

NCFE CACHE Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) (603/5355/7)

NCFE CACHE Technical Level 3 Extended Diploma in Health and Social Care (601/8435/8)

Unit title: Anatomy and physiology for health and social care

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Assessment code: HSCNI/SAE

Paper number: P001678

Mark Scheme

v2.0 Pre-standardisation

This mark scheme has been written by the Assessment Writer and refined, alongside the relevant questions, by a panel of subject experts through the external assessment writing process and at standardisation meetings.

The purpose of this mark scheme is to give you:

- examples and criteria of the types of response expected from a learner
- information on how individual marks are to be awarded
- the allocated assessment objective(s) and total mark for each question.

Marking guidelines

General guidelines

You must apply the following marking guidelines to all marking undertaken throughout the marking period. This is to ensure fairness to all learners, who must receive the same treatment. You must mark the first learner in exactly the same way as you mark the last.

- The mark scheme must be referred to throughout the marking period and applied consistently. Do not change your approach to marking once you have been standardised.
- Reward learners positively giving credit for what they have shown, rather than what they might have omitted.
- Utilise the whole mark range and always award full marks when the response merits them.
- Be prepared to award zero marks if the learner's response has no creditworthy material.
- Do not credit irrelevant material that does not answer the question, no matter how impressive the response might be.
- The marks awarded for each response should be clearly and legibly recorded in the grid on the back of the question paper.
- If you are in any doubt about the application of the mark scheme, you must consult with your Team Leader or the Chief Examiner.

Guidelines for using extended response marking grids

Extended response marking grids have been designed to award a learner's response holistically and should follow a best-fit approach. The grids are broken down into levels, with each level having an associated descriptor indicating the performance at that level. You should determine the level before determining the mark.

When determining a level, you should use a bottom up approach. If the response meets all the descriptors in the lowest level, you should move to the next one, and so on, until the response matches the level descriptor. Remember to look at the overall quality of the response and reward learners positively, rather than focussing on small omissions. If the response covers aspects at different levels, you should use a best-fit approach at this stage, and use the available marks within the level to credit the response appropriately.

When determining a mark, your decision should be based on the quality of the response in relation to the descriptors. You must also consider the relative weightings of the assessment objectives, so as not to over/under credit a response. Standardisation materials, marked by the Chief Examiner, will help you with determining a mark. You will be able to use exemplar learner responses to compare to live responses, to decide if it is the same, better or worse.

You are reminded that the indicative content provided under the marking grid is there as a guide, and therefore you must credit any other suitable responses a learner may produce. It is not a requirement either, that learners must cover all of the indicative content to be awarded full marks.

Assessment objectives

This unit requires learners to:

AO1	Recall of knowledge and understanding	
AO2	Application of knowledge and understanding	
AO3	Analysis to demonstrate knowledge of concepts and/or theories	

The weightings of each assessment objective can be found in the qualification specification.

Qu	Mark scheme	Total marks
Section	n A Total for this section	: 20 marks
1 (a)	Which one (1) of the following pieces of equipment is used to measure respiratory rate?	1
	Award one (1) mark for:	AO1=1
	D watch (1)	
1 (b)	Taking in oxygen is one function of respiration by the lungs.	1
	Identify the other function of respiration.	
	Award one (1) mark for correct identification:	AO1=1
	 removal of waste products (1). Accept removal of CO₂ (1) 	
1 (c)	Identify three (3) structures of the respiratory system involving the passage of air that are after the trachea.	3
	Award up to three (3) marks for correct identification:	AO1=3
	bronchi (1)	
	• bronchioles (1)	
	alveoli (1).	
1 (d)	Explain the process of gaseous exchange within the lungs.	4
	Award up to four (4) marks for an accurate explanation.	
	 Oxygen reaches the alveoli which are tiny air sacs (1). The walls of the alveoli are only one cell thick (1) to allow for diffusion (1). Oxygen enters the bloodstream via the capillaries (1) and carbon dioxide leaves the bloodstream into the alveoli to be exhaled (1). 	AO3=4
	Accept other suitable responses.	
1 (e)	Identify the two (2) muscles of respiration and describe the	5
	structure and / or function of one (1) of these muscles. Award up to two (2) marks for correct identification:	AO1=2

• diaphragm (1)

AO2=3

6

• intercostals (1).

Award up to three (3) marks for an accurate description.

- Diaphragm a thin skeletal muscle that sits below the lungs

 (1) it contracts creating a vacuum when an individual inhales and relaxes to push the air out when an individual exhales
 (1). The diaphragm separates the abdomen from the chest
 (1).
- Intercostals These are situated between the ribs (1). They contract to raises the ribcage causing inhalation (1) and then relax which lowers the ribcage to allow for exhalation (1). They work in conjunction with the diaphragm (1).

Accept other suitable responses.

1 (f)

Explain how ventilation is controlled.

Level	Mark	Description	
3	5–6	Application of knowledge is appropriate and	AO2=3
		accurate and shows clear understanding of the	AOZ-S
		mechanism for the control of ventilation.	AO3=3
		Analysis to demonstrate understanding of the	
		mechanism for the control of ventilation is	
		detailed and highly effective, with clearly	
		reasoned consequences. Clear links are made.	
2	3–4	Application of knowledge is mostly appropriate,	
		showing some clear understanding of the	
		mechanism for the control of ventilation. There	
		may be a few errors.	
		Analysis to demonstrate understanding of the	
		mechanism for the control of ventilation is	
		effective and mostly relevant, with simplistic	
		consequences. Some clear links are made.	
1	1–2	Application of knowledge is limited and may	
		show a lack of understanding of the	
		mechanism for the control of ventilation. There	
		may be a number of errors.	
		Analysis to demonstrate understanding of the	
		mechanism for the control of ventilation lacks	
		detail and may have limited effectiveness and	
		relevance. Links may be made but are often	

inappropriate.

No creditworthy material.

Indicative Content

AO2

- Respiration is controlled by parts of the brain
- The pons controls the rate of involuntary respiration
- The medulla oblongata signals the muscles involved in breathing
- The motor cortex (within the cerebral cortex) controls breathing via the respiratory pathway

AO3

- Chemoreceptors in the blood measure pH which indicates carbon dioxide levels
- Two centres of the pons work together to either stimulate or limit breathing rate
- This results in the medulla sending signals to the respiratory muscles to affect expiration and inspiration.
- These nerve signals can be overridden by chemoreceptor messages in periods of activity / exercise.

Accept other suitable responses.

Section B Total for this section: 20 marks

2 (a)	Discus: wellbei		ely effects of muscular dystrophy on Charlie's	12
	Level	Mark	Description	
	3	9–12	A wide range of relevant knowledge and understanding of the impact of muscular dystrophy on the wellbeing of Charlie is shown, which is accurate and detailed.	AO1=2 AO2=5 AO3=5
			Application of knowledge is appropriate and accurate and shows clear understanding of the impact of muscular dystrophy on the wellbeing of Charlie.	
			Analysis to demonstrate understanding of the impact of muscular dystrophy on the wellbeing of Charlie is detailed and highly effective, with reasoned judgements made. Clear links are made.	

2	5–8	A range of relevant knowledge and understanding of the impact of muscular dystrophy on the wellbeing of Charlie is shown. There may be a few errors. Application of knowledge is mostly appropriate, showing some clear understanding of the impact of muscular dystrophy on the wellbeing of Charlie. There may be a few errors. Analysis to demonstrate understanding of the impact of muscular dystrophy on the wellbeing of Charlie is effective and mostly relevant with simplistic judgments made. Some clear links are made.
1	1-4	A limited range of relevant knowledge and understanding of the impact of muscular dystrophy on the wellbeing of Charlie is shown but is often fragmented. Application of knowledge is limited and may show a lack of understanding of the impact of muscular dystrophy on the wellbeing of Charlie. There may be a number of errors. Analysis to demonstrate understanding of the
	0	impact of muscular dystrophy on the wellbeing of Charlie lacks detail and may have limited effectiveness and relevance. Links may be made but are often inappropriate. No relevant material.

Indicative content

Answers may take a holistic approach or focus on the individual physical, cognitive, emotional and social aspects of Charlie's wellbeing.

Physical

A01

• Charlie may have difficulties with mobility

AO2

- Charlie may experience muscle pain
- Charlie's joints may become stiff or loose

AO3

- Charlie may develop difficulty with swallowing
- Charlie may have heart problems

Cognitive

A01

Charlie may develop learning difficulties

AO2

- This could lead to Charlie experiencing difficulties with multitasking
- Charlie could also experience some issues with problem solving

AO3

- Charlie may, however, have an IQ within the normal range
- This may mean an impairment of cognitive abilities without an intellectual impairment

Emotional

AO1

 Muscular dystrophy may affect how Charlie feels about himself

AO2

- Charlie could experience frustration when unable to mobilise or carry out day to day tasks
- This could result in angry outbursts at those around him.

AO3

- Charlie could become anxious due to physical restrictions and his feelings about his abilities
- This could result in them later developing depression

Social

AO1

 Charlie's social interactions may reduce due to his poor mobility

AO2

- Charlie may not be able to visit friends due to accessibility problems
- Friends may find it challenging to include Charlie in their activities

AO3

- Charlie may miss school days, making it harder to socialise with friends
- Missed school days may result in fewer opportunities for Charlie to engage in extracurricular activities.

Accept other suitable responses.

2 (b)	Two types of movement are available at the elbow joint. One is flexion.	1
	Identify the other type of movement.	AO1=1
	Award one (1) mark for the correct answer:	
	extension (1).	

2 (c)	Agonist and synergist are two roles of muscles.	4

Identify two (2) other roles of muscles and describe one (1) of these roles of muscles.

Award up to two (2) marks for correct identification:

antagonist (1)

fixator (1).

Award up to two (2) marks for an accurate description.

Antagonist – This role is to oppose the action of another muscle (1). These muscles are found in pairs (1). One muscle contracts, whilst the other muscle relaxes (1).

Fixator – Stabilises a part of the body during movement (1). Assists the function of the agonist muscle (1) by giving a stable point for the muscle to pull against (1).

Accept other suitable responses.

There are two (2) types of muscle fibres. 2 (d) 3 Identify one (1) of these muscle fibre types and explain the function of this muscle fibre type. AO1=1 Award one (1) mark for correct identification and up to two (2) AO3=2 marks for an accurate explanation: • type 1 (1) type 2 (A and B) (1). Award up to two (2) marks for an accurate explanation. • Type 1 – This is a "slow twitch" muscle fibre (1). They generate force at a slow rate (1) and have a slower rate of fatique (1). Example is gluts gluteus maximus or gluts • Type 2 – this is a "fast twitch" muscle fibre (1). They generate force at a faster rate (1) and have a faster rate of fatigue (1). Accept other suitable responses.

Section C Total for this section: 20 marks

3 (a)		Discuss the likely effects of cardiovascular disease on Natalia's cognitive and emotional wellbeing.		9 AO1=3
	Level	Mark	Description	AO2=3

3	7–9	A wide range of relevant knowledge and	AO3=3
		understanding of how cardiovascular disease	
		may impact on the cognitive and emotional wellbeing of Natalia is shown, which is	
		accurate and detailed.	
		Application of knowledge is appropriate and accurate and shows clear understanding of	
		how cardiovascular disease may impact on	
		the cognitive and emotional wellbeing of	
		Natalia.	
		Analysis to demonstrate understanding of	
		cardiovascular disease may impact on the	
		cognitive and emotional wellbeing of Natalia is detailed and highly effective, with reasoned	
		judgements made. Clear links are made.	
2	4–6	A range of relevant knowledge and understanding of how cardiovascular disease	
		may impact on the cognitive and emotional	
		wellbeing of Natalia is shown, but may be	
		lacking in sufficient detail, with a few errors.	
		Application of knowledge is mostly	
		appropriate, showing some clear	
		understanding of how cardiovascular disease may impact on the cognitive and emotional	
		wellbeing of Natalia. There may be a few	
		errors.	
		Analysis to demonstrate understanding of	
		how cardiovascular disease may impact on the cognitive and emotional wellbeing of	
		Natalia is effective and mostly relevant with	
		simplistic judgments made. Some clear links	
1	1–3	are made. A limited range of relevant knowledge and	
•		understanding of how cardiovascular disease	
		may impact on the cognitive and emotional	
		wellbeing of Natalia but is often fragmented.	
		Application of knowledge is limited and may	
		show a lack of understanding of how cardiovascular disease may impact on the	
		cognitive and emotional wellbeing of Natalia.	
		There may be a number of errors.	
		Analysis to demonstrate understanding of	
		how cardiovascular disease may impact on	
		the cognitive and emotional wellbeing of	
		Natalia lacks detail and may have limited	

		effectiveness and relevance. Links may be made but are often inappropriate.
	0	No relevant material.

Indicative content

Cognitive

AO1

- Pain and discomfort from cardiovascular disease may make it harder for Natalia to concentrate
- This could make it harder for Natalia to remember things
- Which in turn could lead to confusion

AO2

- Natalia could become disorientated following cardiovascular disease
- This could lead to other impaired thinking and reasoning
- Cardiovascular disease could lead to Alzheimer's and dementia

AO3

- Poor circulation as a result of cardiovascular disease can result in reduced oxygen to the brain
- This leads to a reduction in sodium levels
- Some of the cognitive impairment may not return

Emotional

AO1

- Natalia could be fearful as a result of cardiovascular disease
- Natalia may be wary of carrying out activities due to potential risks
- Not carrying out activities may isolate Natalia leading to her feeling lonely

AO2

- Natalia may not be able to work, which could affect her self esteem
- Natalia may start to feel worthless and that she is not contributing
- Not working could lead to financial difficulties which may cause Natalia to worry more

AO3

 Natalia could become anxious due to her health and subsequent issues

Natalia's reduced self-esteem could lead to depression	
 Natalia's mental health issues could affect her compliance with medication making her feel worse. 	
Accept other suitable responses.	

3 (b)	Arteries are a type of major blood vessel that carry blood away from the heart. Identify the type of major blood vessel that carry blood to the heart and explain the structure of this blood vessel type.	4 AO1=1 AO3=3
	Award one (1) mark for correct identification:	
	• veins (1).	
	Award up to three (3) marks for an accurate explanation.	
	 Veins – Composed of three layers (1). An outer layer of connective tissue (1) a middle layer of smooth muscle (1) and an inner layer of endothelial cells (1). Accept valves 	
	Accept other suitable responses.	

3 (c)	Identify the smallest type of blood vessels and describe these	4
1	blood vessels.	AO1=1
	Award one (1) mark for correct identification:	AO2=3
	• capillaries (1).	
	Award up to three (3) marks for an accurate description.	
	 Capillaries – The most numerous blood vessels (1). They connect arteries to veins (1). They have thin walls (1) to allow the transfer of oxygen, nutrients and waste products to and from tissue (1). 	
	Low pressure in the capillaries	
	Accept other suitable responses.	

3 (d)	ldentify three (3) valves in the heart.				
	Award up to three (3) marks for correct identification:	AO1=3			
	• tricuspid (1)				

bicuspid (or mitral) (1)
pulmonary (1)
aortic (1).

Section D Total for this section: 20 marks

4 (a)	Identify the hormone produced in the ovaries.	1
	Award one (1) mark for:	
	B oestrogen (1)	AO1=1

4 (b)	When the external temperature increases, thermoregulation is used to keep the body cooler.	5
	Identify three (3) mechanisms that are used to keep the body cooler and explain the function of one (1) of these mechanisms.	AO1=3 AO3=2
	Award one (1) mark for a correct identification up to three (3) marks:	7100-2
	 hairs lie flat (1) sweating (1) vasodilation (1) skin reddens (1). 	
	Award up to two (2) marks for an accurate explanation.	
	 Hairs lie flat – This prevents air being trapped and insulating the body (1). It allows sweat to evaporate more easily (1) and heat to be given off through vasodilation (1). Sweating –Sweat on the skin evaporates (1). This causes heat energy to be removed from the skin (1) cooling the body down (1). Vasodilation –The blood vessels leading to the capillaries become wider (1). This allows more blood flow to the skin (1) therefore increasing the surface area of blood vessel (1) to allow heat to escape (1). Skin reddens – Due to the increase of blood to the skin, it reddens (1). The darkening of the skin allows more heat to be given off (1) and therefore escape from the body (1). 	

Accept other suitable responses.	
	1

4 (c)	Identify three (3) ways to use a thermometer to take a person's temperature.	3
	 Award up to three (3) marks for a correct answer: oral (1) ear (1) forehead (1) 	AO1=3
	underarm (1)rectal (1).	

Level	Mark	Description	
3	5–6	Application of knowledge is appropriate and	AO2=
		accurate and shows clear understanding of the	
		role of negative feedback.	AO3=
		Analysis to demonstrate understanding of the	
		role of negative feedback is detailed and highly	
		effective, with clearly reasoned consequences.	
		Clear links are made.	
2	3–4	Application of knowledge is mostly appropriate,	
		showing some clear understanding of the role	
		of negative feedback. There may be a few	
		errors.	
		Analysis to demonstrate understanding of the	
		role of negative feedback is effective and	
		mostly relevant, with simplistic consequences.	
		Some clear links are made.	
1	1–2	Application of knowledge is limited and may	
		show a lack of understanding of the role of	
		negative feedback. There may be a number of	
		errors.	
		Analysis to demonstrate understanding of the	
		role of negative feedback lacks detail and may	
		have limited effectiveness and relevance. Links	
		may be made but are often inappropriate.	
	0	No creditworthy material.	

AO2

- Responds when a change in environment is detected
- This environment could be external to the body
- This environment could be internal to the body
- Negative feedback resets conditions to their normal state

AO3

- Works in a negative feedback loop
- Receptors detect a change and send signals to the hypothalamus
- This in turn instructs the release hormones or proteins
- These act to oppose the stimulus that triggered the response.

Accept other suitable responses.

4 (e)	Stress can affect physiological measurements.	5		
	Identify four (4) physiological measurements affected by stress and briefly explain the effect that stress has on one (1) of these measurements. Award up to four (4) marks for correct identification:			
	 respiration rate (1) pulse (1) blood pressure (1) oxygen saturation (1) temperature (1). 			
	Award one (1) mark for a brief explanation.			
	 Respiration rate increases (1) as the body needs more oxygen to fight or run (1). Pulse increases (1) to get oxygen to the muscles faster (1). Blood pressure increases (1) to increase blood flow (1). Oxygen saturation reduces (1) as oxygen is utilised by muscles (1). Temperature increases (1) as increased activity produces heat (1). 			
	Accept other suitable responses.			

Assessment Objective Grid

Question	AO1	AO2	AO3	Total
1a	1			1
1b	1			1
1c	3			3
1d			4	4
1e	2	3		5
1f		3	3	6
2a	2	5	5	12
2b	1			1
2c	2	2		4
2d	1		2	3
3a	3	3	3	9
3b	1		3	4
3c	1	3		4
3d	3			3
4a	1			1
4b	3		2	5
4c	3			3
4d		3	3	6
4e	4		1	5
Total	32	22	26	80