

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Care of Children and Young People

Assignment 1 - Case study

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



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 focusing 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 performance outcomes (PO), 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.

Scenario

You are working in an urgent care centre (UCC), assisting a nurse practitioner with routine clinical patients. The UCC is adjacent to an accident and emergency department (A&E).

Patients present through one of 4 routes:

- · they walk into the centre
- they are referred by 111 or their general practitioner (GP)
- they are seen in the A&E and sent by the triage nurse when their needs are not serious enough to warrant an emergency review
- they are brought to the UCC by paramedics as an alternative to A&E

The UCC treats patients of all ages, including newborn babies, children and teenagers. You have been assigned to work with Martin, an experienced nurse, who is also qualified to prescribe medicines, such as painkillers. Martin is a registered mental health nurse (RMN) and sees patients with mental health needs, as well as physical health needs.

Your resources include:

- item A: adult mental health triage form
- item B: intoxicated adolescent pathway
- item C: notification of concern flowchart
- item D: family health needs assessment child's voice assessment framework
- item E: family health needs assessment care planning template
- item F: family health needs assessment action plan
- item G: family health needs assessment child's developmental needs



Task 1: assessment of the patient/situation

Scenario

Marianne, a 39 year old female has presented at the UCC Her key information is detailed on the patient triage form (item A). She attends the department with her 15 year old son, Benjamin.

Yourself and the paediatric nurse have been asked to support Benjamin whilst his mum is in a consultation. Mum has agreed that you and the nurse can speak to Benjamin.

Benjamin appears agitated and reluctant to talk to you and the nurse. You and the nurse make a number of observations about his appearance that cause concern. He is visibly unkempt and is wearing dirty clothes that are not appropriate for the weather, which is very cold and wet.

Task

Using the information in the adult mental health triage form (item A) relating to Marianne (Mum) evaluate the possible safeguarding risks to Benjamin.:

Use the principles of child safeguarding to support your answer and recommend the actions you think should be taken with regards to Benjamin.

Band	Mark	Descriptor
4	16–20	An excellent, well developed and highly coherent response overall that is demonstrably focused on the key demands of the question. The student provides an answer that:
		demonstrates an excellent, detailed, and balanced evaluation of safeguarding risk in the context of the case study
		demonstrates unambiguous, proportional understanding of young people's care and safeguarding
		 presents a discussion that reflects a well thought out decision-making strategy, which clearly reflects the needs of the person who is the focus of the case study
		makes recommendations that are compelling and convincing, and are clearly centred on the concepts of person and family-centred care
		includes fully, complete and accurate documentation
		 demonstrates detailed understanding of relevant safeguarding principles, standards, and legislation

Band	Mark	Descriptor						
3	11–15	A good, coherent response overall that is focused on the key demands of the question. The student provides an answer that:						
		demonstrates an accurate evaluation of safeguarding risk in the context of the case study						
		demonstrates unambiguous understanding of young people's care and safeguarding						
		presents a discussion that reflects an identifiable decision-making strategy, which reflects most of the needs of the person who is the focus of the case study						
		makes recommendations that are logical and centred on the concepts of person and family- centred care						
		includes complete, accurate documentation but there may be one or two errors						
		demonstrates understanding of named relevant safeguarding principles, standards, and legislation						
2	6–10	An adequate response overall that is focused on some of the key demands of the question. The student provides an answer that:						
		demonstrates a satisfactory evaluation of safeguarding risk in the context of the case study						
		demonstrates moderate understanding of young people's care and safeguarding						
		presents a discussion that reflects a moderate decision-making strategy, which reflects some of the needs of the person who is the focus of the case study						
		makes recommendations that are inconsistently and poorly centred on the concepts of person and family-centred care						
		includes a complete document but there may be a number of errors						
		demonstrates satisfactory understanding of safeguarding principles, standards, and legislation						
1	1–5	A limited response overall with little focus on the key demands of the question. The student provides an answer that:						
		demonstrates a limited, superficial evaluation of safeguarding risk with limited relevance to						
		the case study						
		demonstrates limited, descriptive understanding of young people's care and safeguarding presents a limited discussion that reflects a vague decision making strategy, which has						
		 presents a limited discussion that reflects a vague decision-making strategy, which has limited application needs of the person who is the focus of the case study 						
		makes recommendations that are weak and poorly or non-contextualised in the concepts of person and family-centred care						
		documentation is either partially complete or inaccurate						
		demonstrates tenuous, vague understanding of safeguarding principles, standards, and legislation						

Band	Mark	Descriptor
	0	No creditworthy material.

- evaluates possible safeguarding risks to Benjamin by reviewing the information on the adult mental health triage form, which indicates risks associated with Marianne:
 - o evidence of self-harm Benjamin may be exposed to an unstable adult
 - absence of nearby family or friends in conjunction with drinking at home alone
 - dishevelled with dirty/damaged clothes
 - o are there child protection issues? box is ticked evidence of potential safeguarding issues for Benjamin
 - o there are 3 yes marks and 8 maybe marks in the suicide screen
- uses the principles of young person's safeguarding to support their answer
- recommends the involvement of specialist individuals and teams relevant to safeguarding children and young people (CYP) roles.
- discusses communication methods, strategies, and barriers with young people
- includes the principles of consent for young people in the recommendation discussion:
 - o legal consent to examination and clinical review begins at 16 years of age
 - hospital staff may engage with people younger than 16 if they are satisfied the person has capacity to give consent
 - a balance of risk between separating Benjamin from Marianne and investigating the situation further with a specialist
- uses the standardised principles of care as appropriate throughout the answer
- refers to common factors across care settings and scenarios:
 - privacy and dignity
 - infection control
 - confidentiality

Task 2: goals/patient outcomes/planned outcomes

Scenario

After some discussion with Benjamin, you and the nurse find he is under the influence of alcohol, which he was drinking at home with Marianne (Mum). While slightly intoxicated, he is able to move and speak normally. Marianne is also intoxicated.

The UCC uses an intoxicated adolescent pathway (item B) to determine the next course of action. You and the nurse use this and it identifies a need to raise a notification of concern (NOC) (item C) to social services and child protection services.

Read the intoxicated adolescent pathway flowchart and the NOC flowchart to help you understand the process.

You and the nursedecide to speak with the designated safeguarding lead (DSL) who is on call in the hospital.

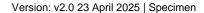
Task

Considering your knowledge of the Children Act 1989/2004, prepare the key points you would raise with the DSL in the planned discussion. Include an evaluation of Benjamin's holistic health needs that makes justified recommendations to achieve good outcomes.

Band	Mark	Descriptor						
4	16–20	n excellent, well developed and highly coherent response overall that is demonstrably cused on the key demands of the question. ne student provides an answer that:						
		demonstrates an excellent, detailed, and balanced evaluation of the health and social care issues depicted in the case study						
		demonstrates unambiguous, proportional understanding of the application of the Children Act in young people's care and safeguarding						
		 presents a discussion that reflects a well thought out decision-making strategy, which clearly reflects the needs of the person who is the focus of the case study 						
		makes recommendations that are compelling and convincing, and are clearly centred on the concepts of person-centred care with particular recognition of adolescents in the urgent care setting						
		demonstrates detailed understanding of relevant health promotion principles and practices						

Band	Mark	Descriptor
3	11–15	 A good, coherent response overall that is focused on the key demands of the question. The student provides an answer that: demonstrates an accurate evaluation of the health and social care issues depicted in the case study demonstrates unambiguous understanding of the application of the Children Act in young people's care and safeguarding presents a discussion that reflects an identifiable decision-making strategy, which reflects most of the needs of the person who is the focus of the case study
		 makes recommendations that are logical and centred on the concepts of person-centred care in a specific scenario demonstrates a good understanding of health promotion principles and practices
2	6–10	 An adequate response overall that is focused on some of the key demands of the question. The student provides an answer that: demonstrates a satisfactory evaluation of the health and social care issues depicted in the case study demonstrates a moderate understanding of the application of the Children Act in young people's care and safeguarding presents a discussion that reflects a moderate decision-making strategy, which reflects some of the needs of the person who is the focus of the case study makes recommendations that are inconsistently and poorly centred on the concepts of person-centred care demonstrates satisfactory understanding of health promotion principles and practices
1	1-5	 A limited response overall with little focus on the key demands of the question. The student provides an answer that: demonstrates a limited, superficial evaluation of the health and social care issues depicted in the case study demonstrates limited, descriptive understanding of the application of the Children Act in young people's care and safeguarding presents a limited discussion that reflects a vague decision-making strategy, which has limited application to the needs of the person who is the focus of the case study makes recommendations that are weak and poorly or non-contextualised in the concepts of person-centred care demonstrates tenuous, vague understanding of safeguarding principles, standards, and legislation
	0	No creditworthy material.

- Discuss points that will be raised with the DSL
- Underage drinking
- Marianne (Mum) being intoxicated in front of Benjamin
- explains implications of the Children Act on the case study scenario, such as:
 - o ensures Benjamin's welfare
 - helps to fully understand the family situation
 - reduces risk
 - o supports acting within statutory frameworks
- discusses features of multidisciplinary working such as differences in expertise and approaches to Benjamin's
- explains the importance of consent and choice, for example teenagers in the urgent care setting should be supported to make their own decisions
- identifies elements of health promotion with teenagers such as signposts to specialist services
- uses the standardised principles of care as appropriate throughout the answer such as involving the individual in their care planning, in line with age of consent principles
- justification of how points identified will have good outcomes for Benjamin for his next steps
- refers to common factors across care settings and scenarios:
 - privacy and dignity
 - infection control
 - confidentiality



Task 3: care/treatment/support plan

Scenario

After your experience in the UCC, you are placed with the community safeguarding team for further practical work experience. The team deals with family support and care. You are working with Megan, a safeguarding specialist in the social work team.

Megan is working with the family of Tom, a 13 year old who the social services team suspect of living in emotional neglect. The team became involved with Tom after an anonymous referral from a concerned neighbour.

So far, Megan understands that Tom does not feel supported by his mum, who is the only adult at home, and does not feel able to talk to her about difficulties he sometimes has. The neighbour has disclosed Tom often looks after himself for days when his mum is not around.

Megan decides to meet with Tom at school to find out more about his situation and uses the child's voice assessment framework (item D) to help understand Tom's feelings and needs.

Task,

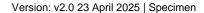
Look at the notes Megan made on the child's voice assessment framework (item D) regarding Tom's social presentation.

Prepare a summary of Tom's needs using the care plan template (item E). Use the action plan (item F) to prepare a brief summary of the next steps you would take to protect Tom and meet his needs. As part of your answer, include the extent to which you believe Megan's team should continue to engage with Tom.

Band	Mark	Descriptor						
4	16–20	An excellent, well developed and highly coherent response overall that is demonstrably ocused on the key demands of the question. The student provides an answer that:						
		demonstrates a detailed and balanced summary of the health and social care evidence depicted in the case study						
		demonstrates unambiguous, proportional understanding of the application of adolescent welfare and wellbeing						
		 presents a discussion that reflects a well thought out decision-making strategy, which clearly reflects the needs of the person who is the focus of the case study 						
		makes recommendations that are compelling and convincing, and are clearly centred on the concepts of person-centred care, with particular recognition of vulnerable adolescents						
		demonstrates detailed understanding of relevant health communication strategies						

Band	Mark	Descriptor
3	11–15	 A good, coherent response overall that is focused on the key demands of the question. The student provides an answer that: demonstrates a detailed summary of the health and social care evidence depicted in the case study demonstrates unambiguous understanding of the application of adolescent welfare and wellbeing presents a discussion that reflects an identifiable decision-making strategy, which reflects most of the needs of the person who is the focus of the case study makes recommendations that are logical and centred on the concepts of person-centred care of adolescents demonstrates a good understanding of relevant health communication strategies
2	6–10	 An adequate response overall that is focused on some of the key demands of the question. The student provides an answer that: demonstrates some detail in the summary of the health and social care issues depicted in the case study demonstrates satisfactory understanding of the application of adolescent welfare and wellbeing presents a discussion that reflects a moderate decision-making strategy, which reflects some of the needs of the person who is the focus of the case study makes recommendations that are inconsistently and poorly applied to the concepts of person-centred care of adolescents demonstrates satisfactory understanding of relevant health communication strategies
1	1–5	 A limited response overall with little focus on the key demands of the question. The student provides an answer that: demonstrates limited detail with some significant omissions or errors in the summary of the health and social care issues depicted in the case study demonstrates limited, descriptive understanding of the application of the Children Act in young people's care and safeguarding presents a limited discussion that reflects a vague decision-making strategy, which has limited application to the needs of the person who is the focus of the case study makes recommendations that are weak and poorly or non-contextualised in the concepts of person-centred care demonstrates tenuous, vague understanding of relevant health communication strategies
	0	No creditworthy material.

- completes response on proforma documentation:
 - o answers are contained in the care documentation with professional presentation
- discusses the manifestation of emotional immaturity on communication in health and social care settings
 - o limits of Tom's capacity to understand
 - limits to Tom's willingness and ability to engage
 - extent of Tom's ability to interpret information
 - extent of Tom's decision-making capabilities
- identifies key elements and presentation of Tom's wellbeing and welfare and the inherent risks to both, such as environmental and home security
- balances an argument about whether or not the team should continue to engage with Tom, providing supporting evidence, for example behaviours that impact health, such as drinking and sexual practices typical amongst teenagers
- discusses the developmental stages of young people, with reference to Tom's age, gender and behaviours
- demonstrates understanding of the interactions between health and social care systems and the professionals within each
- key approaches to support should include discussion with the individual to support person-centred care, for example duty of care and the 6 Cs
- refers to common factors across care settings and scenarios:
 - privacy and dignity
 - o infection control
 - o confidentiality



Task 4: evaluation/monitoring effectiveness/clinical effectiveness

Scenario

You are planning to visit Tom at school with Megan to carry out an assessment of his emotional and behavioural needs. Megan is keen to use the Whooley questions to assess Tom for signs of depression.

Task

Read the child's development needs section of the child's voice assessment framework, including the prompts for the Whooley approach to depression assessment (item G).

Considering what you know about Tom so far, propose an approach to monitoring the effectiveness of your action plan in the context of what you know about young people's health needs. Refer to the guidance in item D to justify your answer.

Band	Mark	Descriptor
4	16–20	 An excellent, well developed and highly coherent response overall that is demonstrably focused on the key demands of the question. The student provides an answer that: demonstrates an excellent, detailed, and balanced evaluation of the health and social care evidence depicted in the case study demonstrates unambiguous, proportional understanding of the application of adolescent welfare and wellbeing proposes an approach that is compelling and convincing, and is clearly centred on the concepts of person-centred care with particular recognition of vulnerable adolescents demonstrates detailed understanding of relevant health communication strategies
3	11–15	 A good, coherent response overall that is focused on the key demands of the question. The student provides an answer that: demonstrates an accurate evaluation of the health and social care evidence depicted in the case study demonstrates accurate and appropriate understanding of the application of adolescent welfare and wellbeing proposes an approach that is logical and mostly centred on the concepts of person-centred care of adolescents demonstrates a good understanding of most of the relevant health communication strategies

Band	Mark	Descriptor
2	6–10	An adequate response overall that is focused on some of the key demands of the question. The student provides an answer that:
		demonstrates satisfactory evaluation of the health and social care issues depicted in the case study
		demonstrates moderate understanding of the application of adolescent welfare and wellbeing
		proposes an approach that is inconsistently and poorly applied to the concepts of person- centred care of adolescents
		demonstrates moderate understanding of some of the relevant health communication strategies
		A limited response overall with little focus on the key demands of the question. The student provides an answer that:
		demonstrates a limited, superficial evaluation of the health and social care issues depicted in the case study
		demonstrates limited, descriptive understanding of the application of the Children Act in young people's care and safeguarding
		proposes an approach that is weak and non-contextualised in the concepts of person-centred care
		demonstrates tenuous, vague understanding of relevant health communication strategies
	0	No creditworthy material

- · discusses Tom's mental health and emotional needs such as purpose and goals
- promotes the place of Tom's voice in the care setting, for example consent to intervention, care and treatment
- identifies triggers of mental health challenges for Tom as named in the case study, such as access to alcohol and being sexually active at a young age
- discusses engagement and communication strategies for use with Tom, such as identifying and involving the people close to him, like teachers
- uses standard tools to assess for conditions such as depression and other health needs:
 - accurately interprets the Whooley questions as a structured assessment or pathway for use with Tom
 - o applies existing knowledge of CYP health to this system, independent of whether familiarity is disclosed
- identifies use of outcome measurement monitoring in care, for example long-term markers of success and goal monitoring, such as achievement of Tom's personal goals and maintenance of good physiological health
- links emotional and physical health in the context of challenging social circumstances

- key approaches to support should include discussion with the individual to support person-centred care, such as purpose of escalation in the clinical environment
- refers to common factors across care settings and scenarios:
 - o privacy and dignity
 - infection control
 - confidentiality



Performance outcome grid

Question	C- PO1	C- PO2	C- PO3	O- PO1	O- PO2	O- PO3	Total	Knowledge	Application	Analysis/
										Evaluation
1	4	3	0	5	6	2	20	5	10	5
2	2	2	6	2	3	5	20	5	10	5
3	3	3	0	3	8	3	20	5	8	6
4	4	4	0	3	3	6	20	5	7	9
Total	13	12	6	13	20	16	80	20	35	25
% Weighting	16.25	15	7.5	16.25	25	20	100	35	43.75	31.25

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Change History Record

Version	Description of change	Approval	Date of Issue
v1.0	Post approval, updated for publication.		January 2021
v1.1	NCFE rebrand		September 2021
v1.2	OS review Feb 23		February 2023
v1.3	Sample added as a watermark.	November 2023	21 November 2023
v2.0	Annual review Feb 25 amended wording on p4. Assessment objectives (AO) to performance outcomes (PO)	April 2025	23 April 2025