

MARKING KEY

DRAFT

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VET Community Services Certificate III in Children's Services (CHC30402)

Examination question mapping

Multiple-choice questions

	Draft sample paper 1	Draft sample paper 2
Question	Unit of competence	Unit of competence
1	CHCPR1C	
2	CHCPR1C	
3	CHCFC1C	
4	CHCPR3C	
5	CHCPR3C	
6	CHCCN2C	
7	CHCCN2C	
8	CHCCN4D	
9	CHCCN4D	
10	CHCIC1C	
11	CHCIC1C	
12	CHCCHILD1C	
13	CHCOHS301A	
14	CHCOHS301A	
15	CHCCS301A	
16	CHCCS301A	
17	CHCCN5C	
18	CHCCN5C	
19	HLTFA301A	
20	HLTFA301A	

Short answers

	Draft sample paper 1	Draft sample paper 2
Question	Unit of competency	
1	CHCCN5C	
2	CHCPR3C	
3	CHCCN1D	
4	CHCPR1C	
5	CHCCN2C	
6	CHCCN4D	
7	CHCFC1C	
8	CHCIC1C	

Marking key

Section One: Multiple-choice

20 Marks

Question	Response	Mark
1	a	1
2	c	1
3	c	1
4	b	1
5	c	1
6	b	1
7	a	1
8	b	1
9	d	1
10	b	1
11	c	1
12	b	1
13	b	1
14	b	1
15	d	1
16	c	1
17	a	1
18	b	1
19	c	1
20	a	1

Section Two: Short answer**120 Marks****Question 1: CHCCN5C Care for babies****(a) 2 marks**

Description	Marks
Clear and precise explanation of the term	2
Attempted explanation of the term	1

Answers could include the following information:

- Social referencing—Children are looking for indications of how to feel about a particular issue, event or situation by watching the reactions of others. Initially, the reference person is usually the person the child has secure bonds with but as the infant's world expands and their social contacts grow, they begin to look quite broadly for the reference 'people' i.e. significant others, peers, friends.

(b) 6 marks

Description	Marks
Clear and precise explanation of attachment and both primary and secondary attachment. Response may elaborate on the definition by using examples to support explanation	5–6
Brief but clear explanation of attachment and both primary and secondary attachment	3–4
Correct explanation of attachment or Correct explanation of both primary and secondary attachment	2
Limited explanation of attachment or primary attachment or secondary attachment	1

Answers could include the following:

Attachment

- Attachment is characterised by a strong feeling of being connected and belonging together.
- It provides a secure base from which infants can explore the world.
- It also provides a model for future relationships and securely attached children tend to be more outgoing, happy and do better at school than those who are not securely attached.
- Attachment is not present at birth but develops over the first few months of life.

Primary and secondary attachment

- Infants can form primary attachment to one person only or to more than one person that are their primary carer.
- Primary attachment usually occurs with the mother/father, and secondary attachment to other family members and care givers. Primary = parents/family, secondary = caregivers.
- Secondary attachments can be made with caregivers.
- Having a consistent staff with limited turnover can assist the infant to develop a strong sense of trust and confidence in the world.

(Central TAFE, 2004)

Question 2: CHCPR3C Develop an understanding of children’s interests and developmental needs.

(a) 3 marks

Description	Marks
Makes three appropriate suggestions	3
Makes two appropriate suggestions	2
Makes one appropriate suggestion	1

Answers could include the following:

- send an interest questionnaire home for her parents to complete and return
- arrange for a meeting with her parents to gather additional information
- create a communication booklet to go between care and home and present specific questions for the parent/s to respond to
- talk to Ramya – she is nearly 5 years old
- phone Ramya’s parent/s
- have an informal conversation with the parent/s when they drop (or collect) Ramya

(b) 2 marks

Description	Marks
Lists two valid and appropriate sources, agencies or organisations	2
Lists one valid and appropriate source, agency or organisation	1

Answers could include the following:

- multi cultural organisations
- local library
- local (specific) cultural society or group
- child care association

(c) 3 marks

Description	Marks
Clearly describes three ways to support cultural diversity	3
Clearly describes two ways to support cultural diversity	2
Clearly describes one way to support cultural diversity	1

Answers should include the following:

Taking into account different:

- dietary requirements
- religious practices
- traditions
- languages
- cultural taboos
- festivals and celebrations

Specific examples are acceptable.

[2(c) adapted from: Victorian Curriculum and Assessment Authority. (2007). *VCE VET Community Services: Written examination: 2007 assessment report* (p. 8). Retrieved May, 2009, from http://www.vcaa.vic.edu.au/vet/programs/community/assessreports/2007/comserv_2007_assessrep.pdf]

Question 3: CHCCN1D Ensure children's health and safety

(a) 5 marks

Description	Marks
Lists five suitable behaviours	5
Lists four suitable behaviours	4
Lists three suitable behaviours	3
Lists two suitable behaviours	2
Lists one suitable behaviour	1

Answers could include the following:

- children tend to put almost anything in their mouths i.e. coins, dirt, toys.
- children often forget to wash their hands after going to the toilet or before a meal.
- children may not cover their mouths, use a tissue or turn away from someone when they cough or sneeze.
- children have no reservations about sharing food even if it has been in someone else's mouth.
- some children may not wipe themselves adequately after going to the toilet.
- children do not necessarily instigate teeth brushing and need to be taught how.

(b) 10 marks

Description	Marks
<ul style="list-style-type: none">• States two behaviours and provides a clear and well structured description of two appropriate activities. Demonstrates a high level of understanding of how to implement good hygiene activities by including a detailed explanation of how the activity is to be applied in a childcare service.	9–10
<ul style="list-style-type: none">• States two behaviours and describes two appropriate activities. Demonstrates a sound understanding of how to implement good hygiene activities by including a clear explanation of how the activity can be applied in a childcare service.	7–8
<ul style="list-style-type: none">• States one behaviour and describes one appropriate activity. Demonstrates an understanding of how to implement the activity by including a clear explanation of how the activity can be applied in a childcare service.• States two behaviours and describes two activities but explanations are limited indicating an average understanding of how personal hygiene activities could be developed and implemented in a childcare setting.	5–6
<ul style="list-style-type: none">• States two behaviours and gives a limited description of two appropriate activities. Procedure for implementation is unclear or not supplied.	3–4
<ul style="list-style-type: none">• States behaviour and attempts to describe an activity that could teach good hygiene practices in a childcare setting, however the response is unclear and disjointed.	1–2

Answers should elaborate on the following:

- childcare staff model good hygiene—explanation can include *how* the behaviour is modelled and in what behaviours
- role playing with the children—description of the activity would include the content of the role play. Also could be taught in the practical life station e.g. teaching the children to wash their doll's body
- structured/semi structured lessons e.g. hand washing, toilet training, brushing hair, washing face, blowing nose etc.
- incorporate activity into daily activities i.e. toilet training, before meals etc.
- staff monitoring of behaviour
- telling stories, using songs to illustrate appropriate actions
- have hand washing stations set up at various points within the centre e.g. meals area, outside, in bathroom
- have a 'practical life' station set up in the centre where children can model the behaviour of cleaning i.e. wiping down tables, bathing dolls, washing clothes etc.

Question 4: CHCPR1C Deliver services/activities to stimulate children’s development and enhance their leisure

(a) 4 marks

Description	Marks
<ul style="list-style-type: none"> • Demonstrates a clear understanding of the role of play in a child’s development. Response includes specific reference to the domains of development and the impact of play on that domain. • Concise well structured explanation. 	3–4
<ul style="list-style-type: none"> • Demonstrates general understanding of the role of play in a child’s development and loosely refers to play’s role on specific domains of development. • Explanation is limited. 	1–2

Answers should include but are not limited to the following:

- Children learn through play. They are able to learn, develop and enhance social, cognitive, physical and language skills in play situations. They are able to explore with creativity and imagination whilst gaining (and refining) skills across all domains.
- Social/emotional development—aim of both planned and spontaneous play is the development of positive self esteem and emotional wellbeing. By providing safety and security a child is able to explore their environment. Children learn important social skills such as sharing, turn taking, negotiation and resilience during play. Play offers opportunities to have quality interactions with adults and other children that teaches them the foundations of good relationships.
- Cognitive development—through play children are able to learn to problem solve, explore and it gives them opportunity to practice repetitive tasks according to their own learning style. May allow children to build on past experiences and allows hands on interaction with the environment.
- Language skills—opportunities exist for questions and answers to be developed especially when translating the details of the child’s imagination to adults and peers involved in the process. Adults can model correct language and new words and may give the opportunity for looking, pointing and labelling objects.

(b) 14 marks

Description	Marks
1 mark for each correct selection of appropriate age group.	14

Answers:

ACTIVITY	MOST APPROPRIATE AGE GROUP			
A selection of different textured, coloured and medium sized toys.	0 to 2’s <input checked="" type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Facilitating the development of hobbies	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input checked="" type="checkbox"/>
Cooking, sewing and carpentry experiences	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input checked="" type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Simple obstacle course	0 to 2’s <input type="checkbox"/>	2 to 3’s <input checked="" type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
A nature walk to look at and collect leaves	0 to 2’s <input type="checkbox"/>	2 to 3’s <input checked="" type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Complex obstacle course	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input checked="" type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Self selected peer group project	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input checked="" type="checkbox"/>
15 to 20 minute ‘mat’ session (or circle time)	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input checked="" type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Small group turn taking experiences	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input checked="" type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Peek-a-boo	0 to 2’s <input checked="" type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Clay modelling	0 to 2’s <input type="checkbox"/>	2 to 3’s <input type="checkbox"/>	3 to 5’s <input checked="" type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Free dance movement	0 to 2’s <input type="checkbox"/>	2 to 3’s <input checked="" type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
10 minute ‘mat’ session (or circle time)	0 to 2’s <input type="checkbox"/>	2 to 3’s <input checked="" type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>
Feely box	0 to 2’s <input type="checkbox"/>	2 to 3’s <input checked="" type="checkbox"/>	3 to 5’s <input type="checkbox"/>	5 to 12’s <input type="checkbox"/>

(c) 8 marks

Description	Marks
<ul style="list-style-type: none">• Gives four correct considerations and clearly explains why each one is important.	7–8
<ul style="list-style-type: none">• Gives three correct considerations and clearly explains each one is important.• Gives four correct considerations and mostly explains each one clearly.	5–6
<ul style="list-style-type: none">• Gives two correct considerations and clearly explains why each one is important.• Gives four correct considerations and gives a limited explanation of each one.	3–4
<ul style="list-style-type: none">• Gives one correct consideration and clearly explains why it is important.• Demonstrates a very limited understanding of the specific considerations, the answer is incomplete, mostly inaccurate and with only one or two valid points made.	1–2

Answers should include the following:

1. Variety	<p>areas, resources and materials for different types of play need to be provided and changed regularly</p> <ul style="list-style-type: none">• quiet play• constructive play• noisy play• sand play/water play• creative play – including music and movement• dramatic play – including conversational• physical play – including sport
2. Diversity	<ul style="list-style-type: none">• provisions for play and leisure need to reflect cultural diversity, gender.• caters for the varying abilities of the children in the group
3. Safety	<ul style="list-style-type: none">• environment must be set up in a way that is safe, non-threatening, challenging and stimulating
4. Time	<ul style="list-style-type: none">• sufficient time should be provided (and allowed) for play to develop and be completed when possible• having a flexible care routine allows for the natural pattern of exploration to come to its own natural conclusion
5. Child centred	<ul style="list-style-type: none">• children's individual interests and needs are identified• support with the provision of activities or materials with a child centred focus
6. Choice	<ul style="list-style-type: none">• a range of activities needs to be available at any given time, to allow children choice in their play whenever possible• activities may include art, music, outdoor, indoor, water play, technological, problem solving planned and spontaneous play
7. Group and individual play	<ul style="list-style-type: none">• opportunities for both group and individual play need to be provided• children need an allocated area that they can be by themselves if they choose i.e. a reading corner• additional group activities should be available

Question 5: CHCCN2C Care for children

(a) 6 marks

Description	Marks
1 mark for each appropriate piece of information.	6

Answers should include but are not limited to the following:

- any separation anxiety/issues
- any particular rituals
- specific likes and dislikes e.g. food
- any anticipated distress
- individual interests/special toys etc.
- any pets at home
- rest/sleep requirements
- cultural or religious considerations
- any other relatives that Ryan is close to
- availability for transitional assistance (father)
- what school Ryan will be attending
- food allergies
- any illnesses/medication requirements
- immunisation record
- daily schedule.

(b) 8 marks

Description	Marks
<ul style="list-style-type: none">• Demonstrates a high level of understanding of how to meet a specific child's needs. and• Gives a detailed and clear explanation of each of the four chosen topics and describes suitable strategies to help Ryan adapt	7–8
<ul style="list-style-type: none">• Demonstrates a general understanding of how to meet a specific child's needs and either• Gives a clear explanation of three chosen topics and describes suitable strategies to help Ryan adapt or• Gives an explanation of each of the four chosen topics and describes suitable strategies to help Ryan adapt	5–6
<ul style="list-style-type: none">• Gives a clear explanation of two chosen topics and describes suitable strategies to help Ryan adapt or• Gives a limited explanation of each of the two or three chosen topics and describes suitable strategies to help Ryan adapt	3–4
<ul style="list-style-type: none">• Demonstrates limited understanding of how to meet a specific child's needs and either• Gives a clear explanation of one chosen topic and describes suitable strategies to help Ryan adapt or• Gives a limited explanation of each of the one or two chosen topics or• Suggests one or two strategies to help Ryan adapt.	1–2

Answers may include the following:

Considerations when communicating with Ryan:

- make sure that only information that is necessary is given to Ryan to avoid him feeling overloaded with rules and regulations.
- Ryan has been through a lot of changes and may feel scared and unsure so it is important to use positive language and reassuring body language.

Answers to chosen topics may include:

Hand washing	<p>Initially explaining when to wash hands and showing the child how to.</p> <ul style="list-style-type: none"> • model the behaviour for Ryan. • use correct terminology and simple clear language. • encourage Ryan to take responsibility for his own personal hygiene. • enforcing limits consistently and sensitively. • use of posters and books. • gentle reminders. • have a class routine set and inform Ryan about the procedures i.e. we wash our hands when: we come in from play, before and after our meals, after we go to the toilet. • demonstrate the behaviour in the appropriate place e.g. In the bathroom as opposed to the office.
Toileting	<ul style="list-style-type: none"> • show Ryan where the toilets are and instruct him on centre procedures. • explain the procedure, for instance when to advise the carer when he needs to use the toilet and explain that he need not hold on or feel embarrassed. • use correct terminology and simple clear language i.e. do not use language that is too hard, and use the correct terms to describe body parts.
Safety issues—indoors and outdoors	<ul style="list-style-type: none"> • for all safety issues, explain the reasons for limits/rules associated with possible hazards in terms that he can understand – developmentally appropriate for 4 and 1/2 year old e.g. we do not run inside because we can hurt ourselves and others. • when playing outside on the equipment you need to wait for your turn so that you don't hurt yourself or others. • when explaining the safety rules make sure that it is done in the context that you are explaining so that Ryan understands. • use correct terminology and simple clear language i.e. do not use language that is too hard.
Meal times, menus and nutrition	<ul style="list-style-type: none"> • ask Ryan about his favourite foods. • explain the meal time routine. • show Ryan where the meals area is. • invite Ryan to assist in setting the table. • discuss food/nutrition – one on one or in groups. • 'buddy' Ryan up with a child of a similar age to sit with him at meal time.
Rest time	<ul style="list-style-type: none"> • explain the rest time process to Ryan. Ensure he understands that 'rest time' does not necessarily mean 'sleep time' but rather a quiet period. • show him where his bedding is for rest time and what the process is. • provide Ryan with familiar objects (book/comforter) at rest time.
Arrival and departure ritual	<ul style="list-style-type: none"> • establish a personalised ritual with Ryan's help. • show him his personal space/locker. • as he has not been in care before reassure him that he will be picked up at a certain time and that his father or someone else that he knows well will come and get him. • let him know that children arrive and leave at different times of the day.

(b) 4 marks

Description	Marks
Clear well structured answer. Response clearly takes into account the physical aspects of the situation and the emotional/psychological sensitivity required to effectively deal with the situation.	4
Satisfactory attempt to explain an appropriate response to the situation. Brief reference made to the emotional/psychological sensitivities of the situation.	2–3
Response provides a brief explanation of what would be said and done. No reference to the emotional/psychological sensitivity of the incident.	1

Answers could include any of the following:

- the caregiver needs to ensure that they do not make the child feel pressured, ashamed or embarrassed about the toileting accident.
- toileting accidents are normal and need to be dealt with in a sensitive, matter of fact way.
- privacy is very important – avoid public acknowledgement of the child’s accident.
- quiet reassurance is needed – the child may be disappointed in himself and also concerned at how others will react – the carer needs to be discreet.
- any examples need to fall within these areas

Question 6: CHCCN4D Respond to illness accidents and emergencies

(a) 6 marks

Description	Marks
One mark for each correct symptom.	6

Answers could include the following:

- diarrhoea
- breathing difficulties
- vomiting
- skin rashes
- headache
- stiff neck
- pale face
- flushed face
- clammy skin
- sore throat
- itching/scratching
- skin hot to touch
- coughing
- eye discharge.

(b) 5 marks

Description	Marks
<ul style="list-style-type: none"> • Demonstrates a high level of competence and understanding by giving detailed instructions for taking a child’s temperature using a mercury thermometer. • Specifies the correct temperature (degrees Celsius) that indicates a fever in a child. 	5
<ul style="list-style-type: none"> • Lists or clearly explains at least the four major points (highlighted below) for taking a child’s temperature with a mercury thermometer. • Specifies the correct temperature (degrees Celsius) that indicates a fever in a child. 	4
<ul style="list-style-type: none"> • Lists or outlines most of the important aspects (highlighted below) for taking a child’s temperature with a mercury thermometer without specifying temperature of a child who has a fever. • Lists or outlines two major aspects (highlighted below) for taking a child’s temperature with a mercury thermometer and specifies correct temperature that indicates a fever in a child. 	3
<ul style="list-style-type: none"> • Demonstrates a limited understanding of the process for taking a child’s temperature. Answer is brief and/or unclear. Correct temperature that indicates a fever in a child may or may not be supplied. 	1–2

(Department of Health and Ageing, 2007)

Answers should include the following:

- Wash hands.
 - Inspect the thermometer for any broken edges or other faults etc.
 - Shake the thermometer down to below 35/36 degrees Celsius.
 - Always make sure you talk calmly to the child to reassure him/her and advise them of what you are doing.
 - With the child sitting on your lap (or lying down if not distressed), place the bulb end of the thermometer under the child's clothing and arm. The thermometer needs to rest between skin folds.
- NB: temp is not taken orally because the child may bite down and break it in their mouth – potential injury
- Leave the thermometer in place for 2 minutes – remove and read the mercury level
 - Normal under arm temp is 36.1 to 36.7 – a fever is a temperature of 37.5 or higher.
 - Settle the child again.
 - Wash your hands.
 - Record the temperature.
 - Check every 30 minutes to monitor the temperature.

(Mayo Clinic Staff, 2009)

Shaded areas indicate minimum level of information required

(c) 4 marks

Description	Marks
1 mark for each appropriate suggestion.	4

Answers could include the following:

- loosen/remove unnecessary clothing
- use a fan
- provide cool drinks of water
- provide ice to suck on (depending on the age of the child)
- ensure the environment is cool
- sponge the child with tepid water
- lukewarm flannel bath. Do not use cold water as it can increase core body temperature from the action of shivering
- medicate within centre policy guidelines
- open windows for ventilation
- avoid too many blankets.

Question 7: CHCFC1C Support the development of children in the service

(a) 2 marks

Description	Marks
• Clearly and accurately defines creativity.	2
• A brief definition of creativity.	1

Answers could include the following:

In the context of the child care industry, creative experiences relate to activities that allow children to *express themselves freely without directive instruction* from the caregiver.

Creativity keywords

- create
- invent
- freedom of expression
- develop
- problem solve
- originality
- expressive
- imaginative
- invent
- innovate
- design.

Can be limited by a predetermined outcome and where consistency and conformity are valued above creative expression. A child is usually engaged when using their creativity.

(b) 5 marks

Description	Marks
Demonstrates a high level of understanding by providing a clear explanation of the skills developed. Lists at least 4 specific skills and elaborates on how cognitive play influences these skills.	5
Demonstrates understanding by providing a clear explanation of the skills developed. Lists at least 3 specific skills and provides a brief explanation of how cognitive play influences these skills.	4
Demonstrates understanding by providing a clear explanation of the skills developed. Lists at least 2 specific skills and provides a brief explanation of how cognitive play influences these skills.	3
Demonstrates a general understanding by providing an explanation of the skills developed. Lists at least 1 specific skill and provides a brief explanation of how cognitive play influences this skill.	2
Demonstrates a limited understanding and provides a very brief attempt to explain the skills developed. May list specific skills and provides a brief explanation of how cognitive play influences these skills.	1

Answers could include the following:

- abstract thinking
 - using logic
 - sequencing skills
 - developing perception
 - sorting and using information
 - finding solutions
 - concept enhancement
 - classifying
 - seeing the relationship between things or events.
- cognitive skills are used to varying extent in all forms of play. There are many opportunities to use thinking skills in play.
 - during cognitive play children are able to develop their unique skills and interests in a flexible environment. This supports a child's natural instinct to explore, experiment, problem solve, discuss investigate and ask questions.
 - during exploratory and investigative play the child is provided with new information and experiences and is encouraged by these to find out how things behave.
 - in constructive play the child is faced with finding ways to join objects, balance designs or achieve representational likeness.

Question 8: CHCIC1C Interact effectively with children

(a) 8 marks

Description	Marks
• Provides eight appropriate care giving behaviours	8
• Provides seven appropriate care giving behaviours	7
• Provides six appropriate care giving behaviours	6
• Provides five appropriate care giving behaviours	5
• Provides four appropriate care giving behaviours	4
• Provides three appropriate care giving behaviours	3
• Provides two appropriate care giving behaviours	2
• Provides one appropriate care giving behaviour	1

Answers should include the following:

Age range	Strategies
0 to 2 years	Non-verbal cues—smiles, frowns, head shakes, clapping Positive attention Distraction
2 to 3 years	Talk about appropriate behaviours Repetition of guidance Reinforce desired behaviour
3 to 5 years	Praise and encouragement Choice of favourite activity Anticipate and redirect Focus on the positive Discuss and give reasons for guidance
5 to 12 years	Model desired behaviour Discuss feelings Involve the children in the decision making Collaborate to set limits and consequences

(b) 15 marks

Description	Marks
<ul style="list-style-type: none">• Suggests five valid influences on Oscars behaviour• A well developed, clear answer. Demonstrates a high level of understanding of positive communication and behaviour modification by providing a comprehensive and complete explanation of the strategies that would be employed to foster a positive experience and outcome.	13–15
<ul style="list-style-type: none">• Suggests four valid influences on Oscars behaviour• A clearly worded answer. Demonstrates a satisfactory level of understanding of positive communication and behaviour modification by providing a complete explanation of the strategies that would be employed to foster a positive experience and outcome.	9–12
<ul style="list-style-type: none">• Suggests three valid influences on Oscars behaviour• A brief answer. Demonstrates a basic understanding of positive communication and behaviour modification by providing limited but appropriate explanation of the strategies that would be employed to foster a positive experience and outcome.	6–8
<ul style="list-style-type: none">• Suggests two valid influences on Oscars behaviour• An incomplete and or inappropriate answer. Attempts to demonstrate an understanding of positive communication and behaviour modification but does not clearly explain the information to support the response.	3–5
<ul style="list-style-type: none">• Suggests one valid influence on Oscars behaviour• Does not demonstrate an understanding of positive communication and behaviour modification.	1–2

Answers could include but are not limited to:

Possible influences on Oscars behaviour:

- recent changes to family dynamics with the introduction of the baby sister. Oscar has been the only child for nearly four years so he may be feeling unsure about his new position and struggling to assimilate the changes
- regardless of the additional help that Oscar's mother may be getting while her husband is away, she is required to look after two children by herself to some extent. Her time and energy will be focussed on looking after the baby and more than likely be very stressed and tired. Despite her good intentions she may not have as much free time to spend with Oscar
- Oscar enjoyed time with his mother for five days a week. He had established his own routines at home. Having to go to day care four days a week has interrupted his normal routine and he may be reacting to this
- Oscar may be feeling tired as a result of the baby keeping the family awake
- Oscar's regular sleep pattern may be disturbed
- Oscar may have to be disciplined more than usual at home if his behaviour is the same at home. A negative pattern may be being established at both home and day care
- because of his insecurities at the moment the other children may be alienating him more than usual
- he may be shouting more because it is being modelled at home
- he may be frustrated because he is unable to express his 'unfamiliar' feelings well enough
- Oscar may be acting out his frustrations at the baby while at the centre. He may be harbouring some resentment for the amount of attention, time and energy being directed towards the new baby.
- he may be missing his father and the comfort and security that their relationship provides
- his mother and father's relationship may be strained through lack of sleep and the associated issues of bringing a new child into the world.

Behaviour modification and communication strategies:

- consult the centre's behaviour guidance policy and use it as a basis for actions.
- be nurturing and supportive
- modelling is one of the most effective ways of modifying children's behaviour. In this case remaining calm with Oscar and get him to talk calmly through his emotions will help him communicate better rather than acting out his feelings i.e. 'Oscar do you feel sad, mad or glad?', 'why do you feel sad?'
- respond patiently and be consistent
- get Oscar's mother in and try and get more information, being careful to remain compassionate.
- ignore some of the less serious behaviour
- acknowledge and validate his feelings
- active listening is very important. Oscar needs to feel that he is being listened to. Particularly with Oscar, gain eye contact, keep quiet, using reassuring passive communication techniques such as nodding and have full attention on him when he is talking. It may be effective to take him to a quiet place to talk. Get down to Oscar's level to talk to him. Establish a trusting relationship
- use a good assertive approach to discipline. That is, explain the rules
- reinforce his caring, calm, thoughtful, creative, behaviour
- reinforce his behaviour when he communicates effectively. Make sure that he gets at least some quiet time and try to encourage him having a sleep
- distract Oscar with some fun positive activities that he will succeed in and that make him feel good about himself
- emphasise what to do and set an example to follow
- set clear, realistic limits and guidelines
- give him appropriate attention
- use a time out/thinking time strategy to help him re-centre and break the cycle of behaviour
- use a prevention strategy. That is if he is clashing with some children, separate them in activities. If he does not want to participate in an activity let him read quietly or do an activity by himself. As long as he is respecting the rules and not disturbing the other children be flexible with him in activities
- avoid hurrying him
- remember not to discipline him as a person. Rather, discipline the behaviour.

ACKNOWLEDGEMENTS

Section Two: Short answer

Question 1

Information source: Central TAFE. (2004). *CHCCN5C: Care for babies* [Learning guide]. Perth: Central TAFE.

Question 2(c)

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Question 6 (b)

Information source: Department of Health and Ageing. (2007). *Communicable diseases guidelines*. Canberra: Department of Health and Ageing.

Information source: Mayo Clinic Staff. (2008). *Fever. First aid*. Retrieved May, 2009, from <http://www.mayoclinic.com/health/first-aid-fever/FA00063#>.

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