

2021 HSC Human Services Marking Guidelines

Section I

Multiple-choice Answer Key

Question	Answer
1	C
2	A
3	D
4	A
5	C
6	C
7	B
8	D
9	B
10	B
11	B
12	A
13	B
14	C
15	D

Section II

Question 16 (a)

Criteria	Marks
<ul style="list-style-type: none"> • Outlines one method that the community services / healthcare worker can use to enhance professional development 	2
<ul style="list-style-type: none"> • Provides some relevant information 	1

Sample answer:

The community services / healthcare worker can use on-line forums to enhance professional development. On-line forums can include topics such as infection control, hand hygiene, detecting deterioration and fire evacuation.

Answers could include:

Reading journals, attending in-services / conferences, asking questions, seeking a mentor.

Question 16 (b)

Criteria	Marks
<ul style="list-style-type: none"> • Demonstrates understanding of the first aider's involvement in primary assessment 	2
<ul style="list-style-type: none"> • Provides some relevant information 	1

Sample answer:

The primary assessment by the first aider includes DRSABC and checks if the casualty is conscious.

If conscious, ask them what happened / where it hurts; check signs and symptoms of life-threatening injuries and decide treatment approach.

If unconscious, assess for DRSABCD; place casualty in recovery position when appropriate.

Answers could include:

Try to obtain a history either from the casualty or a bystander.

Question 17 (a)

Criteria	Marks
<ul style="list-style-type: none"> Describes the first aid management for an adult experiencing hypoglycaemia 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

The first aid management initially is to call for help and assess the casualty.

If the casualty is conscious, a sugary drink or lolly is given to the casualty.

Monitor the casualty for improvement and give a drink that is more sugary if there is no improvement after 10 minutes.

Answers could include:

If possible, ask the casualty if they are carrying any lollies.

If the casualty is unconscious, place them in the recovery position and follow DRSABC.

When recovered, provide a snack (milk, bread, fruit) and reassurance.

Question 17 (b)

Criteria	Marks
<ul style="list-style-type: none"> Describes how the community services / healthcare worker can demonstrate respect to colleagues 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

The community services / healthcare worker demonstrates respect by their positive body language and using a polite and non-threatening tone of voice when communicating with a colleague. The healthcare worker can show respect to colleagues by actively listening to them and making appropriate gestures to show they understand what is being communicated.

Answers could include:

The community services / healthcare worker can demonstrate they respect their colleague's culture and preferences by participating in cultural events, such as Easter, Ramadan etc.

The community services / healthcare worker demonstrates respect to colleagues with positive body language such as maintaining eye contact, effective team work (doing their own job well and meeting deadlines).

Question 17 (c)

Criteria	Marks
<ul style="list-style-type: none"> Provides a sound explanation of an ethical issue related to the use of social media in the healthcare context 	3
<ul style="list-style-type: none"> Provides basic information about an ethical issue related to the use of social media in the healthcare context 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

An ethical issue that can arise in relation to social media in the healthcare context could occur when a worker posts client information on social media without their consent, informing other people they are in hospital.

This is a breach of confidentiality and privacy because the health professional has not behaved in an ethical manner. Serious ethical issues can result in disciplinary action.

Answers could include:

Can compromise patient safety.

Social media is a public platform and when client information, treatment, hospital stay etc is posted on social media without consent then a breach has occurred. The client may not want people to know about their hospital stay or treatment but it can't be avoided once it is posted onto a public forum. Their privacy is compromised and could affect relationships as well as their safety and welfare.

Question 18 (a)

Criteria	Marks
<ul style="list-style-type: none"> Outlines the importance of mandatory reporting 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

Mandatory reporting is important because it is a legal requirement. Once an incident such as abuse is reported, it can then be formally investigated so that further occurrences are prevented and people who experience abuse can be provided with assistance.

Answers could include:

It keeps the client safe and maintains privacy and confidentiality.

Question 18 (b)

Criteria	Marks
<ul style="list-style-type: none"> • Demonstrates a comprehensive understanding of the infection control measures when caring for a client with gastroenteritis 	4
<ul style="list-style-type: none"> • Demonstrates a sound understanding of the infection control measures when caring for a client with gastroenteritis 	3
<ul style="list-style-type: none"> • Demonstrates a basic understanding of the infection control measures and/or issues related to gastroenteritis 	2
<ul style="list-style-type: none"> • Demonstrates some understanding of infection control measures 	1

Sample answer:

Gastroenteritis is spread by direct contact with an infected person and requires precautions that are used in addition to standard precautions. These include:

- Confining the infected person to a single room
- Additional surface cleaning
- Single use of all equipment
- The disposal of all PPE in the room of the infected person
- Requiring visitors to follow the same precautions as staff.

Answers could include:

Visitors and contractors may be prevented from entering a facility, the facility may be in 'lockdown'.

Question 19

Criteria	Marks
• Demonstrates a comprehensive understanding of the responsibilities of the employer in relation to EEO	4
• Demonstrates a sound understanding of the responsibilities of the employer in relation to EEO	3
• Demonstrates a basic understanding of the responsibilities of the employer in relation to EEO	2
• Provides some understanding of EEO	1

Sample answer:

EEO is a legal (legislation) principle that everyone is treated equally regardless of race, religious beliefs, age or gender and everyone has access to the same opportunities and advantages.

The responsibilities of employers in relation to EEO include providing a safe environment for employees to enable safer patient care; providing specific equipment such as personal protective equipment, safe drinking water and clean workplace that all employees have equal access to.

The workplace must be free from discrimination, harassment and abuse.

Answers could include:

- Upholding NSW Health core values
- The employer must ensure employees can satisfy working commitments within the healthcare context
- Employers must pay their employees fairly with no discrimination in payments
- Employers recruit to positions and select on merit, without discrimination due to race, gender, religion etc and any adjustments for employees who have a disability are made accordingly
- Employers must not favour any specific group of individuals
- Flexible working conditions can be offered by employers.

Question 20 (a)

Criteria	Marks
• Names both components correctly	2
• Names one component correctly	1

Sample answer:

X = Aorta

Y = Superior Vena Cava.

Question 20 (b)

Criteria	Marks
• Provides a sound description of the function of the cardiovascular system	3
• Provides a basic description of the function of the cardiovascular system	2
• Provides some relevant information	1

Sample answer:

The function of the cardiovascular system is to maintain blood flow to all parts of the body.

Blood travels through the blood vessels called arteries, capillaries and veins. Arteries carry oxygenated blood away from the heart; capillaries transport oxygen and nutrients to and from the cells; veins return blood back to the heart.

Answers could include:

The heartbeat has two phases – one is when the heart is resting and the heart chambers fill with blood (diastole).

The second phase is when the heart contracts and blood is pumped through the blood vessels (systole).

The heart has its own electrical system that stimulates the heart to contract. The electrical signal from the Sino-atrial node is like the heart's pacemaker and this electrical signal spreads through the heart causing it to contract and beat.

Question 20 (c)

Criteria	Marks
<ul style="list-style-type: none"> Provides a comprehensive description of the signs and symptoms associated with cardiovascular disease 	4
<ul style="list-style-type: none"> Provides a sound description of the signs and symptoms associated with cardiovascular disease 	3
<ul style="list-style-type: none"> Provides some description of the signs and/or symptoms associated with cardiovascular disease 	2
<ul style="list-style-type: none"> Provides limited information on sign and/or symptoms 	1

Sample answer:

The signs and symptoms of cardiovascular system disease depend on whether the disorder affects the heart, the blood vessels or the blood. Signs and symptoms include:

- Chest pain occurs due to lack of blood supply to the heart muscle that is caused by blockages in the coronary blood vessel(s).
- Dyspnoea (shortness of breath or difficulty breathing) occurs because the cardiac muscle is not pumping effectively enough to meet the body's need for oxygen.
- Abnormal heartbeat (palpitations) may be due to a problem with the conduction system of the heart.
- Cyanosis (bluish colour to the skin) occurs due to low oxygen saturation.

Answers could include:

- Cough – caused by accumulation of fluid in the lungs
- Fatigue – relates to inadequate blood flow to the brain and muscles
- Faintness – occurs due to lack of oxygen to the brain
- Oedema – is accumulation of fluid in the tissues and occurs due to reduced cardiac output
- Cramping – occurs due to atherosclerosis, a blockage in the arteries of the leg due to build up of plaque
- Pale, cold extremities – impaired blood flow to the limbs
- Bruising – in the absence of injury, bruising is due to a blood disorder.

Section III

Question 21

Criteria	Marks
<ul style="list-style-type: none"> Provides a comprehensive explanation of how the healthcare team can support and provide care for marginalised groups within the healthcare system Provides a logical and cohesive response that includes relevant industry terminology and workplace examples 	13–15
<ul style="list-style-type: none"> Provides a detailed explanation of how the healthcare team can support and provide care for marginalised groups within the healthcare system Provides a logical response that includes some relevant industry terminology and/or workplace examples 	10–12
<ul style="list-style-type: none"> Provides a sound explanation of how the healthcare team can support and/or provide care for marginalised groups within the healthcare system Provides a response with some appropriate terminology and/or workplace examples 	7–9
<ul style="list-style-type: none"> Provides a basic description of how the healthcare team can support and/or provide care for marginalised groups within the healthcare system 	4–6
<ul style="list-style-type: none"> Provides some relevant information 	1–3

Sample answer:

Marginalised groups can include people from groups such as LGBTI+, sexual orientation, gender, religion, race, cultural groups, ethnic and minority community groups. People with mental health issues, any disability or drug and alcohol dependence can also be included in marginalised groups.

Community services / healthcare workers must uphold the NSW Health CORE values when dealing or caring for any individual from a marginalised group, with a non-judgemental attitude while avoiding stereotypical behaviour. Healthcare workers also sign the Code of Conduct when they are employed; community services workers can refer to the Charter of Aged Care Rights, Aged Care Quality and Safety Commission and also the Aged Care Quality Standards. For example, a client with mental health issues is cared for with the same respect as other clients, without discrimination and free from bias, irrespective of how we might feel or think about mental illness.

The community services / healthcare workers and team consists of nurses, doctors, allied health professionals and administration staff who work together to provide the best possible care for all individuals. Every client interaction should be sincere in how we communicate and care for the clients. This can also include providing cultural safety with optimum health outcomes, as well as understanding the client’s culture, which can be gained through training and asking appropriate questions. For example, an Aboriginal client will have access to the Aboriginal Liaison Officer and relevant community groups. Healthcare workers will also benefit from training programs such as Respecting the Difference.

Community services / healthcare workers must also examine their own values and attitudes regarding people of different groups to enable non-judgemental care while in the facility. For example, a same-sex couple who want to share a room in an aged care facility; or a prisoner receiving treatment in the hospital – these individuals have the right to optimal healthcare regardless of their situation.

Community services / healthcare workers can examine their own attitudes and values through reflective supervision which will enable the worker to see perspectives from another person's position and make changes if they come across the same situation again.

Community services / healthcare workers can receive training on communication strategies to provide accurate information that is culturally appropriate, inclusive and accessible to all groups. For example, a client from a Non-English Speaking Background may need an interpreter to assist with signing a consent form; using picture cards for deaf clients; using translated brochures in various languages. Family interpreters should be avoided due to possible bias or not giving the full explanation to their sick relative.

Clients with a disability will require access to appropriate resources and referral agencies, such as social workers or occupational therapists and healthcare workers should be aware of these resources or know where to access the information.

Answers could include:

Healthcare team	Includes support workers, AINs, nurses, doctors and other allied health professionals working together	
Training of staff	Training staff (support workers, AINs, nurses, doctors and other health professionals) in cultural safety How: training necessary to enable optimal care for marginalised population	Cultural awareness
Reflection on practice	Examine own values and attitudes to people from different groups How: self-reflection	
Workplace policies and procedures	Code of Conduct CORE values Common Care Standards Charter of Aged Care Rights	
Legal rights/Anti-discrimination	All clients treated equally, non-judgementally Awareness of EEO, Freedom of Information, Anti-discrimination Act	Discrimination against sexual preferences, religion, race, gender Socioeconomic
Attitudes towards marginalised groups	Inclusion / non-inclusion / exclusion; cultural awareness, cultural safety and competence How: avoid stereotypical behaviour; provide cultural safety for clients; optimal healthcare provided to enhance positive health outcomes Being sincere in interactions with clients	Sexual orientation Gender LGBTQI... Cultural groups, ethnic / minority groups Race, religion, atheism Disability Mental Health Alcohol and other drugs

Language barriers	<p>Interpreters</p> <p>Information /brochures/patient leaflets</p> <p>Enhance communication; provide accurate information which is culturally appropriate, accurate and accessible; informed consent</p>	<p>Culture</p> <p>Deaf / blindness – braille</p> <p>Printed material – languages</p> <p>Audio books</p> <p>Use of family as interpreters?</p>
Cultural background	<p>Understanding of the client’s culture</p> <p>Community Liaison Officers, Aboriginal Liaison Officer, etc</p> <p>Interpreters</p>	<p>As above</p> <p>Include Aboriginal and Torres Strait Islander peoples</p> <p>Multicultural Australia</p>
Equal access to health services	<p>Access to information</p>	<p>Social principles of equity and justice</p>
Disability	<p>Awareness of appropriate resources, who to refer the client to (eg social work, OT etc)</p>	<p>As above</p> <p>Link to resources / referral</p>

Section IV

Question 22 (a)

Criteria	Marks
<ul style="list-style-type: none"> Provides sound description of the impact of declining cognitive ability on independence 	3
<ul style="list-style-type: none"> Provides a basic description of the impact of declining cognitive ability on independence 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

Declining cognitive ability includes the loss of the ability to do familiar tasks and problems with judgement. This makes routine tasks such as personal care, toileting and feeding herself difficult for Dorothy, making her more reliant on care staff thereby reducing her independence and affecting her wellbeing.

Answers could include:

- Problems with judgement
- Difficulty with language
- Confusion about time and place
- Misplacing items
- Apathy and withdrawal.

Question 22 (b)

Criteria	Marks
• Provides a comprehensive description of appropriate communication strategies that can be used by a personal support worker	5
• Provides a sound description of appropriate communication strategies that can be used by a personal support worker	4
• Provides a basic description of appropriate communication strategies that can be used by a personal support worker	3
• Provides an outline of communication strategies that can be used by a personal support worker	2
• Provides some relevant information	1

Sample answer:

Communicating with Dorothy can be difficult due to memory loss and a problem finding words. It is therefore important for the personal support worker to communicate warmth and caring through positive non-verbal language, kindness and patience. It is also necessary to use short sentences and to ask one question at a time to avoid confusing Dorothy and to avoid shouting and confrontation as this may increase the instance of behaviours of concern, such as anxiety, agitation and wandering.

Answers could include:

- Keep the tone of voice low
- Provide a calm, secure environment
- Use Dorothy's name
- Be familiar with Dorothy's social history so conversation can be relevant (as much as possible)
- Respond to Dorothy's feelings rather than her words
- Respond to non-verbal cues rather than words.

Question 22 (c)

Criteria	Marks
<ul style="list-style-type: none"> Provides a comprehensive explanation of how person-centred care can promote Dorothy's sense of wellbeing Provides a logical and cohesive response Supports answer with relevant industry terminology and workplace examples 	10–12
<ul style="list-style-type: none"> Provides a sound explanation of how person-centred care can promote Dorothy's sense of wellbeing Supports answer with some relevant workplace examples and industry terminology 	7–9
<ul style="list-style-type: none"> Demonstrates a basic understanding of how person-centred care can promote Dorothy's sense of wellbeing Includes a relevant workplace example and/or some industry terminology 	4–6
<ul style="list-style-type: none"> Provides some relevant information about person-centred care and/or Dorothy's sense of wellbeing 	1–3

Sample answer:

Person-centred care takes into account the person's psychosocial needs and acknowledges who they are, that is, their 'personhood', facilitating trust, respect and positive relationships in a supportive environment.

Person-centred care promotes a sense of wellbeing through the application of the following (VIPS) principles:

- Valuing the person and upholding/promoting their basic human rights
- (Wellbeing example: maintain Dorothy's privacy during personal care; being patient with repetitive questions)
- Treating the person as an individual, taking into account their unique history, personality and experiences
- (Wellbeing example: being respectful of Dorothy's cultural background; incorporating conversations about her life into daily interactions; re-establishing previous roles)
- Looking at the world through their eyes/from their perspective
- (Wellbeing example: being aware of signs that Dorothy is tired and/or hungry; acknowledging Dorothy may be confused in an unfamiliar environment)
- Providing a social environment that supports their psychological needs and compensates for their limitations, while promoting their autonomy
- (Wellbeing example: ensuring Dorothy has access to familiar objects in her room and access to past interests such as listening to music and that established routines are maintained – such as personal care preferences and meal times).

Answers can include:

Person-centred care emphasises quality care that aims to enhance quality of life. To ensure the person's quality of life, it is essential to take into account their psychosocial needs, as well as their physical needs. To meet a person's psychosocial needs, it is important they maintain a sense of who they are. Person-centred care encourages the personal support worker to consider and evaluate how the person with dementia is experiencing their illness and their support, enhancing their wellbeing.

Question 23 (a)

Criteria	Marks
• Provides a sound outline of the role of three allied health professionals involved in Mike's initial rehabilitation while he is in hospital	3
• Provides a basic outline of the role of some allied health professionals involved in Mike's initial rehabilitation while he is in hospital	2
• Provides some relevant information	1

Sample answer:

Three members of the allied health team that can be involved in Mike's rehabilitation include physiotherapists, occupational therapists and speech pathologists. Physiotherapists implement therapy designed to increase strength and mobility. Occupational therapists assist clients to achieve independence in their activities of daily living and assess clients' homes for any required modifications. Speech pathologists diagnose, assess and treat communication problems.

Answers can include:

- Case manager / could be medical officer – develops comprehensive needs assessment
- Social worker – liaise with existing community groups, counselling, and assisting families.

Question 23 (b)

Criteria	Marks
• Provides a comprehensive description of the appropriate communication strategies used by an allied health worker	5
• Provides a sound description of the appropriate communication strategies used by an allied health worker	4
• Provides a basic description of the appropriate communication strategies used by an allied health worker	3
• Provides an outline of the communication strategies	2
• Provides some relevant information	1

Sample answer:

Communicating with Mike following a stroke can be difficult due to his slurred speech. Using Mike's name is very important so he feels respected in all communications. The allied health worker needs to communicate with Mike with warm and caring verbal and non-verbal language, maintaining effective eye contact and keeping a low tone of voice. Mike may be unable to answer questions promptly so patience is required while waiting for a response. This will also create a calm and secure environment.

Using short sentences in asking questions, or asking one question at a time will make it easier for Mike to hear and respond to questions and requests. It is important not to rush Mike with an answer. Another strategy could be asking simple questions where Mike just replies with yes or no.

Answers could include:

- Avoid shouting, arguments, confrontations
- Respond to Mike's feelings
- Respond to non-verbal cues
- Being sensitive to Mike's visual and sensory difficulties
- Minimise environmental clutter and noise as too much visual or auditory stimulation could cause confusion for Mike (calm and quiet surroundings).

Question 23 (c)

Criteria	Marks
<ul style="list-style-type: none"> Provides a comprehensive explanation of how the allied health workers can use therapy sessions in promoting Mike's rehabilitation Provides a logical and cohesive response Supports answer with relevant industry terminology and workplace examples 	10–12
<ul style="list-style-type: none"> Provides a sound explanation of how allied health workers can use therapy sessions in promoting Mike's rehabilitation Supports answer with some relevant workplace examples and industry 	7–9
<ul style="list-style-type: none"> Demonstrates a basic understanding of allied health therapy session(s) and/or promoting Mike's rehabilitation Includes a relevant workplace example and/or some industry terminology 	4–6
<ul style="list-style-type: none"> Provides some relevant information about the allied health therapy session or some reference to Mike's rehabilitation 	1–3

Answers could include:

- ACAT assessment prior to discharge
- Referral to dietitian – assist with eating and drinking, may have to cut up meals, use of special cutlery, monitor intake
- Referral to counselling/social work
- Bladder and bowel care – regular toileting, use of continence aids
- Planning and booking next visit to the facility or attendance of allied health worker in the home
- Skin care
 - avoid friction, shearing or pulling the skin when moving patient
 - handle with care during transfers especially when there is limb weakness and loss of control of limbs
 - risk of pressure injury due to reduced mobility: carry out risk assessment to identify degree of risk, implement strategies to prevent skin breakdown, strategies to prevent existing pressure sores from become worse or recurring. Strategies may include change position 2 hourly, protect skin with padding or pressure-relieving devices
 - place affected arm or leg in garment first during dressing to avoid skin tears
- The use of walking frames or lifters to assist with mobility
- WHS appropriate manual handling techniques for safety of self and client
- Communication of treatment goals and preparation of the client
- Referrals to speech pathologist, occupational therapist and physiotherapist
- Importance of maintaining dignity, comfort, confidentiality, privacy and safety
- Record keeping/documentation of care and progress in the medical records.

Question 24 (a)

Criteria	Marks
<ul style="list-style-type: none"> Provides a sound outline of the role of three multidisciplinary team members delivering care to Magda 	3
<ul style="list-style-type: none"> Provides a basic outline of the role of some multidisciplinary team members delivering care to Magda 	2
<ul style="list-style-type: none"> Provides some relevant information 	1

Sample answer:

Three members of the multidisciplinary team who can assist in the delivery of care and support for Magda include physiotherapists, registered nurses and speech pathologists. Physiotherapists implement therapy designed to increase strength and mobility. Registered nurses plan and implement care. Speech pathologists diagnose, assess and treat communication problems.

Answers could include:

- Occupational therapists – assist client to achieve ADLs, assess home for any modifications required
- Social worker – liaise with existing community groups, counselling, assisting families
- Interpreter – consider if there are any language barriers, consent required etc.

Question 24 (b)

Criteria	Marks
• Provides a comprehensive description of appropriate communication strategies used by a community services / healthcare worker	5
• Provides a sound description of appropriate communication strategies used by a community services / healthcare worker	4
• Provides a basic description of appropriate communication strategies used by a community services / healthcare worker	3
• Provides an outline of communication strategies	2
• Provides some relevant information	1

Sample answer:

Communicating with Magda can be difficult due to slurred speech and having English as a second language. It is therefore important for the health worker to communicate warmth and caring through positive non-verbal language, kindness and patience. It is also necessary to use short sentences and to ask one question at a time to enable Magda to answer using non-verbal language or simple sentences. Creating a calm environment will also help communication, as distractions will be minimised. It is also necessary to acknowledge cultural and linguistic differences between Magda and members of the team.

Answers could include:

- Use eye contact and attentive behaviours
- Keep the tone of voice low
- Avoid shouting, arguments and confrontations
- Ask one question at a time
- Provide a calm, secure environment
- Use Magda's name so that she feels respected
- Respond to Magda's feelings rather than her words
- Respond to non-verbal cues rather than words.

Question 24 (c)

Criteria	Marks
<ul style="list-style-type: none"> Provides a comprehensive explanation of the physical, social and emotional support from the community services / healthcare worker Provides a logical and cohesive response Supports answer with relevant industry terminology and workplace examples 	10–12
<ul style="list-style-type: none"> Provides a sound explanation of the physical, social and/or emotional support from the community services / healthcare worker Supports answer with some relevant workplace examples and industry terminology 	7–9
<ul style="list-style-type: none"> Demonstrates a basic understanding of the physical and/or social and/or emotional support from the community services / healthcare worker Includes a relevant workplace example and/or industry terminology 	4–6
<ul style="list-style-type: none"> Provides some relevant information about the support from the community services / healthcare worker 	1–3

Answers could include:

Physical support:

- Positioning the patient appropriately – use of pillows, splints, braces, sit upright for meals
- Patient safety – use of mobility aids, falls prevention strategies eg non slip socks and high falls risk signage to alert staff, pressure injury prevention strategies
- Communication boards
- Diet and nutrition – assist with eating and drinking, may have to cut up meals, use of special cutlery, monitor intake
- Bladder and bowel care – regular toileting, use of continence aids
- Skin care –
 - avoid friction, shearing or pulling the skin when moving patient
 - handle with care during transfers especially when there is limb weakness and loss of control of limb
 - risk of pressure injury due to reduced mobility, carry out risk assessment to identify degree of risk, implement strategies to prevent skin breakdown, strategies to prevent existing pressure sores from become worse or recurring. Strategies may include change position two hourly, protect skin with padding or pressure-relieving devices
 - place affected arm or leg in garment first during dressing to avoid skin tears
 - ensure water temperature is appropriate as patient might not be able to detect extremely hot temperature due to sensory deficit.

Social support:

Social worker referrals may assist with discharge planning, linking Magda to other support services.

- Encourage social interactions (phone calls)
- Support groups
- Family support
- Cultural support groups, being aware of barriers to communicating in CALD.

Emotional support:

- Empathy and understanding that her reduced ability to perform ADLs is due to circumstances outside of her control
- Acknowledge grief associated with loss of control and ability to make decisions
- Allow time for Magda to adjust to the changes
- Provide a positive environment
- Encourage social interactions (phone calls and visiting from husband if he wants)
- Acknowledge Magda may feel frustrated /angry due to loss of independence and reduced functionality
- Maintaining client independence can also assist with her recovery.
- Respect client's right to make decisions and use her own abilities and skills whenever possible
- Assess the level of support client may need as it varies for each individual. Magda may need assistance with preparation only, or she may need prompts to perform ADLs, or may need full assistance
- Explain clearly how much support you will be providing during the procedure so that the client knows how much support she can rely on
- Patiently allow time to complete tasks and not rush client
- Dignity of risk – being mindful of Magda's safety while encouraging her to be independent.

2021 HSC Human Services Mapping Grid

Section I

Question	Marks	HSC content – focus area
1	1	Healthy body systems — major body systems and associated components – page 23
2	1	Industry context — sources of information – page 26
3	1	Safety — infection prevention and control in the community services / health workplace – page 35
4	1	Work — communication – page 41
5	1	Healthy body systems — major body systems and associated components – page 23
6	1	Industry context — legal and ethical issues (work role boundaries) – page 28
7	1	Safety — incidents, accidents and emergencies – page 37
8	1	Work — communication – page 41
9	1	Healthy body systems — major body systems and associated components – page 23
10	1	Industry context — employment – page 28
11	1	Safety — safe work procedures and practices – page 34
12	1	Work — work practices – page 42
13	1	Healthy body systems — major body systems and associated components – page 23
14	1	Industry context — working in the industry – page 27
15	1	Safety — incidents, accidents and emergencies – page 37

Section II

Question	Marks	HSC content – focus area
16 (a)	2	Industry context — sources of information – page 26
16 (b)	2	Safety — incidents, accidents and emergencies – page 36–37
17 (a)	2	Safety — incidents, accidents and emergencies – page 36–37
17 (b)	2	Work — diversity – page 43
17 (c)	3	Work — recording and reporting – page 42
18 (a)	2	Industry context — legal and ethical issues – page 28; work reporting – page 42
18 (b)	4	Safety — infection prevention and control – page 35–36
19	4	Industry context — employment – page 27
20 (a)	2	Healthy body systems — major body systems and associated components, (diagram) – page 23; terminology – page 24
20 (b)	3	Healthy body systems — major body systems and associated components – page 23
20 (c)	4	Healthy body systems — body systems and health – page 24

Section III

Question	Marks	HSC content – focus area
21	15	Work — diversity – page 43

Section IV

Question	Marks	HSC content – focus area
22 (a)	3	Ageing, independence and wellbeing — client needs – pages 46–47
22 (b)	5	Ageing, independence and wellbeing – page 47
22 (c)	12	Ageing, independence and wellbeing — client independence – page 48; wellbeing – pages 46–47
23 (a)	3	Allied health — Allied health services – page 51
23 (b)	5	Allied health — Allied health therapies – page 51
23 (c)	12	Allied health — delivering care and support – pages 52–53
24 (a)	3	Nursing assistance in acute care – page 55
24 (b)	5	Nursing assistance in acute care — delivery of care and support – page 55
24 (c)	12	Nursing assistance in acute care — delivery of care and support – pages 55–56