



# T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

## Supporting the Midwifery Team

Assignment 3 – Professional discussion

Mark scheme

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# Supporting the Midwifery Team

## Mark scheme

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## About this document

This mark scheme has been written by the assessment writer and refined, alongside the relevant questions, by a panel of subject experts through the external assessment writing process and at standardisation meetings.

The purpose of this mark scheme is to give you:

- examples and criteria of the types of response expected from a student
- information on how individual marks are to be awarded
- the allocated performance outcomes (POs) and total marks for each question

SAMPLE

# Marking guidelines

## General guidelines

You must apply the following marking guidelines to all marking undertaken throughout the marking period. This is to ensure fairness to all students, who must receive the same treatment. You must mark the first student in exactly the same way as you mark the last.

The mark scheme must be referred to throughout the marking period and applied consistently. Do not change your approach to marking once you have been standardised.

Reward students positively giving credit for what they have shown, rather than what they might have omitted.

Utilise the whole mark range and always award full marks when the response merits them.

Be prepared to award 0 marks if the student's response has no creditworthy material.

Do not credit irrelevant material that does not answer the question, no matter how impressive the response might be.

The marks awarded for each response should be clearly and legibly recorded.

If you are in any doubt about the application of the mark scheme, you must consult with your team leader or the chief examiner.

## Guidelines for using extended-response marking grids

Extended-response marking grids have been designed to award a student's response holistically and should follow a best-fit approach. The grids are broken down into bands, with each band having an associated descriptor indicating the performance at that band. You should determine the band before determining the mark.

When determining a band, you should use a bottom-up approach. If the response meets all the descriptors in the lowest band, you should move to the next one, and so on, until the response matches the band descriptor.

Remember to look at the overall quality of the response and reward students positively, rather than focussing on small omissions. If the response covers aspects at different bands, you should use a best-fit approach at this stage and use the available marks within the band to credit the response appropriately.

When determining a mark, your decision should be based on the quality of the response in relation to the descriptors. You must also consider the relative weightings of the assessment objectives (AOs), so as not to over/under credit a response. Standardisation materials, marked by the chief examiner, will help you with determining a mark. You will be able to use exemplar student responses to compare to live responses, to decide if it is the same, better, or worse.

You are reminded that the indicative content provided under the marking grid is there as a guide and, therefore, you must credit any other suitable responses a student may produce. It is not a requirement either, that students must cover all of the indicative content to be awarded full marks.

## Performance outcomes (POs)

This assessment requires students to demonstrate the following:

### Supporting Healthcare (core)

<b>PO1</b>	Assist with an individual's overall care and needs to ensure comfort and wellbeing
<b>PO2</b>	Assist registered health professionals with clinical or therapeutic tasks and interventions
<b>PO3</b>	Undertake a range of physiological measurements

### Supporting the Midwifery Team (option B)

<b>PO1</b>	Assist the midwifery team with clinical tasks
<b>PO2</b>	Assist the midwife to provide care for mothers and support to parents at all stages, from antenatal, perinatal and postnatal
<b>PO3</b>	Assist with the care of newborn babies by undertaking observations and measurements

## **Theme 1: the midwifery team and the roles and responsibility of a maternity support worker**

### **Question 1**

#### **Part A**

Referring to your own learning or experience, discuss the role of a maternity support worker in health education in the antenatal and postnatal period.

#### **Part B**

Referring to your own experience or learning, explain the importance of interpersonal skills when working in partnership with a multidisciplinary team (MDT).

(12 marks)

Band	Mark	Descriptor
4	10–12	<p>Discussion of the role a maternity support worker plays in health education in the antenatal and postnatal periods are highly detailed.</p> <p>Demonstration of accurate and excellent understanding of use of skills and behaviours always consistent with application of knowledge to practice.</p> <p>Comprehensive explanation of the importance of interpersonal skills and the impact it has on an effective team, which is highly relevant.</p>
3	7–9	<p>Discussion of the role a maternity support worker plays in health education in the antenatal and postnatal periods has good detail.</p> <p>Appropriate demonstration of accurate understanding of use of skills and behaviours consistent with application of knowledge to practice.</p> <p>Good explanation of the importance of interpersonal skills and the impact it has on an effective team, which is mostly relevant.</p>
2	4–6	<p>Description of the role a maternity support worker plays in health education in the antenatal and postnatal periods has satisfactory detail.</p> <p>Mostly appropriate demonstration of understanding of use of skills that is sometimes inconsistent with application of knowledge to practice.</p> <p>Limited explanation of the importance of interpersonal skills and the impact it has on an effective team, which is somewhat relevant.</p>
1	1–3	<p>Tenuous description of the role of a maternity support worker plays in health education in the antenatal and postnatal periods has limited detail and is inaccurate in places.</p> <p>Limited demonstration of understanding of use of skills and behaviours consistent with application of knowledge to practice.</p> <p>Limited explanation the importance of interpersonal skills and the impact it has on an effective team, which is somewhat relevant and is inaccurate in places.</p>
0	0	No creditworthy material.

## Indicative content

### Part A

- aspects of their role in public health promotion in antenatal and postnatal period/signposting
- immunisation for mother – BCG, MMR and Hepatitis B
- immunisation for baby – 6 in 1 vaccine (diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b(hib) Rotavirus, Meningococcal group B), postnatal period (8 weeks)
- vaccinations available – flu, whooping cough, coronavirus, (mother-antenatal period)
- discuss health promotion – healthy lifestyle/diet
- forming positive relationship/bonding with baby
- postnatal exercises – resource information sharing (for example, NHS app)

### Part B

- aids effective communication use of tools and handover of information
- sharing knowledge/expertise and good collaborations
- supports teamworking/problem solving
- sharing resources and research guidance in line with up to date local and national guidance



## Question 2

### Part A

Based on your learning and experience, discuss preparation for parenthood in accordance with local and national guidance.

### Part B

Referring to your learning and experience in part A, discuss the principles of partnership working within an MDT

(20 marks)

SAMPLE

Band	Mark	Descriptor
4	16–20	<p>Highly detailed discussion of the actions required to suitably prepare for parenthood that is in full accordance with local and national guidance with a range of relevant and coherent examples.</p> <p>Explanation demonstrates excellent congruence in application of knowledge and understanding to the specific context.</p> <p>Comprehensive discussion of the principles of partnership and the impact it has on an effective team, which is highly relevant.</p>
3	11–15	<p>Detailed discussion of the actions required to suitably prepare for parenthood that is in full accordance with local and national guidance with a range of generally relevant and coherent examples.</p> <p>Explanation demonstrates good congruence in application of knowledge and understanding to the specific context.</p> <p>Good discussion of the principles of partnership and the impact it has on an effective team, which is mostly relevant.</p>
2	6–10	<p>Satisfactory discussion of the actions required to suitably prepare for parenthood that is in full accordance with local and national guidance with a range of mostly appropriate examples.</p> <p>Explanation demonstrates satisfactory congruence in application of knowledge and understanding to the specific context.</p> <p>Limited discussion of the principles of partnership and the impact it has on an effective team, which is somewhat relevant.</p>
1	1–5	<p>Basic discussion of the actions required to suitably prepare for parenthood that is in full accordance with local and national guidance with limited examples.</p> <p>Explanation demonstrates limited congruence in application of knowledge and understanding to the specific context.</p> <p>Limited discussion of the principles of partnership and the impact it has on an effective team, which is somewhat relevant and inaccurate in places.</p>
0	0	No creditworthy material.

## Indicative content

### Part A

- the areas that are relevant to health and wellbeing, such as infant feeding
- local and national guidance – Baby Friendly Initiative (BFI)
- informed choice, breastfeeding/formula feeding
- breast feeding – feeding cues (closeness and responsiveness), mother/baby wellbeing, support with hand expressing, access help with feeding at home/resources
- formula feeding – feeding cues, understand if the baby is getting enough milk (wet and dirty nappies), support to sterilise equipment and make feeds
- physical, psychological and social needs

### Part B

- sharing expertise enhances support and resources
- builds team relationships
- understanding quality and reliability of policy and guidelines
- builds clear communication
- recognition of and respect for the competence and contribution to each member of MDT
- aids continuity of care/shared knowledge

## Theme 2: birthing environment

### Question 3

#### Part A

Referring to your own experience or learning, describe a situation or period of learning in which you assisted the midwifery team to prepare the birth environment.

#### Part B

Referring to your own experience or learning, explain the role of midwifery team in implementing best practices including choices on a range of different birthing environments.

(12 marks)

SAMPLE

Band	Mark	Descriptor
4	10–12	<p>Description of assisting the midwifery team to prepare the birth environment is highly detailed.</p> <p>Comprehensive explanation of the role of the midwifery team in implementing best practices for a wide range of different birthing environments</p> <p>Demonstrates excellent knowledge in which examples provided are suitable for the environment given in detail.</p>
3	7–9	<p>Description of assisting the midwifery team to prepare the birth environment has good detail.</p> <p>Good explanation of the role of the midwifery team in implementing best practices for a range of different birthing environments.</p> <p>Demonstrates effective knowledge in which examples provided are mostly suitable for the environment given in detail.</p>
2	4–6	<p>Description of assisting the midwifery team to prepare the birth environment has satisfactory detail.</p> <p>Satisfactory explanation of the role of the midwifery team in implementing best practices for a range different birthing environments.</p> <p>Demonstrates satisfactory knowledge in which examples provided are somewhat suitable for the environment given.</p>
1	1–3	<p>Description of assisting the midwifery team to prepare the birth environment is limited in detail and is inaccurate in places.</p> <p>Limited explanation of the role of the midwifery team in implementing best practices for a limited range different birthing environments.</p> <p>Demonstrates limited knowledge in which examples provided are somewhat suitable for the environment given, but are inaccurate in cases.</p>
0	0	No creditworthy material.

## Indicative content

### Part A

- how they assisted in preparation of a birth environment, such as a labour wardroom, birthing pool, or home environment
- labour room
  - setting up room (for example, appropriate equipment bed, birthing ball, monitoring such as Sonicaid/Electronic Foetal Monitoring (EFM), emergency equipment - Resuscitatore, delivery pack, towels, gloves)
  - birthing pool
  - list the birth equipment used within birthing environment (for example, home, bean bag, birthing pool, sieve/strainer, thermometer, birthing ball, gloves, towels)
  - birth pool/hospital setting
  - discuss infection control appropriate for birth pool, the choice of detergents available, dilution regimes, policy/guidelines
  - temperature control – correct temperature between 36–37.5°C
  - maintain equipment
  - disposal of waste appropriately for the birth environment/clinical waste/general waste/personal protective equipment (PPE)

### Part B

- the different options for delivery (for example, home/stand-alone midwifery/hospital attached midwifery/hospital obstetric)
- duty of care by midwifery team if birthplace outside of guidance (for example, high-risk pregnancy)
- MDT discussions, team working collaborations/safeguarding information-sharing
- the importance of personalised birth plans and parental choice (for example, informed choice)
- the choice of pain relief in accordance with birth environment (for example, gas and air, epidural, pethidine injection)

## Question 4

### Part A

Referring to your own experience or learning, explain the duty of care by the midwifery team if chosen birthplaces are outside of guidance.

### Part B

Explain how you have applied knowledge of parental choice and how following birth plans is important to ensure the birthing environment is fit for purpose for women.

(20 marks)

SAMPLE

Band	Mark	Descriptor
4	16–20	<p>Highly detailed explanation of the duty of care the midwifery have in relation to birthplaces chosen that are outside of guidance and all information given is correct and relevant.</p> <p>Highly effective understanding of the requirements of a suitable birthing environment demonstrated.</p> <p>Comprehensive explanation that demonstrates excellent knowledge of the importance of parental choice and birth plans, which supports a positive environment for women with a wide range of suitable examples.</p>
3	11–15	<p>Detailed explanation of the duty of care the midwifery have in relation to birthplaces chosen that are outside of guidance and information given is mostly correct and relevant.</p> <p>Generally effective understanding of the requirements of a suitable birthing environment demonstrated.</p> <p>Detailed explanation that demonstrates effective knowledge of the importance of parental choice and birth plans, which supports a positive environment for women with a range of mostly suitable examples.</p>
2	6–10	<p>Satisfactory explanation of the duty of care the midwifery have in relation to birthplaces chosen that are outside of guidance and information given is somewhat correct and relevant.</p> <p>Satisfactory understanding of the requirements of a suitable birthing environment demonstrated.</p> <p>Basic explanation that demonstrates basic knowledge of the importance of parental choice and birth plans, which supports a positive environment for women with somewhat suitable examples.</p>
1	1–5	<p>Limited explanation of the duty of care the midwifery have in relation to birthplaces chosen that are outside of guidance and information given is somewhat correct and relevant but is in some cases inaccurate.</p> <p>Limited understanding of the requirements of a suitable birthing environment demonstrated.</p> <p>Limited explanation that demonstrates limited knowledge of the importance of parental choice and birth plans, which supports a positive environment for women which contains some inaccuracies.</p>
0	0	No creditworthy material.



## Indicative content

### Part A

- the duty of care by midwifery team
- informed choice of birth environment chosen (for example, advantage/disadvantages)
- the importance of birth planning and preparation prior to birth – considering high risk pregnancy
- team working with multidisciplinary team/consultant midwife/community leads and the use of local and national guidelines
- equipment will be needed, such as emergency equipment/home birthing pool kit (including cleaning equipment /disinfect/ birthing ball)
- risk assessment to include plan if deviations of the norm are evident/plans for transfer into maternity unit

### Part B

- discuss the use of birth plans to effectively plan the birth so the birth environment is fit for purpose
- management of pain relief and the options available outside hospital setting (Entonox or opioid injections)
- choice of birth partner/doula/independent midwife

## Theme 3: supporting with the care of newborn babies

### Question 5

#### Part A

Describe a situation or learning experience to show how you carried out a breastfeeding assessment.

#### Part B

Referring to your own experience or learning, explain how the actions taken following the assessment in part A, provide care that will aid the nutritional needs of babies.

(12 marks)

SAMPLE

Band	Mark	Descriptor
4	10–12	Highly detailed description of how a breastfeeding assessment was completed that demonstrates excellent congruence in application of knowledge and understanding to the specific context.  Comprehensive explanation of how the actions taken following the assessment will aid the nutrition of babies, with all actions well detailed and fully suitable for the needs of the baby.
3	7–9	Detailed description of how a breastfeeding assessment was completed that demonstrates good congruence in application of knowledge and understanding to the specific context.  Detailed explanation of how the actions taken following the assessment will aid the nutrition of babies, with most actions well detailed and fully suitable for the needs of the baby.
2	4–6	Satisfactory description of how a breastfeeding assessment was completed that demonstrates satisfactory congruence in application of knowledge and understanding to the specific context.  Satisfactory explanation of how the actions taken following the assessment will aid the nutrition of babies, with some actions detailed and mostly suitable for the needs of the baby.
1	1–3	Basic description of how a breastfeeding assessment was completed that demonstrates limited congruence in application of knowledge and understanding to the specific context.  Basic explanation of how the actions taken following the assessment will aid the nutrition of babies, with some actions suitable for the needs of the baby, but with some inaccuracies.
0	0	No creditworthy material.

## Indicative content

### Part A

- the importance breastfeeding assessment – to gather baseline information on the wellbeing of nutritional needs of babies
- when the assessment should be completed – at birth, prior to discharge and a minimum of 2 assessments in the first 10 days, with an appropriate plan made
- how to support action plan – discuss observations/positioning/attachment
- documentation and escalation process to relevant multi-professional team/specialist midwife
- explain local and national guidelines – Baby Friendly Initiative (BFI)/supporting families with feeding and developing close and loving relationships so baby has the best start
- using resources to assist with effective feeding as per the mother's choice – use of breast pumps/hand expression techniques/syringe feeding/cup feeding

## Part B

- as a result of actions:
  - the benefits of bonding and feeding/attachment-psychological benefits/lowering stress and increasing calm feelings/mother and baby
  - the importance of skin-to-skin to initiate feeding – keeping baby close
  - the benefits of responsive feeding
- baby self-regulation, such as heart rate/breathing/temperature
- importance of suitable environment for feeding
- establish parental skills

SAMPLE

## Question 6

### Part A

Referring to your own experience or learning, reflect on a time when supporting advice was given to a mother in the postnatal period.

### Part B

Referring to your own experience or learning, explain the procedures in escalating any deviations from the normal expected observations in newborn babies.

(20 marks)

SAMPLE

Band	Mark	Descriptor
4	16–20	<p>Comprehensive and detailed explanation of a situation in which advice was given to a mother in the postnatal period, with all advice given fully suitable for the situation and all advice given was completely within the remit of the role.</p> <p>Sophisticated and reflective evaluation of own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy and protocols.</p> <p>Demonstrates excellent ability to seek advice and clear and coherent understanding of their own limitations and actions to resolve them.</p>
3	11–15	<p>Detailed explanation of a situation in which advice was given to a mother in the postnatal period, with all advice given suitable for the situation and all advice given was within the remit of the role.</p> <p>Appropriate and reflective evaluation of own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>Demonstrates ability to seek advice and clear understanding of their own limitations and actions to resolve them.</p>
2	6–10	<p>Satisfactory explanation of a situation in which advice was given to a mother in the postnatal period, with mostly suitable advice given for the situation and most advice given was within the remit of the role.</p> <p>Mostly appropriate and recognises the signs of jaundice with some evaluation of own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>Demonstrates some ability to seek advice but occasionally demonstrates inaccurate understanding of their own limitations and actions to resolve them.</p>
1	1–5	<p>Basic explanation of a situation in which advice was given to a mother in the postnatal period, with some suitable advice given for the situation and some advice given was within the remit of the role, with some inaccuracies or unsuitable advice given.</p> <p>Inconsistent evaluation of own role, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>Demonstrates some ability to seek advice but frequently demonstrates inaccurate understanding of their own limitations and actions to resolve them.</p>
0	0	No creditworthy material.

## Indicative content

### Part A

- bathing/explain steps to topping and tailing/equipment/bowl/cotton wool/nappy environment/warm room/safety
- promote skin-to-skin management – importance of suitable environment/benefits of bonding and feeding/temperature regulation/heart rate regulation
- breastfeeding – explain responsive feeding/cues/maternal desires to feed/signs of hunger/baby distressed/crying/safety/observations/visualise nostrils
- hand expression/sterilisation
- sleeping – positioning to prevent cot death/safe temperature and environment (for example, non-smoking)

### Part B

- recognising deviation from the normal – use of observation charts (MEWS/BEWs/NEWS)
- scoring system/number/colour coded
- timely escalation to relevant multidisciplinary team/midwife/doctor/consultant/paediatrician
- tools to aid escalation – call buzzer/communication/phone call

## Performance outcome (PO) grid

Question	C-PO1	C-PO2	C-PO3	O-PO1	O-PO2	O-PO3	Total
<b>Theme 1</b>							
1	6				6		12
2	10	10					20
<b>Theme 2</b>							
3	2	2	3	3		2	12
4	3	4	3	3	4	3	20
<b>Theme 3</b>							
5	2		2	3	3	2	12
6	4		4	4	4	4	20
<b>Total</b>	<b>27</b>	<b>16</b>	<b>12</b>	<b>13</b>	<b>17</b>	<b>11</b>	<b>96</b>
<b>% weighting</b>	<b>28.1%</b>	<b>16.7%</b>	<b>12.5%</b>	<b>13.5%</b>	<b>17.7%</b>	<b>11.5%</b>	<b>100</b>



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Owner: Head of Assessment Design

## Change History Record

Version	Description of change	Approval	Date of issue
v1.0	Additional sample material		01 September 2023
v1.1	Sample added as a watermark	November 2023	22 November 2023