

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Midwifery Team

Assignment 3 - Professional discussion

Mark scheme

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About this document

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

The purpose of this mark scheme is to give you:

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

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Marking guidelines

General guidelines

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

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

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

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

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

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

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

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

Guidelines for using extended response marking grids

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

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

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

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

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

Performance outcomes

This assessment requires students to demonstrate the following:

Supporting Healthcare (core)

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

Supporting the Midwifery Team (option B)

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

Theme 1: observations, screening and measurements of newborn babies

Question 1

Part A

Referring to your learning or experience, discuss the routine tests that are offered in the newborn screening programme.

Part B

Referring to your learning or experience, explain the roles and responsibilities of the midwifery team involved in delivering the newborn screening programme.

(12 marks)

Band	Mark	Descriptor
4	10–12	<p>Highly accurate and clear description of a wide range of newborn screening tests that demonstrates strong connections between the learning experience and understanding of why different groups are given different tests.</p> <p>Highly detailed explanation of 2 or more members of the roles and responsibilities, or exceptionally detailed explanation of one member of the midwifery team's roles and responsibilities.</p> <p>Excellent and comprehensive understanding of scope of student's own role, other roles, and occupational concepts and ability to question biases, stereotypes, preconceptions, and/or assumptions.</p> <p>The terminology used is clear, accurate and subject specific.</p>
3	7–9	<p>Mostly accurate and clear description of multiple newborn screening tests that demonstrates awareness of connections between the learning experience and understanding of why different groups are given different tests.</p> <p>Detailed and accurate explanation of one or more members of the midwifery team's role and responsibilities.</p> <p>Good and appropriate understanding of scope of student's own role, other roles, and occupational concepts and ability to question biases, stereotypes, preconceptions, and/or assumptions.</p> <p>The terminology used is clear, accurate and subject specific. There may be minor errors.</p>

Band	Mark	Descriptor
2	4–6	<p>Satisfactory description of multiple newborn screening tests that demonstrates some awareness of connections between the learning experience and understanding of why different groups are given different tests.</p> <p>Somewhat detailed and accurate explanation of one or more members of the midwifery team’s role and responsibilities.</p> <p>Mostly appropriate understanding of scope of student’s own role, other roles, and occupational concepts and ability to question biases, stereotypes, preconceptions, and/or assumptions.</p> <p>The terminology used is mostly clear, accurate and subject specific.</p>
1	1–3	<p>Tenuous description of multiple newborn screening tests that demonstrates a limited awareness of connections between the learning experience and understanding of why different groups are given different tests.</p> <p>Explanation of one or more members of the midwifery team’s roles and responsibilities sometimes inaccurate, or sometimes is lacking significant relevant detail.</p> <p>Partial understanding of scope of student’s own role, other roles, and occupational concepts and ability to question biases, stereotypes, preconceptions, and/or assumptions.</p> <p>There are lapses in clarity and inaccuracy of terminology impedes understanding.</p>
0	0	No creditworthy material.

Indicative content

The student will demonstrate knowledge of the newborn screening programme and the tests that are routinely offered:

- newborn physical examination or newborn and infant physical examination (NIPE)
- physical examination of the baby by a paediatrician or suitably trained midwife within 72 hours of birth
- newborn hearing screening carried out by a newborn hearing screener in the hospital or at a clinic or a health visitor in a community setting
- automated otoacoustic emission test (AOAE)
- automated brainstem response test (AABR) to detect hearing loss at a younger age
- neonatal screening test (NNST)
- what the NNST, carried out by the midwife at 5 days old, is checking for, for example sickle cell, cystic fibrosis, congenital hypothyroidism
- members of the midwifery team involved in performing the newborn and infant physical examination. (NIPE)
- physical examination carried out by a paediatrician or midwife who has completed specialist training
- hearing screening carried out by a newborn hearing screener who will have had specialist training; carried out in the hospital or a community setting (some area health visitors will be trained to perform this test)

Accept other appropriate responses.

Question 2

Part A

Referring to your learning or experience, explain the rationale for one newborn screening test that you observed or assisted with.

Part B

Justify the need for and importance of informed consent in both this test and in general practice (you should refer to your examples given in part A).

(20 marks)

Band	Mark	Descriptor
4	16–20	<p>Highly detailed explanation of newborn screening tests and gaining consent with a range of outstanding relevant and coherent examples.</p> <p>Explanation demonstrates excellent congruence in application of knowledge and understanding to the specific context.</p> <p>Justification for informed consent process is comprehensive with excellent and extensive reflection on own ability and limitations.</p> <p>Analysis of the importance of consent is highly effective.</p>
3	11–15	<p>Detailed explanation of newborn screening tests and gaining consent with a range of generally relevant and coherent examples.</p> <p>Explanation demonstrates good congruence in application of knowledge and understanding to the specific context.</p> <p>Justification for informed consent process is coherent, with good reflection on own ability and limitations.</p> <p>Analysis of the importance of consent is effective.</p>
2	6–10	<p>Satisfactory explanation of newborn screening tests and gaining consent with a range of mostly appropriate examples.</p> <p>Explanation demonstrates satisfactory congruence in application of knowledge and understanding to the specific context.</p> <p>Justification for informed consent process is mostly appropriate, with satisfactory reflection on own ability and limitations.</p> <p>Analysis of the importance of consent is relevant.</p>

Band	Mark	Descriptor
1	1–5	<p>Basic explanation of newborn screening tests and gaining consent and has few examples.</p> <p>Explanation demonstrates limited congruence in application of knowledge and understanding to the specific context.</p> <p>Justification for informed consent process is basic, with limited reflection on own ability and limitations.</p> <p>Limited reflection on the importance of consent.</p>
	0	No creditworthy material.

Indicative content

The student demonstrates knowledge of one of the following newborn screening tests, how it was performed, and the rationale for the test:

- physical examination
- eye examination
- heart test
- hips test
- testes test
- hearing screening test
- blood spot test/heel prick test/neonatal screening test (NNST)

The student justifies the importance of informed consent in both test and general practice.

Accept other appropriate responses.

Theme 2: security and safeguarding procedures and protocols to protect the newborn baby

Question 3

Part A

Referring to your learning or experience, describe the local procedure for newborn baby identification in the maternity environment and what to do in the event of lost or detached identity bands.

Part B

Referring to your learning or experience, outline the importance of the process and purpose of other security measures in place to protect the newborn baby in the maternity environment.

(12 marks)

Band	Mark	Descriptor
4	10–12	<p>Highly detailed description of a situation that demonstrates an exceptional knowledge and understanding of local security procedures, safeguarding, and the importance of using identification procedures correctly.</p> <p>Skills and behaviours are highly consistent with intended application of knowledge to practice.</p> <p>Comprehensive explanation of actions on how to respond to lost or detached identity bands, demonstrating highly effective and appropriate skills and behaviours to ensure escalation.</p>
3	7–9	<p>Good detail in description of a situation that demonstrates a good knowledge and understanding of local security procedures, safeguarding, and the importance of using identification procedures correctly.</p> <p>Skills and behaviours are consistent with intended application of knowledge to practice.</p> <p>Good explanation of actions on how to respond to lost or detached identity bands, demonstrating mostly effective and appropriate skills and behaviours to ensure escalation.</p>
2	4–6	<p>Satisfactory description of a situation that demonstrates mostly appropriate knowledge and understanding of local security procedures, safeguarding, and the importance of using identification procedures correctly.</p> <p>Skills and behaviours sometimes lack consistency with intended application of knowledge to practice.</p> <p>Moderate explanation of actions on how to respond to lost or detached identity bands, demonstrating mostly effective and appropriate skills and behaviours to ensure escalation.</p>

Band	Mark	Descriptor
1	1–3	<p>Poorly contextualised description of a situation that demonstrates limited knowledge and understanding of local security procedures, safeguarding, and the importance of using identification procedures correctly.</p> <p>Skills and behaviours are inconsistent with intended application of knowledge to practice.</p> <p>Basic explanation of actions on how to respond to lost or detached identity bands, demonstrating limited or frequently inadequate skills and behaviours to ensure escalation.</p>
	0	No creditworthy material.

Indicative content

When birth is imminent the midwife will prepare 2 baby identification labels with the mother’s surname and hospital number written on them. These are checked with the mother for spelling and accuracy and checked against the mother’s own identification label.

After delivery, the midwife will write the date and time of birth on the labels and place them on to the baby’s ankles. The baby should not leave the delivery suite without labels.

On transfer to the post-natal ward a staff member will check the baby’s identity bands with the mother and the person transferring the mother from the delivery suite. This will be documented in the mother’s notes.

Allow for local policies and procedures as some areas may use electronic tags.

The student will discuss the procedure for lost identity bands:

- if one identity band is lost another should be immediately printed out, checked by the midwife with the mother and reapplied to the baby’s ankle
- if both bands are missing, inform midwife in charge and check all other babies on the ward; check mother and if other member of staff is confident that it is their baby, print out new labels check with the mother and reapply
- this must be documented in the notes

Other security measures in the maternity environment would include:

- baby security tags that will send an alarm if the baby is moved from the ward
- a door entry system to the ward so only those people that have a right to be there are allowed onto the ward/controlled access
- staff wearing photographic identification badges
- permission from the mother as to who can visit/restricted visiting
- closed circuit television (CCTV) or other video surveillance
- discharge policy to ensure the right baby is going home with the mother

Accept other appropriate responses.

Question 4

Part A

Referring to your learning or experience, discuss safeguarding procedures involving raising concerns in respect of any risks, threats or signs of abuse in the maternity environment.

Part B

Referring to your learning or experience, present a time you interpreted a risk assessment to provide personalised care.

(20 marks)

Band	Mark	Descriptor
4	16–20	<p>Comprehensive and detailed explanation of ways of handling safeguarding procedures and interpreting a risk assessment to deliver personalised care, demonstrating exceptional knowledge, skills, and behaviours.</p> <p>Clearly articulated interpretation of the risk assessment, allowing for a highly effective analysis of its relevance to the example and excellent identification areas for personalised provision.</p> <p>Sophisticated and reflective evaluation of the student's own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>The student demonstrates excellent ability to seek advice and clear and coherent understanding of their own limitations and actions to resolve them.</p>
3	11–15	<p>Accurate and detailed explanation of ways of handling safeguarding procedures and interpreting a risk assessment to deliver personalised care, demonstrating good knowledge, skills, and behaviours.</p> <p>Good interpretation of the risk assessment, allowing for an effective analysis of its relevance to the example and good identification areas for personalised provision.</p> <p>Appropriate and reflective evaluation of the student's own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>The student demonstrates ability to seek advice and clear understanding of their own limitations and actions to resolve them.</p>

Band	Mark	Descriptor
2	6–10	<p>Satisfactory explanation of ways of handling safeguarding procedures and interpreting a risk assessment to deliver personalised care, demonstrating limited knowledge, skills, and behaviours.</p> <p>Satisfactory interpretation of the risk assessment, allowing for some convincing analysis of its relevance to the example and mostly appropriate identification areas for personalised provision.</p> <p>Mostly appropriate and reflection evaluation of the student’s own performance, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>The student demonstrates some ability to seek advice but occasionally demonstrates inaccurate understanding of their own limitations and actions to resolve them.</p>
1	1–5	<p>Basic explanation of ways of handling safeguarding procedures and interpreting a risk assessment to deliver personalised care, demonstrating limited knowledge, skills, and behaviours.</p> <p>Limited interpretation of the risk assessment, allowing for a basic analysis of its relevance to the example and some appropriate identified areas for personalised provision.</p> <p>Inconsistent evaluation of the student’s own role, reflecting on the scope of their role and the responsibilities of others within the team to comply with legislation, policy, and protocols.</p> <p>The student demonstrates some ability to seek advice but frequently demonstrates inaccurate understanding of their own limitations and actions to resolve them.</p>
	0	No creditworthy material.

Indicative content

Safeguarding:

- the student will reflect on safeguarding procedures and how to raise concerns, operating within their scope of practice
- the student will recognise that all staff have a responsibility to identify any risks, threats, or signs of abuse. If any of these are suspected they should inform the nurse in charge
- there should be recognition that there is a named midwife for safeguarding children who will be responsible for developing policies and procedures and training and supervision of staff
- the student will indicate knowledge of scope of role through indicating that if they feel there is a cause for concern this will be escalated to their superior; a safeguarding concern will be reported to safeguarding lead, for example, a multi-agency safeguarding hub (MASH) team, a team of key professionals to support vulnerable children
- the student will discuss that it is not just the baby that could be at risk but also the mother, the student will demonstrate knowledge of safeguarding training

Risk assessments:

- student will identify a time:
 - when a risk assessment was carried out
 - the key stages of undertaking a risk assessment
 - why a risk assessment was carried out
 - how this formed the basis of the care that they provided
- they will:
 - identify the hazard
 - identify who may be harmed
 - decide on precautions
 - record findings
 - implement procedures/measures to provide care

Accept other appropriate responses.

SAMPLE

Theme 3: Assessing the physical and mental wellbeing of a new mother

Question 5

Part A

Based on your learning or experience, discuss assisting to prepare a woman for an ultrasound scan, focusing on the procedure and purpose.

Part B

Referring to your learning or experience, recall and explain the preparation, procedure and purpose of a venepuncture.

(12 marks)

Band	Mark	Descriptor
4	10–12	<p>Description of assisting to prepare a woman for an ultrasound scan and venepuncture is highly detailed.</p> <p>Demonstration of accurate and excellent understanding of use of skills and behaviours always consistent with application of knowledge to practice.</p> <p>Comprehensive explanation of actions of venepuncture, demonstrating skills and behaviours to ensure person centred, highly effective and wholly appropriate care.</p>
3	7–9	<p>Description of assisting to prepare a woman for an ultrasound scan and venepuncture has good detail.</p> <p>Appropriate demonstration of accurate understanding of use of skills and behaviours consistent with application of knowledge to practice.</p> <p>Good explanation of actions of venepuncture, demonstrating relevant skills and behaviours to ensure effective and appropriate care.</p>
2	4–6	<p>Description of assisting to prepare a woman for an ultrasound scan and venepuncture has satisfactory detail.</p> <p>Mostly appropriate demonstration of understanding of use of skills that is sometimes inconsistent with application of knowledge to practice.</p> <p>Adequate explanation of actions of venepuncture, demonstrating satisfactory skills and behaviours to ensure effective and appropriate care.</p>

Band	Mark	Descriptor
1	1–3	<p>Description of assisting to prepare a woman for an ultrasound scan and venepuncture is limited in detail and is inaccurate in places.</p> <p>Limited demonstration of understanding of use of skills and behaviours consistent with application of knowledge to practice.</p> <p>Basic explanation of actions of venepuncture, demonstrating limited skills and behaviours to ensure effective and appropriate care.</p>
	0	No creditworthy material.

Indicative content

The student discusses how to prepare a woman for an ultrasound scan, focusing on procedure and purpose.

The student explains the procedure and the purpose of a venepuncture, considering local policies, consent and correct step by step procedure, which may include details such as:

- obtaining consent
- checking woman’s identification prior to the test, name, date of birth. Prepare the correct coloured bottles for the procedure
- cleaning the skin, apply tourniquet, identify suitable vein by palpating and observing
- perform venepuncture using the correct bottles in the correct order

Accept any other appropriate responses.

Question 6

Part A

Referring to your learning or experience, reflect on a time when you offered a mother and her partner advice or support in an antenatal clinic.

Part B

Referring to your learning or experience, explain the procedures in escalating any concerns about mental wellbeing to the midwifery team during any stage of pregnancy.

(20 marks)

Band	Mark	Descriptor
4	16–20	<p>Comprehensive and critical evaluation of provision of person-centred care in accordance with the care plan.</p> <p>Highly effective synthesis of elements of provision of enabling and supporting mothers and partners with individualised person-centred care to support overall wellbeing.</p> <p>Highly detailed explanation of how to assess and escalate concerns, demonstrating outstanding knowledge, skills, and behaviours.</p>
3	11–15	<p>Good evaluation of provision of person-centred care in accordance with the care plan.</p> <p>Generally effective synthesis of elements of provision of enabling and supporting mothers and partners with individualised person-centred care to support overall wellbeing.</p> <p>Detailed explanation of how to assess and escalate concerns, demonstrating good knowledge, skills, and behaviours.</p>
2	6–10	<p>Satisfactory evaluation of provision of person-centred care in accordance with the care plan.</p> <p>Effective and partial synthesis of elements of provision of enabling and supporting mothers and partners with individualised person-centred care to support overall wellbeing.</p> <p>Somewhat detailed explanation of how to assess and escalate concerns, demonstrating appropriate knowledge, skills, and behaviours.</p>
1	1–5	<p>Basic evaluation of provision of person-centred care in accordance with the care plan.</p> <p>Inconsistent synthesis of elements of provision of enabling and supporting mothers and partners with individualised person-centred care to support overall wellbeing.</p> <p>Explanation of how to assess and escalate concerns is sometimes un-contextualised, demonstrating limited knowledge, skills, and behaviours.</p>
	0	No creditworthy material.

Indicative content

Health promotion and information offered in an antenatal clinic:

- smoking and alcohol cessation
- effects of alcohol and smoking on the foetus and newborn baby
- healthy diet advice, for example vitamins/supplements (folic acid etc)
- foods to avoid
- preparation for parenthood
- support in caring for the newborn, for example feeding, care of the skin, umbilical cord, nappies
- advice and information on screening tests that the mother will have during pregnancy:
 - blood tests, ultrasound scans, weight, abdominal measurements
- explain the procedures in escalating any concerns about mental wellbeing to the midwifery team during any stage of pregnancy
- detailed history taken will determine if the mother has existing or past mental health conditions:
 - by developing a rapport with the mother and getting to know them over time, will help early detection of mental health problems
 - the mother's mental health status should be discussed during wellbeing talks at antenatal visits and in the post-natal period

The procedure for the student to escalate concerns would be to report their findings in a timely manner to a senior member of staff involving other professionals more suitably qualified. Recognising this is not within the student's sphere of competence.

Accept other appropriate responses.

Performance outcome grid

Question	C-PO1	C-PO2	C-PO3	O-PO1	O-PO2	O-PO3	Total
Theme 1							
1		2		5		5	12
2	4		5	5		6	20
Theme 2							
3	5					7	12
4	10					10	20
Theme 3							
5		3	6	3			12
6	1	5		4	10		20
Total	20	10	11	17	10	28	96
% weighting	21	10	12	18	10	29	100

Document information

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Owner: Head of Assessment Design

Change History Record

Version	Description of change	Approval	Date of Issue
v1.0	Post approval, updated for publication.		January 2021
v1.1	Updated to address post approval feedback.		March 2021
v1.2	NCFE rebrand		September 2021
v1.3	OS review Feb 23		February 2023
v1.4	Sample added as a watermark	November 2023	21 November 2023