T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Midwifery Team

Assignment 1 - Case study

Mark scheme

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Contents

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 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.

Scenario

You are supporting the community midwife with her caseload, and as a result are present in a number of interactions with different expectant parents.

One of the pregnant women in the caseload you are working with is called Lucy, and you will be supporting the team in working with her throughout her pregnancy journey.

The resources available to you are:

- item A: online resources

- item B: booking notes – handheld notes

- item C: booking summary

- item D: modified early obstetric warning score (MEOWS) chart

- item E: breastfeeding photograph

- item F: breastfeeding tool

- item G: extract from labour notes

- item H: day 5 baby postnatal notes

- item I: day 5 maternal postnatal notes

- item J: day 8 drop-in clinic – conversation transcript

Task 1: assessment of the patient/situation

Scenario

You have an hour long appointment booked with Lucy, the aim of which is to ascertain a thorough history, assess her needs and then advise, educate, plan, and refer as needed.

Task

For this task you are involved in completing:

- the highlighted gaps in the booking notes (item B), including calculating the body mass index (BMI)

- the highlighted gaps in the booking summary (item C)

- the observations that you have available in the first column of the MEOWS chart (item D) which will provide a baseline for the rest of the pregnancy

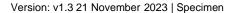You must then identify 3 risk factors from the documentation and explain:

- how the risk factors are relevant to Lucy

- what advice you would give Lucy based on these risk factors

You can use online resources: Tommy's - PregnancyHub - BMI Calculator; NHS UK - Stop smoking in pregnancy; NHS UK - Start 4 Life - Pregnancy; Antenatal Results and Choices - Tests explained; NHS UK- Start 4 Life - Breastfeeding (item A) to support your answer.

(20 marks)

Band	Mark	Descriptor
4	16–20	An excellent, well developed and highly coherent response overall that demonstrably fulfils the key demands of the question. The student provides an answer that: - demonstrates excellent accuracy, detail, and balanced analysis of evidence-based care in the context of the case study - includes a fully complete and accurate documentation in adherence to the conventions of the templates - gives advice that is reasoned, well considered and contextualised - demonstrates detailed understanding of evidence-based principles and standards in maternity care - presents justification that reflects a highly comprehensive decision-making strategy, which clearly reflects the issues in the case study

Band	Mark	Descriptor
3	11–15	A good, coherent response overall that fulfils the key demands of the question. The student provides an answer that: • demonstrates an accurate analysis of evidence-based care in the context of the case study • includes completed documentation in adherence to the conventions of the templates. There may be 1 or 2 minor errors • gives advice that is logical and mostly contextualised • demonstrates understanding of evidence-based principles and standards in maternity care • presents justification that reflects an identifiable decision-making strategy, which reflects the issues in the case study
2	6–10	An adequate response overall that fulfils some of the key demands of the question. The student provides an answer that: • demonstrates an analysis with satisfactory detail of evidence-based care in the context of the case study. There may be occasional errors that do not impede understanding • includes completed documentation with frequent errors in content and in the use of the template guidance • gives advice that is inconsistently contextualised • demonstrates satisfactory understanding of evidence-based principles and standards in maternity care • presents justification that reflects a moderate decision-making strategy, which reflects the issues in the case study
1	1–5	A basic response overall with little focus on the key demands of the question. The student provides an answer that: • demonstrates a basic, superficial analysis of evidence-based care in the context of the case study • includes partially completed documentation with one or significant errors or omissions, including in adherence to the conventions of the templates • gives advice that is weak and uncontextualised in places • demonstrates tenuous understanding of evidence-based principles and standards in maternity care • presents limited justification that reflects a vague decision-making strategy which demonstrates limited application to the issues in the case
	0	No creditworthy material.

Indicative content

- completes highlighted gaps on documentation:

    o   BMI calculated and completed on booking notes (item B) and booking summary (item C) as 31.2 or 31

    o   Lucy's name and hospital number completed on the bottom of the booking summary antenatal notes (item C)

    o   due date, parity and BMI accurately transferred from handheld notes to the first page of the booking summary (item C)

    o   medication, allergies and Lucy's details correctly transferred to the second page of the booking notes (item B)

    o   the first column of the MEOWS chart (item D) completed with pulse 73, RR 13, temperature 36.8, BP 95/58, and total yellow score is 1 and then initialled. Sheet is dated

- explains 3 risk factors and advises Lucy about them, including reassuring that a chance of something happening might not indicate it will happen. Risk that should be explored might include:

    o   BMI and diet

    o   smoking

    o   alcohol intake

    o   mental health

Accept other appropriate responses.

Task 2: goals/patient outcomes/planned outcomes

Scenario

You are assisting with an appointment for Lucy in her last trimester. Lucy is still undecided about her options regarding place of her birth and is considering a water birth.

Task

For this task, you have to produce notes to help Lucy make an informed decision around choosing a place of birth; home, midwifery-led unit or consultant unit.

In these notes, explain the advantages and drawbacks of each birthing environment. You should also include the practical information that parents need to consider when preparing for birth in each setting.

(20 marks)

Band	Mark	Descriptor
4	16–20	An excellent, well developed and highly coherent response overall that demonstrably fulfils the key demands of the question. The student provides an answer that: • demonstrates excellent accuracy, detail, and balanced analysis of evidence-based care in the context of the case study • gives information that is tailored to the needs of the mother and birthing partner in relation to birthing environments • includes accurate and appropriate explanation that evidences excellent understanding of the goals and planned outcomes in the case study • uses relevant and accessible healthcare terminology consistently throughout.
3	11–15	A good, coherent response overall that fulfils the key demands of the question. The student provides an answer that: • demonstrates accurate analysis of evidence-based care in the context of the case study • gives information that is tailored to the needs of the mother and birthing partner in relation to birthing environments • includes accurate and appropriate explanation that evidences good understanding of the goals and planned outcomes in the case study • uses relevant and accessible healthcare terminology consistently throughout, with no more than 1 or 2 minor errors

Band	Mark	Descriptor
2	6–10	An adequate response overall that fulfils some of the key demands of the question. The student provides an answer that: - demonstrates a satisfactory analysis of evidence-based care in the context of the case study - gives information that is tailored to the needs of the mother and birthing partner with some lapses in relation to birthing environments - includes explanation that evidences a moderate understanding of the goals and outcomes in the case study - uses accessible healthcare terminology, but not always appropriate and sometimes with numerous errors
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 basic, superficial analysis of evidence-based care in the context of the case study - gives information that is unlikely to meet the needs of the mother and birthing partner in relation to birthing environments - includes partially accurate and appropriate explanation that evidences insufficient understanding of the goals and outcomes in the case study - uses limited or inaccurate accessible healthcare terminology
	0	No creditworthy material.

Indicative content

Explains advantages, drawbacks and practical implications around each place of birth:

- home birth:
  - advantages, such as increases the chance of straightforward birth and fewer interventions
  - disadvantages, such as fewer pain management options
- midwifery led unit (MLU):
  - advantages, such as greater chance of continuity of carer, which in turn leads to more favourable outcomes
  - disadvantages, such as often smaller: may not be staffed 24/7 or already full, no guarantee until telephone call made to unit on the day
- hospital birth:
  - advantages, such as direct access to obstetricians if labour becomes complicated
  - disadvantages, such as higher likelihood of interventions even for a low-risk pregnancy
- practical considerations:

- o home births require parents to do more preparation themselves and parents are made aware that fetal heart will be monitored by handheld doppler or Pinard

- o MLUs are for low-risk labours only: if the midwife finds that labour deviates from normal then transfer will be recommended

- o hospital units may have a limit on the number of birth partners

Accept other appropriate responses.

Task 3: care/treatment/support plan

Scenario

You accompany the community midwife to Lucy's first home visit on day 3. Lucy tells you that she is not sure if her baby is getting enough milk.

Task

Referring to the breastfeeding photograph (item E); the breastfeeding tool answers (item F); and the Start4Life breastfeeding website (item A), document your discussion with Lucy. You should analyse Lucy's breastfeeding, considering signs of effective feeding and potential problems.

Write a breastfeeding plan outlining the steps that could help Lucy, considering Lucy's wishes and needs as well as breastfeeding mechanics.

(20 marks)

Band	Mark	Descriptor
4	16–20	An excellent, well developed and highly coherent response overall that demonstrably fulfils the key demands of the question. The student provides an answer that: • demonstrates excellent accuracy, detail, and balanced analysis of the breastfeeding options in the context of the case study • demonstrates accurate and appropriate understanding of breastfeeding options in the context of the case study • presents a discussion that reflects a highly comprehensive decision-making strategy, which clearly reflects the issues in the case study • makes recommendations that are reasoned, well considered and contextualised • demonstrates detailed understanding of best practice and needs relevant to maternity care

Band	Mark	Descriptor
3	11–15	A good, coherent response overall that fulfils the key demands of the question. The student provides an answer that: • demonstrates accurate analysis of the breastfeeding options in the context of the case study • demonstrates accurate and appropriate understanding of the breastfeeding options in the context of the case study • presents a discussion that reflects an identifiable decision-making strategy, which reflects the issues in the case study • makes recommendations that are logical and mostly contextualised • demonstrates good understanding of relevant best practice and needs to relevant maternity care
2	6–10	An adequate response overall that fulfils some of the key demands of the question. The student provides an answer that: • demonstrates a satisfactory analysis of the breastfeeding options in the context of the case study • demonstrates moderate understanding of breastfeeding options in the context of the case study • presents a discussion that reflects an identifiable decision-making strategy, which reflects the needs of the issues in the case study • makes recommendations that are inconsistent and poorly contextualised • demonstrates satisfactory understanding of relevant best practice and needs in maternity care
1	1–5	A basic response overall with little focus on the key demands of the question. The student provides an answer that: • demonstrates a limited analysis of the breastfeeding options in the context of the case study • demonstrates partially accurate and appropriate understanding of breastfeeding options in the context of the case study • presents a limited discussion that reflects an identifiable decision-making strategy, lacking in sufficient application to the issues in the case study • makes recommendations that are weak and uncontextualised • demonstrates tenuous understanding of relevant best practice and needs in the case study
	0	No creditworthy material.

Indicative content

- analyses feeding problems from photograph (item E) and answers in the breastfeeding tool (item F) and identifies details such as:

  o incorrect positioning and attachment

  o baby sucking on end of the nipple

  o nipple misshapen, which is a sign that the nipple is not to the back of baby's mouth and is instead hitting baby's palate causing pain for mother and ineffective milk transfer for baby

- analyses positive signs of feeding such as:

  o baby is alert and content

  o no dummy or formula, which means there will be no nipple confusion and milk supply will not be affected by use of formula disrupting supply and demand

  o milk has arrived, which means baby has been stimulating the breasts

- writes a breastfeeding plan that includes actions and information such as:

  o observe a feed

  o explain responsive feeding/recognising early feeding cues

  o principles of good positioning and attachment (for example CHIN: close to mother/head free/in-line/nose to nipple)

  o different positions (for example cross cradle; rugby ball (good with bigger breasts); lying down (good with painful stitches); biological nurturing (good to encourage feeding))

  o signpost to video links, breastfeeding support groups, contact numbers

- supports Lucy and considers her needs and wishes:

  o listen to what Lucy finds difficult (for example pain, number of feeds, lack of knowledge on how to feed, and tailoring the information in a person-centred way)

  o ask whether Lucy wants to continue breastfeeding (for example goals, aspirations, options)

  o ask about her concerns

  o address misconceptions (for example baby not getting enough milk, baby rejecting her)

  o provide emotional support, health advice and signpost to support groups

Accept other appropriate responses.

Task 4: evaluation/monitoring effectiveness/clinical effectiveness

Scenario

You are one of the midwifery support workers (MSW) on the infant feeding team running the regular drop-in sessions. Lucy comes to have her baby weighed on day 8 and opens up to you about a number of issues that she is experiencing (item J).

Task

Referring to the day 3 breastfeeding tool (item F), extract from labour notes (item G), day 5 postnatal notes (items H and I), and day 8 conversation transcript (item J), write a confidential email to her community midwife to evaluate:

- how Lucy is recovering from the birth physically and adapting to parenthood emotionally

- how breastfeeding has been since day 3

(20 marks)

Band	Mark	Descriptor
4	16–20	An excellent, well developed and highly coherent response overall that demonstrably fulfils the key demands of the question. The student provides an answer that: - demonstrates an accurate, detailed, and relevant evaluation of postnatal recovery in the context of the case study - includes a high level of active engagement with a range of individualised examples in the context of the case study - includes accurate and appropriate explanation that evidences excellent understanding of the needs of the evaluation - demonstrates detailed understanding of person-centred care principles and standards in the context of maternity care
3	11–15	A good, coherent response overall that fulfils the key demands of the question. The student provides an answer that: - demonstrates an accurate evaluation of postnatal recovery in the context of the case study - includes an appropriate level of active engagement with some individualised examples in the context of the case study - includes accurate explanation that evidences good understanding of the needs of the evaluation - demonstrates good understanding of person-centred care principles and standards in the context of maternity care

Band	Mark	Descriptor
2	6–10	An adequate response overall that fulfils some of the key demands of the question. The student provides an answer that: • demonstrates a satisfactory evaluation of postnatal recovery in the context of the case study • includes a moderate level of active engagement with few individualised examples in the context of the case study; these examples may be vague and general • includes explanation that evidences moderate understanding of the needs of the evaluation • demonstrates satisfactory understanding of person-centred care principles and standards in the context of maternity care
1	1–5	A basic response overall with little focus on the key demands of the question. The student provides an answer that: • demonstrates a basic, superficial evaluation of postnatal recovery in the context of the case study • includes little or no level of active engagement with examples that are weak and uncontextualised in the context of the case study • includes explanation that evidences limited understanding of the needs of the evaluation • demonstrates basic, superficial understanding of person-centred care principles and standards in the context of maternity care
	0	No creditworthy material.

Indicative content

- evaluates Lucy's postnatal physical recovery:
  - lochia function – normal
  - micturition function – normal
  - bowel functions – normal
- awareness of deep vein thrombosis (DVT) risk – postnatal women are at greater risk of DVT than before pregnancy
- suture healing:
  - Lucy experiences pain from her sutures, which could impact on her mood and ability to do tasks, for example feeding the baby comfortably:
    - no sign of infection at day 5 so likely normal healing
    - day 8 pain worsening so could be infection and requiring antibiotics

- breast and nipple pain are improving, which is a sign that position and latch adjustments are working

- evaluates Lucy's adaptation to parenthood emotionally

- evaluates Lucy's breastfeeding

Accept other appropriate responses.

Performance outcome grid

Question	C-PO1	C-PO2	C-PO3	O-PO1	O-PO2	O-PO3	Total
1	5	1	4	10	0	0	20
2	5	5	0	10	0	0	20
3	3	2	3	2	7	3	20
4	5	3	0	4	5	3	20
Total	18	11	7	26	12	6	80
% Weighting	22.5	13.75	8.75	32.5	15	7.5	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	NCFE rebrand		September 2021
v1.2	OS review Feb 23		February 2023
v1.3	Sample added as a watermark	November 2023	21 November 2023