



# T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

## Supporting the Midwifery Team

Assignment 2 - Practical assessment - Pass

Guide standard exemplification materials

## T Level Technical Qualification in Health Occupational specialism assessment

# Guide standard exemplification materials

## Supporting the Midwifery Team

### Assignment 2

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## Introduction

The material within this document relates to the Supporting the Midwifery 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 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 2, the student must demonstrate practical skills that are vitally important for any future role in the healthcare sector and must work in ways typical to the workplace.

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

# Practical activity scenario 1

This practical activity scenario requires students to:

OPA16: Identify individual babies following local procedure

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time is 15 minutes.

## Purpose

To assess the knowledge and skills the student has around newborn baby identification.

## Brief

A woman is in the delivery suite and the midwife has just delivered her baby.

## Task

You are asked to prepare and apply the newborn baby identification labels to the baby, prior to the woman's transfer to the postnatal ward.

You should explain to the woman what to do in the event of a lost or detached identification label.

An extract of the woman's notes is given in item A. Use the woman's notes to document your actions.

## Supporting information

### Mode of assessment

This practical activity involves role play. The woman will be played by a member of staff. The newborn baby is played by a baby manikin.

You have been given an extract from the woman's notes (item A).

### Equipment

You have access to the following equipment:

- 2 newborn baby identification labels.
- a pen
- handwashing facilities
- gloves and an apron

## Performance outcomes

This practical activity scenario assesses:

PO1: Assist the midwifery team with clinical tasks

PO3: Assist with the care of newborn babies by undertaking observations and measurements

## Student evidence

The student acknowledges the mother - "Hello my name is ... and I've been asked to put your baby's name bands on".

The student takes 2 baby bands, the mother's notes, and they complete the bands:

Baby boy of Jessica Clark

Born 28/9/20 at 14.45

They take the bands and put them on the baby, one on each ankle, checking they are not too tight.

They explain to the mother - "If the baby kicks a band off, or you notice one has fallen off, please will you tell the midwife looking after you. It is important the babies always have their bands on while in hospital for safety so there can never be any confusion as to who the baby belongs to"

They complete the woman's notes (Item A).

## Item A: extract from woman's notes

### Confidential patient record form

Health simulation centre

Mother			
<b>Name</b>	Jessica	<b>Surname</b>	Clark
<b>Date of birth</b>	10/03/89		
<b>NHS number</b>	367 4567 4367		

Baby			
<b>Time</b>	14:45	<b>Sex</b>	Boy
<b>Date of birth</b>	28/09/2020		
<b>NHS number</b>	675 3876 2561		
<b>Name of GP</b>	Dr Jones		
<b>Consultant</b>	Mr Kennedy		

Baby identification labels check			
Applied right ankle – please tick (✓)		Applied left ankle – please tick (✓)	

Date	Time	Actions taken	Signature
20 Jan 2021	10am	Baby bands x2 written out and attached to left and right ankles on delivery suite. Mother present and aware to let midwife know if either band falls off.	Signed, name in print.

## Practical activity scenario 2

This practical activity scenario requires students to:

OPA5: Support the midwife to prepare women and other individuals (partner, family member, friend) for interventions and procedures

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 25 minutes.

### Brief

A woman has arrived at the antenatal clinic reception desk for her first scan.

### Task

You are asked by the midwife to greet the woman at the reception desk and take her to the ultrasound room to prepare her for her first scan.

You should explain the procedure and why it is carried out.

You should then position the woman ready for the sonographer to carry out the scan.

You should document your actions in the woman's notes (item B).

### Supporting information

This practical activity scenario involves role play. The woman is played by a member of staff.

You will have access to:

- a reception desk/area
- an ultrasound room

You will have access to the following equipment:

- a jug of water and glass
- a chair
- a couch
- a blanket/sheet

### Performance outcomes

This practical activity scenario assesses:

PO1: Assist the midwifery team with clinical tasks

## Student evidence

The student washes their hands and puts on gloves.

They clean the trolley with disinfectant and wipes, focussing on the flat surfaces.

They put the delivery pack/forceps on bottom of trolley.

They take the trolley into other room.

They open the delivery pack, manipulating the pack all over before opening it, and placing it on top of the trolley.

They open the forceps and put them on an opened delivery pack whilst trying not to touch the delivery pack.

They indicate that they are finished.

They greet the woman: "Hi, what's your name? Hi 'Susan' my name is ..., I'm a trainee MSW and the midwife has asked me to take you through to your scan if that's alright, I'll just take you through to the scan room".

They take the woman to the scan room. "Please take a seat" - pointing to the chair.

"There's some fresh water there for you if you'd like to have a drink." - they point to the water jug/glass.

They ask the woman – "So, you are here for your first scan, is that right? It's always exciting to see your baby for the first time. So, the sonographer will come in in a moment to perform the scan, but the midwife has asked me just to make sure you understand what will happen.

This scan is carried out between 12 and 14 weeks to find out your due date, so it's called your dating scan.

You'll lie down on the bed and then the sonographer will put gel on this probe and pass it over your tummy and you'll be able to see the black and white picture of the baby on the screen in front.

She'll be taking various measurements of the baby like its head circumference and its length on the scan and this will tell her the size of the baby and so when it is due.

She'll also be able to check whether there is just one baby or whether there's twins, for example, but she won't be able to see the sex of the baby yet, not until your 20 week scan.

You can also have a screening test to see whether the baby has Down's syndrome, or Edwards or Patau's syndrome. If you do, she'll also take the nuchal fold measurement at the back of the baby's neck, and I'll take a blood sample from you after the scan.

Ok, so we'll get you ready for the scan now if that is alright?

This bed is a bit low, I'll just put it up for you (I adjust height of bed).

If you can lie down on the bed and lift up your top a little and just pull down your trousers a bit, just so we don't get gel on them. I'll just cover you with this sheet too to maintain your dignity while we wait for the sonographer (student covers lower half of woman with sheet).

Is that comfortable enough?

Great, the sonographer will be in in a moment, and then I'll turn the lights off then so that she can see better on the scan screen".

They document this in the notes (item B).



## Item B: woman's notes

### Confidential patient record form

Health simulation centre

Mother			
<b>Name</b>	Jessica	<b>Surname</b>	Clark
<b>Date of birth</b>	10/03/89		
<b>NHS number</b>	367 4567 4367		

Baby			
<b>Time</b>	14:45	<b>Sex</b>	Boy
<b>Date of birth</b>	28/09/2020		
<b>NHS Number</b>	675 3876 2561		
<b>Name of GP</b>	Dr Jones		
<b>Consultant</b>	Mr Kennedy		

Date	Time	Actions taken	Signature
2 Feb 2021	2 pm	<p>Susan collected from reception and taken to scan room 1. Given water. Discussed purpose of the scan, for example, to date the pregnancy and give a due date and to check number of babies. Also offered screening test for Downs/Edwards/Patau's syndrome.</p> <p>Explained process of scan. Susan made comfortable on the bed and covered with sheet, ready for the sonographer.</p>	Signed, dated and job title written underneath.

## Practical activity scenario 3

This practical activity scenario requires students to:

OPA12: Assist the midwife with teaching parents how to interact with and meet the nutritional and hygiene needs of babies.

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 35 minutes.

### Brief

A woman who is a primigravida has not bathed her newborn baby before.

### Task

You are working on a postnatal ward and have been asked by the midwife to demonstrate to the woman the safe bathing of her baby.

You should document your actions in the daily care log (item C).

### Supporting information

This practical activity scenario involves role play. The woman will be played by a member of staff. The baby will be played by a baby manikin.

You have been given a daily care log (item C).

You will have access to following equipment:

- a baby bath and stand
- a towel
- cotton wool balls
- a nappy
- a babygrow (the woman will have this with her)
- a bath thermometer
- a room thermometer
- disinfectant
- paper towels
- a sink with hot and cold water
- a jug
- a trolley

## Performance outcomes

This practical activity scenario assesses:

PO1: Assist the midwifery team with clinical tasks

PO2: Assist the midwife to provide care for mothers and support to parents at all stages, from antenatal, perinatal and postnatal

## Student evidence

The student acknowledges the mother and why she's here - "Hi, I'm going to show you how to bath your baby".

They fill bath with warm water and put bath thermometer in the water. They explain to the mother - "It's important that the water is not too hot for the baby, so a thermometer can be really useful to check".

They help the mother undress the baby except for nappy and swaddle the baby in a towel. They ask the mother to hold the baby with its head over bath and they demonstrate how to wash hair first, splashing water carefully on to head and rubbing in hair. They explain - "Baby can lose a lot of heat through its head so wash and dry that first before putting baby fully in bath". They dry baby's hair appropriately then take the nappy off the baby.

They put baby into the bath holding baby securely, with one hand behind the baby's shoulder/under the arm when in the bath. They explain to the mother - "it's really important to hold on tightly to the baby in the bath as they can be slippery".

They demonstrate using their other hand to splash water onto baby's body and explain - "You can use a bit of baby wash too if you want to".

They take baby out of bath and dry head and body gently, explaining - "and then you need to dry baby and get them dressed again as quickly as you can to stop them getting cold".

They put nappy on baby and dress it.

The student documents their actions in daily log (item C):

## Item C: daily care log

Date	Time	Actions taken	Signature
12 Feb 2021	10am	Bath demonstration given to mother. Discussed appropriate water temperature and shown how to wash hair and clean baby's body and dry. Aware baby can get cold quickly and so to keep warm with dry towels.	Signed, name and job title printed underneath.

## Practical activity scenario 4

This practical activity scenario requires students to:

OPA2: Undertake and record physiological measurements as directed by the midwifery team, recognising and responding to deviations from normal using the modified early obstetric warning score (MEOWS) observation chart.

You have up to 5 minutes to carefully read through the following scenario and (further instructions as needed).

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 25 minutes.

### Brief

A woman has arrived into hospital for an elective caesarean section.

### Task

You are asked by the midwifery team to complete the following set of physiological measurements:

- respiration rate
- oxygen saturation (SpO<sub>2</sub>)
- blood pressure
- heart rate
- body temperature

You can use the physiological measurement form (item D) to make notes before recording the observations on the modified early obstetric warning score (MEOWS) chart (item E) and calculating the woman's MEOWS score.

Report the results to the midwife in charge using the information in item F.

### Supporting information

The woman in this practical activity scenario is played by a responsive manikin. The midwife in charge in this practical activity will be played by a member of staff.

You have been given a physiological measurements form (item D) and MEOWS observation chart (item E) and the MEOWS escalation protocol (item F).

You have access to the following equipment:

- a tape measure
- a small/medium/large adult blood pressure cuff
- an electronic blood pressure recording machine
- a tympanic thermometer and disposable covers
- a pulse oximeter
- a watch with a second hand

## Performance outcomes

This practical activity scenario assesses:

PO1: Assist the midwifery team with clinical tasks

PO2: Assist the midwife to provide care for mothers and support to parents at all stages, from antenatal, perinatal and postnatal.

## Student evidence

The student acknowledges the mother - "Hello, I'm going to take some observations from you".

They take the small blood pressure cuff and place it on upper arm without looking at where the artery line sits. They press the start button to get a reading and write the result on the measurement sheet.

They tell the woman - "Now I'll do your temperature" - they place disposable cover on probe and put just into ear. Thermometer does not beep. They become flustered, "Oh, I don't know what happened there". They try again but do not press start button correctly and do not obtain reading. "Oh, I'm not sure what's wrong but I can't get a reading".

They say - "I'll do your pulse instead". They select radial pulse point and hold wrist with fingers on pulse and thumb on back. They count for 60 seconds and write result on measurement form.

"Now I'll do your oxygen levels". They place sats probe on finger and write down reading after it registers for a few seconds.

"Now I just need to count your breaths" - they watch chest movements for a minute, counting the respiration rate, and writing the result down on measurement sheet.

They record the information on the MEOWS chart (item E).

They do not date/time the sheet.

They complete the chart and tick the appropriate boxes for respiration rate. They leave the temperature box unfilled. They mark the blood pressure with arrows for systolic/diastolic measurements and mark one parameter a couple of spaces lower than the actual reading obtained.

They initial at end.

They score one yellow.

They inform midwife of results - "The lady's pulse rate was a bit high, and it scores a yellow. I'm sorry, I couldn't get the thermometer to work".

## Examiner commentary

The student is able to demonstrate an overall safe, but basic and limited performance of practical skills in the assessment setting.

The student was quite task orientated and as a result communication with the woman often suffered, with only minimal information given to the woman on several occasions regarding the task (for example, when bathing baby, explaining a thermometer can be useful, without explaining what the correct temperature would be or how else to

check temperature of water is appropriate/or not feeding back vital observations to the woman herself, just escalating to the midwife), or regarding introductions or expectations, and consent was often more assumed than explicitly requested.

The student used some appropriate terminology, but language was often basic with the use of ‘layman’s’ terms.

Both the student’s communications and practical approach to the tasks often demonstrated a superficial understanding of the underpinning theory to the skills, for example, knowing ‘how’ to use some equipment without enough understanding of ‘why’ about the procedures (for example, why a patient’s arm should be measured before BP taken).

The student showed adequate application of the task but rarely used best practice. For example, not consistently demonstrating correct infection prevention techniques such as hand hygiene/cleaning equipment. The student also lacked consistent precision and accuracy in the use of the equipment and tends to attempt tasks without much planning and thought first, but appeared to just jump straight in.

The student demonstrated some ability to handle data but did not comply with all local/national policies, so data was sometimes incomplete (for example, baby bands), inaccurate due to not being neatly completed (MEOWS chart) or not signed/dated, for example.

## Overall 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.

### Occupational specialism overall grade descriptors:

#### Occupational specialism grade descriptors\*

Grade	Demonstration of attainment
Pass	<p>A pass grade student can:</p> <ul style="list-style-type: none"> <li>• communicate the relationship between person centred care and health and safety requirements in healthcare delivery by:                             <ul style="list-style-type: none"> <li>○ demonstrating working in a person-centred way, taking relevant and sufficient precautions to protect the safety and physical and mental wellbeing of individuals</li> <li>○ recognising and responding to relevant healthcare principles when implementing duty of care and candour, including demonstrating sufficient knowledge of safeguarding individuals and maintaining confidentiality</li> <li>○ following standards, codes of conduct and health and safety requirements/legislation to maintain a sufficiently safe working environment</li> <li>○ 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</li> </ul> </li> </ul>

Grade	Demonstration of attainment
	<ul style="list-style-type: none"> <li>• communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by:                             <ul style="list-style-type: none"> <li>○ adequately following current best practice and codes of conduct across relevant boundaries, relevant to assisting with scenario specific, clinical and therapeutic interventions</li> <li>○ 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</li> <li>○ 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</li> <li>○ 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</li> </ul> </li> <li>• 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:                             <ul style="list-style-type: none"> <li>○ working as part of a team to use relevant equipment effectively and safely and following correct monitoring processes</li> <li>○ calculating scores, reporting and differentiation of normal and abnormal results to the relevant registered professional</li> <li>○ applying knowledge of policy and good practice techniques when undertaking all physiological measurements, checking when uncertain and consistent with instructions and guidance</li> </ul> </li> </ul>
Distinction	<p>A distinction grade student can:</p> <ul style="list-style-type: none"> <li>• communicate adeptly the relationship between person centred care and health and safety requirements in healthcare delivery by:                             <ul style="list-style-type: none"> <li>○ 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</li> <li>○ 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</li> <li>○ commitment to following all required standards, codes of conduct and health and safety requirements/legislation decisively to maintain a safe, healthy working environment</li> <li>○ demonstrating proficient use of an extensive range of techniques to promote optimum levels of cleanliness and decontamination required for effective infection prevention and control</li> </ul> </li> </ul>

Grade	Demonstration of attainment
	<ul style="list-style-type: none"> <li>• communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by:                             <ul style="list-style-type: none"> <li>○ 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</li> <li>○ 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</li> <li>○ 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 individuals' rights</li> <li>○ 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</li> </ul> </li> <li>• communicate exceptional 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:                             <ul style="list-style-type: none"> <li>○ working as part of a team to use relevant equipment accurately and safely and consistently following correct monitoring processes</li> <li>○ calculating scores, reporting and differentiation of normal and abnormal results adeptly, consistently and reliably to the relevant registered professional</li> <li>○ 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</li> </ul> </li> </ul>

\* “threshold competence” refers to a level of competence that:

- signifies that a student is well placed to develop full occupational competence, with further support and development, once in employment
- is as close to full occupational competence as can be reasonably expected of a student studying the TQ in a classroom-based setting (for example, in the classroom, workshops, simulated working and (where appropriate) supervised working environments)
- signifies that a student has achieved the level for a pass in relation to the relevant occupational specialism component



## Document information

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

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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