

# 2022 HSC Human Services Marking Guidelines

## Section I

### Multiple-choice Answer Key

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

## Section II

### Question 16 (a)

Criteria	Marks
<ul style="list-style-type: none"> <li>• Outlines two ways that the community services/healthcare worker can communicate effectively with a client who has a hearing disability</li> </ul>	2
<ul style="list-style-type: none"> <li>• Provides some relevant information</li> </ul>	1

**Sample answer:**

The healthcare worker can communicate effectively through positive body language such as facing the client and making eye contact while checking for listening and understanding.

If the client has some hearing, the healthcare worker can attract attention first (waving a hand), speak on the client's good side (hearing side) and ensure that their mouth is visible for the client to be able to lip-read.

**Answers could include:**

- Using pictures, gestures and diagrams to clarify
- Don't exaggerate mouth movements because it makes lip-reading more difficult
- An increase in speaking volume may be required, but there is no need to shout
- Use short sentences and speak at a normal pace (not too fast or slow)
- Ensure that the client's hearing aids are working.

### Question 16 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>• Demonstrates understanding of how the skin helps regulate the body's fluid and electrolyte balance</li> </ul>	2
<ul style="list-style-type: none"> <li>• Provides some relevant information</li> </ul>	1

**Sample answer:**

The skin regulates fluid and electrolyte balance by eliminating water and small amounts of salts. For example, during exercise small amounts of salts are eliminated in sweat through the sweat glands.

### Question 16 (c)

Criteria	Marks
• Outlines the characteristics of an informed consent	2
• Provides some relevant information	1

**Sample answer:**

A person gives consent / makes a decision based on the required information they have been provided with and they understand the procedure, risks and alternatives.

**Answers could include:**

Consent is 'informed' when the person voluntarily agrees to the treatment or procedure without duress after an explanation.

### Question 17 (a)

Criteria	Marks
• Outlines two infection prevention strategies a community services/healthcare worker can implement, including workplace examples	3
• Demonstrates some understanding of prevention strategies a community services/healthcare worker can implement	2
• Provides some relevant information	1

**Sample answer:**

Applying infection prevention strategies in the clinical setting includes correct handwashing techniques (eg five moments) and correct use of PPE taking into account standard and additional precautions.

When using reusable equipment, ensure it is cleaned appropriately between each use. If using disposable equipment (once only use), ensure it is disposed of correctly after use.

**Answers could include:**

- Attend training and education sessions provided by the employer
- Report hazardous behaviour of fellow workers such as not following correct infection control protocols
- Ensure immunisation status is current
- Avoid wearing jewellery
- Ensure correct procedure when transporting specimens
- Use appropriate infection control and prevention specific signage
- Identify and use clean and contaminated zones appropriately
- Use a spill kit according to policies and procedures.

## Question 17 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>Demonstrates comprehensive understanding of strategies that could be used to promote cultural competence in the workplace, including workplace examples</li> </ul>	4
<ul style="list-style-type: none"> <li>Demonstrates sound understanding of strategies that could be used to promote cultural competence in the workplace, including a workplace example(s)</li> </ul>	3
<ul style="list-style-type: none"> <li>Demonstrates some understanding of cultural competence</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

### **Sample answer:**

Cultural competence is about the ability of the healthcare setting and workers to respond to situations of cultural diversity. It requires people to interact positively in many different cultural contexts by showing respect eg continuing to learn about other cultures and backgrounds, and also by encouraging the person to feel confident in expressing their cultural needs eg providing interpreter services.

Examples can include but are not limited to:

- Valuing diversity by having a culturally diverse workplace
- Being aware that everyone has their own cultural views and that people may greet each other differently
- Considering the role of culture in everyday interaction and the way that different values can lead to misunderstanding
- Adapting services to different needs by celebrating cultural events
- Provide female care staff as required
- Offer menu options that reflect different preferences, based on cultural background.

### Question 18 (a)

Criteria	Marks
<ul style="list-style-type: none"> <li>Identifies four respiratory changes a client may experience that should be reported to the supervisor</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Answers could include:**

- Red and runny nose
- Abnormal sneezing
- Dyspnoea
- Nasal flaring
- Cough with or without sputum
- Sharp chest pain, aching or tightness
- Changes in the client's colour
- Tachypnoea (rapid breathing)
- Reduced oxygen saturation
- Apnoea (stopped breathing)
- Noisy respirations such as stridor, wheeze, unable to talk
- Gasping respirations
- Increased work of breathing.

### Question 18 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>Outlines an appropriate action to address each hazard</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

<i>Hazard</i>	<i>Action to address hazard</i>
Blood	<b>Wearing PPE such as gloves</b>
Leaking water	<b>Put sign on floor to warn other people until the spill is cleaned up</b>

**Answers could include:**

Clean water spill, tell supervisor.

### Question 19 (a)

Criteria	Marks
<ul style="list-style-type: none"> <li>• Outlines how personal values of the community services/healthcare worker can affect client care and service delivery</li> </ul>	2
<ul style="list-style-type: none"> <li>• Provides some relevant information</li> </ul>	1

**Sample answer:**

Making decisions regarding lifestyle choices can affect client care. For example, the healthcare worker may have had poor relationship experiences/divorce/abuse etc and this may be reflected in the care of clients if they find themselves in similar situations or they can sympathise with the client, knowing what they have been through. Also, healthcare workers should be aware of maintaining professional boundaries and respect values that are different to their own.

**Answers could include:**

- Educational choices – wellbeing
- Career choices
- Family planning – psychological wellbeing
- Relationships/social networks/family unit
- Healthy lifestyle.

### Question 19 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>• Outlines TWO healthy lifestyle choices that the community services/healthcare worker can promote to a client with diabetes</li> </ul>	2
<ul style="list-style-type: none"> <li>• Provides some relevant information</li> </ul>	1

**Sample answer:**

The healthcare worker can promote a healthy diet with the five food groups which includes consuming low GI food and reducing sugar intake (healthy lifestyle).

Monitoring BSL and maintaining a healthy range (4–8), to prevent hypoglycaemic episodes (drink or lolly when needed) and encouraging self awareness about the risks and complications of diabetes.

**Answers could include:**

- Reduced alcohol intake
- Compliance with medications
- Regular exercise to maintain a healthy body weight and BMI (Body Mass Index)
- Skin care especially when there is injury/skin breakdown; regular podiatry consultations.

### Question 19 (c)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a sound explanation of strategies to minimise potential risk to the worker and the client</li> </ul>	3
<ul style="list-style-type: none"> <li>Demonstrates some understanding of strategies to minimise potential risk to the worker and/or the client</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Strategies that the healthcare worker can use to minimise risk of harm include firstly to do an assessment of the situation. For example, two people may be required to assist with movement of this client to prevent manual handling injuries.

If an incorrectly sized wheelchair is used for this client, there can be injury or harm to the client. A bariatric wheelchair should be used. If the wheelchair is incorrectly used as well, this can be a risk to both the client and healthcare worker.

**Answers could include:**

- Risk to staff member include manual handling risks/injury due to lifting, twisting or incorrectly positioning feet to transfer the client to the wheelchair
- Ensure brakes are on while client is getting into the wheelchair to prevent falls.

### Question 20

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive explanation of the relationship between the community services/healthcare worker’s duty of care and allowing for Eddie’s dignity of risk</li> </ul>	6
<ul style="list-style-type: none"> <li>Provides a sound explanation of the relationship between the community services/healthcare worker’s duty of care and allowing for Eddie’s dignity of risk</li> </ul>	4–5
<ul style="list-style-type: none"> <li>Demonstrates some understanding of the community services/healthcare worker’s duty of care and/or allowing for Eddie’s dignity of risk</li> </ul>	2–3
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Duty of care is an obligation to provide care of a particular standard to a person. In this scenario, where Eddie refuses the care, the worker’s duty of care is related to the information provided to Eddie. Eddie has the right to self-determination and choice, ie he has the right to refuse treatment. In achieving a balance between a worker’s duty of care to provide pressure injury management and Eddie’s dignity of risk, it is important to ask: what is the foreseeable harm of not providing care? How serious are the risks in that decision? It is also necessary to provide Eddie with all relevant information and to provide him alternatives to reduce harm. In doing so, the worker is empowering Eddie to take control and responsibility for this risky situation.

## Section III

### Question 21

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive analysis of the consequences for the client, the community services/healthcare worker and the health facility when clinical information is not reported accurately and promptly</li> <li>Provides a logical and cohesive response</li> <li>Communicates ideas and information using relevant workplace examples and industry terminology</li> </ul>	13–15
<ul style="list-style-type: none"> <li>Provides a detailed analysis of the consequences for the client, the community services/healthcare worker and the health facility when clinical information is not reported accurately and promptly</li> <li>Provides a logical response that includes some relevant industry terminology and/or workplace examples</li> </ul>	10–12
<ul style="list-style-type: none"> <li>Demonstrates some understanding of the consequences for the client, the community services/healthcare worker and the health facility when clinical information is not reported accurately and promptly</li> <li>Provides a response with some appropriate terminology and/or workplace examples</li> </ul>	7–9
<ul style="list-style-type: none"> <li>Provides a description of the consequences for the client and/or the community services/healthcare worker and/or the health facility when clinical information is not reported accurately and/or in a timely manner</li> </ul>	4–6
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1–3

**Answers could include:**

When clinical information is not reported accurately and promptly, it has consequences for the client, the healthcare worker and the health facility.

The consequences for the patient include the following:

If accurate information is not reported then any clinical changes in the patient's condition may go undetected and may not be escalated for review by the appropriate team, which could lead to incidents or patient becoming critical. If accurate information is not reported, assumptions may be made in the care provided. For example, the nursing care plan may not get adjusted to suit the patient's current situation and staff coming on the next shift may not carry out the new orders for treatment.

If accurate information is not reported, referrals to other MDT may not be made and inappropriate and/or inadequate care may be provided.

If clinical information is not reported in a timely manner, it could delay the medical attention and care that the patient may need, which may lead to further deterioration in the patient's condition.

For example, if abnormal observations for the patient are not escalated in a timely manner, then the patient may suffer a deterioration which can lead to an admission to the ICU or even require active resuscitation.

The consequence for the community services/healthcare worker of not reporting accurately is a breach of their duty of care. For example, if the client's observations were not in the normal range and an adverse event occurs, the healthcare worker will be investigated along with other team members which could lead to further training or even disciplinary action. If the

investigation showed there was negligence, then the healthcare worker may receive a warning or even be dismissed from their employment.

The consequences for the health facility of not reporting the clinical information would result in financial impact as well as a negative impact on the organisation's reputation and authority to practise and possibly loss of accreditation. Also, there could be legal implications which result in the organisation facing litigation.

## Section IV

### Question 22 (a)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a sound description of what could have helped to prevent developing osteoporosis</li> </ul>	3
<ul style="list-style-type: none"> <li>Provides a basic description of what could have helped to prevent developing osteoporosis</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Ranjit could have helped prevent developing osteoporosis by doing regular weight bearing exercises as well as by avoiding immobility, smoking, alcohol and certain drugs that increase the severity of osteoporosis.

By eating a healthy, balanced diet, keeping well-hydrated and taking dietary supplements such as calcium, Ranjit could have helped prevent osteoporosis.

### Question 22 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive description of how the support worker can assist Ranjit with food and fluids</li> </ul>	5
<ul style="list-style-type: none"> <li>Provides a sound description of how the support worker can assist Ranjit with food and fluids</li> </ul>	4
<ul style="list-style-type: none"> <li>Provides a basic description of how the support worker can assist Ranjit with food and/or fluids</li> </ul>	3
<ul style="list-style-type: none"> <li>Provides an outline of how Ranjit can be assisted with food and fluids</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

In order to prevent Ranjit from coughing, gagging and choking during meals, the support worker should ensure Ranjit is in an upright position with his head tilted slightly forward. The support worker should ensure that Ranjit has correct diet and meal/fluid consistency to reflect his management plan. For example, thickened fluids level 3. He should be offered small amounts of food at a time. Ranjit should not be rushed and the support worker should allow sufficient time for Ranjit to swallow the food and fluids. The support worker should ensure food is swallowed entirely before offering more and observe Ranjit for coughing and choking, and report if that occurs.

## Question 22 (c)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive explanation of how a support worker can enhance Ranjit's emotional and psychological health</li> <li>Includes relevant workplace examples and industry terminology</li> </ul>	10–12
<ul style="list-style-type: none"> <li>Provides a sound explanation of how a support worker can enhance Ranjit's emotional and psychological health</li> <li>Includes some relevant workplace examples and industry terminology</li> </ul>	7–9
<ul style="list-style-type: none"> <li>Demonstrates some understanding of how a support worker can enhance Ranjit's emotional and psychological health</li> <li>Includes a relevant workplace example and/or some industry terminology</li> </ul>	4–6
<ul style="list-style-type: none"> <li>Demonstrates limited understanding of enhancing a sense of wellbeing</li> </ul>	2–3
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

### **Sample answer:**

Emotional health incorporates feelings of contentment and satisfaction with life. Good mental health is indicated by being emotionally balanced and having a good self-concept. Good mental health can enhance self-esteem, increasing wellbeing.

Ranjit's emotional and psychological health can be supported by using a variety of communication methods to convey to Ranjit that he is being listened to and understood. When providing personal care, Ranjit is shown respect by meeting his preferences as identified in his care plan and by providing him privacy. Support workers can also validate Ranjit's perspective using person-centred communication, including making him feel valued, understanding his perspective and creating a supportive environment.

Ranjit's emotional and psychological health can be enhanced by understanding what activities and hobbies Ranjit enjoyed and providing the opportunity for him to remain engaged in those activities. This will also provide Ranjit an opportunity to engage socially. The support worker should provide Ranjit opportunities to be independent through the use of assistive devices such as an electric wheelchair and aids to assist him to eat independently.

Ranjit's wellbeing can be enhanced by employing validation therapy and reminiscence. The support worker may read the newspaper to Ranjit and provide him the opportunity to listen to the radio and watch TV, reflecting his individual preferences.

**Question 23 (a)**

Criteria	Marks
<ul style="list-style-type: none"> <li>Describes a disorder of the central nervous system which may contribute to a decreasing level of mobility in an elderly client</li> </ul>	3
<ul style="list-style-type: none"> <li>Outlines a disorder of the central nervous system which may contribute to a decreasing level of mobility in an elderly client</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Central nervous system disorders contribute to decreasing mobility.

Cerebral Vascular Accident (CVA) or stroke occurs when blood flow to a part of the brain is interrupted either by a blockage or a rupture of a blood vessel. This can lead to weakness or paralysis as well as decreased balance and coordination, which can result in reduced mobility or an unstable gait resulting in a fall.

**Answers could include:**

- Alzheimer's disease is a progressive mental deterioration and can occur due to generalised degeneration of the brain. This can cause instability, loss of balance and coordination when walking or moving, as people tend to shuffle when they walk, increasing the risk of falls. In advanced Alzheimer's disease chewing and swallowing abilities deteriorate increasing the risk of choking on food.
- Multiple Sclerosis is when the protective lining of the nerves that lies between the brain and the rest of the body has to fight with the body's immune system. It can cause communication problems, fatigue, depression and walking difficulties. In addition, Multiple Sclerosis causes an increasing numbness in the legs making it more likely that the client will not want to mobilise for fear of falling or not being able to determine where they are putting their feet.
- Parkinson's disease is caused by damage to the brain cells in the substantia nigra – an essential part of the brain. Symptoms include shaking, loss of automatic movements leading to a loss of balance, and the client's difficulty while walking in a straight line.
- Huntington's disease is a condition in which the nerve cells degenerate progressively over time. The disease affects brain functionality such as thinking and movement with uncontrolled movement of arm, leg, head and upper body. Clients can also experience anxiety and depression which may contribute to them decreasing their level of mobility.

**Question 23 (b)**

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive description of how an allied health worker can assist Agnes with two other physical problems due to immobility and poor oral intake</li> </ul>	5
<ul style="list-style-type: none"> <li>Provides a sound description of how an allied health worker can assist Agnes with two other physical problems due to immobility and poor oral intake</li> </ul>	4
<ul style="list-style-type: none"> <li>Provides a basic description of how an allied worker can assist Agnes with physical problem(s) due to immobility and/or poor oral intake</li> </ul>	3
<ul style="list-style-type: none"> <li>Provides an outline of how Agnes can be assisted with physical problem(s) due to immobility and/or oral intake</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Agnes may experience a number of physical problems due to her immobility and poor oral intake, resulting in an overall decline in her health.

One problem that Agnes could experience is a change in her skin integrity leading to pressure ulcers and subsequently open wounds developing with the possibility of infection that requires Agnes to receive an increased level of care. An allied health worker can support Agnes to improve circulation to the skin by assisting in her mobility by using mobility aids such as 2WW or 4WW; also supporting Agnes and encouraging her mobility efforts as well as assessing for falls risk. An allied health worker can also encourage Agnes with fluid intake which will hydrate the skin and support Agnes with nutritious food, or even assisting with feeding if that was needed. Nutrition is vital to build up body muscles which will lower risks of pressure injury.

In addition, Agnes is at risk of developing chest infections due to immobility which may result in hospitalisation leading to further decline in health. An allied health worker can assist Agnes by sitting her up in the bed during and after meals, and when she is sitting in the chair. An allied health worker can also encourage Agnes with deep breathing exercises and assist with chest physiotherapy if indicated.

**Answers could include:**

Agnes may experience impaired balance when standing with the added risk of falling. This could be due to reduced muscle mass from immobility or dehydration and subsequent hypotension. An allied health worker can support Agnes with mobility and support while standing to ensure she has a stable gait/balance, and assist her coordination in walking to the bathroom, for example.

### Question 23 (c)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive explanation of how the allied health worker can demonstrate support for Peter in both the hospital therapy sessions and planning for discharge</li> <li>Includes relevant workplace examples and industry terminology</li> </ul>	10–12
<ul style="list-style-type: none"> <li>Provides a sound explanation of how the allied health worker can demonstrate support for Peter in both the hospital therapy sessions and planning for discharge</li> <li>Includes some relevant workplace examples and industry terminology</li> </ul>	7–9
<ul style="list-style-type: none"> <li>Demonstrates some understanding of how the allied health worker can demonstrate support for Peter in the hospital therapy sessions and/or planning for discharge</li> <li>Includes a relevant workplace example and/or industry terminology</li> </ul>	4–6
<ul style="list-style-type: none"> <li>Demonstrates limited understanding of the allied health worker’s support for Peter</li> </ul>	2–3
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

Agnes lives with her son who is her main carer therefore it is important to collaborate with / involve him in the planning and delivery of her care.

Therapy session:

- The allied health worker needs to be open and honest with the son when he asks questions about Agnes’s condition. However, it is important that the allied health worker ascertains that Peter is the next of kin and obtains consent from Anges before sharing her health information with him.
- The allied health worker can demonstrate support by being available to Peter when he visits Agnes at the therapy session. The staff will inform him of the visiting hours so that he can plan his day and he can let Anges know when he will be visiting her. If not able to visit eg due to COVID restrictions, look at options for how the son can be involved in her care via the internet / technology.
- Collaborating with patients, carers and family members can ensure that essential baseline information about a patient’s condition is established so that deterioration, improvement and strategies for ongoing care can be identified. For example, Agnes’s son is likely to be the most accurate source of information about her usual capabilities, behaviours, preferences and medical history.
- Agnes may need to practise activities in the therapy session. An example of this is walking up and down stairs with a walking stick for stability; strength training exercises for the lower limbs and it could even include community or social interaction by assisting Agnes on the bus or transporting her by car to meet friends.
- The allied health worker should report any concerns the son may have to the supervising RN and document it in progress notes, so that meetings can be organised to facilitate open communication between him and the multidisciplinary team.

Preparing for discharge:

- The allied health worker can support the son by providing a referral for an Aged Care Assessment Team (ACAT)
- Allied health team – social worker to organise family conferences to discuss home care, residential care or respite

- Dietitian – for nutritional advice
- Speech pathologist to assess Agnes’s swallowing especially since she has decreased LOC. Physiotherapist for exercise to promote circulation and muscle strength
- Occupational Therapist to organise home environment modifications.

Peter had previously revealed that he had not coped well while caring for his mother at home. The allied health worker can develop a therapeutic relationship with Peter using effective communication and interpersonal skills such as listening, paraphrasing and answering any questions.

The allied health worker can provide basic training for Peter on the equipment that is used in therapy sessions and what will be required after discharge home. The equipment can include supportive devices such as walking frames or walking sticks, a sling to aid transfer from bed to chair, ADL equipment such as a cuff for the cutlery, toilet chairs and shower chairs. Peter can be learning how to use these and receive encouragement and feedback from the allied health worker. This will be good preparation for Peter to take his mother home after discharge and feel better equipped, physically and mentally, to cope with caring for his mother at home.

Refer the son to carer support groups and relevant websites where he can get information about his mother’s condition.

**Question 24 (a)**

Criteria	Marks
<ul style="list-style-type: none"> <li>Describes a disorder of the central nervous system which may contribute to an elderly client's inability to carry out activities of daily living</li> </ul>	3
<ul style="list-style-type: none"> <li>Outlines a disorder of the central nervous system which may contribute to an elderly client's inability to carry out activities of daily living</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

**Sample answer:**

One disorder of the central nervous system is Alzheimer's disease, which may contribute to an elderly client's inability to carry out activities of daily living. In Alzheimer's disease, progressive mental deterioration can occur due to generalised degeneration of the brain, leading to cognitive impairment and memory loss, accompanied by deterioration in emotional control, social behaviours or motivation.

**Answers could include:**

- Cerebral Vascular Accident (CVA) where blood flow to a part of the brain is stopped either by a blockage or a rupture of a blood vessel. This could lead to weakness in the client's limbs and decreased mobility, difficulty in communication and inability to tolerate a normal diet.
- Multiple Sclerosis is a chronic inflammatory disorder where the protective lining of the neurons is damaged. It can cause communication problems, fatigue, dizziness and incontinence.
- Parkinson's disease is caused by damage to brain cells. Clients may have symptoms like shaking, loss of balance, lack of coordination or tremors.
- Huntington's disease is a condition in which the nerve cells degenerate progressively over time. The disease affects brain functionality like that of thinking and movement.

## Question 24 (b)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive description of how a community services/healthcare worker can assist Barry with two other physical problems due to immobility and poor oral intake</li> </ul>	5
<ul style="list-style-type: none"> <li>Provides a sound description of how a community services/healthcare worker can assist Barry with two other physical problems due to immobility and poor oral intake</li> </ul>	4
<ul style="list-style-type: none"> <li>Provides a basic description of how a community services/healthcare worker can assist Barry with physical problem(s) due to immobility and/or poor oral intake</li> </ul>	3
<ul style="list-style-type: none"> <li>Provides an outline of how Barry can be assisted with physical problem(s) due to immobility and/or oral intake</li> </ul>	2
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

### **Sample answer:**

Barry may experience a number of physical problems due to his immobility and poor oral intake, resulting in an overall decline in health.

Barry's skin integrity may be compromised due to poor circulation, leading to pressure injuries with a possibility of infection. The community services/healthcare worker can promote circulation to the skin by ensuring regular pressure area care and gentle exercises are performed. Barry also may not be able to toilet independently, resulting in further skin excoriation and breakdown. The community services/healthcare worker can support Barry with a regular toileting regime, incontinence care such as a barrier cream and encourage fluid intake which will hydrate the skin. Also, the community services/healthcare worker can encourage Barry to eat nutritious food which is vital to build up body muscles which will lower risks of pressure injury.

Barry is at risk of falls due to immobility which could result in a fracture requiring hospitalisation and rehabilitation. The community services/healthcare worker can assist with mobility aids, supporting Barry when he is standing. Muscle wasting can be a result of immobility and poor oral intake, so the community services/healthcare worker can support Barry by referring him to a dietitian so that he has a healthy balanced diet with supplements included to minimise further weight loss and muscle wasting.

### **Answers could include:**

Barry is at risk of developing chest infections due to immobility which may result in hospitalisation leading to further decline in health. A community services/healthcare worker can assist Barry by sitting him up in the bed during and after meals, and when he is sitting in the chair. An allied health worker can also encourage Barry with deep breathing exercises and assist with chest physiotherapy if indicated.

## Question 24 (c)

Criteria	Marks
<ul style="list-style-type: none"> <li>Provides a comprehensive explanation of how the CS/HC worker can demonstrate support for Leanne in both the delivery of care in hospital and in planning for discharge</li> <li>Includes relevant workplace examples and industry terminology</li> </ul>	10–12
<ul style="list-style-type: none"> <li>Provides a sound explanation of how the CS/HC worker can demonstrate support for Leanne in both the delivery of care in hospital and in planning for discharge</li> <li>Includes some relevant workplace examples and industry terminology</li> </ul>	7–9
<ul style="list-style-type: none"> <li>Demonstrates some understanding of how the CS/HC worker can demonstrate support for Leanne in the delivery of care and/or planning for discharge</li> <li>Includes a relevant workplace example and/or industry terminology</li> </ul>	4–6
<ul style="list-style-type: none"> <li>Demonstrates limited understanding of the CS/HC worker's support for Leanne</li> </ul>	2–3
<ul style="list-style-type: none"> <li>Provides some relevant information</li> </ul>	1

### **Sample answer:**

Barry lives with his daughter who is his main carer therefore it is important to collaborate with/involve her in the planning and delivery of his care.

The CS/HC worker needs to be open and honest with the daughter when she asks questions about Barry's condition. However, it is important that the healthcare worker ascertains that the daughter is the next of kin and obtains consent from the client before sharing his health information with her.

The CS/HC worker can show respect and support by being inclusive, by including Barry's daughter in the delivery of personal care such as feeding, showering, bed bath and oral hygiene if she asks to be included.

The CS/HC worker can demonstrate support by being available to her when she visits him in hospital. Inform her of the visiting hours so that she can plan her day and she can let Barry know when she will be visiting him. If not able to visit eg due to COVID restrictions, look at options for how the daughter can be involved in his care via the internet / technology.

Collaborating with patients, carers and family members can ensure that essential baseline information about a patient's condition is established so that deterioration, improvement and strategies for ongoing care can be identified. For example, Barry's daughter is likely to be the most accurate source of information about his usual capabilities, behaviours, preferences and medical history.

The CS/HC worker can support the daughter by providing referrals for Aged Care Assessment Team (ACAT); allied health team – social worker to organise family conferences to discuss home care, residential care or respite; dietitian – for nutritional advice; speech pathologist to assess Barry's swallowing especially since he has decreased LOC; PT for exercise to promote circulation and muscle strength; OT to organise home environment modifications.

Refer the daughter to carer support groups and relevant websites where she can get information about the client's condition.

Respite care may be available for Leanne as part of her support group or network.

The CS/HC worker should report any concerns the daughter may have to the supervising RN and document it in progress notes, so that meetings can be organised to facilitate open communication between her and the multidisciplinary team.

***Answers could include:***

Consider legal and ethical issues that might arise, for example decisions about ongoing care at home.

# 2022 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 — nature of the industry – page 26
3	1	Safety — infection prevention and control in the community services/health workplace – page 35
4	1	Work — recording and reporting – page 42
5	1	Healthy body systems — major body systems and associated components – page 23
6	1	Industry context — nature of the industry – page 26
7	1	Safety — infection prevention and control – page 35
8	1	Work — misunderstandings and conflict – page 44
9	1	Healthy body systems — major body systems and associated components – page 23
10	1	Industry context — legal and ethical issues – page 28
11	1	Safety — incidents, accidents and emergencies – pages 36–37
12	1	Work — communication – page 40
13	1	Healthy body systems — body systems and health – page 23
14	1	Industry context — legal and ethical issues – page 28
15	1	Safety — risk management – page 34

## Section II

Question	Marks	HSC content – focus area
16 (a)	2	Work — communication – pages 40–41
16 (b)	2	Healthy body systems — body systems and health – page 23
16 (c)	2	Industry context — legal and ethical issues – page 28
17 (a)	3	Safety — infection prevention and control – page 35
17 (b)	4	Work — diversity – page 43
18 (a)	2	Healthy body systems — clinical information – page 57
18 (b)	2	Safety — risk management – page 34
19 (a)	2	Work — community services / healthcare worker – page 41
19 (b)	2	Healthy body systems — body systems and health – pages 23–24
19 (c)	3	Safety — safe work procedures and practices – page 34
20	6	Industry context — legal and ethical issues – page 28

**Section III**

Question	Marks	HSC content – focus area
21	15	Work — recording and reporting – page 42 Healthy body systems – page 24 Safety – page 38

**Section IV**

Question	Marks	HSC content – focus area
22 (a)	3	Body systems and health – page 24 Ageing, independence and wellbeing — wellbeing – page 46
22 (b)	5	Ageing, independence and wellbeing — delivery of care and support – pages 48–49
22 (c)	12	Ageing, independence and wellbeing — emotional wellbeing – pages 46–47
23 (a)	3	Allied health — body systems and health – page 23 Allied health services — page 51
23 (b)	5	Allied health — body systems and health – page 24 Primary healthcare approach – page 52
23 (c)	12	Allied health — delivery of care and support – pages 52–53
24 (a)	3	Nursing assistance in acute care — body systems and health – page 23 Client needs – page 56
24 (b)	5	Nursing assistance in acute care — body systems and health – page 24 Client needs – page 56
24 (c)	12	Nursing assistance in acute care — delivery of care and support – page 55