

# T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

## Supporting the Adult Nursing Team

Assignment 1 – Case study

Case study stimulus materials

v1.1: Additional sample materials  
20 November 2023  
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## T Level Technical Qualification in Health Occupational specialism assessment (OSA)

# Supporting the Adult Nursing Team

### Assignment brief

Assignment 1

Case study stimulus materials

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## Item A: physiological measurements on hospital admission

Physiological measurements
Respiration rate: 18bpm
Oxygen saturation: 98%
Blood pressure: 120/80
Heart rate (pulse): 80bpm
Consciousness: Confusion
Temperature: 37.5°C

SAMPLE

## Item B: scripted conversation between Sam and the doctor completing her admission assessment

**Doctor:** 'Can you tell me what happened?'

**Patient:** 'I fell off my bike.'

**Doctor:** 'And do you know where you are?'

**Patient:** 'It looks like a hospital.'

**Doctor:** 'What day is it?'

**Patient:** 'I don't know.'

**Doctor:** 'Where were you going on your bike?'

**Patient:** 'I'm not sure.'

SAMPLE

## Item C: patient notes handed over by the ambulance team

**Patient name:** Sam Jones

**D.O.B:** 25/06/1965

**Date:** 28/01/2023

**Address of incident:** Market Square

**Caller to 999:** Husband

**Information given on arrival to the scene:** Patient fell from their bike on return home from a bike ride. Fell onto left side with injury to head and knee. Patient's husband advised on arrival at the scene the patient was unable to recall events of what happened and seems dazed and confused. After falling from her bike, the patient did not lose consciousness. After the fall, the patient became incredibly quiet and took a long time to respond to any questions. The patient's husband stated she struggled to recall his name for a period after the incident. No loss of consciousness but patient showing confusion and not orientated to time or place.

**Physiological measurements on ambulance admission:** Respiration rate: 18bpm, Oxygen saturation: 98%, Blood pressure: 130/90, Heart rate (pulse): 92bpm, Consciousness: Confusion, Temperature: 37.5°C.

**Current medications:** None given

**Known allergies:** None known

**Additional information:** Complaints of pain to left knee and head. Abrasion to head, cleaned before transfer to hospital. No requirement for oxygen.



## The NEWS2 scoring system

Physiological parameter	Score						
	3	2	1	0	1	2	3
Respiration rate (per minute)	≤8		9–11	12–20		21–24	≥25
SpO <sub>2</sub> Scale 1 (%)	≤91	92–93	94–95	≥96			
SpO <sub>2</sub> Scale 2 (%)	≤83	84–85	86–87	88–92 ≥93 on air	93–94 on oxygen	95–96 on oxygen	≥97 on oxygen
Air or oxygen?		Oxygen		Air			
Systolic blood pressure (mmHg)	≤90	91–100	101–110	111–219			≥220
Pulse (per minute)	≤40		41–50	51–90	91–110	111–130	≥131
Consciousness				Alert			CVPU
Temperature (°C)	≤35.0		35.1–36.0	36.1–38.0	38.1–39.0	≥39.1	

National Early Warning Score (NEWS) 2

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## NEWS2 thresholds and triggers and clinical response to the NEWS2 trigger thresholds

NEW score	Clinical risk	Response
Aggregate score 0–4	Low	Ward-based response
Red score Score of 3 in any individual parameter	Low–medium	Urgent ward-based response*
Aggregate score 5–6	Medium	Key threshold for urgent response*
Aggregate score 7 or more	High	Urgent or emergency response**

\* Response by a clinician or team with competence in the assessment and treatment of acutely ill patients and in recognising when the escalation of care to a critical care team is appropriate.

\*\*The response team must also include staff with critical care skills, including airway management.

National Early Warning Score (NEWS) 2

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NEWS score	Frequency of monitoring	Clinical response
0	Minimum 12 hourly	<ul style="list-style-type: none"> <li>Continue routine NEWS monitoring</li> </ul>
Total 1–4	Minimum 4–6 hourly	<ul style="list-style-type: none"> <li>Inform registered nurse, who must assess the patient</li> <li>Registered nurse decides whether increased frequency of monitoring and/or escalation of care is required</li> </ul>
3 in single parameter	Minimum 1 hourly	<ul style="list-style-type: none"> <li>Registered nurse to inform medical team caring for the patient, who will review and decide whether escalation of care is necessary</li> </ul>
Total 5 or more Urgent response threshold	Minimum 1 hourly	<ul style="list-style-type: none"> <li>Registered nurse to immediately inform the medical team caring for the patient</li> <li>Registered nurse to request urgent assessment by a clinician or team with core competencies in the care of acutely ill patients</li> <li>Provide clinical care in an environment with monitoring facilities</li> </ul>
Total 7 or more Emergency response threshold	Continuous monitoring of vital signs	<ul style="list-style-type: none"> <li>Registered nurse to immediately inform the medical team caring for the patient – this should be at least at specialist registrar level</li> <li>Emergency assessment by a team with critical care competencies, including practitioner(s) with advanced airway management skills</li> <li>Consider transfer of care to a level 2 or 3 clinical care facility, ie higher-dependency unit or ICU</li> <li>Clinical care in an environment with monitoring facilities</li> </ul>



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## Change History Record

Version	Description of change	Approval	Date of issue
v1.0	Additional sample material		01 September 2023
v1.1	Sample added as a watermark	November 2023	20 November 2023