T-LEVELS | Institute for Apprenticeships & Technical Education

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Adult Nursing Team

Assignment 1 - Case study - Pass

Guide standard exemplification materials

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Supporting the Adult Nursing Team

Assignment 1

Contents

Introduction

The material within this document relates to the Supporting the Adult Nursing Team occupational specialism sample assessment. These exemplification materials are designed to give providers and students an indication of what would be expected for the lowest level of attainment required to achieve a pass or distinction grade.

The examiner commentary is provided to detail the judgements that examiners will undertake when examining the student work. This is not intended to replace the information within the qualification specification and providers must refer to this for the content.

In assignment 1, the student must interrogate and select relevant information to respond to the tasks in ways typical to the workplace. By adopting a problem-based inquiry approach, the student is placed at the centre of decision-making regarding an individual's care in a scenario designed to be as realistic as possible.

After each live assessment series, authentic student evidence will be published with examiner commentary across the range of achievement.

Scenario

You are supporting the adult nursing team on ward C at New Town Hospital. Ward C provides care on an inpatient basis for those with conditions relating to ageing, frailty and dementia. The hospital is a district general facility in a suburban area. Many inpatients on ward C spend several months in the ward due to a lack of community adult social care beds.

Mike is a 77 year old inpatient and has been there for 10 months awaiting a community bed. Mike was admitted following an unwitnessed fall at home in which he suffered a fractured neck of femur. This followed several months in which Mike's family were concerned about him living alone. He seemed to be experiencing the symptoms of increasing frailty, although he would not see his GP about this. During this admission, the multidisciplinary team felt it would be unsafe for Mike to return home to live by himself and helped him to make the decision to move into an assisted living facility. These are in short supply in his local area and he is on a long waiting list.

The case study you have been provided with includes a number of documents:

- item A: Mike's care plan
    - nursing care plan
    - multi-disciplinary care plan
- item B: Mike's NEWS2 chat
- item C: healthy skin project guidance
- item D: Roper-Logan-Tierney's model of nursing based on a model of living
- item E: photograph of a grade 3 pressure ulcer
- item F: blue sheet patient goals form
- item G: wound assessment chart
- item H: discharge plan

Task 1: assessment of the patient/situation

Scenario

You are assisting a staff nurse in carrying out a weekly review of Mike's care documentation. Mike appears reasonably alert but looks physically unwell and you think his condition has deteriorated although there does not appear to be a need for urgent care.

The ward team use the NEWS2 tool to monitor Mike's condition because they are concerned about potential deterioration, including the issue of pressure sores.

You find the following areas of concern in your review:

- the nurse looking after Mike has not calculated his NEWS2 score for the 16 June to 18 June 2020 (item B)
- whilst reading Mike's care plan and activities risk assessment, you note he sometimes complains of pain when moving around (item A)
- Mike has not been referred to a pain specialist and he becomes agitated when nurses ask him questions about it
- you decide from your observations that Mike is experiencing pain that he does not want to talk about

Task

Calculate Mike's missing NEWS2 scores. Explain your answer and decide whether or not you would escalate his care. Make recommendations based on the case study and what you know about best practice. You should think about what can influence a NEWS2 score and pain management and the consequences of not acting on changes.

Student evidence

The total NEWS2 score on 16 April 2020 is 9.

The total NEWS2 score on 17 April 2020 is 12.

The total NEWS2 score on 18 April 2020 is 7.

The NEWS2 score helps health professionals find out what they need to do and because it was not calculated, the staff may not realise that Mike's physical condition is very unstable.

All 3 days of scores are above the normal range showing he is unwell. This includes his respirations and pulse oximetry, and pulse has been high and his blood pressure being low. He is sometimes confused too. He does not have a temperature, but patients who have low blood pressure and elevated respirations do not always show a high temperature when in the later stages of sepsis. It is not clear if staff suspect Mike has sepsis but they should test for this, as he would be at even greater risk of deterioration.

Based on this information I would escalate Mike's care and seek urgent help from the critical care outreach team. Mike's pulse oximetry and high respiratory rate could indicate insufficient oxygen perfusion via his lungs. Insufficient oxygen saturation will mean that his brain and other organs are not fully oxygenated and could explain his episodes of confusion.

Mike is experiencing pain but does not want to talk about it. This might be because he is anxious about the causes of this pain or may not want anything to hinder his discharge home. If his pain was not effectively managed it could influence the NEWS2 scores, for example his blood pressure, pulse and respirations may be outside the normal range. The staff nurse should contact the pain management team for a review.

It was a serious omission to neglect to calculate the NEWS2 scores and this should be reported to the nurse in charge or ward manager. They will decide if other action needs to take place, which might include an investigation of local practices.

Task 2: goals/patient outcomes/planned outcomes

Scenario

As part of your care documentation review, the ward manager asks you to read Mike's care plan and identify opportunities to improve his wellbeing and general happiness as an inpatient.

Mike's nursing care plan and the Roper-Logan-Tierney's model of nursing (item D) includes 11 key activities of daily living (ADL). This model is often used to ensure care planning is evidence-based and is in the patient's best interest. The ward uses the blue sheet documentation for patient goals to help staff understand what patients want from their care (item F).

The ward manager has asked you to work with Mike to ensure he achieves his ADL. Refer to the guidance in the Roper-Logan-Tierney model of nursing and the information provided in Mike's care plan.

Task

Complete the blue sheet documentation part II discussion content and the symptom management section of part III for patient goals (item F). You can use information from Mike's care plan to complete the form. You should record the information on a word processor with the sections clearly labelled.

Using your understanding of patient goals and the ADLs, recommend a course of action to support Mike to achieve good outcomes. Refer explicitly to ADLs relevant to Mike and justify your answer by considering the information in the care plan and your completion of the blue sheet.

Student evidence

Blue form for patient Mike (surname not supplied)

Discussion participants:

- Mike
- his son (name not supplied)

Family/social networks include:

- lives alone independently and wishes to remain doing so
- support networks include friends who he meets at the pub to do a quiz with several times a week

SDM and POA

Mike can make his own decisions and has no substitute decision maker.

It would be useful to arrange a substitute decision maker for the future.

Medical/nursing team

Ward C at Newtown Hospital (ward sister)

Allied health professionals:

- physiotherapist and awaiting psychology assessment
- pain assessment specialist referral
- activities volunteer

Part II discussion content

Patients understanding of his medical condition and values, priorities and expectations

Osteoarthritis and muscle wasting - his goals are:

- physiotherapy
- to go home and be independent
- to have no pain
- to take his medicines for pain management

Part III discussion outcomes

Physiotherapy to improve mobility and independence.

A pain management plan to help him cope with physiotherapy.

Support for his hobbies/activities to help relieve depression including going to the film club.

Task 3: care/treatment/support plan

Scenario

You are asked to take part in daily shift handovers with your mentor and the nursing team.

During a handover, your mentor is told about a patient, Anita, with a grade 3 pressure ulcer on their left heel. A nurse discovered this during the night. Item E includes a photograph of the pressure ulcer and a skin physiology diagram.

The hospital uses the healthy skin project care plan guidance to support good skin health and prevent pressure ulcers amongst inpatients. Staff complete a wound assessment chart when they find evidence of a breakdown in skin integrity.

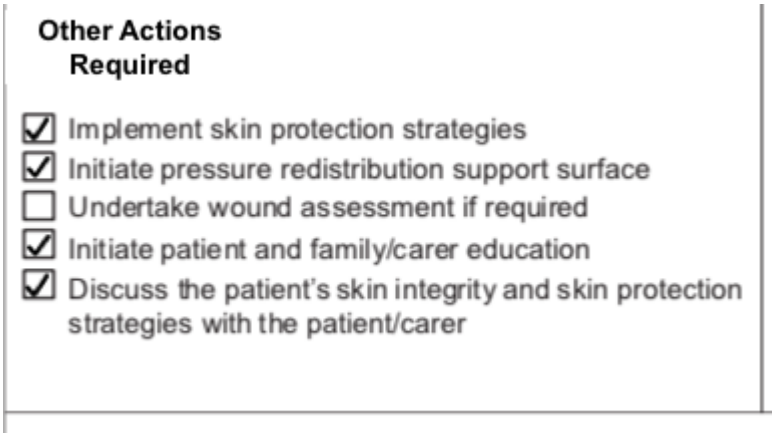
Task

You assist the staff nurse in the completion of the wound assessment chart (item G). Complete the 'other actions required' section by marking the actions you believe should be taken next.

Using the appropriate healthy skin project care plan guidance (item C) and your selections in the wound assessment chart, briefly evaluate the effectiveness of different options to prevent further pressure ulcers in this patient. In your answer, consider the possible causes of the pressure ulcer and its grade.

Student evidence

The student completes the other actions required section as follows:



There are things that might stop pressure sores from getting worse and help them heal.

Skin assessment – this should help to decide how frequently skin should be observed per day depending on risk.

Surface – where the skin meets the surface of a chair or mattress. These need to be the right equipment for someone who has a risk of pressure ulcers.

Movement – Anita should be told to keep moving if she can independently, and frequent change of position should be carried out by nursing staff if necessary.

Incontinence – can contribute to skin breakdown. Any incontinence needs to be successfully managed so that Anita is dry.

Nutrition – Anita will need a healthy balanced diet to heal the sore and not get any new ulcers. We need to know if anything is preventing her getting a balanced diet and approximately 2 litres of fluid per day.

Certain medications reduce healing such as steroids.

Certain medical conditions increase the risk, for example, diabetes causes poor circulation and poor nerve sensation to the skin.

Allergies to treatment can cause skin rashes that could be implicated in pressure sore development.

The grade of the pressure ulcer is 3, which means it is a safeguarding issue due to neglect.

Anita should not get a grade 3 pressure ulcer during the night and it could be that she did not have an assessment, or not enough actions were followed after the assessment to put things in place, for example, a suitable mattress that was correct for her needs and she was not turned frequently enough. She may not be eating enough food or drinking enough fluids and if she is incontinent, it may not be managed well enough.

Task 4: evaluation/monitoring effectiveness/clinical effectiveness

Scenario

Informal care givers play a key role in ensuring people with care needs achieve their long-term care and treatment goals. These can often be different to the goals or milestones prioritised by the clinical team.

Mike is increasingly frustrated with his inpatient spell and has become more positive about the MDT plan to find him a community supported living facility. He has given this a lot of thought and thinks he can be happy and safe there. He has told staff that 2 of his friends will help to look after him. The ward manager needs to complete a full assessment of needs to be able to decide if this would be a safe course of action.

Task

Complete the discharge plan (item H) to indicate what will be needed for Mike to leave the hospital safely and what he will need in the community.

Consider the information in Mike's multidisciplinary care plan. Evaluate the effectiveness of informal support that care givers in the community would be able to give. In your answer you should make a recommendation about his request for discharge.

Student evidence

See attached discharge form.

Recommendations about Mike's request for discharge

Mike got frustrated with waiting and now agrees to go into assisted living arrangements. He will need a social worker to support this. This means his goal to get home has not been met and this is not person-centred, and his choices are not being respected.

The hospital will need to let his GP, a pharmacy and his family know about his plans to go home and arrange to monitor his pain relief and mobility.

He may need some social prescribing for activities in the community but also, he needs to go and view any options for supported living facilities so that he chooses a place he likes.

Evaluation of the effectiveness of informal support including potential drawbacks

Informal support provides its own benefits and can be effective in Mike's continued happiness and safety once discharged. Mike will have the support he requires to assist in meeting most of his needs; these can include doing his shopping, and reminding him to pay his bills and attend appointments. Most importantly for Mike is the companionship an informal care giver provides and the safety element of spotting any changes that can be reported to the authorities.

As with all informal care, there are potential drawbacks to be considered. Informal care givers do not have a duty of care so they may not work to a good enough standard, and Mike may not feel comfortable saying if they get things wrong or might have to put up with things he does not want or like.

Conclusion

It can be a good thing to have informal carers, but it might not be enough.

Examiner commentary

The student communicated the relationships between person-centred care and maintaining safety. This included some combination of physical or mental wellbeing. Contexts or scenarios were referenced with basic information. They explained the principles of such areas of work and in areas of some relevance to adult nursing and tenuously adapted these to individuals receiving care. They had awareness of codes of conduct, duties of care and the duty of candour in scenarios related to safeguarding and a basic understanding of safeguarding risks. They applied an understanding of resources required to work in safeguarding scenarios safely and appropriately.

The student understood their scope of practice and identified at least one strength, weakness and opportunity for learning. These were loosely in the context of their own experience. They understood the most common markers of clinical deterioration, including actions they could take to reduce risk. They understood formal documentation was needed.

The student reviewed documentation to make recommendations about patient care and outcomes. Their recommended support was justified with evidence that was mostly relevant.

The student communicated knowledge of the scope and limitations of their healthcare role. They identified team working practice and approaches to assist professionals with current best practice interventions to support individuals to maintain dignity. They understood the purposes of gathering information and maintaining records in line with legislation and maintaining individuals' rights.

The student communicated information on physiological states that demonstrated a basic understanding of the use of equipment to monitor and calculate scores. They understood they needed to escalate results appropriately under supervision and guidance.

Grade descriptors

The performance outcomes form the basis of the overall grading descriptors for pass and distinction grades.

These grading descriptors have been developed to reflect the appropriate level of demand for students of other level 3 qualifications, the threshold competence requirements of the role and have been validated with employers within the sector to describe achievement appropriate to the role.

Grade	Demonstration of attainment
Pass	A pass grade student can: • communicate the relationship between person-centred care and health and safety requirements in healthcare delivery by: o demonstrating working in a person-centred way, by taking relevant and sufficient precautions to protect the safety and physical and mental wellbeing of individuals o recognising and responding to relevant healthcare principles when implementing duty of care and candour, including demonstrating sufficient knowledge of safeguarding individuals and maintaining confidentiality o following standards, codes of conduct and health and safety requirements/legislation to maintain a sufficiently safe working environment o demonstrating use of an adequate range of techniques, equipment and resources safely to promote sufficient levels of cleanliness and decontamination required for satisfactory infection prevention and control • communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by: o adequately following current best practice and codes of conduct across relevant boundaries, relevant to assisting with scenario specific, clinical and therapeutic interventions o working adequately as part of a team to assist registered health professionals with delegated tasks and interventions, supporting individuals to meet their care and needs to a satisfactory standard, including maintaining individual's privacy and dignity and communicating effectively, contributing to handovers, seeking help, advice and information, and responding sufficiently to service users views to maintain effective provision of services o gathering sufficient evidence, contributing to, following and recording information in care plans/records relevant to tasks and interventions, structuring these sufficiently to allow understanding in line with local and national legislation and policies, preserving individuals' rights o maintaining a record of professional development with evidence of using feedback to develop knowledge, skills, values and behaviours consistent with sufficient ability to reflect on practice and thereby improve performance adequately • communicate sufficiently reliable levels of knowledge of the physiological states that are commonly measured by healthcare support workers including why, when and what equipment/techniques are used by: o working as part of a team to use relevant equipment effectively and safely and following correct

Grade	Demonstration of attainment
	monitoring processes ○ calculating scores, reporting and differentiation of normal and abnormal results to the relevant registered professional ○ applying knowledge of policy and good practice techniques when undertaking all physiological measurements, checking when uncertain and consistent with instructions and guidance
Distinction	A distinction grade student can: • communicate adeptly the relationship between person-centred care and health and safety requirements in healthcare delivery by: ○ demonstrating flexible and constructive person-centred care, taking appropriate precautions reliably, making sound decisions to protect the safety and physical and mental wellbeing of individuals ○ alertness and responsiveness to relevant healthcare principles when implementing duty of care and candour, including the demonstration of exceptional sensitivity and accurate knowledge of safeguarding individuals and maintaining confidentiality ○ commitment to following all required standards, codes of conduct and health and safety requirements/legislation decisively to maintain a safe, healthy working environment ○ demonstrating proficient use of an extensive range of techniques to promote optimum levels of cleanliness and decontamination required for effective infection prevention and control • communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by: ○ following current best practice and agreed ways of working highly relevant to assisting with scenario specific, care-related tasks consistently and reliably, whilst fully supporting individuals to meet their care and needs, including maintaining the individual's privacy and dignity to a high standard ○ working adequately as part of a team to assist registered health professionals with delegated tasks and interventions, supporting individuals to meet their care needs to a satisfactory standard, including maintaining individual's privacy and dignity and communicating effectively, contributing to handovers, seeking help, advice and information, and responding sufficiently to service users views to maintain effective provision of services ○ gathering extensive evidence consistently, interpreting, contributing to, following and recording information in care plans/records highly relevant to tasks and interventions, structured accurately and legibly and in line with local and national policies, while preserving and promoting an individual's rights ○ maintaining a record of professional development to develop knowledge, skills, values and behaviours consistent with ability to reflect on practice enthusiastically, using the feedback to initiate new learning and personal practice development to improve performance with developing proficiency • communicate exceptional levels of knowledge of the physiological states that are commonly

Grade	Demonstration of attainment
	measured by healthcare support workers including why, when and what equipment/techniques are used by: ○ working as part of a team to use relevant equipment accurately and safely and consistently following correct monitoring processes ○ calculating scores, reporting and differentiation of normal and abnormal results adeptly, consistently and reliably to the relevant registered professional ○ applying knowledge of policy and good practice techniques proficiently when undertaking all physiological measurements, checking when uncertain, solving problems, and following instructions and guidance with energy and enthusiasm

Document information

The T Level Technical Qualification is a qualification approved and managed by the Institute for Apprenticeships and Technical Education.

Owner: Head of Assessment Design

Change History Record

Version	Description of change	Approval	Date of Issue
v1.0	Published final version.		June 2021
v1.1	NCFE rebrand		September 2021