

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting Healthcare

Assignment 2 – Practical activities part 1

Provider delivery guide with mark scheme

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Practical activities part 1

Contents

Document security	4
Introduction	5
Summary of the practical activities assessment (PAA)	6
Assessor instructions	7
Assessor information	8
PAA delivery	10
Practical activity scenario 1	11
Role play information	13
Item A: daily care log	14
Floor plan scenario 1	15
Practical activity scenario 2	16
Item B : Pre surgery and Post Surgery physiological measurements	19
Item C: physiological measurements form	20
Item D: NEWS2 observation chart	21
Item E: the NEWS2 scoring system	22
Item F: NEWS2 thresholds and triggers and clinical response to the NEWS2 trigger thresholds	23
Floor plan scenario 2	25
Practical activity scenario 3	26
Floorplan scenario 3	29

PAA mark scheme	30
Marking guidance	30
Scenario-specific skills marking grid	32
Underpinning skills marking grid.....	36
Indicative content	40
Practical activity scenario 1	40
Practical activity scenario 2	41
Practical activity scenario 3.....	43
Performance outcome grid	44
Document information	45

Past Paper

Document security

To be opened on Thursday 6 April 2023 at 9.00am, 7 working days prior to the assessment period from Monday 17 April 2023 to Friday 28 April 2023.

This assessment material must **not** be shared with students. Any breach of this assessment material must be reported to NCFE **immediately** in accordance with the assessment regulations found on the NCFE website.

Time allowed

1 hour 10 minutes

Paper number

P001989

Past Paper

Introduction

This document must be used to deliver and mark the practical activity assessment for the Summer 2023 series of Supporting Healthcare.

It is the responsibility of the internal moderator to follow the guidance contained within this document and ensure that a consistent approach is taken to the delivery and marking for all students through a satisfactory internal standardisation process.

Past Paper

Summary of the practical activities assessment (PAA)

The practical activities assessment (PAA) aspect of the occupational specialism (OS) component requires students to demonstrate practical activities taken from the list of practical activities published by NCFE CACHE in September 2022. The list of practical activities is published in the tutor guidance document, which can be found on the NCFE website.

The PAA is externally set by NCFE.

The PAA is internally marked by provider assessors and moderated by NCFE. Providers are required to audio-visually record the performances of all students.

The PAA requires students to complete the 3 practical activity scenarios detailed in this document.

The PAA is assessed against 2 mark schemes:

- a scenario-specific skills mark scheme – this mark scheme is applied to award a mark for every practical activity scenario
- an underpinning skills mark scheme – this mark scheme is applied to award a mark across the practical activity scenarios

Assessor instructions

This assessment requires students to demonstrate the **3** practical activity scenarios detailed in this document, the practical activity scenarios are taken from the list of practical activities published by NCFE in September 2022.

It is the responsibility of the internal moderator to follow the guidance contained within this document and ensure that the practical activity scenarios are set up correctly at different stations within a suitable assessment environment.

The floor plans included are illustrative to suggest an appropriate layout for each scenario. It is not a requirement to exactly replicate the floor plan and there may be resources and equipment not represented on the floor plan.

Students will move between the **3** stations during the assessment, once the first student has completed station 1 and moved to station 2, the next student will be admitted to station 1, and so on.

Students must be given up to **5** minutes when they get to each station to prepare for the practical activity scenario. They should use this time to carefully read each practical activity scenario, including any supporting information and familiarise themselves with the station.

Students will have a maximum amount of time to complete each practical activity scenario. The time available is written clearly at the beginning of each practical activity scenario; if a student goes over this time, you must tell them to move on to the next station.

Assessors should read the instructions and information on the front of the assignment brief to the student and confirm understanding before the practical activity assessment begins. Students should be made aware that some stations might take more time than others, meaning they may have a short wait before being allowed to progress to the next station and understand that this waiting time will still be under supervised conditions, as specified in the tutor guide and assessment regulation documents.

Where providers are delivering the assessment with assessors remaining at each station, providers must ensure that there is a mechanism by which the students' assessment booklets can be kept securely between stations.

Assessors will need to collect the students' completed assignment brief booklets at the end of the assessment.

Students will need to complete and sign the external assessment cover sheet to confirm the authenticity of their work and to confirm that they will uphold the confidentiality of the assessment..

Assessor information

Marks

- the marks available for each practical activity scenario are shown in brackets
- the marks for this assessment are broken down into scenario-specific skills and underpinning skills:
 - 16 marks are available for scenario-specific skills, students will be awarded a scenario-specific skills mark for their performance in each practical activity scenario they demonstrate
 - 12 marks are available for underpinning skills, students will be awarded an underpinning skills mark for their holistic application of these skills in their performance across the practical activity scenarios they demonstrate
- the maximum mark for this assessment is 60

Materials

For this assessment students must have:

- a black or blue ball-point pen

Equipment and resources

The equipment and resources listed under each practical activity scenario are in line with those detailed in the qualification specification. All equipment and resources should be familiar to the student and used during teaching and learning delivery of the qualification.

Standardised patients and role play

Where the practical activity scenario requires a standardised patient (SP) or element of role play, these roles must be fulfilled by a member of the provider staff. It is not appropriate to use students or any other person in these roles for the assessment.

Standardised patients and role players (RP) must be fully briefed on the requirements of their role in each of the scenarios, prior to the assessments taking place. Role play scripts are provided in the resources where appropriate.

Number of provider staff required

The table below indicates the number of provider staff that are needed to deliver **each** practical activity scenario.

Practical activity scenario	Assessor	SP/RP*	Total
1	1	1	2
2	1	1	2
3	1	1	2

Note: The assessor will act as one of RPs if their role is minimal and **only** where it does not distract from the focus being on applying the mark scheme. Further detail is provided in the specific requirements for each practical activity scenario.

Assessing the practical activity stations

Providers can manage the marking of the practical activity assessment in 2 ways:

- individual students are assessed on all practical activity stations by one assessor or
- individual students are assessed by multiple assessors located at the different practical activity stations

It is the internal moderator's responsibility to ensure that the assessors marking, in either approach, is in line with the agreed standard.

Past Paper

PAA delivery

For further guidance on the general delivery of the PAA, please refer to the tutor guidance document, which can be found on the NCFE website.

Please be aware that the details provided in this section, whilst reflecting the assignment brief document given to students, do contain additional information. The additional information is supplied to help providers establish a consistent approach to the delivery and marking of the PAA.

Most of the items contained within this document will be repeated in the students' assignment brief. There will, however, be instances where providers need to make copies of items from this document. Clear instructions will be given where this is the case.

Past Paper

Practical activity scenario 1

This practical activity scenario requires students to:

CPA3: Respond to an incident or emergency

CPA4: Demonstrate a range of techniques for infection prevention and control

Purpose

The scenario aims to assess the knowledge and skills of the student in responding to a change in situation, patient comfort and wellbeing.

Brief

A 77-year-old patient was admitted to a medical respiratory ward last night with a chest infection.

The registered nurse has asked you to check on the patient.

As you approach the patient to complete this task you notice a small pool of vomit on the floor.

Task

You must respond appropriately to this situation. Including dealing with the spillage and waste management.

Check on the patient and record the situation in the individual's daily care log (item A).

[16 marks]

Plus marks for underpinning skills –
duty of care, candour and person-centred care,
communication and health and safety

Supporting information

Mode of assessment

This practical activity scenario involves role play. The individual will be played by a member of staff or manikin and a member of staff will respond to questions as appropriate.

The student will be provided with a daily care log.

Information about the role play is provided below: role play information.

The individual should sit up in the hospital chair when the student moves to the station.

Equipment

This practical activity scenario requires the following equipment:

- a chair
- clinical waste kit, including clinical waste bin
- yellow slip sign
- handwashing equipment
- simulated vomit on floor (for example, vegetable soup, chicken soup, orange juice with crackers)
- general cleaning equipment and products for use on the floor
- personal protection equipment (PPE) - apron and gloves (masks not required)

Resources

Daily care log (item A)

Time

The total amount of time available for this practical activity scenario, including the 5 minutes' reading time, is 20 minutes.

Performance outcomes

This practical activity scenario assesses:

PO1: Assist with an individual's overall care and needs to ensure comfort and wellbeing

PO3: Undertake a range of physiological measurements

Role play information

The individual should act within the parameters of the information provided in the care plan.

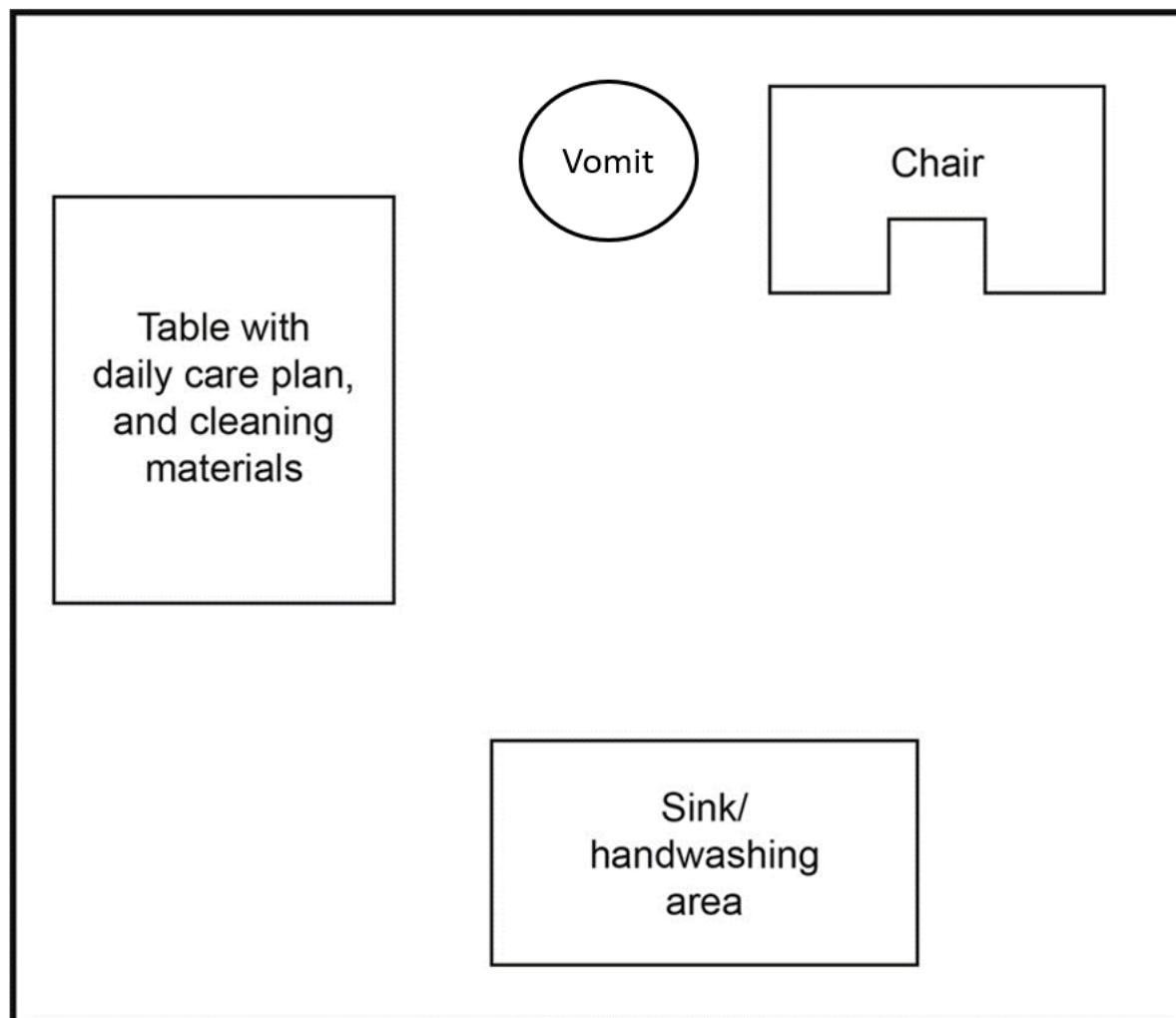
If asked, advise the student that your stomach is no longer upset, and you are not likely to vomit again. The problem was caused by excessive coughing due to the chest infection rather than illness.

Item A: daily care log

Name	Home address	DOB
Jones, Sam	5 Waybourne Road, Wittering, PE5 8XZ	18 May 1944

Date	Time	Actions taken	Signatures
17/03/23	20:00	Patient admitted at 8pm and has started antibiotics for next 48 hours.	A Bennett RN (A)
18/03/23	09:00	Patient has been seen by physiotherapist who has explained some deep breathing exercises to be used by patient every hour.	D Clark

Floor plan scenario 1



Practical activity scenario 2

This practical activity scenario requires students to:

CPA2: Undertake and record a range of physiological measurements, recognising deteriorations in physical health and escalating as appropriate

Purpose

The scenario aims to assess students' knowledge and skills relevant to undertaking and recording key vital signs and physiological measures, recording and responding to findings.

Brief

A 48 year old patient has been admitted to the ward with a fracture of their left forearm and left ribs. The injuries were caused by a fall from a ladder 1 day ago.

The patients' observations have been recorded pre-surgery and post-surgery and are provided on Item B.

The patient has now been cleared to eat and drink post -surgery.

You have been asked to complete the patients' observations on return to the ward from surgery.

The patient is currently lying in a hospital bed and appears alert.

Task

It is 6pm, take the patient's current observations:

- respiratory rate
- oxygen saturation
- blood pressure
- heart rate
- level of consciousness
- body temperature

Use item C to make notes then record them on item D.

Using information from Item E, calculate the individual's NEWS2 score on Item D.

Report verbally the findings to the nurse in charge including information on any deteriorations in observations from the pre and post-surgery observations.

Item B, Item E and Item F can be used to report the findings.

As the patient has now been cleared to eat and drink, report to the nurse how his elimination, nutrition and hydration should be monitored.

[16 marks]

Plus marks for underpinning skills – duty of care, candour and person-centred care, communication and health and safety

Supporting information

Mode of assessment

This practical activity involves role play in order to:

- assess students' knowledge and skills relevant to undertaking and recording key vital signs and physiological measures
- recording and responding to findings as mandated by the NEWS2 tool
- relaying findings back to the nurse in charge, who will need to be played by a member of staff

The patient in this practical activity scenario is played by a member of staff or manikin.

If using a manikin, once the student has correctly demonstrated the skill they should be given the readings below to continue the task.

- respiratory rate – 21 breaths per minute
- oxygen saturation (SpO2 scale 1) – 94%
- blood pressure – 148/90 mmHg
- heart rate – 93 bpm
- body temperature – 37.6°C

Note: temperature and oxygen saturations should be provided by the member of staff once the student has used the equipment correctly.

If required, the assessor should act as the manikin's voice to respond to the student's communication in a minimal but compliant way, for example, consenting to procedure, responding to questions about comfort/position.

An appropriate simulated dressing/ bandage to the left forearm should be applied to the patient.

Equipment

This practical activity scenario requires the following equipment:

- a manikin/role player/assessor
- automatic blood pressure (BP) machine
- a thermometer
- a pulse oximeter
- a watch with second hand
- NEWS2 chart
- PPE – gloves and apron
- general cleaning equipment for products after use
- handwashing equipment

Resources

Students are given pre surgery and post surgery physiological measurements (item B), physiological measurement form (item C) and NEWS2 observation chart (item D) within the assignment brief booklet. Providers must also ensure that students have access to the NEWS2 scoring system (item E), and NEWS2 thresholds and triggers and clinical response to the NEWS2 trigger thresholds (item F).

Time

The total amount of time available for this practical activity scenario, including the 5 minutes reading time is 30 minutes.

Performance outcomes

This practical activity scenario assesses:

PO1: Assist with an individual's overall care and needs to ensure comfort and wellbeing

PO2: Assist registered health professionals with clinical or therapeutic tasks and interventions

PO3: Undertake a range of physiological measurements

Role play

If required, the assessor should act as the responsive manikin's voice to respond to the student's communication in a minimal but compliant way, for example, consenting to procedure, responding to questions about comfort/position.

Item B: pre-surgery and post-surgery physiological measurements

Physiological measurement	Pre-surgery 2pm	Post- surgery 4pm
Blood pressure	110/80 mmHg	120/85 mmHg
Heart rate	85bpm	90bpm
Respirations	18bpm	20bpm
Oxygen saturation	94%	94%
Body temperature	37°C	37.5%

Item C: physiological measurements form

Use this form to make notes. This will **not** be marked as part of your assessment.

Physiological measurements			
Blood pressure			
Heart rate			
Respirations			
Oxygen saturation			
Body temperature			

Item D: NEWS2 observation chart

NEWS key		FULL NAME											
0 1 2 3		DATE OF BIRTH					DATE OF ADMISSION						
DATE TIME							DATE TIME						
A+B Respirations Breaths/min	≥25						3						≥25
	21–24						2						21–24
	18–20												18–20
	15–17												15–17
	12–14						1						12–14
	9–11												9–11
≤8						3						≤8	
A+B SpO ₂ Scale 1 Oxygen saturation (%)	≥96											≥96	
	94–95						1					94–95	
	92–93						2					92–93	
	≤91						3					≤91	
SpO₂ Scale 2† Oxygen saturation (%) Use Scale 2 if target range is 88–92%, eg in hypercapnic respiratory failure ONLY use Scale 2 under the direction of a qualified clinician	≥97 on O ₂						3					≥97 on O ₂	
	95–96 on O ₂						2					95–96 on O ₂	
	93–94 on O ₂						1					93–94 on O ₂	
	≥93 on air											≥93 on air	
	88–92											88–92	
	86–87						1					86–87	
	84–85						2					84–85	
	≤83%						3					≤83%	
Air or oxygen?	A=Air											A=Air	
	O ₂ L/min						2					O ₂ L/min	
	Device											Device	
C Blood pressure mmHg Score uses systolic BP only	≥220						3					≥220	
	201–219											201–219	
	181–200											181–200	
	161–180											161–180	
	141–160											141–160	
	121–140											121–140	
	111–120											111–120	
	101–110						1					101–110	
	91–100						2					91–100	
	81–90											81–90	
	71–80											71–80	
	61–70						3					61–70	
	51–60											51–60	
≤50											≤50		
C Pulse Beats/min	≥131						3					≥131	
	121–130						2					121–130	
	111–120											111–120	
	101–110						1					101–110	
	91–100											91–100	
	81–90											81–90	
	71–80											71–80	
	61–70											61–70	
	51–60											51–60	
	41–50						1					41–50	
	31–40											31–40	
	≤30						3					≤30	
	D Consciousness Score for NEW onset of confusion (no score if chronic)	Alert											Alert
Confusion												Confusion	
V							3					V	
P												P	
U												U	
E Temperature °C	≥39.1°						2					≥39.1°	
	38.1–39.0°						1					38.1–39.0°	
	37.1–38.0°											37.1–38.0°	
	36.1–37.0°											36.1–37.0°	
	35.1–36.0°						1					35.1–36.0°	
	≤35.0°						3					≤35.0°	
NEWS TOTAL							TOTAL						
Monitoring frequency							Monitoring						
Escalation of care Y/N							Escalation						
Initials							Initials						

National Early Warning Score (NEWS) 2

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Item E: the NEWS2 scoring system

National Early Warning Score (NEWS) 2

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Physiological parameter	3	2	1	Score 0	1	2	3
Respiration rate (per minute)	≤8		9–11	12–20		21–24	≥25
SpO ₂ Scale 1 (%)	≤91	92–93	94–95	≥96			
SpO ₂ Scale 2 (%)	≤83	84–85	86–87	88–92 ≥93 on air	93–94 on oxygen	95–96 on oxygen	≥97 on oxygen
Air or oxygen?		Oxygen		Air			
Systolic blood pressure (mmHg)	≤90	91–100	101–110	111–219			≥220
Pulse (per minute)	≤40		41–50	51–90	91–110	111–130	≥131
Consciousness				Alert			CVPU
Temperature (°C)	≤35.0		35.1–36.0	36.1–38.0	38.1–39.0	≥39.1	

Item F: NEWS2 thresholds and triggers and clinical response to the NEWS2 trigger thresholds

NEW Score	Clinical Risk	Response
Aggregate score 0–4	Low	Ward-based response
Score of 3 in any individual parameter	Low–medium	Urgent ward-based response *
Aggregate score 5–6	Medium	Key threshold for urgent response *
Aggregate score 7 or more	High	Urgent or emergency response **

*Response by a clinician or team with competence in the assessment and treatment of acutely ill patients and in recognising when the escalation of care to a critical care team is appropriate.

**The response team must also include staff with critical care skills, including airway management.

National Early Warning Score (NEWS) 2

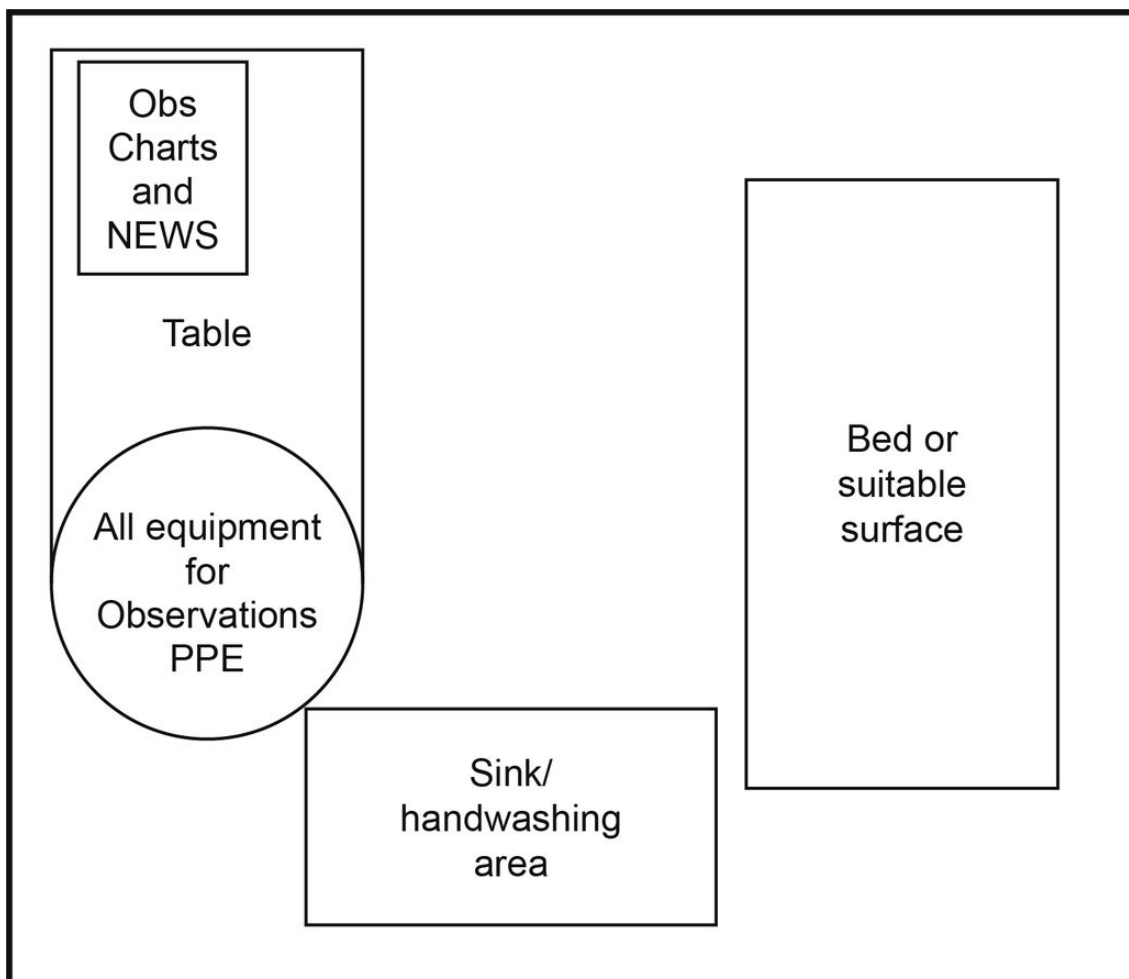
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NEW score	Frequency of monitoring	Clinical Response
0	Minimum 12-hourly	<ul style="list-style-type: none"> continue routine NEWS monitoring
Total 1–4	Minimum 4–6 hourly	<ul style="list-style-type: none"> inform registered nurse, who must assess the patient registered nurse decides whether increased frequency of monitoring and/or escalation of case is required
3 in single parameter	Minimum 1-hourly	<ul style="list-style-type: none"> registered nurse to inform medical team caring for the patient, who will review and decide whether escalation of care is necessary
Total 5 or more Urgent response threshold	Minimum 1-hourly	<ul style="list-style-type: none"> registered nurse to immediately inform the medical team caring for the patient registered nurse to request urgent assessment by a clinician or team with core competencies in the care of acutely ill patients provide clinical care in an environment with monitoring facilities
Total 7 or more Emergency response threshold	Continuous monitoring of all vital signs	<ul style="list-style-type: none"> registered nurse to immediately inform the medical team caring for the patient – this should be at least at specialist registrar level emergency assessment by a team with critical care competencies, including practitioners with advanced airway management skills consider transfer of care to a level 2 or 3 clinical care facility, for example, higher-dependency unit or ICU clinical care in an environment with monitoring facilities

National Early Warning Score (NEWS) 2

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Floor plan scenario 2



Practical activity scenario 3

This practical activity scenario requires students to:

CPA7: Assist in the overall comfort and wellbeing of an individual, contributing, recording and following care plans and responding as appropriate

Purpose

To assess students' knowledge and skills relevant to undertaking and recording information about a patient's fluid and nutrition status.

Brief

An 81-year-old has been admitted to the medical assessment unit from a nursing home for investigations with a recent history of reduced eating and drinking.

The registered nurse has told you that the individual's fluid balance needs monitoring.

Task

The current time is 4pm and the fluid balance chart started at 1am today.

Item G is the fluid balance chart.

Use item G to measure and record the individual's urine output

(As there is no sluice available, you are not required to dispose of the urine sample after use. But place it in a safe position until the task is completed)

[16 marks]

Plus marks for underpinning skills –
duty of care, candour and person-centred care,
communication and health and safety

Supporting information

Mode of assessment

The patient in this practical activity scenario is played by a staff member. If required, the staff member should respond to the student's communication in a minimal way, for example, consenting to procedure, responding to questions about comfort/position. The student should request that the patient provides a urine sample by directing them to the toilet facilities and allowing privacy. At this point the staff member playing the role of patient should pour 200ml of simulated urine-coloured fluid into the bed pan before returning it to the student. While frail the patient is mobile and able to get to the commode/toilet. This is not a moving and handling task.

Students are not required to dispose of the urine sample within the task due to the unavailability of a sluice, student will safely position the sample to one side to complete and finish the task.

Equipment

This practical activity scenario requires the following equipment:

- clinical waste kit
- measuring jug with ml markers
- fluid balance chart
- PPE – apron and gloves
- handwashing equipment
- commode/simulated toilet area/disposable bed pan

Resources

Students are given a fluid balance chart (item G)

Time

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 20 minutes.

Performance outcomes

This practical activity scenario assesses:

PO1: Assist with an individual's overall care and needs to ensure comfort and wellbeing

PO2: Assist registered health professionals with clinical or therapeutic tasks and interventions

PO3: Undertake a range of physiological measurements

Item G: fluid balance chart

Fluid balance chart

Hospital:

Patient's weight 75 Kg

Write particulars or affix identification label here

Surname:

First Name(s)

RIO No.:

NHS No.:

Date:

24 hours from:

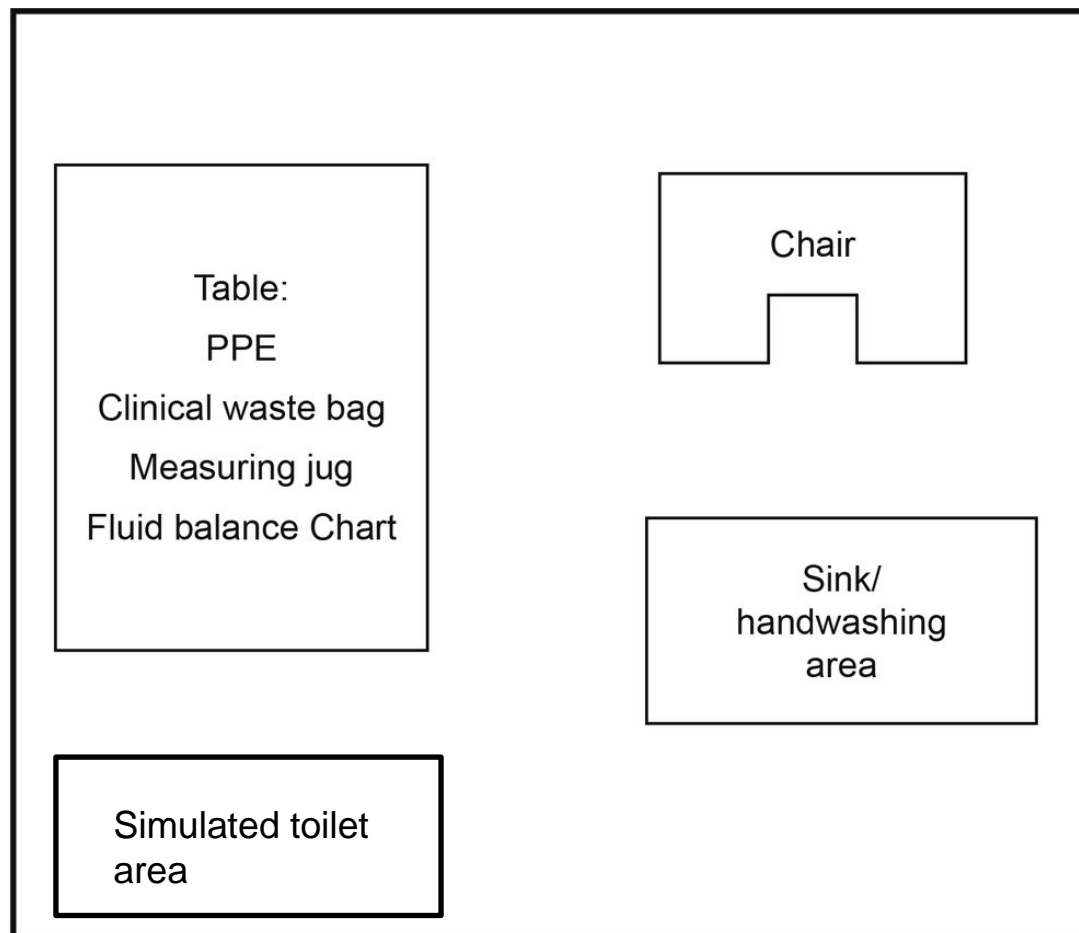
to:

FLUID BALANCE

Time	INTAKE: ml			OUTPUT: ml		
	Oral	Intravenous	Other	Urine		Vomit
0100						
0200						
0300						
0400						
0500						
0600	Tea 200					
0700						
0800				245		
0900						
1000	Water 100					
1100						
1200	Tea 200					
1300				355		
1400	Water 150					
1500						
1600						
1700						
1800						
1900						
2000						
2100						
2200						
2300						
TOTALS						
Total intake:			Measured output:	Estimated insensible losses:		
BALANCE:						

DO NOT DESTROY WHEN ENTRY IS COMPLETED ON REVERSE1

Floorplan scenario 3



PAA mark scheme

The mark scheme for the PAA comprises of marking grids and indicative content.

The following marking grids should be used to assess students and award marks for the scenario-specific skills and underpinning skills. The indicative content for the scenario-specific skills is for the practical activity scenarios set for the Summer 2023 series only.

To understand what is required to be awarded marks, students should have already been provided with a copy of the marking grids. The marking grids are published in the tutor guidance document, which can be found on the NCFE website.

Assessors are reminded that they should complete a student assessment record form to record descriptive information and evidence of the student's skills and knowledge demonstrated during the PAA. The student assessment record form can be found on the NCFE website.

Marking guidance

Marking grid

The marking grids for the scenario-specific skills and the underpinning skills identify the 4 assessment criteria that students are assessed against. Each assessment criterion is out of a total of 4 marks.

The assessment criteria are broken down into 4 bands with a corresponding descriptor. The descriptor for the band indicates the quality of a student's performance in that band. The band is the mark that should be awarded for that assessment criterion (for example, band 1 = 1 mark and band 4 = 4 marks). There is a total of 16 marks available for the scenario-specific skills, and 12 marks available for underpinning skills mark schemes, which should be used in accordance with the assessment requirements (see page 8 for details).

When determining marks for scenario-specific skills, assessors should only consider the quality of the student's performance in that scenario. When determining a band/mark, assessors' decisions should be based on the overall quality of the student's performance in relation to the descriptors. If the student's performance covers different aspects of different bands, assessors should use a best-fit approach to award the band/mark.

When determining marks for underpinning skills, the assessor should consider performance across **all** scenarios. Where certain scenarios do not provide opportunities for students to demonstrate an underpinning skill, students should not be penalised; the mark awarded should be based on the quality of the student's performance in scenarios where the underpinning skills have emerged. When determining a band/mark, assessors' decisions should be based on the overall quality of the student's performance in relation to the descriptors. If the student's performance of a particular underpinning skill is inconsistent across scenarios, and covers different aspects of different bands, assessors should use a best-fit approach to award the most appropriate band/mark.

Standardisation materials can be used to help assessors with determining a band/mark if they are unsure.

Assessors should start at the lowest band of the marking grid and move up until there is a match between the band descriptor and the student's performance.

Indicative content

Indicative content has been provided as a guide to help assessors understand what should be expected in a student's performance to allow for a marking judgement to be made. Assessors are reminded that indicative content is not an exhaustive list.

Past Paper

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations/legislation in relation to clinical tasks		Use of equipment and/or materials and/or resources in relation to clinical tasks		Following, recording, reporting, and/or storing data and/or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the clinical tasks, that is sustained throughout the student's practice.	4	The student demonstrates a highly effective application of the clinical tasks that is consistently in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations/legislation is excellent and demonstration of the clinical tasks is always within the scope of their role and responsibilities.	4	The student demonstrates a highly proficient use of the equipment and/or materials and/or resources, which are always applied with accuracy and precision. The student maintains a consistently safe environment, providing an excellent experience for the individual and their wider family/carers, as appropriate.	4	The student follows, records and reports on information in a highly effective and clear way, with accurate spelling, grammar, and punctuation, to suit a particular purpose. The student consistently follows, records, reports, stores, and handles information in line with local and national policies, keeping all relevant information confidential and supports others to do so.

3	3	The student demonstrates good knowledge and understanding of the clinical tasks, that is largely sustained throughout the student's practice.	3	<p>The student demonstrates an effective application of the clinical tasks that is mostly in line with best practice techniques and agreed ways of working.</p> <p>The student's adherence to the appropriate regulations/legislation is good and demonstration of the clinical tasks is usually within the scope of their role and responsibilities.</p>	3	<p>The student demonstrates a proficient use of the equipment and/or materials and/or resources, which are usually applied with accuracy and precision.</p> <p>The student maintains a generally safe environment, providing a good experience for the individual and their wider family/carers, as appropriate.</p>	3	<p>The student follows, records and reports on information in an effective and mostly clear way, with largely accurate spelling, grammar, and punctuation, to suit a particular purpose.</p> <p>The student generally follows, records, reports, stores, and handles information in line with local and national policies, keeping most relevant information confidential and largely supports others to do so.</p>
2	2	The student demonstrates satisfactory knowledge and understanding of the clinical tasks, that is partially	2	The student demonstrates a reasonably effective application of the clinical tasks that is sometimes in line with best practice	2	The student demonstrates sufficient use of the equipment and/or materials and/or resources, which	2	The student follows, records and reports on information in a reasonably effective and partially clear way, with some accurate spelling, grammar, and

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations/legislation in relation to clinical tasks		Use of equipment and/or materials and/or resources in relation to clinical tasks		Following, recording, reporting, and/or storing data and/or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
		sustained throughout the student's practice.		techniques and agreed ways of working. The student's adherence to the appropriate regulations/legislation is satisfactory and demonstration of the clinical tasks is sufficiently within the scope of their role and responsibilities.		are sometimes applied with accuracy and precision. The student maintains sufficiently safe environmental practices, but errors may not always provide a comfortable experience for the individual and their wider family/carers, as appropriate.		punctuation, to suit a particular purpose. The student sometimes follows, records, reports, stores, and handles information in line with local and national policies, keeping some relevant information confidential and sometimes supports others to do so.

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations/legislation in relation to clinical tasks		Use of equipment and/or materials and/or resources in relation to clinical tasks		Following, recording, reporting, and/or storing data and/or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the clinical tasks, that is fragmented throughout the student's practice.	1	The student demonstrates a minimally effective application of the clinical tasks that is rarely in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations/legislation is poor and demonstration of the clinical tasks is minimally within scope of their role and responsibilities.	1	The student demonstrates a poor use of the equipment and/or materials and/or resources, which are rarely applied with accuracy and precision. The student is uncertain about how to maintain a minimally safe environment, providing an uncomfortable experience for the individual and their wider family/carers, as appropriate.	1	The student follows, records and reports on information in a minimally effective and clear way, with occasionally accurate spelling, grammar, and punctuation, to suit a particular purpose. The student rarely follows, records, reports, stores, and handles information in line with local and national policies, keeping little relevant information confidential and rarely supports others to do so.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	<p>The student demonstrates excellent duty of care, candour, and person-centred care, taking all necessary precautions to protect physical and mental wellbeing of the individuals.</p> <p>The student is always respectful of and responsive to the individual's perspectives, consistently keeping carers and relevant others informed where appropriate.</p> <p>The student is highly effective at working with others.</p>	4	<p>The student demonstrates highly effective communication skills, always speaking clearly and confidently.</p> <p>The student's tone, register and level of detail is excellent and always reflects the audience and purpose.</p> <p>The student uses technical language with accuracy, and they always demonstrate active listening.</p>	4	<p>The student maintains a highly effective and safe clinical working environment, demonstrating excellent knowledge, understanding and application of health and safety legislation.</p> <p>The student demonstrates correct use of personal protective equipment (PPE) throughout and follows safe practices highly effectively.</p> <p>The student is fully aware of their own limitations and always works within them to safeguard the individual's wellbeing.</p>

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	<p>The student demonstrates good duty of care, candour, and person-centred care, taking most necessary precautions to protect physical and mental wellbeing of the individuals.</p> <p>The student is mostly respectful of and responsive to the individual's perspectives, generally keeping carers and relevant others informed where appropriate.</p> <p>The student is effective at working with others.</p>	3	<p>The student demonstrates effective communication skills, generally speaking clearly and confidently.</p> <p>The student's tone, register and level of detail is good and generally reflects the audience and purpose.</p> <p>The student's use of technical language is generally accurate, and they usually demonstrate active listening.</p>	3	<p>The student maintains an effective and safe clinical working environment, demonstrating good knowledge, understanding and application of health and safety legislation.</p> <p>The student demonstrates correct use of PPE most of the time and follows safe practices effectively.</p> <p>The student is generally aware of their own limitations and mostly works within them to safeguard the individual's wellbeing.</p>

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	<p>The student demonstrates satisfactory duty of care, candour, and person-centred care, taking sufficient necessary precautions to protect physical and mental wellbeing of the individuals.</p> <p>The student is sometimes respectful of and responsive to the individuals, sometimes keeping carers and relevant others informed where appropriate but often orientated towards own or service perspectives.</p> <p>The student is reasonably effective at working with others.</p>	2	<p>The student demonstrates reasonably effective communication skills, sometimes speaking clearly and confidently.</p> <p>The student's tone, register and level of detail is satisfactory and sometimes reflects the audience and purpose.</p> <p>The student's use of technical language is partially accurate, and they demonstrate active listening sometimes.</p>	2	<p>The student maintains a sufficiently effective and safe clinical working environment, demonstrating satisfactory knowledge, understanding and application of health and safety legislation.</p> <p>The student sometimes demonstrates the correct use of PPE and follows satisfactory safe practices.</p> <p>The student shows some awareness of their own limitations and they work sufficiently within them, but this may risk failure to safeguard the individual's wellbeing.</p>

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	<p>The student demonstrates basic duty of care, candour, and person-centred care, occasionally taking the necessary precautions to protect physical and mental wellbeing of the individuals.</p> <p>The student is rarely respectful of and responsive to the individuals, occasionally keeping carers and relevant others informed where appropriate but invariably orientated to own perspectives.</p> <p>The student is minimally effective at working with others.</p>	1	<p>The student demonstrates minimally effective communication skills, occasionally speaking clearly and confidently.</p> <p>The student's tone, register and level of detail is basic and rarely reflects the audience and purpose.</p> <p>The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening.</p>	1	<p>The student maintains a minimally effective and safe clinical working environment, demonstrating basic knowledge, understanding and application of health and safety legislation.</p> <p>The student rarely demonstrates the correct use of PPE and follows limited safe practices.</p> <p>The student shows limited awareness of their own limitations, rarely working within them, which risks failure to safeguard the individual's wellbeing.</p>
0	No evidence demonstrated or nothing worthy of credit.					

Indicative content

Practical activity scenario 1

- the student will introduce themselves in a professional and friendly manner to build rapport with the patient
- the student applies standard precautions in accordance with health and safety legislation and policy
- infection prevention and control including:
 - waste management, using correct waste systems
 - identifying spillages and ensuring clean up following protocol
 - correct hand-washing technique
 - the student chooses the appropriate PPE for the task
- the student cleans the area and deals with any spillages
- the student records concern around vomit from patient and follows up with patient, they then take any appropriate action
- the student washes equipment and stores it safely, removes PPE and disposes of it safely, and washes hands in accordance with health and safety legislation and policy
- accept other appropriate actions

Note: any failure to apply underpinning skills of communication, duty of care, candour, safeguarding principles and person-centred approaches or neglect to follow procedures to promote health and safety should be assessed in accordance with the underpinning skills mark scheme.

Practical activity scenario 2

- the student asks for consent in accordance with duty of care
- the student applies standard precautions in accordance with health and safety legislation and policy
- infection prevention and control including:
 - waste management, using correct waste systems
 - hand washing
 - the student chooses the appropriate PPE for the task
 - each piece of equipment is cleaned prior to and following use in accordance with health and safety legislation and policy in order to safeguard the wellbeing of other service users and staff
- the student communicates each stage of the procedure to the patient
- respiration and oxygen saturation monitoring, using watch seconds hand/stopwatch and pulse oximeter:
 - probe placed on index finger for a minimum of one minute
 - whilst probe is in place, counts breaths for one minute (this allows the measurement to be more accurate as the patient is unaware that breaths are being counted at that time)
 - probe placed on index finger for a minimum of one minute
 - whilst probe in place, counts breaths for one minute
 - documents readings on NEWS2 chart
- blood pressure (BP) monitoring using automatic BP machine:
 - applies correct sized cuff
 - lower edge of cuff 2cm to 3cm above the brachial artery with the cuff aligned as per the cuff instructions
 - inflates the cuff
 - aware of patient's injury and makes appropriate decision to which arm to use
 - documents blood pressure measurement on the NEWS2 chart
- heart rate monitoring:
 - select appropriate pulse point (usually radial artery used at base of wrist, but other appropriate pulse point can be accepted)
 - measure pulse for one minute using seconds hand/stopwatch
 - numeric data in beats per minute identified (bpm) rhythm – regular/irregular identified
 - heart rate recorded in correct place on NEWS2 chart
- levels of consciousness – alert
- body temperature monitoring:
 - uses thermometer as per manufacturer instructions, including applying protective cover as required
 - leave in place for correct amount of time (according to manufacturer's instructions) before removing
 - dispose of probe cover correctly
 - correct numeric and degree noted
 - temperature recorded in correct place on NEWS2 chart

- Student will record NEWS2 scores accurately:
 - respiratory rate – 21 breaths per minute: 2
 - oxygen saturation (SpO₂ scale 1) – 94%: 1
 - blood pressure – 148/90mmHg: 0
 - heart rate – 93 bpm: 1
 - level of consciousness-alert: 0
 - body temperature – 37.6°C: 0

Total NEWS2 score = 4

Students will report the measurements and NEWS2 score to the nurse in charge and report any deterioration from previous observations:

- NEWS2 score of 4 – low clinical risk, ward-based response, minimum 4-6 hour monitoring, nurse to assess patient
- deteriorations from previous observations; increased blood pressure, heart rate, respiration rate and body temperature; will require additional monitoring

Students will report to the nurse how elimination, nutrition and hydration should be monitored:

- elimination – urine and bowel charts
- nutrition – food diaries
- hydration – fluid balance charts
- the student cleans the equipment, removes PPE and disposes safely, and washes hands in accordance with health and safety legislation and policies
- accept other appropriate actions

Note: any neglect of application of standard precautions, procedural competency and communication protocols should be considered in accordance with safeguarding principles.

Practical activity scenario 3

- the student asks for consent in accordance with duty of care
- the student applies standard precautions in accordance with health and safety legislation and policy
- infection prevention and control including:
 - waste management, using correct waste systems
 - identifying spillages, ensuring clean up following protocol (if appropriate)
 - hand washing
 - each piece of equipment is cleaned prior to and following use in accordance with health and safety legislation and policy in order to safeguard the wellbeing of other service users and staff
- the student communicates each stage of the procedure to the patient
- the student should explain to the patient that they need to measure their urine
- a disposable bed pan should be placed in the commode
- the patient should be given dignity to use commode in privacy
- the student assesses that the urine output needs to be measured and selects appropriate equipment
- the student documents all findings on the fluid balance chart
- the student cleans the equipment, removes PPE and disposes safely, and washes hands in accordance with health and safety legislation and policies
- accept other appropriate actions

Note: any neglect of application of standard precautions, procedural competency and communication protocols should be considered in accordance with safeguarding principles.

Performance outcome grid

Practical activity scenario	C-PO1	C-PO2	C-PO3	Total
1	6	6	4	16
2	5	7	4	16
3	6	6	4	16
Underpinning skills	12			12
Total	29	19	12	60
% weighting	48%	32%	20%	100%

Past Paper

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