or speech difficulties requiring assistive technology
Cultural needs	Particular values or customs (<u>might</u> be linked to religion)
Cognitive/intellectual needs	Dependant on stage of the life cycle – making sense of the world
Emotional needs	Love, belongingness, self-esteem, confidence, worth
Social needs	Relationships and opportunities to build these in a range of contexts
Spiritual needs	Could be linked to religion but also opportunities for contemplation

Candidates may refer to other ways of assessing needs they have learned (e.g. SPECC, PIES), but should only be allocated marks if they explain the actual needs the acronym stands for.

Candidates may also be awarded marks if they competently explain assessment tools as a way that Craig could assess Nina's needs. These could include:-

- Meetings
- Assessment forms
- Checklists
- Observation and asking questions
- Diaries and scrapbooks
- Shared activities

Final Comment:

Markers should use their discretion to award marks for reference to other models and techniques (e.g. Egan's Skilled Helper model, SOLER), but only if the candidate appropriately explains these in relation to how Craig could assess Nina's needs.

Analysis/Evaluation & Application (AE/APP)

Craig should recognise that Nina is a unique individual with a range of holistic or inter-related needs. If he used Maslow's hierarchy of needs as a means of assessing Nina's needs, he may assess her physiological needs in terms of being a wheelchair user or perhaps focus on some of her physical requirements if she moved into a flat of her own. In terms of physiological needs Craig may also be concerned about her tiredness and poor levels of concentration and consequently spend some time assessing these aspects of Nina's situation. In relation to safety needs Craig might give some consideration to Nina's physical safety in her wheelchair when she is carrying out everyday tasks. Although her security needs may be being adequately met in the familiar routine and environment of her supported accommodation, these may change as she moves on to live independently. In relation to Nina's love and belonging needs, Craig could consider the extent to which these appear to be being met at least partially by being part of a group in the supported accommodation and through the support of the care workers. It would be important, however, to make sure that she did not become isolated when she moved into a flat of her own. In terms of her esteem needs, Nina has gained the respect of the college tutor and is gaining in confidence which will boost her self-esteem as will her growing confidence as a wheelchair user. Self-actualisation is difficult to achieve for many people and especially difficult to sustain, however, in terms of self-actualisation, Craig may find that through attending the evening class and the problem-solving and creativity this might involve, this is being partially met. However, a lot of Nina's energy will be used in meeting her 'deficiency' needs, and Craig will probably reach an assessment that highlights ways in which Nina will require additional support to help her make the move on to the next level of independence.

Or any other relevant answer.

- (d) Explain how Craig would use the care planning process to help Nina achieve **one** of her goals.

8

4 KU
4 AE/App

Guidance to markers

KU marks could be awarded for information relating to the care planning process or goal setting. 4KU could be awarded to candidates who fully explain all stages of the Care Planning Process.

KU and AE/APP marks could be awarded holistically for responses that explain the processes of care planning and goal setting in an integrated way in relation to Nina's situation

Knowledge and understanding

Care Planning Process

- Care planning involves setting both short-term and long-term goals.
- Care Planning involves assessing, planning, implementing, evaluating as well as on-going monitoring and reviewing.
- The care plan sets out the strategies for providing resources that the service user requires to meet their needs.
- The service user should always be placed at the centre of the process

Goals and goal setting

- Goals are targets that the service user is aiming to achieve. A care worker's role involves discussing options and planning the best way to support the service user.
- When deciding on goals the care workers should support the service user to set goals that are specific, measurable, achievable, realistic and time-framed (SMART)

Although the question focusses on the care planning process, markers should use their discretion in awarding either KU or AE/APP marks if candidates appropriately refer to how Craig could use either the Exchange or Person Centred Planning model to help Nina achieve one of her goals.

Analysis/Evaluation & Application (AE/APP)

One goal could be for Nina to build up her energy levels so she is less tired at the end of the day (assessed physiological need). The care planning process could be used effectively to help Nina achieve this goal. Nina and Craig could work together to make plans for a healthy eating programme and develop strategies to help Nina get enough rest while still undertaking appropriate exercise, perhaps with the support of a dietician or physiotherapist (planning). Once these ideas were agreed they would be put in place (implementation) and their effectiveness evaluated over a set period of time. This would also relate to the idea of SMART goal setting where it would be important that Nina's goals were achievable and realistic; if not the plan would be reviewed and amended. It's likely that Craig would use the care planning process to

help Nina set and work toward both short and long-term goals. Whatever goal Nina set such as moving to her own flat or finding employment, it would be important for Craig to place Nina at the centre of the process. Craig's support should always be based on the two core care values of respecting Nina's worth and dignity as a human being as well as promoting her welfare and ensuring that she receives the appropriate support and resources to which she is entitled (social justice.)

Or any other relevant answer.

Section 4 Integration 'Sociology for Care' and 'Values and Principles in Care'

Some people in society are labelled as deviant. Why is it important for care workers to have an understanding of deviance? In your answer you should include:

12 KU
13AE/App

- key features of Symbolic Interactionist theory
- the effect of discrimination on people viewed as deviant
- the principles underpinning the National Care Standards to support people viewed as deviant
- the role of legislation in promoting positive care practice with people who are labelled as deviant.

Guidance to markers

As this is an integrated essay question, candidates could answer in a variety of ways. Markers should use their discretion in awarding marks but should ensure that a 12KU/13AE/APP split in mark allocation is applied.

In general, marks should be awarded holistically with markers applying discretion and professional judgement. The overall mark awarded should reflect the candidate's ability to apply learning from both the Sociology for Care and Values and Principles in Care units in an integrated manner. Overall, candidates should be awarded marks for ideas, statements and observations that demonstrate an ability to link the concepts being examined in a coherent way.

To achieve the full 25 marks an answer must demonstrate:

- *knowledge, understanding from **both** the Sociology for Care and Values and Principles in Care units to explain why is it important for care workers to have an understanding of deviance*
- *Knowledge, understanding, analysis/evaluation of the effect of discrimination, the application of the principles underpinning the NCS and an explanation of the role of legislation in promoting positive care practice with people labelled as deviant*
- *This means that the integrated essay should include reference to all the bullet points listed in the question.*

A maximum of 18 marks should be awarded if no reference is made to care contexts or no reference made to why is it important for care workers to have an understanding of deviance.

Symbolic Interactionist Theory

- **The idea of the Self Concept**

The self-concept is derived from the perceptions we have of the **feedback** we receive from other people during our social interactions. In relation to the study of deviance a person is likely to perceive his or her behaviour as **deviant** if they receive feedback from others such as disapproval, distaste or discrimination. A person may choose to recognise that their behaviour is being seen as **deviant** or unacceptable and may change or adapt their behaviour accordingly. However, when the interaction produces negative feedback on a regular basis within a range of settings, then the individual concerned may incorporate the notion of deviance into their **self-concept**.

- **The significance of symbols and labels in social interaction**

During social **interactions** a range of **symbols**, both verbal and non-verbal are used and interpreted. The meanings we give to these symbols are significant in our future interactions. If a **label** of deviant is attached to an individual, then this symbol can suggest an expectation of behaviour which can, in some instances, result in a **self-fulfilling prophecy**.

- **The concept of Role-taking**

This relates to the part we play as '**social actors**'. It also relates to the idea of empathy through the ability to imagine oneself in the **role** of another person. We try to act in such ways that others with whom we interact perceive our 'acting' positively. In relation to deviance the **expected behaviours** of a role may be negative rather than positive.

- **The individual as an influence on society**

Symbolic interactionist theory adopts a **micro-sociological** perspective, so it concentrates on explaining behaviour at an individual or small group level and, from examining these **small-scale interactions**, builds up a picture of society. In relation to the study of deviance, the focus is on the **interactions** that lead to an individual's behaviour being defined in terms of deviance.

Effects of discrimination

Discrimination is based on stereotypes and prejudice. Discrimination can occur at different levels: personal, institutional or cultural. It can deny people of opportunities to participate fully in society and is a barrier to fulfilling personal potential. It can lead to marginalisation and exclusion and deny people equal access to life chances. This refers to the chances someone has of accessing the opportunities or experiences that are widely considered to be desirable in society. It can relate to such aspects of life as education, income, housing and health. People labelled as deviant often experience reduced life chances due to discrimination.

Principles underpinning the National Care Standards

Any, or all, of the following six principles may be referred to:

- **Dignity:** this relates to an individual's right to be respected and to develop healthy social relationships which promote their self-esteem. Care workers could ensure that service users are supported in such a way that protects them from discrimination or negative perceptions as a result of discrimination e.g. if their behaviour is labelled as deviant. Care workers should ensure that all service users are treated respectfully when in receipt of care services irrespective of any behaviour which may be viewed as deviant.
- **Privacy:** this principle is concerned with preserving an individual's right to be free from intrusion and to have their personal property respected. Information should be protected and kept confidential. Care workers should ensure that they only share information about service users on a 'need to know' basis in order to protect service users from negative perceptions of individuals viewed as deviant.
- **Choice:** relates to the individual's right to know the range of choices available, and be supported to make their own decisions based on informed choice. Service users should be seen as individuals who have personal preferences, hopes, fears and dreams. Care workers should ensure that individualised care is available to meet the needs of service users and choices are not restricted as a result of perceptions about people viewed as deviant.
- **Safety:** relates to the need for individuals to feel secure but not over-protected. Individuals should also be free from exploitation and abuse. Care workers should provide support to service users and work together with individuals to assess risk and ensure appropriate support is provided. People viewed as deviant may be more vulnerable to abuse.
- **Realising potential:** recognises that people have individual aspirations. Individuals should be supported to achieve what they can and make the most of their life to realise their potential and feel fulfilled. Care workers should plan effectively and offer support which meets the individual's needs taking into account issues associated with being viewed as deviant.
- **Equality and diversity:** recognises that individuals need to have their cultural needs recognised and respected. This principle supports the individual's right to be valued for their ethnic background, language, culture and faith. Care workers should ensure service users are treated equally and cared for in an environment which is free from bullying, harassment and discrimination which may occur as a direct result of the person's behaviour being labelled as deviant. Care workers should work towards ensuring the service user is included in society.

The role of Legislation

Legislation that is currently in use and that can be seen to have an influence on current care practice could include:

- Equality Act 2010
- Gender Equality Duty 2007
- Mental Health (Care and Treatment) (Scotland) Act 2003
- Community Care and Health (Scotland) Act 2002
- Regulation of Care (Scotland) Act (2001)
- Adults with Incapacity Act (Scotland) 2000
- Data Protection Act (1998)
- NHS and Community Care Act (1990)

Ways in which legislation acts as a framework to promote positive care practice:

- by promoting health and wellbeing
 - social, cultural, mental, physical, emotional and cognitive aspects
- reflecting values associated with human rights
- safeguarding human rights and bringing benefit to individuals requiring care
- providing benefits to individuals
- maintaining quality of life
- protecting rights and choices
- maintaining confidentiality
- promoting equality of opportunity
- enforcing professional accountability
- specifying professional care workers responsibilities under legislation

Care workers have a responsibility to maintain professional knowledge, including knowledge of current legislation (and any proposed changes) as well as organisational policies and procedures that relate to protecting service users' rights. Legislation can also be used by care workers to advocate on behalf of people who may be viewed as deviant in order to access relevant services required to meet individual need. This is supported in law by the Regulation of Care (Scotland) Act (2001) legislation which established a system of care regulation to promote high quality services appropriate to service users' needs. It is important for care workers to realise that people viewed as deviant may be more vulnerable to abuse as a result of the labelling and discrimination they may face. Care workers are supported by legislation such as the Equality Act 2010 to challenge prejudice and discrimination and work towards removing barriers that may prevent individuals from fulfilling their potential, or participating fully in society whether these be based on age, disability and health, gender, race, religion or belief, sexual orientation or transgender status or any other basis. Service users who may face discrimination as a consequence of receiving a label relating their mental health status are supported in terms of legislation by the Mental Health Care and Treatment (Scotland) Act 2003 which includes the guiding principles of non-discrimination and equality and the protection of the rights of a person with a mental disorder.

Or any other relevant answer

[END OF MARKING INSTRUCTIONS]