



Mark Scheme (Results)

Summer 2025

Pearson Edexcel GCSE

In History (1HI0)

Paper 1: Thematic study and historic environment (1HI0/11)

Option 11: Medicine in Britain, c1250–present and

The British sector of the Western Front, 1914–18: injuries, treatment and the trenches

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General Marking Guidance

- All candidates must receive the same treatment. Examiners must mark the first candidate in exactly the same way as they mark the last.
- Mark schemes should be applied positively. Candidates must be rewarded for what they have shown they can do rather than penalised for omissions.
- Examiners should mark according to the mark scheme not according to their perception of where the grade boundaries may lie.
- There is no ceiling on achievement. All marks on the mark scheme should be used appropriately.
- All the marks on the mark scheme are designed to be awarded. Examiners should always award full marks if deserved, i.e. if the answer matches the mark scheme. Examiners should also be prepared to award zero marks if the candidate's response is not worthy of credit according to the mark scheme.
- Where some judgement is required, mark schemes will provide the principles by which marks will be awarded and exemplification may be limited.
- When examiners are in doubt regarding the application of the mark scheme to a candidate's response, the team leader must be consulted.
- Crossed out work should be marked UNLESS the candidate has replaced it with an alternative response.

How to award marks when level descriptions are used

1. Finding the right level

The first stage is to decide which level the answer should be placed in. To do this, use a 'best-fit' approach, deciding which level most closely describes the quality of the answer. Answers can display characteristics from more than one level, and where this happens markers must use the guidance below and their professional judgement to decide which level is most appropriate.

For example, one stronger passage at L4 would not by itself merit a L4 mark, but it might be evidence to support a high L3 mark, unless there are substantial weaknesses in other areas. Similarly, an answer that fits best in L3 but which has some characteristics of L2 might be placed at the bottom of L3. An answer displaying some characteristics of L3 and some of L1 might be placed in L2.

2. Finding a mark within a level

After a level has been decided on, the next stage is to decide on the mark within the level. The instructions below tell you how to reward responses within a level. However, where a level has specific guidance about how to place an answer within a level, always follow that guidance.

Levels containing two marks only

Start with the presumption that the work will be at the top of the level. Move down to the lower mark if the work only just meets the requirements of the level.

Levels containing three or more marks

Markers should be prepared to use the full range of marks available in a level and not restrict marks to the middle. Markers should start at the middle of the level (or the upper-middle mark if there is an even number of marks) and then move the mark up or down to find the best mark. To do this, they should take into account how far the answer meets the requirements of the level:

- If it meets the requirements *fully*, markers should be prepared to award full marks within the level. The top mark in the level is used for answers that are as good as can realistically be expected within that level
- If it only *barely* meets the requirements of the level, markers should consider awarding marks at the bottom of the level. The bottom mark in the level is used for answers that are the weakest that can be expected within that level
- The middle marks of the level are used for answers that have a *reasonable* match to the descriptor. This might represent a balance between some characteristics of the level that are fully met and others that are only barely met.

Indicative content

Examiners are reminded that indicative content is provided as an illustration to markers of some of the material that may be offered by students. It does not show required content and alternatives should be credited where valid.

The British sector of the Western Front, 1914–18: injuries, treatment and the trenches

Question	
1 (a)	Describe one feature of the fighting on the Western Front that led to a high number of injuries. Target: knowledge of key features and characteristics of the period. AO1: 2 marks.
Marking instructions	
Award 1 mark for a valid feature identified. The second mark should be awarded for supporting information. e.g. - Machine gunners were able to mow down large numbers of soldiers as they advanced (1). Machine guns could fire 600 bullets per minute (1). - Trench warfare involved a policy of attrition, with the aim of outlasting the other side in a battle (1). High casualty rates were experienced when fighting continued for days and even months. (1). - Artillery shells and machine guns could inflict multiple injuries (1). Many soldiers died from blood loss as a result of their injuries (1). Accept other appropriate features and supporting information.	

Question	
1 (b)	Describe one feature of the use of blood transfusions on the Western Front. Target: knowledge of key features and characteristics of the period. AO1: 2 marks.
Marking instructions	
Award 1 mark for a valid feature identified. The second mark should be awarded for supporting information. e.g. - Blood transfusions were used to prevent soldiers dying from shock (1). Operations could then be carried out to deal with wounds (1). - New techniques in the storage of blood increased the use of blood transfusions (1). Transfusions no longer needed to have the donor present (1). - A blood bank was created before the Battle of Cambrai in 1917 (1). This was done in anticipation of heavy casualties during the battle (1). Accept other appropriate features and supporting information.	

Question		
2 (a)		How useful are Sources A and B for an enquiry into the difficulties in caring for the wounded on the Western Front? Explain your answer, using Sources A and B and your knowledge of the historical context. Target: Analysis and evaluation of source utility. AO3: 8 marks.
Level	Mark	Descriptor
	0	No rewardable material.
1	1–2	A simple judgement on utility is given, and supported by undeveloped comment on the content of the sources and/or their provenance¹. Simple comprehension of the source material is shown by the extraction or paraphrase of some content. Limited contextual knowledge is deployed with links to the sources.
2	3–5	Judgements on source utility for the specified enquiry are given, using valid criteria. Judgements are supported by developed comment related to the content of the sources and/or their provenance¹. Comprehension and some analysis of the sources is shown by the selection and use of material to support comments on their utility. Contextual knowledge is used directly to support comments on the usefulness of the content of the sources and/or their provenance.
3	6–8	Judgements on source utility for the specified enquiry are given, applying valid criteria with developed reasoning which takes into account how the provenance¹ affects the usefulness of the source content. The sources are analysed to support reasoning about their utility. Contextual knowledge is used in the process of interpreting the sources and applying criteria for judgements on their utility.
Notes 1. Provenance = nature, origin, purpose. Marking instructions Markers must apply the descriptors above in line with the general marking guidance (page 3). No credit may be given for contextual knowledge unless it is linked to evaluation of the sources. No credit may be given for generic comments on provenance which are not used to evaluate source content. Indicative content guidance Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited. The grouping of points below does not imply that this is how candidates are expected to structure their answers. Source A The usefulness could be identified in terms of the following points which could be drawn from the source: - Source A mentions tents and huts, suggesting that many patients were being treated in temporary accommodation, which might not be well-equipped. - Source A is useful because it claims that the overwhelming number of patients arriving for treatment meant that many patients had to be left on the floor, in unhygienic conditions. - Source A suggests that the constant arrival of new patients created an impossible workload, saying that some patients died before they could be treated.		

The following points could be made about the authorship, nature or purpose of the source and applied to ascribe usefulness to material drawn from it:

- Source A is from a chaplain who is writing about things he has seen and as someone who is not directly involved in the medical care of patients, he may be able to give a clear, overall description of conditions.
- Source A is a diary extract, where Walker is writing about the events of each day, so his account may be affected by his personal response to what he has seen.

Knowledge of the historical context should be deployed to support inferences and/or to assess the usefulness of information. Relevant points may include:

- Casualties at the Battle of the Somme were very high, with tens of thousands needing care on the first day of fighting.
- Serious injuries were usually treated at CCSs, all of which faced overwhelming numbers, with limited resources and staff.

Source B

The usefulness could be identified in terms of the following points which could be drawn from the source:

- The content of Source B is useful as it highlights the difficult conditions on the wards caused by the weather.
- Source B suggests that it would be difficult to maintain hygiene when water froze so quickly.
- Source B states that routine work had to start very early each day, which suggests that the staff would be overworked and tired.

The following points could be made about the authorship, nature or purpose of the source and applied to ascribe usefulness to material drawn from it:

- Brittain is writing about her own experiences and therefore can provide valuable insights based on her first-hand knowledge.
- Brittain is writing to her mother so she might not include distressing details.

Knowledge of the historical context should be deployed to support inferences and/or to assess the usefulness of information. Relevant points may include:

- Hospitals and CCSs were often established in abandoned buildings but these had usually been damaged by the fighting, so facilities might be limited.
- The weather often made conditions difficult as heavy rain made the ground muddy, making it difficult to keep conditions hygienic.

Question	
2 (b)	How could you follow up Source B to find out more about the difficulties in caring for the wounded on the Western Front? In your answer, you must give the question you would ask and the type of source you could use. Target: Source analysis and use (the ability to frame historical questions). AO3: 4 marks.
Marking instructions	
Award 1 mark for selecting a detail in Source B that could form the basis of a follow-up enquiry and 1 mark for an appropriate follow-up question. e.g. • <i>Detail in Source B that I would follow up: 'The cold is terrible. The windows of the ward are all covered with icicles.'</i> (1) • <i>Question I would ask: How long did such cold conditions last?</i> (1) (No mark for a question that is not linked to following up Source B, e.g. 'because it would be an interesting question to ask'.) Award 1 mark for identification of an appropriate source to use in a follow-up enquiry and 1 mark for an answer that explains how the information it contains could help answer the chosen follow-up question. e.g. • <i>What type of source I would look for: RAMC financial records containing details of orders for bedding and other provisions to keep patients warm.</i> (1) • <i>How this might help answer my question: These records would show the length of time the authorities needed to make provision for dealing with the cold and difficult conditions.</i> (1) Accept other appropriate alternatives.	

Medicine in Britain, c1250–present

Question		
3		Explain one way in which the Great Plague in London (1665) was similar to the cholera epidemic in London (1854). Target: Analysis of second order concepts: similarity [AO2]; Knowledge and understanding of features and characteristics of the period [AO1]. AO2: 2 marks. AO1: 2 marks.
Level	Mark	Descriptor
	0	No rewardable material.
1	1–2	- Simple or generalised comment is offered about a similarity. [AO2] - Generalised information about the topic is included, showing limited knowledge and understanding of the periods. [AO1]
2	3–4	- Features of the period are analysed to explain a similarity. [AO2] - Specific information about the topic is added to support the comparison, showing good knowledge and understanding of the periods. [AO1]
Marking instructions Markers must apply the descriptors above in line with the general marking guidance (page 3). Performance in AO1 and AO2 is interdependent. An answer displaying no qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge <i>and</i> understanding. Indicative content guidance Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited. Relevant points may include: - In both cases, people did not know what caused the disease. Ideas about the cause of the Great Plague included divine action, miasma or astrological influences; ideas about the cause of cholera were miasma or spontaneous generation. - Both epidemics were terrifying for the population. Many people left London in 1665 as they were afraid of the effects of the plague and, in the cholera epidemic of 1854, Londoners were terrified as thousands died in a short space of time.		

Question		
4		Explain why Pasteur's Germ Theory (1861) led to changes in medicine in the years c1861-present. You may use the following in your answer: • Koch's work identifying microbes • antiseptic surgery You must also use information of your own. Target: Analysis of second order concepts: causation/change [AO2]; Knowledge and understanding of features and characteristics [AO1]. AO2: 6 marks. AO1: 6 marks.
Level	Mark	Descriptor
	0	No rewardable material.
1	1–3	• A simple or generalised answer is given, lacking development and organisation. [AO2] • Limited knowledge and understanding of the topic is shown. [AO1]
2	4–6	• An explanation is given, showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1]
3	7–9	• An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] <i>Maximum 8 marks for answers that do not address three or more aspects of content.</i>
4	10–12	• An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] <i>No access to Level 4 for answers that do not address three or more aspects of content.</i>

Marking instructions

Markers must apply the descriptors above in line with the general marking guidance (page 3).

Performance in AO1 and AO2 is interdependent. An answer displaying **no** qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge *and* understanding.

The middle mark in each level may be achieved by stronger performance in either AO1 or AO2.

Indicative content guidance

Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited.

Relevant points may include:

- Pasteur's Germ Theory led to Koch's understanding that disease was caused by different microbes and that vaccinations against individual diseases could be developed once specific microbes had been identified.
- The work of Koch in building on Pasteur's Germ Theory to identify specific microbes that caused individual diseases, led to developments in treatment, e.g. Salvarsan 606.
- The Germ Theory led to Lister understanding that infection in surgery could be reduced by the introduction of antiseptic techniques.
- Understanding the link between germs and infection led to the development of aseptic surgery.
- Acceptance of the Germ Theory led to improvements in public health that reduced the spread of infectious diseases.
- Pasteur's Germ Theory led to a more scientific understanding of disease, for example, explaining the basis of previous discoveries such as Jenner's vaccination against smallpox and Snow's demonstration that cholera was water-borne.

Question		
5		'In the years c1250-c1700, medicine was mainly based on the Theory of the Four Humours.' How far do you agree? Explain your answer. You may use the following in your answer: • Galen • herbs and spices You must also use information of your own. Target: Analysis and evaluation of second order concepts: significance [AO2]; Knowledge and understanding of features and characteristics [AO1]. AO2: 10 marks. AO1: 6 marks. Spelling, punctuation, grammar and the use of specialist terminology (SPaG): up to 4 additional marks.
Level	Mark	Descriptor
	0	No rewardable material.
1	1–4	• A simple or generalised answer is given, lacking development and organisation. [AO2] • Limited knowledge and understanding of the topic is shown. [AO1] • The overall judgement is missing or asserted. [AO2]
2	5–8	• An explanation is given showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] • The overall judgement is given but its justification is asserted or insecure. [AO2]
3	9–12	• An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] • The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2] <i>Maximum 11 marks for answers that do not address three or more aspects of content.</i>
4	13–16	• An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] • Criteria for the required judgement are justified and applied in the process of reaching the overall judgement. [AO2] <i>No access to Level 4 for answers that do not address three or more aspects of content.</i>

Marks for SPaG		
Performance	Mark	Descriptor
	0	• The learner writes nothing. • The learner's response does not relate to the question. • The learner's achievement in SPaG does not reach the threshold performance level, e.g. errors in spelling, punctuation and grammar severely hinder meaning.
Threshold	1	• Learners spell and punctuate with reasonable accuracy. • Learners use rules of grammar with some control of meaning and any errors do not significantly hinder meaning overall. • Learners use a limited range of specialist terms as appropriate.
Intermediate	2–3	• Learners spell and punctuate with considerable accuracy. • Learners use rules of grammar with general control of meaning overall. • Learners use a good range of specialist terms as appropriate.
High	4	• Learners spell and punctuate with consistent accuracy. • Learners use rules of grammar with effective control of meaning overall. • Learners use a wide range of specialist terms as appropriate.
Marking instructions Markers must apply the descriptors above in line with the general marking guidance (page 3). Performance in AO1 and AO2 is interdependent. An answer displaying no qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge <i>and</i> understanding. The first two bullet points [AO1 and AO2] account for 3 of the 4 marks in the level and are equally weighted; the third bullet point [AO2] accounts for the remaining mark. Once the level has been found, there are two steps to follow to determine the mark within the level: • Markers should consider bullet points 1 and 2 together. Strong performance (for the level) in both would be awarded all 3 marks, while 2 marks may be achieved by stronger performance in either bullet point; weak performance would be awarded 1 mark. • The fourth mark in each level is allocated to the bullet point 3 and should be considered independently of the award of the other marks. Indicative content guidance Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited. The grouping of points below does not imply that this is how candidates are expected to structure their answers. Relevant points that support the statement may include: • Prevention and treatment continued to be based on the idea of balancing the Four Humours, by bloodletting, purging or using Galen's Theory of Opposites. • Physicians' medical degrees and training were all based on the works of Galen, who promoted the Theory of the Four Humours, until the sixteenth and seventeenth centuries. • The Church discouraged dissections and practical research which might have discredited the Theory of the Four Humours. • When there were different ideas about the cause of disease, for example, divine intervention, or new ideas such as, Sydenham's work on disease, this did not lead to new prevention and treatment, which generally continued to be based on the Theory of the Four Humours.		

Relevant points to counter the statement may include:

- There was a practical understanding that bad air, miasma, was linked to disease and therefore some ideas about prevention were based on this, for example, carrying sweet-smelling herbs to protect against the plague.
- Many people who could not afford a physician relied on traditional medicine, based on home-made herbal remedies.
- Apothecaries often produced ready-made medicines, which were based on herbs, spices and minerals.
- Many people believed that disease had a religious cause and therefore based prevention and treatment on religious practices.

Question		
6		'In the years c1800-present, the role of the government was the most important factor in improving care and treatment in hospitals.' How far do you agree? Explain your answer. You may use the following in your answer: - the creation of the NHS (1948) - Nightingale's <i>Notes on Nursing</i> (1859) You must also use information of your own. Target: Analysis and evaluation of second order concepts: causation; significance [AO2]; Knowledge and understanding of features and characteristics [AO1]. AO2: 10 marks. AO1: 6 marks. Spelling, punctuation, grammar and the use of specialist terminology (SPaG): up to 4 additional marks.
Level	Mark	Descriptor
	0	No rewardable material.
1	1–4	- A simple or generalised answer is given, lacking development and organisation. [AO2] - Limited knowledge and understanding of the topic is shown. [AO1] - The overall judgement is missing or asserted. [AO2]
2	5–8	- An explanation is given showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] - Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] - The overall judgement is given but its justification is asserted or insecure. [AO2]
3	9–12	- An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] - Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] - The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2] <i>Maximum 11 marks for answers that do not address three or more aspects of content.</i>
4	13–16	- An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] - Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] - Criteria for the required judgement are justified and applied in the process of reaching the overall judgement. [AO2] <i>No access to Level 4 for answers that do not address three or more aspects of content.</i>

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Indicative content guidance

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Relevant points that support the statement may include:

- The government improved access to care and treatment when it set up the NHS to provide free access at the point of delivery from GPs and hospitals.
- The government funded the building of new NHS hospitals and the provision of technology used by the NHS to aid treatment, for example, in chemotherapy, radiography, transplant surgery.
- The government funded the development of additional services offered through NHS hospitals, such as physiotherapy, and support in stopping smoking.
- During the nineteenth and early twentieth centuries, local governments set up some hospitals, for example to isolate TB patients.

Relevant points to counter the statement may include:

- Florence Nightingale's Notes on Nursing led to the professionalisation of nursing, with a key role in caring for patients in hospitals.
- Nightingale's emphasis on the importance of hygiene led to a better standard of care and treatment in

hospitals.

- Advances in scientific knowledge and surgery led to developments, for example, transplant surgery, improving the care and treatment of patients with life-threatening conditions.
- Developments in technology improved the standard of care and treatment in hospitals, for example, monitoring devices, intravenous drips, and dialysis machines.

