

# T Level Technical Qualification in Healthcare Science

Occupational specialism assessment (OSA)

## Optical Care Services

Assignment 3 Task 1

Practical skills assessment evidence requirement form

v1.1: Specimen assessment materials  
17 November 2023  
603/7083/X

Internal reference: HCSci-ER-0009

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# Optical Care Services

## Practical skills assessment evidence requirement form

Assignment 3 Task 1

### Contents

|   |          |
|---|----------|
| <b>Introduction</b> .....                 | <b>3</b> |
| <b>Task 1 evidence requirements</b> ..... | <b>4</b> |
| <b>Sign off</b> .....                     | <b>5</b> |
| <b>Document information</b> .....         | <b>6</b> |
| Change History Record .....               | 6        |

## Introduction

|                          |                       |
|--------------------------|-----------------------|
| TQ pathway:              | Healthcare Science    |
| Occupational specialism: | Optical Care Services |
| Assignment:              | Assignment 3: task 1  |

The following table lists the evidence that providers must ensure is collected for each student completing assignment 3 in the Optical Care Services occupational specialism of the TQ in Healthcare Science. Evidence is split into the following types:

- student produced evidence
- audio visual recordings
- photographic evidence
- provider or tutor commentary

This form should be used as a checklist and signed off by the tutor and internal quality assurer before being returned to NCFE with the evidence for each student.

SAMPLE

## Task 1 evidence requirements

| Task 1 evidence requirement                        | Detailed commentary, where relevant   |
|--|---|
| Student produced evidence                          |   |
| Signed student declaration of authenticity         | Completed declaration of authenticity.  |
| Updated patient record form                        | Completed patient record form with updated patient details ascertained from the interaction.  |
| Job order form                                     | Completed job order form, with updated order details.   |
| Audio visual recordings                            |   |
| Audio-visual recording of patient interaction 1(a) | Covering each step, labelled with the student and provider name. The recording should capture the student engaging with the patient as part of this task. |
| Audio-visual recording of patient interaction 1(b) | Covering each step, labelled with the student and provider name. The recording should capture the student engaging with the patient as part of this task. |
| Photographic evidence                              |   |
| Photograph of area set up                          | Showing the assessment area, to include equipment and set up, to also include a unique student identifier (for example, enrolment number).                |
| Provider or tutor commentary                       |   |
| Completed observation record form                  | Completed with all relevant commentary used to support marking judgements.  |
| Final mark form                                    | Final marks, student and tutor details.   |

## Sign off

|  |       |
|--|-------|
| <b>Tutor and provider sign off</b>   |       |
| Tutor confirmation:<br>I confirm that all evidence is a true reflection of the student's work for this assignment.   |       |
| Tutor name:  | Date: |
| Internal quality assurer confirmation:<br>I confirm that I agree with the tutor confirmation and have carried out a suitable check to satisfy that this is the case. |       |
| Internal quality assurer name:   | Date: |

SAMPLE ✓

## 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. |               | September 2021   |
| v1.1    | Sample added as a watermark             | November 2023 | 17 November 2023 |