T-LEVELS | Institute for Apprenticeships & Technical Education

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Adult Nursing Team

Assignment 2 - Practical Activities Assessment - Distinction

Guide standard exemplification materials

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Supporting the Adult Nursing Team

Assignment 2

Contents

Introduction

The material within this document relates to the Supporting the ~~Therapy Team~~ Adult Nursing Team occupational specialism sample assessment. These exemplification materials are designed to give providers and students an indication of what would be expected for the lowest level of attainment required to achieve a pass or distinction grade.

The examiner commentary is provided to detail the judgements that examiners will undertake when examining the student work. This is not intended to replace the information within the qualification specification and providers must refer to this for the content.

In assignment 2, the student must demonstrate practical skills that are vitally important for any future role in the healthcare sector and must work in ways that are typical to the workplace.

After each live assessment series, authentic student evidence will be published with examiner commentary across the range of achievement.

Practical activity scenario 1

This practical activity scenario requires you to:

OPA1: move and/or position the individual for treatment or to complete clinical skills, using the appropriate moving and handling aids

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 20 minutes.

Brief

An individual has oesophageal cancer and has had their last course of chemotherapy. Due to their condition and treatment, they have limited communication and mobility. They have requested to sit in their chair today, as they are currently lying in bed.

Task

Assess and assist the individual using the appropriate moving and handling equipment and techniques, from the bed to the chair. You have been given their moving and handling risk assessment form (item A).

Document this in the individual's daily care log (item B).

Student evidence

I observe the student wash their hands thoroughly before going to see the individual.

The student explains to the individual that they are responding to their request to sit in a chair today and they ask and confirm that they still wish to do this now.

The student asks the individual if they have any concerns about the recent treatment they have undergone. The individual tells the student that they are a little concerned as they worry they may fall (they feel a bit wobbly), but the student reassures them that they will support and guide them The student tells the individual that they are going to go and get some equipment which will support them with the move and make the process safer for them both.

The student retrieves the equipment that they are going to use: a slide sheet and transfer belt. Before starting, I observe the student clean the equipment. Whilst cleaning, I observe the student carry out checks; I observe the student check for tears to the stitching and that everything is in correct working order.

I observe the student check the risk assessment documentation.

The student begins by pulling the privacy curtain and checks to make sure the individual is dressed appropriately. The student checks that the individual is fully covered before fully removing the top sheet. The student supports the individual to put on a pair of comfortable and secure fitting footwear.

I observe the student support the individual to move into position, giving clear instruction and guidance. The student begins with elevating the bed and back rest, saying to the individual, ‘I am now going to elevate the bed; it may feel strange, but you shouldn’t feel uncomfortable’, then they position the slide sheet so that the individual can shuffle their body weight onto it by rolling from side to side. The student uses the slide sheet to assist the individual to a sitting position. Next, I observe the student put the transfer belt around the individual’s lower back, ensuring the adjustable strap is at the waist and securing it to the quick release buckle.

The student asks the individual to move into a nose over toes position with both feet flat on the floor, one slightly in front of the other. The student then moves so that they are in a good position to support the individual and guide them in the right direction. The student checks to see if the individual has an obvious weaker side and positions themselves accordingly. I observe the student check their own stability; they place their feet slightly apart with one foot in front of the other, knees slightly bent. I then observe the student take hold of the grab handle on the left. They do not put their whole hand through the loop and take hold of the individual’s right hand. The student then asks the individual to shuffle forward slightly. The student tells the individual that on the count of 3 they will stand up using their support. The student says, ‘1, 2, 3 and stand’ then helps to manoeuvre the individual forward then up. The handling sling also helps the student to support the individual safely. The student checks that the individual feels safe and then encourages them to move forward, slowly and steadily, one foot in front of the other towards the chair. Once the student has guided the individual into the correct position, they ask them to reach out and feel for one of the chair handles to support their balance. Once they can feel the chair touch the back of their legs, they reach round with the other hand and find the other handle. Lastly, the student guides the individual down into the chair carefully

The student had already positioned the chair.

Once in the chair, the student asks the individual if they are comfortable and if they require any additional body support. The student carries out checks, making sure that both the individual’s feet are on the floor and that they were suitably supported when sitting. The student asks if the individual has any pain or discomfort when moving from the bed to the chair. They say no, and that they are okay. Before leaving the individual, the student asks if

they have everything they need and if there is anything else they could do for them.

The student removes their PPE (apron and gloves), washes their hands thoroughly and records the move from the bed to the wheelchair in the daily care log.

The student will document the procedure on the daily care log as follows:

Date	**Time**	**Action taken**
xxxx	xxxx	The individual requested and consented to sitting in a chair. She was assisted to transfer to a chair from her bed using equipment, as per recommendation in the care plan to include, slide sheet, transfer belt. The movement was performed in accordance with procedures and protocols and the individual was comfortable at all times. She was able to maintain her sitting and standing balance and was lowered and seated safely in a chair maintaining the correct posture. It was checked she was comfortable at all times and experienced no pain or other discomfort throughout the procedure. She was seated on a specialist cushion and is to return to bed within 2 hours or sooner if it becomes uncomfortable.

Practical activity scenario 2

This practical activity scenario requires you to:

OPA6: check skin integrity using appropriate assessment documentation and inform others

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 20 minutes.

Brief

A 72 year old, average weight female has been admitted to hospital due to a fractured neck of femur on the left-hand side.

Although she is recovering well, due to a lack of mobility she is at increased risk of developing a pressure ulcer.

It is day 4 post-operative, and the individual's urethral catheter has been removed. The individuals skin condition requires assessment. There are some potential areas of redness (discoloured skin) including the area around the hip and the incision wound.

Task

Identify the skin integrity process using the body map (item C) and an adapted Waterlow tool (item D) to recognise and document areas currently at risk from pressure damage injury.

Identify ways to aid recovery and improve skin integrity.

Student evidence

See attached Word document for pass and distinction body map (item C).

See attached Word document for pass and distinction Waterlow score (item D).

Before starting the procedure, the student gains verbal consent from the individual. The student tells them that they are going to check their skin integrity

The student washes their hands and puts on PPE. The student applies their apron, surgical mask, eye protection and gloves in that order.

The student informs the individual before helping them to move into a position so they can accurately carry out their checks. The student carries out checks, focusing on all of the bony prominences. I observe the student check the hips and the incision, and also the eye orbits and ears. The student explains to the individual their findings. The student informs the individual that the sacrum remains red and therefore the individual requires repositioning on alternate sides at least every 2 hours. All other areas of the skin are intact with no areas of concern identified. The surgical wound is clean and dry, and the dressing should be replaced with a sterile dry dressing using aseptic non-touch technique, which aims to ensure the key wound is not contaminated by keeping the dressing pad, which comes in contact with the wound, free from micro-organisms. I observe the student ensure the individual is turned into a comfortable position. The student leaves the individual with a call bell and tells the individual when they will be back to help them to change position or next get out of bed. The student then removes their PPE (gloves, apron, eye protector and mask) and washes their hands immediately using the 5-point technique.

I observe the student record their findings on the body map and Waterlow tool.

The student clarifies that they are going to proceed with the gold standard of care for pressure ulcer prevention which uses SSKIN. The student clarifies what SSKIN stands for. The student provides a verbal explanation, see below:

Surface – ensuring the patient's skin has the correct supporting surface to spread the load. Skin inspection – regularly performed skin inspections for someone at risk will allow assessment of effectiveness of interventions and prevent deterioration. Keep moving – movement is an important way of relieving pressure and the individual should be encouraged to do this for themselves. Incontinence – this is a risk because it can cause skin moisture lesions which can be very sore and can increase the risk of pressure ulcer formation.

Nutrition and hydration – although this individual does not have any weight concerns currently, it is important to drink plenty of fluids to keep the skin hydrated and to eat a nutritious balanced diet to ensure the skin receives the nutrients.

I have observed the student follow policy and procedures throughout, ensuring effective communication with the individual as well as accurately recording information using the correct documentation; this includes the Waterlow scores and body mapping, and transferring all this information into the individual's care plan so that adequate management/prevention of pressure ulcers is put in place.

Practical activity scenario 3

This practical activity scenario requires you to:

OPA4: demonstrate the ability to carry out clinical skills for individuals, including clinical assessments and report on findings

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 15 minutes

Brief

An individual has been admitted to the medical ward after suffering intermittent non-specific abdominal pain. The doctor has asked you to collect a mid-stream urine sample (MSU) and perform a routine urinalysis.

Task

Collect the urine sample following infection prevention and control procedures and perform urinalysis as requested by the doctor.

Use the next page as the individuals notes to record your findings.

Student evidence

The student asks the individual for consent verbally and then goes to collect the equipment they need. The student makes sure that the individual is fully aware of the process and makes sure they have no issues or concerns prior to starting.

The student explains that this is a mid-stream urine test and the individual's specimen cannot be from the first or last part of the urine that comes out. The student hands them a container to collect the specimen in and advises that they wash their hands before and after giving their sample. The student checks that they understood what they have asked them to do. The individual confirms they have.

The patient will provide a specimen (simulated).

Whilst the individual is collecting their sample, I observe the student wash their hands and put on PPE, including an apron, mask, goggles and single use nonsterile gloves, according to local policy.

The individual returns with their urine sample, and the student demonstrates the use of the non-touch technique. The student accidently spills some of the urine onto the unit top and uses disinfectant to clean it so as not to contaminate the surface. The student puts waste in the correct clinical waste bag in accordance with COSHH policy.

I then observe the student use the test strips to perform the test. They dip the test strip into the urine sample using the non-touch technique.

I observe the student record the results fully and accurately in the patient's notes. The student prepares some of the sample to go to the lab. The student labels the specimen fully and correctly and ensures that it is placed in an appropriately sealed package. The student then disposes of any waste in the correct clinical waste bag and cleans the area they have been working in.

The student then removes their PPE (gloves, apron, googles and mask) and disposes of it safely in clinical waste. They then wash their hands thoroughly.

Before the individual leaves, the student informs them that glucose has been found in their urine samples, explaining that the result is outside the normal range and that they are going to inform the clinician.

The student then records the urinalysis result in the individual's electronic records, including the name, unique identifier of individual and date, time of sample, the results obtained and escalation intentions of abnormal findings.

Practical activity scenario 4

This practical activity scenario requires you to:

OPA10: support or enable individuals to maintain good nutrition by promoting current healthy nutrition and hydration initiatives to support individuals to make healthier choices, recording details using food and drink charts and nutritional plans and involving carers, where appropriate.

You have up to 5 minutes to carefully read through the following scenario and familiarise yourself with the station.

The total amount of time available for this practical activity scenario, including the 5 minutes reading time, is 20 minutes.

Brief

An individual has been struggling to look after themselves at home. They have been admitted to hospital following concerns from family that they have not been eating very well and have recently lost 6kg.

Task

Use the information in the nutrition assessment document (item E) and the BMI and weight loss scoring chart (item F) to assess the individual's risk of malnutrition and discuss adequate nutrition and hydration needs with the individual using the Eatwell guide (item G).

Student evidence

The student explains the procedure and purpose and gains the individual's consent before starting. The student demonstrates clear communication skills and positive behaviours to build a rapport with the individual whilst being calm, open and professional.

The student then moves on to carrying out the measurements. The student identifies the appropriate measurements to use the tool. The student confirms with the individual that they are measuring the patient's height and weight, and they also explain to the individual the purpose of taking each measurement so that they accurately record their BMI.

Before starting the process of taking measurements, the student puts on PPE. I observed them prepping the area and equipment prior to starting.

Height = 163cm

Weight = 54kg

Weight loss (unplanned) = 6kg

6/54 = 0.11 x 100 = 11.11% weight loss

Body mass index = 21 (normal range) – score = 0

Unplanned weight loss score = 2

Establish an acute disease effect score = 0

The student uses the above measurements to calculate and record a MUST score of 2. The student verbally informs the patient.

The student then continues to have a discussion with the patient to find out a bit more background information to identify any need for support with nutrition. The student asks the individual if they require any support. The student records all the responses given by the individual.

The individual displays concerns about their weight loss, and the student makes sure to provide reassurances. The student tells the individual that, they are not underweight, but also recognises that recent weight loss means they are at high risk of malnutrition and therefore the student explains that they are going to refer them to a dietician. Before proceeding, the student checks to make sure they understand what has been discussed and that they are happy to be referred. The student makes a note to inform the doctor about their recommendation and the requirement to have a follow-up MUST assessment.

The student then uses the Eatwell Guide to talk to the individual about their food preferences. The student covers the following:

5 portions of fruit and vegetables daily and 1/3 of the plate should be starchy foods, such as potato, rice or bread. Wholegrain is better for fibre content for bowel health, and some dairy each day provides essential protein, fats, vitamins and minerals. Sufficient protein each day can also be substituted with meat, fish or pulses.

The student provides the individual with suggestions that could be made to their current diet, then proceeds to formulate a plan with the individual.

Throughout the conversation, it is apparent that the student considers some other external factors which may be affecting their weight loss, and they talk about any potential stressors and any increase in activity. All responses

are recorded.

Before completing the assessment and allowing the individual to leave, the student reiterates everything that has been discussed and asks the individual if they have any questions. The student explains that all of today's findings will be escalated to the GP.

The student sees the individual out and removes their PPE. The student makes sure to leave the area clean and, lastly, washes their hands thoroughly.

Examiner commentary

The student demonstrated excellent knowledge of adult nursing and was able to communicate in a highly effective manner. This was evident within the role plays where the student focused finding out information about the individual and developed all points with appropriate questions. The student asked relevant questions and responded by summing up when necessary. This reflects best practice and professional competence.

The student also demonstrated excellent understanding around the impact of adult nursing, which was also evident in the role plays, moving and handling an individual, assessment of skin integrity including prevention, carrying out clinical skills and supporting/promoting good nutrition. The student was able to role play appropriately and had positive body language. The recording of the verbal answers was accurate and included all detail.

The student demonstrated present, accurate and detailed non-verbal communication. There was depth and insight of observing and recording non-verbal communication.

Grade descriptors

The performance outcomes form the basis of the overall grading descriptors for pass and distinction grades.

These grading descriptors have been developed to reflect the appropriate level of demand for students of other level 3 qualifications, the threshold competence requirements of the role and have been validated with employers within the sector to describe achievement appropriate to the role.

Grade	Demonstration of attainment

Pass	A pass grade student can:
	• communicate the relationship between person-centred care and health and safety requirements in healthcare delivery by:
	  ○ demonstrating working in a person-centred way, taking relevant and sufficient precautions to protect the safety and physical and mental wellbeing of individuals
	  ○ recognising and responding to relevant healthcare principles when implementing duty of care and candour, including the demonstrating sufficient knowledge of safeguarding individuals and maintaining confidentiality
	  ○ following standards, codes of conduct and health and safety requirements/legislation to maintain a sufficiently safe working environment
	  ○ demonstrating use of an adequate range of techniques, equipment and resources safely to promote sufficient levels of cleanliness and decontamination required for satisfactory infection prevention and control
	• communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by:
	  ○ adequately following current best practice and codes of conduct across relevant boundaries, relevant to assisting with scenario specific, clinical and therapeutic interventions
	  ○ working adequately as part of a team to assist registered health professionals with delegated tasks and interventions.
	  ○ supporting individuals to meet their care and needs to a satisfactory standard:
	  ▪ including maintaining individual's privacy and dignity and communicating effectively, contributing to handovers, seeking help, advice and information, and responding sufficiently to the service users views to maintain effective provision of services
	  ○ gathering sufficient evidence, contributing to, following and recording information in care plans/records relevant to tasks and interventions, structuring these sufficiently to allow understanding in line with local and national legislation and policies, preserving individuals' rights
	  ○ maintaining a record of professional development with evidence of using feedback to develop knowledge, skills, values and behaviours consistent with sufficient ability to reflect on practice and thereby improve performance adequately
	• communicate sufficiently reliable levels of knowledge of the physiological states that are commonly

Grade	Demonstration of attainment
	measured by healthcare support workers including why, when and what equipment/techniques are used by: o working as part of a team to use relevant equipment effectively and safely and following correct monitoring processes o calculating scores, reporting and differentiation of normal and abnormal results to the relevant registered professional o applying knowledge of policy and good practice techniques when undertaking all physiological measurements, checking when uncertain and consistent with instructions and guidance
Distinction	A distinction grade student can: • communicate adeptly the relationship between person-centred care and health and safety requirements in healthcare delivery by: o demonstrating flexible and constructive person-centred care, taking appropriate precautions reliably, making sound decisions to protect the safety and physical and mental wellbeing of individuals o alertness and responsiveness to relevant healthcare principles when implementing duty of care and candour, including the demonstration of exceptional sensitivity and accurate knowledge of safeguarding individuals and maintaining confidentiality o commitment to following all required standards, codes of conduct and health and safety requirements/legislation decisively to maintain a safe, healthy working environment o demonstrating proficient use of an extensive range of techniques to promote optimum levels of cleanliness and decontamination required for effective infection prevention and control • communicate knowledge of national and local structures, definitions of clinical interventions, the scope and limitations of their healthcare role within it, by: o following current best practice and agreed ways of working highly relevant to assisting with scenario specific, care-related tasks consistently and reliably, whilst fully supporting individuals to meet their care and needs, including maintaining the individual's privacy and dignity to a high standard o working adequately as part of a team to assist registered health professionals with delegated tasks and interventions, supporting individuals to meet their care and needs to a satisfactory standard, including maintaining individual's privacy and dignity and communicating effectively, contributing to handovers, seeking help, advice and information, and responding sufficiently to service users views to maintain effective provision of services o gathering extensive evidence consistently, interpreting, contributing to, following and recording information in care plans/records highly relevant to tasks and interventions, structured accurately and legibly and in line with local and national policies, while preserving and promoting individuals' rights o maintaining a record of professional development to develop knowledge, skills, values and behaviours consistent with ability to reflect on practice enthusiastically, using the feedback to initiate new learning and personal practice development to improve performance with developing

Grade	Demonstration of attainment
	proficiency • communicate exceptional levels of knowledge of the physiological states that are commonly measured by healthcare support workers including why, when and what equipment/techniques are used by: ○ working as part of a team to use relevant equipment accurately and safely and consistently following correct monitoring processes ○ calculating scores, reporting and differentiation of normal and abnormal results adeptly, consistently and reliably to the relevant registered professional ○ applying knowledge of policy and good practice techniques proficiently when undertaking all physiological measurements, checking when uncertain, solving problems, and following instructions and guidance with energy and enthusiasm

Document information

Owner: Head of Assessment Design

Change History Record

Version	Description of change	Approval	Date of Issue
v1.0	Published final version.		June 2021
v1.1	NCFE rebrand		September 2021