

GCSE (9-1)

Physical Education

J587/01: Physical factors affecting performance

General Certificate of Secondary Education

Mark Scheme for June 2019

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This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

All examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

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Annotations

| Annotation | Description | Annotation | Description |
|------------|--|------------|--|
| * | Tick | KU | Knowledge and understanding / indicates AO1 on extended response Q (*) |
| × | Cross | EG | Example/Reference / indicates AO2 on extended response Q (*) |
| BOD | Benefit of doubt | DEV | Development / indicates AO3 on extended response Q (*) |
| TV | Too vague | L1 | Level 1 response on extended response Q (*) |
| REP | Repeat | L2 | Level 2 response on extended response Q (*) |
| IRRL | Significant amount of material which doesn't answer the question | L3 | Level 3 response on extended response Q (*) |
| SEEN | Noted but no credit given / indicates sub-max reached where relevant | 5 | Sub-max reached |
| BP | Blank page | | |

- **KU**, **EG** and **DEV** used <u>instead</u> of ticks on the extended response question to indicate where knowledge or development points from the indicative content have been made.
- On the extended response question (*), one KU, EG or DEV does not necessarily equate to one mark being awarded; the marking is based on a levels of response mark scheme which awards a level and mark holistically based upon the quality of the response overall against the levels descriptors.

| Que | stion | Answer Ma | | Guidance | |
|-----|-------|--|----------------|--|--|
| 1 | | Increased flexibility / elasticity / pliability (of muscles) OR increased range of movement / mobility Increased pliability of tendons / connective tissue Increased / more / faster blood (flow) / oxygen to muscles Increased speed / strength of contractions Reduced risk of injury Delays / reduces (build-up of lactic acid) / delays fatigue | 2 (AO1) | Do not accept: Benefits to other systems such as heart, e.g. initiates vascular shunt is a cardiovascular benefit Prevent injury = TV (does not prevent, only reduce) Warming up the body / muscles = TV More blood to body = TV Muscles are stretched / loose = TV Muscles ready to work = TV Prevents lactic acid build-up = TV | |
| 2 | (a) | mark for: Prevent back flow of blood OR prevents blood from returning to where it came from OR prevents blood flowing in wrong direction | 1 (AO1) | Keeps blood flowing in correct direction = BOD Stops blood travelling backwards = BOD Prevents backflow on its own = TV Blood flow in one direction = TV | |
| | (b) | 1 mark for (Mark 1st answer only) : Semi-lunar / aortic / pulmonary (valves) | 1 (AO1) | Do not accept: Bicuspid / mitral / tricuspid valves / aorta / pulmonary artery | |
| 3 | | mark for (Mark 1st answer only): Ball and socket / hip / shoulder OR gliding / condyloid / wrist / knuckle OR saddle / base of thumb | 1 (AO1) | Do not accept: Ankle / thumb / finger on its own N.B. Ankle is a uniaxial joint, despite what some websites may show. | |
| 4 | (i) | 1 mark for (Mark 1 st answer only): Abdominals OR rectus abdominis | 1 (AO2) | Do not accept: Abs | |
| | (ii) | 1 mark for (Mark 1 st answer only): Sagittal | 1 (AO3) | | |

| Que | estion | Answer | | Guidance |
|-----|--------|--|------------|--|
| 5 | | 1 mark for (Mark 1st answer only): Frontal | 1 (AO3) | Sagittal = BOD |
| 6 | | 1 mark for (Mark 1 st answer only): Third / 3 rd / 3 (class lever) | 1 (AO3) | |
| 7 | (a) | 1 mark for (Mark 1 st answer only): Frontal | 1 (AO2) | |
| | (b) | 1 mark for (Mark 1 st answer only): Any movement that is abduction or adduction, e.g. star jumps / jumping jacks / cartwheel / abduction of the hip during the breaststroke leg action (in swimming) / abduction of shoulder to shoot in netball | 1 (AO3) | Do not accept: Movements that involve different planes, e.g. circumduction. Tennis serve on its own = TV (starts with extension) Catching a ball / golf swing / football throw-in = TV BUT: Arm action in golf swing = BOD |
| 8 | | 1 mark for: (B) Nose, trachea, bronchi, bronchioles, alveoli | 1 (AO1) | |

| Question | | Answer | Mark | Guidance |
|----------|-------------|--|----------------|--|
| 9 | | Two marks from (Mark 1st 2 answers only): | 2 | Do not accept: |
| | | The floor is hard / uneven litter / objects / equipment left out / not put away / in wrong position equipment is damaged / broken / unsafe Inappropriate footwear being worn Other participants / area too crowded / other activities going on Short run off area OR proximity of wall to edge of court OR wall surface / fittings Open doors / windows OR blocked fire exit Poor / unsuitable lighting | (AO1) | Wet / slippery floor answers relating to the weather Temperature / too hot / too cold = TV Litter / objects on its own = TV |
| 10 | (i) | One mark for (Mark 1 st answer only): Vertical / Sargent jump (test) | 1 (AO1) | Do not accept: Standing (broad) jump / high jump Accept: phonetic spellings of Sargent |
| | (ii) | One mark from: 1. Reach up and make a mark / slide ruler up 2. Performer jumps up <u>and</u> touches the board / marks chalk on the wall 3. maximum score / height recorded OR distance between two marks is measured OR measure how high you jumped (by touching ruler) | 1 (AO1) | Do not accept: 'Jump as high as you can' on its own = TV |
| 11 | (i) (ii) | Two marks from: Mobility – (exercises that) take the joint through its (full) range of movement and, e.g. arm swings / heel flicks / high knees / open the gate / lunges Dynamic movement – movements that involve speed and/or changes of direction and, e.g. shuttle runs / skipping / running in and out of cones / zig zag running / high knees / heel flicks / agility ladders | 2 (AO2) | Description and example required for each mark. If no suitable example = TV If example but no description = TV |

| | | The state of the s | | | | |
|----|--|--|-------|------------------------------|--|--|
| 12 | | One mark for (Mark 1 st answer only): | 1 | Do not accept: | | |
| | | Metacarpal(s) / phalange(s) | (AO2) | Carpals (in wrist, not hand) | | |

| Question | Answer | | Mar | rk | Guidance | |
|----------|--|---|-------------|-----|---|--|
| 13 | One mark for (in any order Abduction, adduction and recorder and reco | Anaerobic Short bursts of exercise / up to 30 seconds High intensity No / little oxygen used / oxygen debt created Lactic acid is produced cobic and anaerobic exercises are running / jogging / 800 metals and anaerobic exercises are running / jogging / 800 metals are running / jogging / 800 | 1 (AO 2 (AO | 01) | All three movements to be named for mark 1 tick only after 3 rd correct movement named. If only 1 or 2 named movements then = TV not X 1 mark for correct statement about the difference between aerobic and anaerobic exercise Answer must show a difference by stating both sides of one point in the table Use highlighter for one side correct, tick when 2 nd part is seen Anaerobic is short period of time and aerobic a longer/extended period of time = TV 1 mark for correct practical examples of both types of exercise 'running', 'cycling' or 'football' = TV; BUT Full game of football / tennis match for aerobic = BOD | |
| 15 | One mark for: Volume / amount of blood / ventricles / heart per beau | | 1 (AO | | Key words are in bold Right ventricle = TV | |

| 16 | (i | (i) | One mark for: | 1 | |
|----|----|-----|--|---------|-----------------------|
| | | | (0 1 | (4.0.4) | Key words are in bold |
| | | | (Cardiac output) = heart rate / HR x stroke volume / SV OR Volume / amount of_blood pumped out of left ventricle / ventricles / heart per minute | (AO1) | Right ventricle = TV |

| Que | stion | Answer | Mark | Guidance |
|-----|-------|--|----------------|---|
| | (ii) | One mark for: | 1 | Accept equivalent words i.e. higher |
| | | Increases | (AO2) | But 'quicker' = TV More blood pumped = TV |
| 17 | | One mark for: 1. Connects muscle to bone 2. Assists the muscle with pulling the bone 3. Makes bones move when muscles contract / involved with muscular contractions 4. Give stability / support / shock absorber | 1 (AO1) | Allows movement at a joint = TV Keeps the joint together = TV Holds bones and muscles in place = TV BUT Holds muscles on to bones = BOD |
| 18 | (a) | One mark for: An increase in the number of / more capillaries | 1 (AO1) | Formation of new capillaries = BOD Bigger capillaries = TV |
| | (b) | One mark for: False | 1 (AO2) | |
| 19 | | One mark for: HIIT / High intensity interval training | 1 (AO2) | Do not accept: Interval training on its own (in question) Fartlek = X (type of continuous training) Watch out for HITT or HIT = TV |
| 20 | | One mark for (Mark 1 st answer only): | 1 | Do not accept: |
| | | Helmet / head guard / scrum cap | (AO1) | Gum shield / hat / headgear |

| Q | Question | | Answer | | | Guidance | |
|----|------------|-------|---|--|----------------------------|---|--|
| 21 | 21 (a) (i) | | One mark for (Mark 1st answer only): | 1 | | | |
| | | | Flexibility | | (AO1) | | |
| | | (ii) | One mark for: | | 1 | | |
| | | | 2 OR Abdul and Olivia | | (AO3) | | |
| | | (iii) | Two marks for: | | 2 | Answers must address both sides for pts 1 – 6 | |
| | | | (excellent / Emma / Farah) | (poor / Liam) | (AO3) | But accept comparative comments such as: | |
| | | | were motivated / effort | Unmotivated / didn't try | | Emma / Farah did a better warm up (than Liam) | |
| | | | 2. warmed up / stretched | Did not warm up / stretch | | OR Emma / Farah had a more favourable arm:leg length | |
| | | | long / elastic muscles / large range of motion | Short / inelastic muscles / small range of motion | | ratio OR Liam was not as motivated (to do well in the test) | |
| | | | 4. No injuries | Recovering from injury / suffering from injury | | Pts. 7 and 8 are stand-alone points. | |
| | | | 5. Participate in activities that require excellent flexibility, e.g. dance | Does not participate in activities that require good flexibility | | Use highlighter for one side correct, tick when 2 nd part is seen | |
| | | | 6. Long arms and short legs / high arm:leg length ratio | Short arms and long legs / low arm:leg length ratio | | Do not accept: Emma is more <u>flexible</u> than Liam for pt 3 (flexibility already identified as component being measured in (i) | |
| | | | 7. Females generally more | flexible than males | More active v more sedenta | More active v more sedentary = TV | |
| | | | 8. The test was not measu the validity / accuracy of | | | Liam does not train at all = TV | |

Q21(b) Level descriptors **Discriminators** Level 3 (5-6 marks) Level 3 Discriminators detailed knowledge & understanding · detailed knowledge & understanding of the three other principles of • clear and consistent practical application of knowledge & understanding training (overload; progression; reversibility) effective analysis/evaluation and/or discussion/explanation/development several reasons for the use of beta blockers are evaluated relevant information drawn upon from other areas of the specification clear and consistent practical application of knowledge & understanding accurate use of technical and specialist vocabulary to a gymnast and their training programme there is a well-developed line of reasoning which is clear and logically • AO2 and AO3 are well covered for Level 3; some imbalance between structured. The information presented is relevant and substantiated. the two may be present for 5 marks. At 6 marks, both are equally well addressed Level 2 (3-4 marks) Level 2 Discriminators • satisfactory knowledge & understanding of at least two other principles satisfactory knowledge & understanding of training (overload; progression; reversibility) some success in practical application of knowledge & understanding analysis/ evaluation and/or discussion/explanation/development • some success in practical application of knowledge & understanding to attempted with some success a gymnast's training programme • some relevant information drawn upon from other areas of the • at least two reasons for the use of beta blockers may be evaluated at specification the top of this level technical and specialist vocabulary used with some accuracy • at the bottom of this level, one part of the question may be addressed there is a line of reasoning presented with some structure. The very well while there is a lack of knowledge in the other part or both information presented is in the most-part relevant and supported by parts may have been addressed with some success some evidence. Level 1 (1-2 marks) Level 1 Discriminators • basic knowledge & understanding of the principles of training • basic knowledge & understanding little or no attempt at practical application of knowledge & understanding • little or no attempt to evaluate the use of beta blockers little or no attempt to analyse/ evaluate and/or discuss/explain/develop little or no attempt at practical application of knowledge & understanding little or no relevant information drawn upon from other areas of the to a gymnast's training programme specification • at the top of this level at least one principle of training has been • technical and specialist vocabulary used with limited success explained using a practical application to a training programme or the information is basic and communicated in an unstructured way. The principles of training have been described with limited application information is supported by limited evidence and the relationship to the • at the bottom of this level some knowledge of either a principle of evidence may not be clear. training or the use of beta blockers has been shown (0 marks)

no response or no response worthy of credit.

| | out 2016 | | | | | |
|---|---|--|--|--|--|--|
| Q21(b) Indicative content (3 x AO2, 3 x AO3) | | | | | | |
| Using practical examples, explain the use of other principles of training in a | Evaluate reasons why some gymnasts may use beta blockers within their | | | | | |
| gymnastic training programme. | training programme. | | | | | |
| 1. (Overload) | 4. Psychological reasons | | | | | |
| Work harder than normal / puts body under stress So that fitness adaptations / improvements will occur E.g. gymnast will lift heavier weights in the gym Links with FITT principle Increase frequency / intensity / duration or time of training / or change type of training E.g. gymnast will lift weights for longer / do more sets/reps E.g. gymnast will put themselves through a higher intensity schedule | Help keep the gymnast calm / avoid anxiety / relax / reduce stress To focus / concentrate better on routine Physiological reasons Reduce HR / blood pressure Reduce effects of adrenaline Useful for balance / stability Helps to avoid muscle spasms / reduce muscle tension | | | | | |
| E.g. gymnast will do more training sessions per week2. (Progression) | 6. (Other reasons) | | | | | |
| Training gradually becomes more difficult / challenging Because body has made adaptations / got stronger Must be gradual to avoid injury E.g. gymnast will gradually do more complex vaults / exercises in a floor routine in training (Reversibility) Fitness will deteriorate if training stops E.g. If the gymnast is injured / stops training then the adaptations / | Win at all costs / get more prize money / fame / sponsorship Preparation for major competitions To score higher marks from the judges To improve performance / be better Others are taking drugs / widespread misuse Consequences not severe enough / won't get caught Pressure from coach / peers / society Lack of education / understanding about the dangers | | | | | |
| fitness will be lost Training must be maintained E.g. gymnast will continue training programme all year | | | | | | |
| Guidance | Do not credit: knowledge that is not relevant to the question, e.g. | | | | | |
| Use highlighter to identify overload, progression and reversibility Use KU for knowledge of principles of training Use EG for practical examples related to gymnast's training programme | side-effects and illegal status of beta blockers OR other principles of training not listed in OCR's syllabus, i.e. tedium – Use SEEN , not IRRL If SMART described use IRRL once at end of paragraph | | | | | |
| Use DEV for knowledge of use of beta blockers | All annotations must be in the left-hand margin, not in the body of the text L1, L2 or L3 must be stamped at the end of the answer | | | | | |

| Q | uestior | 1 | Answer | | Guidance |
|----|---------|-------|---|----------------|--|
| 22 | (a) | | Two marks for: | 2 (AO2) | Description and example required for each mark. If no suitable examples then no marks. Needs specific bone protecting specific organ in e.g. for pt 1 Elbow joint moves to throw a ball in rounders = ✓ (description and example given in one sentence) BUT joint moves to throw a ball in rounders = TV Specific joint movement or named muscle pulling specific bones is required in e.g. for pt 2 Triceps contracts to move the arm (bones) to do a football throw-in = ✓ |
| | (b) | (i) | One marks for (Mark 1st answer only): Quadriceps (or one of: rectus femoris, vastus medialis, vastus lateralis, vastus intermedius) | 1 (AO1) | Do not accept: Quads |
| | | (ii) | Two marks for: 1. (muscles work together as) an antagonistic pair / antagonistically 2. <u>quadriceps</u> is prime mover / agonist 3. <u>hamstrings</u> relax / is antagonist | 2 (AO3) | Do not accept: Muscles work in pairs (in question) Quadriceps contract (has already been credited in (i)) Hamstrings extend = TV Can score pt 1 even if pts 2 and 3 are wrong way round No marks for describing knee flexion phase |
| | | (iii) | Two marks for (Mark 1st 2 answers only) : 1. Femur 2. Pelvis / pelvic girdle / ilium | 2 (AO1) | |

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|---|--|---|--|--|--|
| (c) Three marks from: | 3 | Sub-max 1 mark if no diagram (use S for sub-max) | | | |
| 1. First /1st class lever O 2. Fulcrum in middle / EF 3. effort, fulcrum and load correct order) 4. Effort and load arrows | L / LFE d OR load, fulcrum and effort (in | Pt 2 – place tick under fulcrum Pt 3 – place tick under 3 rd correct name, i.e. load Pt 4 – place tick by arrow on right Accept: resistance for load (as in 2018) Do not accept: force for effort If either arrow point upwards = X No credit for 1 2 3 F L E = SEEN | | | |

| Question | | | Answer | | | Mark | Guidance |
|----------|-----|------|--|--|---|----------------|--|
| 23 | (a) | | Lower resting heart rate Bradycardia The heart becomes bigger / larger / (cardiac) hypertrophy The heart becomes stronger / stronger contractions Increase in stroke volume / more blood pumped from the heart in one beat Increase in cardiac output / volume of blood ejected from left ventricle in one minute (Increase in) capillarisation (of heart) Reduce risk of heart attacks / cardiac arrest / angina / CHD | | | 5 (AO2) | Do not accept: Adaptations to blood, e.g. more red blood cells Reduced risk of strokes (vascular and brain, not heart) = TV Lower blood pressure = TV (vascular) Healthier heart = TV Pump blood faster = TV Lower heart rate = TV Heart/walls get thicker = TV |
| | (b) | (i) | 1. 2. 3. 4. | Pulmonary artery Carries deoxygenated blood to the lungs From right ventricle Carry blood at high pressure Thick (walls) / small lumen | Pulmonary vein Carries oxygenated blood from the lungs / back to the heart To left atrium Carry blood at low pressure Thin (walls) / large lumen | 4 (AO1) | Responses must compare differences for each mark. Reference to valves = TV Speed of blood = TV Use highlighter for one side correct, tick when 2 nd part is seen If comparison between veins and arteries is done, credit if points are correct (can only hit pts 4 and 5) Accept comparative terms, e.g. thicker |
| | | (ii) | One mark for (Mark 1st answer only): <u>Vena cava</u> | | 1 (AO1) | | |

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