



HM Government

T-LEVELS

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting Healthcare

Tutor Guidance

V1.0: Live assessment materials 2026 to 2027
September 2026
603/7066/X

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Introduction

This guidance has been produced following feedback from tutors in order to support with the delivery of the T Level in Health, in particular, with the elements of the course where tutors have requested additional support during the first full series of the Qualification Specification. It is not intended to replace the Qualification Specification documents but should be used in conjunction with them.

This document addresses supporting all assessments for the following routes:

- Supporting Healthcare core content
- Option A: Supporting the Adult Nursing Team
- Option B: Supporting the Midwifery Team
- Option C: Supporting the Mental Health Team
- Option D: Supporting the Care of Children and Young People
- Option E: Supporting the Therapy Teams.

The technical qualification will comprise the following assessments, which will assess the knowledge and skills gained from the core and occupational specialist core / component:

	Sub-component	Assessment time	% weighting	Raw marks	Assessment conditions	Marking
Occupational specialist (OS)	Assignment 1: case study assessment (CSA)	4 hours 30 minutes	30%	80	Supervised	External
	Assignment 2 part 1: practical activity assessment (PAA) core	1 hour to 1 hour 30 minutes	20%	60	Supervised	Internal
	Assignment 2 part 2: practical activity assessment (PAA) option	1 hour 15 minutes to 2 hours 15 minutes	20%	76	Supervised	Internal
	Assignment 3: professional discussion assessment (PDA)	1 hour (plus 45 minutes preparation time)	30%	96	Supervised	External
	Component total	7 hours 45 minutes to 9 hours 15 minutes (plus 45 minutes preparation time)	100%	312		

The aim of the assessment is for students to have the opportunity to use their knowledge gained from the core, specialist core and specialist component to demonstrate and show the knowledge and skills they have gained. The assessment methods vary across the components to allow students to express their knowledge and skills gained in a valid and reliable way and for them to be able to demonstrate, at the end of the qualification, the threshold competency they have gained to progress into employment or into higher education. Although the content between occupational specialism (OS) assignments differs, the structure and delivery are consistent.

NCFE provides instructions for each of the assessments and these must be followed by providers. Essential resources for the assessments must be purchased by providers prior to the assessments taking place.

Tutor overview

Tutors should have relevant occupational and teaching experience to undertake the role of an assessor in any of the assessments. Tutors need to familiarise themselves with the content of the assessments to ensure that they have a full understanding of the requirements of the assessments and that essential resources required for the assessments are available.

We recognise that manageability of the practical activity scenarios is important. For practical activity scenarios only (Assignment 2), facilitators can be used during observations instead of assessors on occasions where there are insufficient numbers of staff available with specialist or clinical knowledge and skills.

The members of staff taking on the role of a facilitator can be support staff or teaching staff from other departments. To maintain reliability of the assessment, facilitators involved in the observation of practical activities should be delivered a brief and fully trained by an experienced assessor in the provider on how to complete the observation, including the completion of the observation record forms.

Completed observation record forms, along with audio-visual evidence, should be reviewed by an assessor with relevant occupational and teaching experience who can then determine the marks to be awarded to the student.

Accessibility and fairness

To promote accessibility and fairness for all students and to ensure diversity and equality, we expect providers to be aware of and meet the requirements of relevant NCFE policies and government legislation. You must ensure that:

- all of your processes concerned with assessment are carried out in a fair and objective manner
- you continue to adhere to current equal opportunities legislation
- you continue to operate an effective diversity and equality policy, with which students are familiar and which applies to all students using our products and services.

Plagiarism may result in the external assessment task being awarded a U grade. For further guidance, refer to the Student Handbook for plagiarism in external assessment and the maladministration and malpractice policy located on the NCFE website.

Access arrangements enable students with special educational needs, disabilities or temporary injuries to take our examinations and assessments. Any of the listed tasks may be adapted to suit different needs, but the way in which they are adapted depends on the individual need or disability.

It is important that any adaptation or adjustment does not compromise the rigour and validity of the assessment; in most cases, extra time (which should be applied for) or a change of recording mode (for example, changing to handwriting submissions) are appropriate modifications.

We can make arrangements for disabled students and those with special needs to help them access the assessments, as long as the competences being tested are not changed. Access arrangements must be agreed with us before the assessment by using our online application service. All access requests will be considered individually, and your application should outline

what the student can do and how the activities will be adapted in order to meet the assessment criteria.

Adapted activities will not be accepted for assessment unless approved by NCFE.

Providers can apply on the NCFE website.

Assignment 1: case study assessment (CSA)

Assignment number and title	Assessment length	% weighting	Raw mark	Assessment conditions	Marking
Case study	4 hours 30 minutes	30%	80	Supervised	External

The case study assessment (CSA) is practical in the sense of applying knowledge and skills, introducing clinical vignettes. It is a written simulation, testing students' breadth and depth of knowledge and skills across the performance outcomes (POs) in an authentic, occupationally relevant way.

The CSA requires students to interrogate and select relevant information to respond to the tasks. The focus of this assessment is on students' ability to apply knowledge, understanding and skills which facilitates the production of occupationally relevant assessment evidence.

Students in each OS will be provided with an assignment pack including an:

- Assignment Brief
- Assignment Brief Insert (containing occupationally relevant stimuli).

Students are advised to spend the first 30 minutes reading through the Assignment Brief and the materials provided in the Assignment Brief Insert. Students are also advised to read all four tasks and plan to split their time accordingly, planning for time to check their work.

Delivery of case study assessment (CSA)

Timing of case study assessment (CSA)

- The maximum overall time allowed for the CSA is **4 hours 30 minutes** under **supervised** conditions.
- The stimulus material may include internet links, but these are the only sites students are permitted to access during the assessment.
- The permitted time **must not** be increased, unless a reasonable adjustment has been agreed for a student in accordance with the Access Arrangements and Reasonable Adjustments policy, which can be found on the NCFE website.
- The permitted time **must not** be decreased and students must be given the opportunity to complete the full amount of time for the external assessment task – providers must take this into account when timetabling the session.
- The full time **must** be taken over the course of one day for students.
- Students are encouraged to take a maximum of two comfort breaks and this time is accounted for within the overall exam time and will not be added to their overall allowance.
- Students **must** remain under exam conditions during those comfort breaks and any breach of exam conditions must be reported to NCFE.
- In the case of extenuating circumstances, NCFE must be consulted.

Date of case study assessment (CSA)

The start date of the 2-week completion window can be found in the Key Dates Schedule on the NCFE website. External assessment material should not be given to students until the first supervised assessment session. The submission date for the external assessment task can also be found in the Key Dates Schedule.

The assessment window will consist of provider-arranged supervised sessions of external assessment. Sessions can be undertaken in the normal classroom environment, so long as each student has access to, or the option to use, a computer system. Providers can decide how to arrange supervised sessions if they meet the expectations for delivery as outlined. Providers must submit students' completed assessment work by the published submission date.

At any time, NCFE may request the timetable that providers have set for the supervised sessions.

Submission

Tutors should inform students that all tasks in the case study assessment should be saved separately and completed electronically. The electronic files should:

- use word processing
- use black font, Arial size 12 pt, unless otherwise specified, with standard border sizes
- clearly show where sources have been used to support ideas and opinions
- clearly reference all sources used to support ideas and opinions, including any quotations from websites
- be clearly labelled with the relevant task number and student details, and be legible (for example, front page and headers)
- be given a clear file name for identification purposes; see tasks in the Assignment Brief for relevant naming conventions.

Pages should be numbered in the format 'Page X of Y', where X is the page number and Y is the total number of pages.

Students **must** clearly show where sources have been used to support their own ideas and opinions.

Students **must** clearly reference all sources used to support their own ideas and opinions.

Any quotations from websites **must** be referenced.

Tutors should ensure that students have completed and signed the External Assessment Cover Sheet (EACS) and included it at the front of the assessment task evidence.

Any work not produced electronically **must** be agreed with staff (tutors), in which case the evidence students produce should be scanned and submitted as an electronic piece of evidence.

At the end of the supervised session, the tutor will collect all assessment materials and evidence before students leave the room. Students must not take any assessment materials outside of the room (that is, via a physical memory device). They must not upload any work produced to any platform that will allow access to materials outside of the supervised sessions (including email).

All students' scripts must be submitted to NCFE for marking. All assessment material must be stored securely prior to submission.

Assessment conditions

Students **must** complete the case study assessment independently and under supervised conditions. This means there should be a member of staff in the room where the assessment is being conducted at all times so that screens can be monitored and students supported if necessary.

Students and tutors are required to sign Declarations of Authenticity to confirm that the work is the students' own. The declaration forms can be found on the NCFE website. This is to ensure authenticity and to prevent potential malpractice and maladministration. Students must be made aware of the importance of this declaration and the impact this could have on their overall grade if the evidence was found not to be the students' own work.

Some of the tasks may require students to find and select relevant information from a range of sources to use as references to support their knowledge and understanding or to justify their responses. In the instance that websites are indicated, students are permitted to access those sites only and not to follow links to different pages.

Resources

The Assignment Brief Insert may contain stimuli or resources that consist of digital files, audio files, and / or video files. Therefore, we recommend that providers' staff are fully equipped with the appropriate resources to support the delivery process. Providers are responsible for students' access to digital, electronic and audio equipment.

Students must have access to the appropriate resources required to complete the case study assessment. These include the following:

- laptop or computer with audio software capable of playing common audio files (WAV, MP3, MP4, AAC, WMA)
- headphones
- internet access
- assignment pack containing:
 - Assignment Brief
 - Assignment Brief Insert.

Tutors should provide students with their provider and unique learner numbers.

Students should not have access to the internet or other resources beyond any provided digital resources or any other additional resource materials, excluding internet sites and materials included in the Assignment Brief Insert. Attempting to access other internet sites will be classed as cheating and students may be disqualified from the assessment, resulting in failure of the qualification.

Assignment 2: practical activity assessment (PAA)

Sub-component	Assessment time	% weighting	Raw marks	Assessment conditions	Marking
Assignment 2 part 1: practical activity assessment (PAA) core	1 hour to 1 hour 30 minutes	20%	60	Supervised	Internal
Assignment 2 part 2: practical activity assessment (PAA) option	1 hour 15 minutes to 2 hours 15 minutes	20%	76	Supervised	Internal

Summary of the practical activity assessments (PAAs)

The PAA aspect of the occupational specialist component requires students to demonstrate practical activities taken from the list of practical activities.

The PAA is externally set by NCFE.

The PAA is internally marked by provider assessors and moderated by NCFE. Providers are required to create audio-visual (AV) recordings of the performances of all students.

Students are required to complete all practical activity scenarios for the relevant PAA in the same assessment sitting, moving from one station to the next until completed.

Supporting Healthcare: core

In the core PAA, students will be required to complete **three** practical activity scenarios assessing skills and knowledge taken from the Supporting Healthcare core content. NCFE will select the three practical activities from the corresponding list of practical activities provided below and these will be different from series to series.

The core PAA is assessed against two mark schemes:

- a scenario-specific skills mark scheme – this mark scheme is applied to award a mark for the student's performance in the scenario-specific skills in each practical activity scenario (16 marks each, 48 marks in total)
- an underpinning skills mark scheme – this mark scheme is applied to award a mark for the student's holistic performance across the practical activity scenarios (12 marks).

The marking grids for the Supporting Healthcare core are provided further down in this document.

The maximum mark for this assessment is 60.

Supporting Healthcare: option

In the option PAA, students will be required to complete **four** practical activities assessing skills and knowledge taken from their appropriate Supporting Healthcare option content. NCFE will select the four practical activities from the corresponding list of practical activities provided below and these will be different from series to series.

The option PAA is assessed against two mark schemes:

- a scenario-specific skills mark scheme – this mark scheme is applied to award a mark for the student's performance in the scenario-specific skills in each practical activity scenario (16 marks each, 64 marks in total)
- an underpinning skills mark scheme – this mark scheme is applied to award a mark for the student's holistic performance in the underpinning skills across the practical activity scenarios (12 marks).

The marking grids for the individual Supporting Healthcare options are provided later in this document.

The maximum mark for this assessment is 76.

Lists of practical activities

In September, NCFE will publish the list of practical activities for the core and optional OSs for that series in this Tutor Guidance document.

The below practical activities apply to occupational specialisms (OSs) assessments to be sat in summer 2027:

OS Supporting Healthcare		
Practical activity 1	CPA1: Undertake a general or individual risk assessment in the healthcare environment CPA4: Demonstrate a range of techniques for infection prevention and control	30 minutes
Practical activity 2	CPA7: Assist in the overall comfort and wellbeing of an individual, contributing, recording and following care plans and responding as appropriate	30 minutes
Practical activity 3	CPA2: Undertake and record a range of physiological measurements, recognising deteriorations in physical health and escalating as appropriate CPA4: Demonstrate a range of techniques for infection prevention and control	30 minutes

OS Supporting the Adult Nursing Team		
Practical activity 1	OPA10: Support or enable individuals to maintain good nutrition by promoting current healthy nutrition and hydration initiatives to support individuals to make healthy choices, recording details using food and drink charts and nutritional plans and involving carers where appropriate	30 minutes
Practical activity 2	OPA1: Move and / or position the individual for treatment or to complete clinical skills, using moving and handling aids	25 minutes
Practical activity 3	OPA8: Undertake and record interventions to treat and prevent skin conditions	30 minutes
Practical activity 4	OPA13: Support or enable individuals to be mobile in accordance with their individual needs	30 minutes

OS Supporting the Midwifery Team		
Practical activity 1	OPA8: Prepare, maintain and / or set up the birthing environment and equipment, as directed by the midwifery team	25 minutes
Practical activity 2	OPA12: Assist the midwife with teaching parents how to interact with and meet the nutritional and hygiene needs of babies	25 minutes
Practical activity 3	OPA15: Undertake and record physiological measurements in newborn babies, recognising and reporting any deviations from normal expected observations	25 minutes
Practical activity 4	OPA1: Manage situations in which women cannot do things for themselves, pre and post birth	25 minutes

OS Supporting the Mental Health Team		
Practical activity 1	OPA3: Observe and record an individual's verbal and non-verbal communication recognising how it may be relevant to the individual's condition OPA10: Support the individual or carers to manage their condition during change and transitions, recognising the impact of mental ill health on them and others	30 minutes
Practical activity 2	OPA4: Use a range of communication strategies and skills that are appropriate to individuals with mental health needs OPA5: Assist registered practitioners with routine delegated tasks or therapeutic interventions	25 minutes
Practical activity 3	OPA6: Assist registered practitioners to implement strategies to support individuals with mental ill health OPA8: Support individuals and / or carers / families to manage their condition	25 minutes
Practical activity 4	OPA1: Observe, measure, record and report on physiological health of individuals receiving care and support OPA2: Observe, record and report changes in the mental health of individuals when providing care and support	35 minutes

OS Supporting the Care of Children and Young People		
Practical activity 1	OPA1: Carry out delegated clinical tasks for children and / or young people	30 minutes
Practical activity 2	OPA5: Use known strategies to implement family-centred decision making to deliver the child and / or young person's healthcare needs OPA6: Use known strategies to implement family-centred decision making to deliver the child and / or young person's healthcare needs	30 minutes
Practical activity 3	OPA10: Support or enable children and / or young people to maintain good personal hygiene	30 minutes
Practical activity 4	OPA13: Promote awareness with families and carers on how to maintain and contribute to health and wellbeing of children and / or young people	30 minutes

OS Supporting the Therapy Teams		
Practical activity 1	OPA3: Assess and prepare the therapeutic environment and / or equipment, kit and / or devices for undertaking specific therapy support tasks or interventions and / or setting up specialist equipment OPA5: Carry out stock checks of equipment and resources	25 minutes
Practical activity 2	OPA7: Identify and use equipment, kit and devices for a specific therapeutic task or intervention	30 minutes
Practical activity 3	OPA10: Assist with delegated therapeutic tasks, or interventions using therapy techniques to enable individuals to meet optimum potential	30 minutes
Practical activity 4	OPA6: Support and promote skills for everyday living	30 minutes

List of practical activities: Supporting Healthcare: core requirements

The three practical activity scenarios for each assessment series will be sampled from this list, across the categories. This is except for CPA2, which will be assessed each series.

Category heading	Practical activity
Professional standards	CPA1 (S1.27 and K1.4) Undertake a general or individual risk assessment in the healthcare environment: • general health and safety risk assessments • risk assessments for infection prevention • individual risk assessments relevant to the role in supporting healthcare CPA2 (S1.34, S3.16, S3.17, S3.18, S3.19, S3.20, K3.1, K3.4, K3.5, K3.7, K3.8, K3.11 and K3.14) Undertake and record a range of physiological measurements, recognising deteriorations in physical health and escalating as appropriate. Physiological measurements: • blood pressure • body temperature • respiration rate • heart rate • weight • height • urinary output • oxygen saturation • peak flow Documentation: • blood pressure chart • body temperature chart • peak flow chart • weight / height chart • urine output chart • National Early Warning Score 2 chart (NEWS2)

Category heading	Practical activity
Health and safety, including infection prevention and control	CPA3 (S1.28 and K1.5) Respond to an incident or emergency: • slip, trip or fall • unresponsive patient • choking • bleeding wound • seizure • challenging behaviour CPA4 (S1.29 and K1.6) Demonstrate a range of techniques for infection prevention and control: • waste management • spillages • hand washing CPA5 (S1.32 and K1.9) Move and handle individuals safely when assisting them with their care needs, using moving and handling aids: • wheelchairs • hoist • walking aids / frames • slide sheets • transfer belt • transfer board
Clinical effectiveness	CPA6 (S1.31 and S2.20) Assist in audit processes: • sharps boxes • clinical waste bins • manual and electronic information

Category heading	Practical activity
Comfort and wellbeing	CPA7 (S1.33, S1.34, S1.35, S1.39, K1.9 and K1.12) Assist in the overall comfort and wellbeing of an individual, contributing, recording and following care plans and responding as appropriate: • pain management: ○ medication • bed comfort: ○ use of specialist mattress • environmental factors: ○ heat and noise • social interaction: ○ contact staff and visitors • access to media: ○ mobile phone ○ TV • provide fluids and nutrition: ○ balanced food ○ appropriate fluid intake • exercise or appropriate mobilisations

Category heading	Practical activity
Handling, recording, reporting and storing of information	CPA8 (S1.34, S1.39, S2.18, K1.10, K1.11, K1.15 and K1.18) Assist in obtaining an individual's history and offer brief advice on health and wellbeing, recognising and responding as appropriate: • establish individual's history: ○ physical ○ mental ○ social • offer brief advice on: ○ physical activity ○ healthy lifestyle ○ smoking cessation ○ healthy eating ○ use of substances: ▪ alcohol ▪ legal and prescription drugs ▪ illegal drugs ▪ legal highs ▪ solvent misuse

Supporting Healthcare option A: Supporting the Adult Nursing Team

The four practical activity scenarios for each assessment series will be sampled from this list, across the categories. This is except for skin integrity assessments (OPA6 to OPA9), which will be assessed each series.

Category heading	Practical activity
Moving and positioning	OPA1 (S1.20, S2.12, S2.11, S2.13 and S2.17) Move and / or position the individual for treatment or to complete clinical skills, using moving and handling aids: • treatment: ○ wound dressings ○ injections ○ catheterisation ○ administration of medication • clinical skills: ○ bathing of the body and hair ○ toileting ○ dressing and undressing ○ assisting with personal care needs ○ assisting with eating and drinking • aids: ○ wheelchairs ○ hoist ○ walking aids / frames ○ slide sheets ○ transfer board and belt ○ sling
Monitor and maintain clinical equipment	OPA2 (S1.22 and K1.13) Perform first line calibration on clinical equipment: • automatic blood pressure machine • manual blood pressure machine • tympanic thermometer • pulse oximeter • weighing scales • glucometer

Category heading	Practical activity
Application of clinical skills	OPA3 (S1.17 and K1.2) Perform the sequence of steps for basic life support (BLS). OPA4 (S1.18, K1.3, K1.4 and K1.7) Demonstrate the ability to carry out clinical skills for individuals, including clinical assessments and report findings: • undertake and record physiological measurements: ○ weight ○ height ○ temperature ○ blood pressure ○ Body mass index (BMI) ○ respiration rate ○ heart rate ○ oxygen saturation ○ collection of urine and faecal specimens • monitor fluid intake and output • assessment of the need for a simple wound dressing OPA5 (S2.19, K1.3, K1.4, K1.5, K1.7 and K1.9) Support risk assessments for adults and escalate findings: • malnutrition universal screening tool (MUST) • wound • oral health assessment • continence • Bristol stool scale • fluid balance • nutrition assessment • pain assessment • mobility
Maintaining skin integrity and caring and treating skin conditions	OPA6 (S3.8 and K3.5) Check skin integrity using appropriate assessment documentation and inform others: • body map • Waterlow or Braden risk assessment OPA7 (S3.9 and K3.5) Provide the appropriate care to reduce the risk of pressure ulcers developing or deteriorating and record interventions: • regular turning and positioning • support comfort and mobility by using: ○ bed type ○ seats ○ cushions OPA8 (S3.10, S3.7 and K3.6) Undertake and record interventions to treat and prevent skin conditions. Skin conditions: • psoriasis

Category heading	Practical activity
	• eczema • cuts and abrasions • burns • dermatitis Interventions: • apply non-prescription topical treatments: ○ steroid creams ○ moisturisers ○ water-based creams • apply and / or remove simple dressings: ○ cooling pads ○ hydrocolloid ○ non-adhesive dressing (for example, melolin) ○ adhesive dressing OPA9 (S3.11, K3.3, K3.4 and K3.5) Advise and discuss with both individuals and carers about how to prevent pressure injuries: • areas of the individual's body that a carer should be assessing • the signs of a pressure injury • simple techniques to prevent pressure injuries • signposting to appropriate services
Promotion of health and wellbeing and independence	OPA10 (S1.18, S2.10, S2.18, S2.19, S2.17, K1.3, K2.1, K2.3 and K2.6) Support or enable individuals to maintain good nutrition by promoting current healthy nutrition and hydration initiatives to support individuals to make healthy choices, recording details using food and drink charts and nutritional plans and involving carers where appropriate. OPA11 (S2.12, S2.17, S2.18, S2.19, K2.1, K2.3 and K2.6) Support or enable individuals to maintain good personal hygiene, involving carers where appropriate: • washing and bathing of the body and hair • promoting oral hygiene OPA12 (S2.13, S2.17, S2.18, S2.19, K2.1, K2.3 and K2.6) Support or enable individuals to dress and undress, involving carers where appropriate. OPA13 (S2.14, S2.19 and K2.1) Support or enable individuals to be mobile in accordance with their individual needs: • walking frames • walking stick • crutches

Supporting Healthcare option B: Supporting the Midwifery Team

The four practical activity scenarios for each assessment series will be sampled from this list, across the categories.

Category heading	Practical activity
Moving and positioning	OPA1 (S2.10, S2.11, S2.13 and K2.5) Manage situations in which women cannot do things for themselves, pre and post birth: • washing • dressing • elimination • monitor wounds with dressings • assist with mobility
Undertaking and recording maternal physiological observations, measurements and screening	OPA2 (S1.46, S1.48, S1.50, S2.15, K1.1, K1.2, K1.17, K1.32 and K2.5) Undertake and record physiological measurements as directed by the midwifery team, recognising and responding to deviations from normal using the modified early obstetric warning score (MEOWS) observation chart: • height • weight • BMI • body temperature • heart rate • blood pressure • respiration rate • oxygen saturation • urine samples OPA3 (S2.12 and K2.5) Measure, record and monitor urinary output.
Assisting with delegated tasks and clinical and medical procedures or interventions	OPA4 (S2.13, S2.14 and K2.5) Take measurements, apply and remove anti-embolic stockings. OPA5 (S1.50, K1.29, K1.30, K1.31, K1.32, K1.33, K1.34 and K1.35) Prepare women and other individuals (partner, family member, friend) for interventions and procedures: • ultrasound scans • vaginal scans • venepuncture • monitoring urethral catheters • obtaining urine samples • cannulation OPA6 (S1.51 and K1.36) Support the midwife by preparing women for a caesarean section. OPA7 (S1.48)

Category heading	Practical activity
	Assist the midwife with urethral catheterisation. OPA8 (S1.48, S1.52, S1.53, S1.54, S1.55, K1.37, K1.38 and K1.39) Prepare, maintain and / or set up the birthing environment and equipment, as directed by the midwifery team: • birthing environment: ○ home ○ birthing pool • equipment: ○ foetal doppler ○ stethoscope: ▪ pinard ○ sphygmomanometer ○ blood pressure monitor ○ pulse oximeter ○ digital thermometer ○ feeding equipment OPA9 (S1.48, S1.49, S1.56, S1.48, S1.49, K1.40 and K1.44) Assist midwives and doctors by laying-up trolleys for instrumental deliveries: • forceps: ○ Simpson ○ Kielland ○ Wrigley's ○ Neville Barnes • ventouse suction cup • Kiwi cup
Health promotion and wellbeing	OPA10 (S1.45, K1.1, K1.3, K1.5, K1.6, K1.7, K1.11, K1.12, K1.14 and K1.15) Support women and their partner by providing woman-centred care during each stage of pregnancy, advising on: • public health and health promotion • health, diet and health lifestyle choices during pregnancy • emotional health and wellbeing OPA11 (S1.46, S1.47, K1.1 and K1.2) Recognise and respond to deviation and deterioration from normal expected observations during each stage of pregnancy in emotional and mental health.

Category heading	Practical activity
Promoting care of the newborn	OPA12 (S2.6, S2.8, K2.1 and K2.3) Assist the midwife with teaching parents how to interact with and meet the nutritional and hygiene needs of babies: • bathing • breastfeeding • bottle feeding • changing nappies • transportation • sleeping OPA13 (S2.9) Promote skin-to-skin contact between parent and baby.
Observations, screening and measurements of the newborn	OPA14 (S3.20, K3.1, K3.2, K3.5, K3.6, K3.7, K3.8 and K3.9) Carry out routine observations on newborn babies, as directed by the midwifery team: • cord care • eye care • oral hygiene • checking stools • neonatal jaundice OPA15 (S3.21, K3.4 and K3.11) Undertake and record physiological measurements in newborn babies, recognising and reporting any deviations from normal expected observations: • body temperature • respiratory rate • heart rate
Health, safety and security of the newborn and mother	OPA16 (S3.22 and K3.14) Identify individual babies following local procedure.

Supporting Healthcare option C: Supporting the Mental Health Team

The four practical activity scenarios for each assessment series will be sampled from this list, across the categories.

Category heading	Practical activity
Mental health tasks and therapeutic interventions	OPA1 (S1.45) Observe, measure, record and report on physiological health of individuals receiving care and support: • heart rate • oxygen saturation levels • blood pressure • body temperature • weight • height • body mass index (BMI) OPA2 (S1.44 and K1.28) Observe, record and report changes in the mental health of individuals when providing care and support: • observe: ○ mood levels ○ cognitive changes ○ body language ○ fatigue levels • clinical records: ○ daily client notes ○ assessment notes ○ client reviews • report: ○ verbally: ▪ change over in shift ▪ team meetings ○ written notes, including actions OPA3 (S1.42 and K1.24) Observe and record an individual's verbal and non-verbal communication recognising how it may be relevant to the individual's condition: • first meeting / interview • assessment meeting • group sessions • individual support sessions • review meetings • crisis intervention meeting • hospitalisation OPA4 (S1.39, S1.40, S1.41, S1.43, K1.23, K1.24 and K1.26) Use a range of communication strategies and skills that are appropriate to individuals with mental health needs:

Category heading	Practical activity
	• to build and sustain effective relationships with individuals, carers and other health professionals • to manage behaviour that challenges and poses a risk to self, individuals or others • by recognising when additional support may be needed to communicate effectively with individuals • mental health needs: ○ mood disorders ○ anxiety disorders ○ personality disorders ○ psychotic disorders ○ eating disorders ○ substance-related disorders ○ cognitive disorders ○ trauma • communication strategies: ○ verbal: ▪ telephone ▪ face to face ▪ video chat ○ written: ▪ email ▪ reports / care plans ▪ letter ▪ life / story work ○ non-verbal: ▪ body language ▪ facial expressions ▪ space between communicators ○ visual: ▪ signs and / or symbols, for example Makaton ▪ illustrations / pictures ▪ webpages • communication skills: ○ positive ○ empathic ○ active listening ○ reflection ○ non-verbal ○ non-judgemental • healthcare professionals: ○ mental health support worker ○ nurse ○ community psychiatric nurse (CPN) ○ doctor ○ therapist
Promotion of individual's mental wellbeing	OPA5 (S2.7) Assist registered practitioners with routine delegated tasks or therapeutic interventions: • help to establish immediate care needs

Category heading	Practical activity
	• support with medications • signposting to social prescribing • helping with talking therapies: ○ cognitive behavioural therapy (CBT) ○ guided self-help • promoting a care programme approach (CPA) OPA6 (S2.8) Assist registered practitioners to implement strategies to support individuals with mental ill health: • anger management support strategies: ○ anger triggers ○ relaxation techniques ○ countdown techniques ○ removing themselves from the situation • suicidal thoughts strategies: ○ breathing techniques ○ removing themselves from dangerous areas or situations, contacting support services ○ speaking to someone they trust ○ avoiding drugs and alcohol ○ safety plans • treatment types: ○ medication ○ talking therapies ○ support programmes: ▪ AA ▪ 12 steps ○ group therapy ○ classes: ▪ anger management ▪ anxiety ▪ stress ○ medical supervision ○ complementary therapies ○ recreational groups ○ guided self-help ○ eye movement desensitisation and reprocessing (EMDR) ○ educational groups • preparation for treatment: ○ explanation of treatment ○ updating clinical records OPA7 (S3.13) Assist registered practitioners to implement appropriate and individual strategies to promote mental and physical wellbeing: • help individuals understand anger triggers • support with medication • support with relaxation techniques • support with anxiety techniques

Category heading	Practical activity
	• support with money management • support with social interactions • support with healthy lifestyle and diet • support with exercise and fitness OPA8 (S3.15 and K3.11) Support individuals and / or carers / families to manage their condition: • provide guidance on the building of the individual's self-efficacy to manage their own treatment • provide clear information about an individual's care team • provide details of the relapse prevention plan • discuss relapse indicators and agree an action plan • discuss family therapy • signpost to information • give crisis support information • discuss medication OPA9 (S3.16 and K3.8) Enable an individual to manage their condition through demonstrating the use of coping strategies and skills: • talking with others • writing down thoughts • plan worry time • challenge negative self-talk • set manageable goals • distraction techniques • mindfulness techniques • meditation techniques • exercise • self-harm reduction techniques: ○ ice cubes ○ elastic bands ○ drawing on the body with a red pen ○ buddy box – a box with things to do, positive reminders, colouring book, herbal teas, stress ball, photo of loved one / pet, favourite CD, magazine for example ○ safety plan OPA10 (S3.17) Support the individual or carers to manage their condition during change and transitions, recognising the impact of mental ill health on them and others: • change and transitions: ○ loss and grief ○ becoming a parent ○ changes in physical health ○ changes in emotional health ○ changes in employment, for example promotion, loss of job

Category heading	Practical activity
	○ moving, for example out of home / care ○ pregnancy ○ prison sentence / release from prison ○ work support / work training ○ divorce ○ leaving a domestic violence situation, abusive relationship ○ family conflict ● manage their condition: ○ from home to hospital ○ from ward to ward ○ from hospital to home ○ from hospital to a care setting
Risk assessment and prevention	OPA11 (S1.32, S1.33, K1.12, K1.13, K1.14, K1.15 and K1.16) Assist with collaborative risk assessment and risk management with individuals with mental health needs, involving carers and family members if appropriate, and summarise findings: ● mental health needs: ○ mood disorders ○ anxiety disorders ○ personality disorders ○ psychotic disorders ○ eating disorders ○ substance-related disorders ○ cognitive disorders ○ trauma ● types of risks to be assessed / managed: ○ violence and aggression ○ self-harm ○ suicide ○ significant changes in behaviours ○ excessive exercise / restriction in eating ○ avoidance behaviours ○ withdrawal and low mood ○ noticeable physical changes like excessive weight loss / gain or looking unkempt ● summarise findings: ○ written ○ verbal

Supporting Healthcare option D: Supporting the Care of Children and Young People

The four practical activity scenarios for each assessment series will be sampled from this list, across the categories.

Category heading	Practical activity
Clinical tasks	OPA1 (S1.18 and K1.8) Carry out delegated clinical tasks for children and / or young people: • take physiological measurements: ○ weight ○ height ○ body temperature ○ blood pressure ○ width measurement ○ respiration rate ○ heart rate ○ oxygen saturation level • use tools for clinical assessment: ○ body mass index (BMI) ○ growth charts ○ paediatric early warning system (PEWS) • collect specimens in preparation for clinical assessment: ○ urine samples ○ faecal samples • monitor and record fluid intake / output using a fluid balance chart • apply simple wound dressings OPA2 (S1.20, K1.12 and K1.13) Demonstrate safe practice when moving and / or positioning children and / or young people for treatment or clinical tasks using moving and handling aids: • wheelchairs • hoist • walking aid / frames • slide sheets • transfer boards • standing aid • lifting cushion

Category heading	Practical activity
Health and safety procedures in practice	OPA3 (S1.19 and K1.11) Support risk assessments for children and / or young people, following the collection of specimens and undertaking of observations, and escalate where appropriate: • Braden risk assessment • Bristol stool scale • Waterlow score • oral health assessment • wound / skin integrity assessment: ○ Braden Q ○ Glamorgan scales • continence • fluid balance • nutritional assessment • pain assessment: ○ face, legs, activity, cry, consolability (FLACC) scale ○ Wong-Baker FACES Pain Rating Scale • mobility assessment
Working with children and / or young people, healthcare professionals and families and carers	OPA4 (S3.16, S3.17, S3.22, K3.1, K3.2 and K3.3) Assist with teaching parenting skills: • moderating expectations on development and behaviour • being approachable • showing affection and appreciation • treating the child or young person with respect • giving the child or young person your full attention when with them • acknowledge their feelings • set consistent boundaries • reminding the child or young person that they are loved unconditionally OPA5 (S3.16, S3.18, K3.4 and K3.6) Use known strategies to implement family-centred decision making to deliver the child and / or young person's healthcare needs: • seek, help, assess, reach, evaluate (SHARE) approach OPA6 (K2.29, S3.16, S3.20 and K3.4) Support parents, families and carers to meet the needs of the child and / or young person by offering advice and support on how to manage the child or young person's condition: • asthma • eczema
Health and wellbeing strategies and interventions	OPA7 (S2.49, S2.50, K2.3 and K2.5) Provide care and support to children and / or young people using therapeutic play and learning strategies and interventions before, during and after clinical or therapeutic procedures: • role play • puppetry • music • performance / dance

Category heading	Practical activity
	• crafts or art • building blocks • stories • light box • messy play • guided imagery • imagery • storyboards • blogs • video / multimedia OPA8 (S2.57, S1.18, K2.32 and K1.8) Use dietary assessment tools to support and enable children and / or young people to maintain adequate nutrition and hydration: • calorie intake calculation • healthy eating plate / 5-a-day • food diaries • food and drink chart • nutritional plan • dietary requirements OPA9 (S2.58 and K2.33) Support or enable children and / or young people to maintain continence. OPA10 (S2.59, K2.34 and K2.35) Support or enable children and / or young people to maintain good personal hygiene: • washing and bathing • oral hygiene OPA11 (S2.60 and K2.36) Support or enable children and / or young people to dress and undress. OPA12 (S2.61 and K2.37) Support or enable children and / or young people to be mobile, assessing risk and using mobility aids: • task, individual, load and environment (TILE) • walking frames • walking stick • crutches OPA13 (S3.21, K3.7, K3.8, K3.9, K3.10, K3.11, K3.12, K3.13, K3.14 and K3.15) Promote awareness with families and carers on how to maintain and contribute to health and wellbeing of children and / or young people: • immunisation • nutrition and healthy diet • physical activity • oral care • mental health awareness

Category heading	Practical activity
	• self-harm awareness • protection from abuse and neglect • public health strategies • extended health and social care services
Monitor and maintain equipment and resources	OPA14 (S1.21 and K1.14) Monitor and maintain equipment and resources when assisting with clinical tasks for children and young people: • thermometer • digital blood pressure monitor • oximeter • weighing scales • commodes • pressure-relieving mattresses • incontinence pads / nappies • catheter / stoma • nocturnal enuresis alarms • walking aids: ○ walking frames ○ sticks ○ crutches • hearing aids • glasses

Supporting Healthcare option E: Supporting the Therapy Teams

The four practical activity scenarios for each assessment series will be sampled from this list, across the categories.

Category heading	Practical activity
Health and safety in the therapeutic environment	OPA1 (S1.36, S1.39, K1.20 and K1.24) Assess risk and fit therapeutic equipment to meet individual needs: • crutches • walking sticks • wheelchairs • cushioned bumpers • communication aids • electronic devices OPA2 (S1.37, S2.15, K1.19 and K1.21) Demonstrate how to use specific therapeutic equipment to meet individual needs: • bath seat / chair • hoist • communication aid • wheeled / standard walking frame • bed rail bumpers OPA3 (S3.10, S3.11, K3.1 and K3.2) Assess and prepare the therapeutic environment and / or equipment, kit and / or devices for undertaking specific therapy support tasks or interventions and / or setting up specialist equipment: Therapeutic environment: • physiotherapy suite • communication therapy room • play therapy room • medical room • therapy room Equipment, kit and devices: • mobility aids • wheeled mobility aids • communication aids • toileting equipment • hoists • bed rails • bath seats • play equipment OPA4 (S3.12, S3.13, S3.15, S1.38 and K3.3) Monitor, maintain and / or carry out safety checks on equipment, kit and devices, reporting faults where required: • mobility aids • wheeled mobility aids • communication aids • toileting equipment

Category heading	Practical activity
	• hoists • bed rails • bath seats • play equipment
Roles and responsibilities	OPA5 (S3.14 and K3.9) Carry out stock checks of equipment and resources.
Therapy support process	OPA6 (S2.16, S2.17 and K2.6) Support and promote skills for everyday living: • washing • dressing • mobility • toileting • communicating with aids • exercise OPA7 (S1.34, S1.35, K1.18 and K1.19) Identify and use equipment, kit and devices for a specific therapeutic task or intervention: • mobility aids • play equipment for children • assistive technology • raisers / hoists OPA8 (S2.22, S2.23, K2.12 and K2.13) Use tools to measure and record the progress individuals make, analysing and evaluating against defined outcomes where applicable: • Australian Outcome Measures for Occupational Therapists (AusTOMs) • Canadian Occupational Performance Measure (COPM) • Therapy Outcome Measure (TOM) • Assessment of Motor and Process Skills (AMPS) • Barthel index (BI) OPA9 (S2.15, S2.21, S1.31, K2.8 and K2.9) Provide appropriate advice and support in line with care plans and in consultation with the therapy teams and registered professionals, and carers and families where appropriate: • health and wellbeing • exercise programmes • meal or dietary choices • substance misuse • housing or benefit claims • additional services OPA10 (S1.28, S1.38 and K1.10) Assist with delegated therapeutic tasks, or interventions using therapy techniques to enable individuals to meet optimum potential: • provide targeted therapy support to address a communication disorder • work on exercise with a patient recovering from knee surgery

Category heading	Practical activity
	• support an individual suffering from voice loss with voice-strengthening techniques • support an individual to express their emotions using art equipment or musical instruments

Delivery of the practical activity assessment (PAA)

The PAA is part of the scheme of assessments that make up the occupational specialism (OS) component of the Technical Qualification (TQ). The OS component assessment is linear, meaning that students must complete all assessments normally at the end of the 2-year TQ course and in the same series.

The PAA was available for the first time in April / May 2023 and then every April / May for the lifetime of the qualification.

Please see the information on the NCFE website for the series-specific dates.

Scheduling of the PAA

The PAAs will be delivered in individual assessment windows. The assessment window for each PAA will be a maximum of 2 weeks and will be staggered over several weeks to assist with provider manageability.

NCFE will publish the dates on which the assessment will take place approximately 18 months in advance of the assessment being delivered.

Providers should schedule their assessments on the first day of the assessment window and complete their assessments in the shortest timescale possible; for example, on the first day, in one day. If this is not possible due to the number of students, facilities or staffing capacity, then assessments must be scheduled on consecutive days; there cannot be a day's gap between delivery of the assessment. Where providers are part of a consortium with multiple sites, the assessments must be scheduled at the same time across sites.

Providers will be required to record their PAA schedule and make it available to NCFE if requested.

Release of the practical activity assessment (PAA) materials

The PAA materials will be sent to providers prior to the start of the assessment window. Providers will be permitted to open the assessment materials 7 working days before the start of the assessment window. Providers should use this time to:

- gather the necessary equipment and resources
- organise and debrief members of staff who are taking on a role
- set up the 'stations' in the assessment environment, including audio-visual (AV) equipment. The stations can be set up in the same room or area if large enough, or in separate rooms if required, depending on the nature of the activity
- complete further internal standardisation activities in line with materials and training given by NCFE
- confirm with students the time and place of the assessment and where they need to report to.

The assessment materials must not be shared with students. Any breach of this assessment material must be reported to NCFE immediately in accordance with the assessment regulations found on the NCFE website.

Practical activity assessment (PAA) process

The information below sets out the process of the PAA.

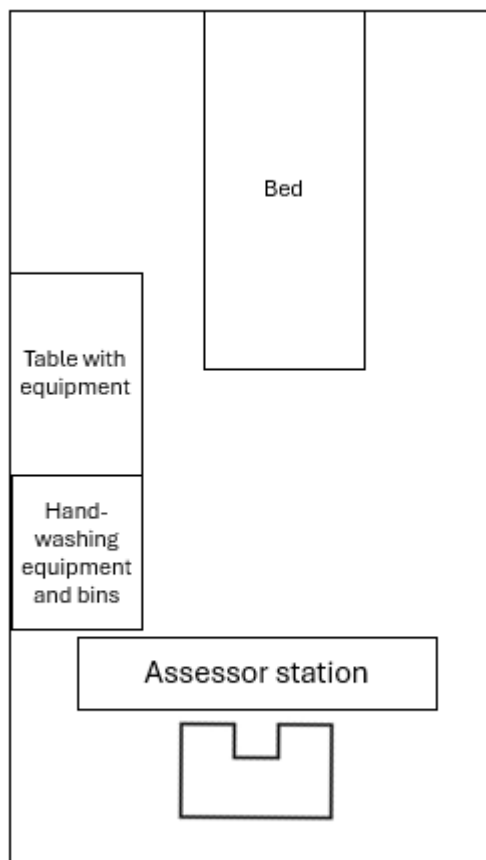
The process assumes that the stations have been set up as per the details given in the Provider Delivery Guide with the Mark Scheme document and that all students taking the assessment on that day are being held in a supervised environment.

- Students are retrieved one at a time from the supervised environment.
- Students are given the assessment booklet 'Assignment Brief', which contains the practical activity scenarios, plus other information that is required to complete each one.
- The assessor / assessors read the instructions and information on the front of the Assignment Brief to the student and confirm understanding before the PAA begins.
- Students will have up to 5 minutes at each station to read through the scenario and familiarise themselves with the environment / equipment; students may start the practical activity at any time during these 5 minutes.
- The maximum amount of time that students can spend at each station (including the 5 minutes reading time) is given – if students go over this time, they will be asked to move on by the assessor.
- Where providers are delivering the assessment with assessors remaining at each station, providers must ensure that there is a mechanism by which students' assessment booklets can be kept securely between stations.
- Students go to the first station and then move between the stations, completing each practical activity scenario.
- Where students are required to wait at a station for a previous student to finish, the provider ensures that they do so with adequate supervision.
- The assessors observe and record the students' performances using the Student Assessment Record Form.
- The assessors collect the students' completed assessment booklets.
- Students leave the assessment environment once they have completed the final practical activity scenario.

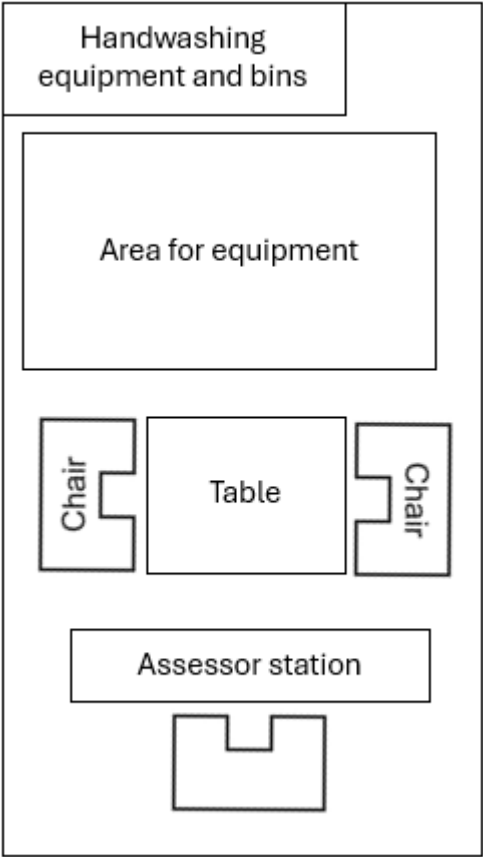
Room layout

A list of equipment is stated within each practical activity scenario. Below are examples of how the layout of a room may be presented.

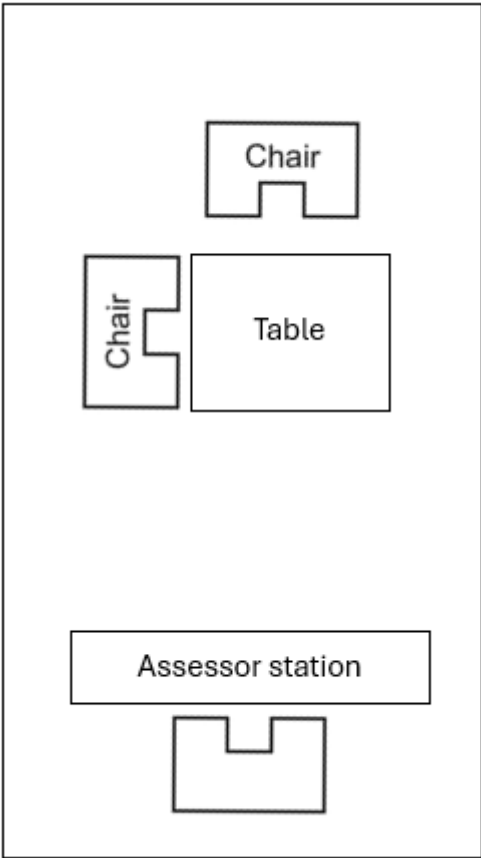
Hospital Ward



GP Surgery / Therapy Room



Counselling room



Where specific layout is required in a practical activity scenario, this will be detailed in the specific Provider Delivery Guide.

Assessing the practical activity assessment (PAA)

The information below provides two examples of how a provider may organise assessors in the assessment of the PAA for the core OS (2.1).

Example 1

In this example, there are three assessors who each stay at the stations as the students move from one station to the next. The stations are all 25 minutes in length with 5 minutes given for resetting. It is assumed this is a provider with a small cohort and only one simulated ward in which all three stations are set up. Students are held in a supervised environment prior to completing the assessment and then allowed to leave once they have completed the final station.

Example of stations and timings

Time	Station 1 25 minutes Assessor 1	Station 2 25 minutes Assessor 2	Station 3 25 minutes Assessor 3
9.00 to 9.30 am	Student A		
9.30 to 10.00 am	Student B	Student A	
10.00 to 10.30 am	Student C	Student B	Student A
10.30 to 11.00 am	Student D	Student C	Student B
11.00 to 11.30 am	Student E	Student D	Student C
11.30 am to 12.00 pm	Student F	Student E	Student D
12.00 to 12.30 pm	LUNCH	Student F	Student E
12.30 to 1.00 pm	Student G	LUNCH	Student F
1.00 to 1.30 pm	Student H	Student G	LUNCH
1.30 to 2.00 pm	Student I	Student H	Student G
2.00 to 2.30 pm		Student I	Student H
2.30 to 3.30 pm			Student I

Delivery requirements:

- one simulated ward
- three assessors
- three members of staff to audio-visually record the students' assessments (these could be from outside of the teaching department)
- members of staff to play any standardised patients, as necessary.

If a provider has access to more than one simulated ward, to get through larger cohorts, this process could be scaled up as necessary, bearing in mind the requirement to complete the assessment in the smallest possible timescale.

Marking requirements

In this example, the assessors would award their scenario-specific skills marks for the stations they are assessing, whilst making notes regarding the underpinning skills. The assessors would then come together at the end of the assessment session to award marks for the underpinning skills of each student. Providers need to make sure that sufficient time and resource is available to complete this marking activity.

Example 2

An alternative to this approach would be for one assessor to move with the student through the stations, awarding marks for both the scenario-specific skills and underpinning skills.

In this example, there are three assessors who follow the students through the assessment. One station is 30 minutes in length with 5 minutes given for resetting, one station is 25 minutes in length with 5 minutes for resetting and one station is 15 minutes with 5 minutes given for resetting. It is assumed this is a provider with a small cohort and only one simulated ward in which all three stations are set up. Students are held in a supervised environment prior to completing the assessment and then allowed to leave once they have completed the final station.

Example of stations and timings

Station 1 30 minutes		Station 2 25 minutes		Station 3 15 minutes	
Student A Assessor 1	Start: 9.00am Finish: 9.30 am				
Student B Assessor 2	Start: 9.35 am Finish: 10.05 am	Student A Assessor 1	Start: 9.35 am Finish: 10.00 am		
Student C Assessor 3	Start: 10.10 am Finish: 10.40 am	Student B Assessor 2	Start: 10.10 am Finish: 10.35 am	Student A Assessor 1	Start: 10.05 am Finish: 10.20 am
Student D Assessor 1	Start: 10.45 am Finish: 11.15 am	Student C Assessor 3	Start: 10.45 am Finish: 11.10 am	Student B Assessor 2	Start: 10.40 am Finish: 10.55 am
Student E Assessor 2	Start: 11.20 am Finish: 11.50 am	Student D Assessor 1	Start: 11.20 am Finish: 11.45 am	Student C Assessor 3	Start: 11.15 am Finish: 11.30 am
Student F Assessor 3	Start: 11.55 am Finish: 12.25 pm	Student E Assessor 2	Start: 11.55 am Finish: 12.20 pm	Student D Assessor 1	Start: 11.50 am Finish: 12.05 pm
LUNCH		Student F Assessor 3	Start: 12.30 pm Finish: 12.55 pm	Student E Assessor 2	Start: 12.25 pm Finish: 12.40 pm
Student G Assessor 1	Start: 12.35 pm Finish: 1.05	LUNCH		Student F Assessor 3	Start: 1.00 pm Finish: 1.15 pm

Station 1 30 minutes		Station 2 25 minutes		Station 3 15 minutes	
	pm				
Student H Assessor 2	Start: 1.10 pm Finish: 1.40 pm	Student G Assessor 1	Start: 1.10 pm Finish: 1.35 pm	LUNCH	
Student I Assessor 3	Start: 1.45 pm Finish: 2.15 pm	Student H Assessor 2	Start: 1.45 pm Finish: 2.10 pm	Student G Assessor 1	Start: 1.40 pm Finish: 1.55 pm
		Student I Assessor 3	Start: 2.20 pm Finish: 2.45 pm	Student H Assessor 2	Start: 2.15 pm Finish: 2.30 pm
				Student I Assessor 3	Start: 2.50 pm Finish: 3.05 pm

Delivery requirements:

- one simulated ward
- three assessors
- three members of staff to audio-visually record the students' assessments (these could be from outside of the teaching department)
- members of staff to play any standardised patients, as necessary.

If a provider has access to more than one simulated ward, to get through larger cohorts, this process could be scaled up as necessary, bearing in mind the requirement to complete the assessment in the smallest possible timescale.

Marking requirements

In this example, the assessors would award their scenario-specific skills marks for each station, making notes regarding the underpinning skills, and award this mark at the end.

NCFE is concerned with ensuring that provider marking is in line with the agreed standard and therefore does not take a view on the mechanism by which providers organise their assessors to arrive at provider marks. This leaves a degree of flexibility for each provider to decide which approach is the best in terms of manageability, considering individual facilities and staffing capacity. For example, a smaller provider with 12 students may only have the staffing capacity

and facilities to deliver one station at a time, and they can manage this within the available assessment window, ensuring they use the least possible time to complete the assessment.

The practical activity scenarios have been designed to be independent from one another and therefore can be completed in any order; however, we recommend that providers deliver the longest station first to minimise student wait times.

Staffing and equipment / resource requirements

The internal moderator is responsible for overseeing the delivery and marking of the PAAs. The internal moderator must ensure that sufficient members of staff are available to deliver the requirements of the PAAs, including:

- the assessors
- members of staff to 'act' if the practical activity scenario requires an element of role play or a standardised patient
- members of staff to set up and operate (if required) the audio-visual (AV) equipment.

Where practical activity scenarios do not require specialist or clinical knowledge and skills, the members of staff taking on a role can be support staff or teaching staff from other departments.

The assessor may also be required to 'act' in the role play if their role is minimal and **only** where it does not distract from the focus being on applying the mark scheme.

All equipment / resources needed for delivery of the PAAs are used in teaching and learning of the course of study and can be found in the Qualification Specification.

Use of standardised patients / role players

A standardised patient (SP) is a person carefully recruited and trained to take on the characteristics of a real patient, thereby affording the student an opportunity to learn and be evaluated on learned skills in a simulated clinical environment.

The role of an SP is to convey details of the patient's life independently, consistently and accurately in an appropriate and consistent manner.

We recommend that providers research the principles of good practice in presenting simulated patients, reading around the subject; for example, NCFE recommends the Simulated Patient Handbook: A Comprehensive Guide for Facilitators and Simulated Patients by Fiona Dudley. NCFE will also provide training on delivery to support the consistency of delivery and provide series-specific guidance.

Members of staff who take on the role of the SP should ensure they have the appropriate level of subject knowledge to understand the nature and complexity of the role.

The SP will be expected to:

- access and apply information from the training provided by NCFE
- memorise the patient's details (although the SP / role players are permitted to have the appropriate notes with them to refer to during the practical activity scenario)
- remain in a specific patient character when responding to student questions
- play the role in a convincing but not melodramatic manner, being mindful of facial expression
- check that language used is appropriate for a typical patient (for example, not overly medicalised)

- refrain from embellishing the condition in a misleading way
- play the role consistently so that every student's experience will be the same
- repeat aspects that the student has not understood and be prepared to alter the wording slightly if they continue to fail to be understood but not radically, so not to advantage that student in comparison to other students
- avoid tips or prompts that make the assessment less challenging
- give information only, but only in response to appropriate prompting.

Audio-visual (AV) evidence

It is a requirement of the delivery of this assessment that all student performances are audio-visually recorded for the purpose of moderation.

It is the provider's responsibility to check that the appropriate audio-visual (AV) equipment is set up and fully operational at each station. The AV recording must clearly identify the students, capture all relevant actions and words from the student and be clear and of sufficient quality to be adequately reviewed by the moderator.

Provider staff – either the assessor or another member of staff – should be equipped to be able to operate the equipment sufficiently to capture all evidence.

To ensure authenticity of the performance, the student's face must be clearly visible at the start of the recording.

Timeline

September

- NCFE publishes the list of practical activities for the core and option Supporting Healthcare OS in this document.
- Tutor standardisation event dates are published and will be available in the autumn and spring terms (dates to be confirmed each academic year).

January / February

- Providers plan their PAA schedule and record in case requested by NCFE.
- Providers also create a list of the particular OS option to be taken by each student and student running orders on the day.

April / May

- NCFE releases the three practical activity scenarios for the core PAA.
- NCFE releases the four practical activity scenarios for the option PAA.
- Providers open the assessment materials 7 days prior to the start of the assessment window and prepare to set up the practical activity scenario stations.
- Providers administer the PAA during the staggered window.
- Providers submit their marks to NCFE by the specified date.

June / July

- A sample of student evidence is requested and reassessed remotely by NCFE external moderators.

August

- Results are issued to students and providers.
- Feedback on moderation outcomes is communicated to providers.

- Post-results service is open, allowing providers that have received an adjustment to their marks to apply for a review of moderation if they wish.

September

- The window for requesting post-results services closes.

Practical activity assessment (PAA) administration

The head of provider is responsible to NCFE for making sure that all PAAs are conducted with these regulations. The head of provider must delegate a member of staff to be the internal moderator to lead on the administration of the assessments in line with these regulations and to ensure there is an internal policy in place to support the effective delivery and marking of the PAA.

Supervising and authenticating

Students must be under formal supervision at all times when carrying out the PAA.

Students who are carrying out the PAA must be held in a supervised environment on that day prior to completing the assessment. Students who have completed the assessment must not have contact with students who are yet to complete the assessment.

If students are required to wait between stations, tutors must ensure there is a place for students to wait and that sufficient supervision is available.

Students will need to complete and sign the Declaration of Authenticity form to confirm the authenticity of their work and to confirm that they will uphold the confidentiality of the assessment. The form can be found on the qualification page of the NCFE website under Assessment Materials.

All assessors who have marked the students' performances must sign the Student Assessment Record Form to confirm that the performances are solely that of the student concerned, that the student has completed the assessment independently and that the assessment was conducted under the conditions laid out in this document and the assessment regulation documents found on the NCFE website.

Malpractice / maladministration

Students must not share the details of the assessment with peers in their provider or other providers once completed, and provider staff should regularly remind their students about potential repercussions of breaches of security by referring to the NCFE guidance and regulations available on the NCFE website.

If at any time during an assessment there is a violation of these regulations, the test invigilators or designated person has the right to stop the assessment immediately. This decision must only be made in exceptional circumstances where malpractice is irrefutable. Once stopped, no allowance can be given retrospectively if the decision is deemed invalid.

If malpractice occurs during an assessment, providers should inform NCFE immediately with a report of what occurred – please see the Notification of Malpractice form available on the NCFE website.

If any of the regulations are breached by a student, assessor or other persons involved in the conduct of the assessment, then NCFE may declare the assessment void.

In the event of a suspected or actual breach of these regulations by students:

- the work completed by the students concerned and any unauthorised materials (if applicable) must be confiscated from the students and given to the internal moderator
- all students suspected of breaching these regulations should be instructed to leave the supervised / assessment environment immediately, if appropriate to do so, causing the least amount of disruption to other students
- the assessor should report the incident to the internal moderator as soon as possible
- NCFE should be informed immediately of any irregularity via a phone call or email
- the provider should conduct its own investigation into the incident and report the incident and their findings to our Quality Assurance team using the NCFE Notification of Malpractice form on our website.

NCFE reserves the right to investigate each case of alleged or actual malpractice / maladministration committed by a student, assessor or other persons involved in the conduct of the assessment in order to establish all of the facts and circumstances surrounding the case. The investigation will be carried out in accordance with NCFE's Maladministration and Malpractice policy.

Tutor standardisation

NCFE will provide support for using the marking criteria and developing appropriate tasks through tutor standardisation training packs.

For further information about tutor standardisation, visit the NCFE website.

Standardisation training is mandatory for all providers.

For further support and advice, please contact us through usual channels.

Internal standardisation

Providers must ensure that they have consistent marking standards for all students. The internal quality assurer must manage this process and confirm that internal standardisation has taken place.

Internal standardisation may involve:

- all tutors marking some sample student performances to identify differences in marking standards
- discussing any differences in marking at a training meeting for all tutors involved
- referring to reference and archive material, such as previous student performances or examples from NCFE's tutor standardisation.

Providers should carry out internal standardisation activities based on a sample of students' AV evidence and the tutor standardisation materials to identify whether marking is accurate, valid and reliable, making any necessary adjustments if discrepancies are found, prior to submitting their provider marks.

Providers must submit their provider marks by the date set by NCFE.

Commenting on student performances

Providers must clearly show how marks have been awarded against the assessment criteria in the mark schemes. These comments must be recorded on the Student Assessment Record Form.

Storing students' evidence

Student's AV evidence, Assignment Brief booklets and Student Assessment Record Forms must be kept under secure conditions from the completion of the assessment. Assessment materials may not be returned to students until after the deadline for enquiries about results.

Moderation

The PAA will be moderated remotely. Moderation will take place after the deadline date for submission of marks.

NCFE will assign a moderator via the NCFE Portal.

Once NCFE is in receipt of provider marks, the moderator will select a sample of student performances. The sample will be made up of students across a range of marks and assessors (if appropriate). The criteria that the moderator will apply when selecting the sample are:

- the top-scoring student
- the lowest non-zero scoring student
- a number of students across a range of marks in between
- from across the range of assessors (if appropriate).

It is the responsibility of providers to then send their moderator the sample of PAAs as requested. This will include:

- AV evidence
- Assignment Brief booklets
- Student Assessment Record Forms.

The sample of student performances will be reassessed by NCFE moderators to ensure that provider marking is in line with the agreed standards. Where provider marking is found to be out of alignment, either too lenient or too harsh (outside of reasonable tolerances), remedial action will be taken and adjustments to marks will be made by NCFE. The outcome of moderation will be shared when results are issued as well as details of any adjustments made.

On results day, providers will receive a report which will detail areas of good practice and areas for development in relation to their assessment decisions.

NCFE will retain the evidence used for moderation until the completion of all enquiries about results and appeals. NCFE may need to keep some of the student evidence for awarding, archiving or standardisation process. NCFE will let providers know if this is the case.

Student Assessment Record Forms

For internal standardisation, it is important that the assessor takes adequate notes to support their marking decisions. The forms that assessors will be provided with resemble the following documents.

Supporting Healthcare: core requirements

Student Assessment Record form

Provider name	
Provider number	

Student name	
Unique learner number	

Day and date	
Assessors	

Please use this form to record descriptive information and evidence of the student's skills and knowledge demonstrated during the practical activity assessment (PAA). Evidence of the quality of skills demonstrated should support decisions against the mark scheme; however, the notes should follow the flow of the practical activity scenarios and how students are expected to complete them, rather than attempting to assign evidence against the assessment criteria. The assessment criteria are provided for information.

Practical activity scenario (PAS) 1	
Scenario-specific skills: • [insert criteria] • [insert criteria] • [insert criteria] • [insert criteria] Underpinning skills: • [insert criteria] • [insert criteria] • [insert criteria]	

Practical activity scenario (PAS) 2

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Practical activity scenario (PAS) 3

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Assessor declaration

I / we confirm that the assessment was conducted under the conditions specified by NCFE and that the assessment evidence produced was solely that of the student.

Signed	
Signed	
Signed	
Signed	

To be completed by the assessors. Marks must be awarded in accordance with the instructions and criteria in the mark scheme.

Scenario-specific skills

	[insert criteria]	[insert criteria]	[insert criteria]	[insert criteria]	Total
PAS 1					
PAS 2					
PAS 3					
Total					

Underpinning skills

	[insert criteria]	[insert criteria]	[insert criteria]	Total
Underpinning skills				
Total				

Supporting Healthcare: option

Student Assessment Record Form

Provider name	
Provider number	

Student name	
Unique learner number	

Day and date	
Assessors	

Please use this form to record descriptive information and evidence of the student's skills and knowledge demonstrated during the practical activity assessment (PAA). Evidence of the quality of skills demonstrated should support decisions against the mark scheme; however, the notes should follow the flow of the practical activity scenarios and how students are expected to complete them, rather than attempting to assign evidence against the assessment criteria. The assessment criteria are provided for information.

Practical activity scenario (PAS) 1

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Practical activity scenario (PAS) 2

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Practical activity scenario (PAS) 3

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Practical activity scenario (PAS) 4

Scenario-specific skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]
- [insert criteria]

Underpinning skills:

- [insert criteria]
- [insert criteria]
- [insert criteria]

Assessor declaration

I / we confirm that the assessment was conducted under the conditions specified by NCFE and that the assessment evidence produced was solely that of the student.

Signed	
Signed	
Signed	
Signed	

To be completed by the assessors. Marks must be awarded in accordance with the instructions and criteria in the mark scheme.

Scenario-specific skills

	[insert criteria]	[insert criteria]	[insert criteria]	[insert criteria]	Total
PAS 1					
PAS 2					
PAS 3					
PAS 4					
Total					

Underpinning skills

	[insert criteria]	[insert criteria]	[insert criteria]	Total
Underpinning skills				
Total				

Marking grids

The mark scheme for the PAA comprises marking grids and indicative content.

The following marking grids should be used to assess students and award marks for the scenario-specific skills and underpinning skills. The indicative content for the scenario-specific skills for the PASs is not provided here as it is unique to each series.

To understand what is required to be awarded marks, students should be provided with a copy of the marking grids.

Assessors should complete a Student Assessment Record Form to record descriptive information and evidence of the student's skills and knowledge demonstrated during the PAA.

Marking guidance

Marking grid

The marking grids for the scenario-specific skills and the underpinning skills identify the four assessment criteria that students are assessed against. Each assessment criteria is out of a total of 4 marks.

The assessment criteria are broken down into four bands with a corresponding descriptor. The descriptor for the band indicates the qualities of a student's performance in that band. The band is the mark that should be awarded for that assessment criteria; for example, band 1 = 1 mark and band 4 = 4 marks. There is a total of 16 marks available for the scenario-specific skills and 12 marks available for the underpinning skills in the mark schemes, which should be used in accordance with the assessment requirements.

When determining marks for scenario-specific skills, assessors should only consider the quality of the student's performance in that scenario. When determining a band / mark, assessors' decisions should be based on the overall quality of the student's performance in relation to the descriptors. If the student's performance covers different aspects of different bands, assessors should use a best-fit approach to award the band / mark.

When determining marks for underpinning skills, the assessor should consider performance across all scenarios. Where certain scenarios do not provide opportunities for students to demonstrate an underpinning skill, students should not be penalised; the mark awarded should be based on the quality of the student's performance in scenarios where the underpinning skills have emerged. When determining a band / mark, assessors' decisions should be based on the overall quality of the student's performance in relation to the descriptors. If the student's performance of a particular underpinning skill is inconsistent across scenarios and covers different aspects of different bands, assessors should use a best-fit approach to award the most appropriate band / mark.

Standardisation materials can be used to help assessors with determining a band / mark if they are unsure.

Assessors should start at the lowest band of the marking grid and move up until there is a match between the band descriptor and the student's performance.

Indicative content

Indicative content will be provided as a guide to help assessors understand what should be expected in a student's performance to allow for a marking judgement to be made. Indicative content will not be an exhaustive list.

Supporting Healthcare: core requirements

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks		Use of equipment and / or materials and / or resources in relation to clinical tasks		Following, recording, reporting, and / or storing data and / or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the clinical tasks, which is sustained throughout the student's practice.	4	The student demonstrates a highly effective application of the clinical tasks that is consistently in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is excellent and demonstration of the clinical tasks is always within the scope of their role and responsibilities.	4	The student demonstrates a highly proficient use of the equipment and / or materials and / or resources, which are always applied with accuracy and precision. The student maintains a consistently safe environment, providing an excellent experience for the individual and their wider family / carers, as appropriate.	4	The student follows, records and reports on information in a highly effective and clear way, with accurate spelling, punctuation, and grammar, to suit a particular purpose. The student consistently follows, records, reports, stores, and handles information in line with local and national policies, keeping all relevant information confidential and supports others to do so.

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks		Use of equipment and / or materials and / or resources in relation to clinical tasks		Following, recording, reporting, and / or storing data and / or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good knowledge and understanding of the clinical tasks, which is largely sustained throughout the student's practice.	3	The student demonstrates an effective application of the clinical tasks that is mostly in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is good and demonstration of the clinical tasks is usually within the scope of their role and responsibilities.	3	The student demonstrates a proficient use of the equipment and / or materials and / or resources, which are usually applied with accuracy and precision. The student maintains a generally safe environment, providing a good experience for the individual and their wider family / carers, as appropriate.	3	The student follows, records and reports on information in an effective and mostly clear way, with largely accurate spelling, punctuation, and grammar, to suit a particular purpose. The student generally follows, records, reports, stores, and handles information in line with local and national policies, keeping most relevant information confidential and largely supports others to do so.

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks		Use of equipment and / or materials and / or resources in relation to clinical tasks		Following, recording, reporting, and / or storing data and / or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory knowledge and understanding of the clinical tasks, which is partially sustained throughout the student's practice.	2	The student demonstrates a reasonably effective application of the clinical tasks that is sometimes in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is satisfactory and demonstration of the clinical tasks is sufficiently within the scope of their role and responsibilities.	2	The student demonstrates sufficient use of the equipment and / or materials and / or resources, which are sometimes applied with accuracy and precision. The student maintains a sufficiently safe environment with some errors, that may not always provide a comfortable experience for the individual and their wider family / carers, as appropriate.	2	The student follows, records and reports on information in a reasonably effective and partially clear way, with some accurate spelling, punctuation, and grammar, to suit a particular purpose. The student sometimes follows, records, reports, stores, and handles information in line with local and national policies, keeping some relevant information confidential and sometimes supports others to do so.

Band	Demonstration of knowledge and understanding of the clinical tasks		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks		Use of equipment and / or materials and / or resources in relation to clinical tasks		Following, recording, reporting, and / or storing data and / or handling information in relation to clinical tasks	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the clinical tasks, which is fragmented throughout the student's practice.	1	The student demonstrates a minimally effective application of the clinical tasks that is rarely in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is poor and demonstration of the clinical tasks is minimally within scope of their role and responsibilities.	1	The student demonstrates a poor use of the equipment and / or materials and / or resources, which are rarely applied with accuracy and precision. The student is uncertain about how to maintain a minimally safe environment, providing an uncomfortable experience for the individual and their wider family / carers, as appropriate.	1	The student follows, records and reports on information in a minimally effective and clear way, with occasionally accurate spelling, punctuation, and grammar, to suit a particular purpose. The student rarely follows, records, reports, stores, and handles information in line with local and national policies, keeping little relevant information confidential and rarely supports others to do so.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent duty of care, candour, and person-centred care, taking all necessary precautions to protect physical and mental wellbeing of the individuals. The student is always respectful of and responsive to the individual's perspectives, consistently keeping carers and relevant others informed where appropriate. The student is highly effective at working with others.	4	The student demonstrates highly effective communication skills, always speaking clearly and confidently. The student's tone, register and level of detail are excellent and always reflects the audience and purpose. The student uses technical language with accuracy, and they always demonstrate active listening.	4	The student maintains a highly effective and safe clinical working environment, demonstrating excellent knowledge, understanding and application of health and safety legislation. The student demonstrates correct use of personal protective equipment (PPE) throughout and follows safe practices highly effectively. The student is fully aware of their own limitations and always works within them to safeguard the individual's wellbeing.
3	3	The student demonstrates good duty of care, candour, and person-centred care, taking most necessary precautions to protect physical and mental wellbeing of the individuals. The student is mostly respectful of and responsive to the individual's perspectives, generally keeping carers and relevant others informed where appropriate. The student is effective at working with others.	3	The student demonstrates effective communication skills, generally speaking clearly and confidently. The student's tone, register and level of detail is good and generally reflects the audience and purpose. The student's use of technical language is generally accurate, and they usually demonstrate active listening.	3	The student maintains an effective and safe clinical working environment, demonstrating good knowledge, understanding and application of health and safety legislation. The student demonstrates correct use of personal protective equipment (PPE) most of the time and follows safe practices effectively. The student is generally aware of their own limitations and mostly works within them to safeguard the individual's wellbeing.

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory duty of care, candour, and person-centred care, taking sufficient necessary precautions to protect physical and mental wellbeing of the individuals. The student is sometimes respectful of and responsive to the individuals, sometimes keeping carers and relevant others informed where appropriate but is often orientated towards own or service perspectives. The student is reasonably effective at working with others.	2	The student demonstrates reasonably effective communication skills, sometimes speaking clearly and confidently. The student's tone, register and level of detail is satisfactory and sometimes reflects the audience and purpose. The student's use of technical language is partially accurate, and they demonstrate active listening sometimes.	2	The student maintains a sufficiently effective and safe clinical working environment, demonstrating satisfactory knowledge, understanding and application of health and safety legislation. The student sometimes demonstrates the correct use of personal protective equipment (PPE) and follows satisfactory safe practices. The student shows some awareness of their own limitations, and they work sufficiently within them, but this may risk failure to safeguard the individual's wellbeing.
1	1	The student demonstrates basic duty of care, candour, and person-centred care, occasionally taking the necessary precautions to protect physical and mental wellbeing of the individuals. The student is rarely respectful of and responsive to the individuals, occasionally keeping carers and relevant others informed where appropriate but is invariably orientated to own perspectives. The student is minimally effective at working with others.	1	The student demonstrates minimally effective communication skills, occasionally speaking clearly and confidently. The student's tone, register and level of detail is basic and rarely reflects the audience and purpose. The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening.	1	The student maintains a minimally effective and safe clinical working environment, demonstrating basic knowledge, understanding and application of health and safety legislation. The student rarely demonstrates the correct use of personal protective equipment (PPE) and follows limited safe practices. The student shows limited awareness of their own limitations, rarely working within them, which risks failure to safeguard the individual's wellbeing.

Band	Duty of care, candour, and person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
0	No evidence demonstrated or nothing worthy of credit.					

Supporting the Adult Nursing Team

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of the delegated clinical skills		Application of best practice, agreed ways of working and regulations / legislation in relation to delegated clinical skills		Use of equipment and / or materials and / or resources in relation to delegated clinical skills		Gaining, recording, using and / or presenting data and / or information in relation to delegated clinical skills	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the delegated clinical skills, which is sustained throughout the student's practice.	4	The student demonstrates a highly effective application of the delegated clinical skills that is consistently in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is excellent and demonstration of the clinical skills is always within the scope of their role and responsibilities.	4	The student demonstrates highly proficient use of equipment and / or materials and / or resources, which are always applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a highly effective way and always ensures that the equipment and / or materials and / or resources are available and correctly located, as applicable.	4	The student gains, records, uses and / or presents data and / or information in a highly effective and clear way when assisting with the delegated clinical skills. The student consistently organises findings and information logically, as appropriate.

Band	Demonstration of knowledge and understanding of the delegated clinical skills		Application of best practice, agreed ways of working and regulations / legislation in relation to delegated clinical skills		Use of equipment and / or materials and / or resources in relation to delegated clinical skills		Gaining, recording, using and / or presenting data and / or information in relation to delegated clinical skills	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good knowledge and understanding of the delegated clinical skills, which is largely sustained throughout the student's practice.	3	The student demonstrates an effective application of the delegated clinical skills that is mostly in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is good and demonstration of the clinical skills is usually within the scope of their role and responsibilities.	3	The student demonstrates proficient use of the equipment and / or materials and / or resources, which are usually applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in an effective way and mostly ensures that the equipment and / or materials and / or resources are available and correctly located, as applicable.	3	The student gains, records, uses and / or presents data and / or information in an effective and mostly clear way when assisting with the delegated clinical skills. The student usually organises findings and information logically, as appropriate.

Band	Demonstration of knowledge and understanding of the delegated clinical skills		Application of best practice, agreed ways of working and regulations / legislation in relation to delegated clinical skills		Use of equipment and / or materials and / or resources in relation to delegated clinical skills		Gaining, recording, using and / or presenting data and / or information in relation to delegated clinical skills	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory knowledge and understanding of the delegated clinical skills, which is partially sustained throughout the student's practice.	2	The student demonstrates reasonably effective application of the delegated clinical skills that is sometimes in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is satisfactory and demonstration of the clinical skills is sufficiently within the scope of their role and responsibilities.	2	The student demonstrates sufficient use of the equipment and / or materials and / or resources, which are sometimes applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a reasonably effective way and sometimes ensures that the equipment and / or materials and / or resources are available and correctly located, as applicable.	2	The student gains, records, uses and / or presents data and / or information in a reasonably effective and partially clear way when assisting with the delegated clinical skills. The student sometimes organises findings and information logically, as appropriate.

Band	Demonstration of knowledge and understanding of the delegated clinical skills		Application of best practice, agreed ways of working and regulations / legislation in relation to delegated clinical skills		Use of equipment and / or materials and / or resources in relation to delegated clinical skills		Gaining, recording, using and / or presenting data and / or information in relation to delegated clinical skills	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the delegated clinical skills, which is fragmented throughout the student's practice.	1	The student demonstrates minimally effective application of the delegated clinical skills that is rarely in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is poor and demonstration of the clinical skills is minimally within the scope of their role and responsibilities.	1	The student demonstrates poor use of the equipment and / or materials and / or resources, which are rarely applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources with limited effectiveness and rarely ensures that equipment and / or materials and / or resources are available and correctly located, as applicable.	1	The student gains, records, uses and / or presents data and / or information in a minimally effective and clear way when assisting with the delegated clinical skills. The student rarely organises findings and information logically, as appropriate.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Person-centred care and service frameworks		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates highly effective person-centred care, ensuring that an excellent standard of safe and high-quality care is provided to all individuals. The student's adherence to the appropriate standards and frameworks is excellent, demonstrating exceptional core values of care when assisting the adult nursing team with clinical skills.	4	The student demonstrates highly effective communication skills when assisting with delegated clinical skills for adults. The student always ensures that appropriate communication techniques are adopted to enhance the experience of the individual and family members / carers, where applicable. The student uses technical language with accuracy, and they always demonstrate active listening to meet the needs of the individuals.	4	The student's adherence to and compliance with health and safety regulations and legislation that keeps individuals safe when assisting with delegated clinical skills is excellent. The student always monitors and maintains the clinical environment and demonstrates highly effective infection prevention and control procedures.

Band	Person-centred care and service frameworks		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates effective person-centred care, ensuring that a good standard of safe and high-quality care is provided to most individuals. The student's adherence to the appropriate standards and frameworks is good, demonstrating good core values of care when assisting the adult nursing team with clinical skills.	3	The student demonstrates effective communication skills when assisting with delegated clinical skills for adults. The student usually ensures that appropriate communication techniques are adopted to enhance the experience of the individual and family members / carers as appropriate when assisting with delegated clinical skills for adults. The student's use of technical language is generally accurate, and they usually demonstrate active listening to meet the needs of the individuals.	3	The student's adherence to and compliance with health and safety regulations and legislation that keeps individuals safe when assisting with delegated clinical skills is good. The student mostly monitors and maintains the clinical environment and demonstrates effective infection prevention and control procedures.
2	2	The student demonstrates reasonably effective person-centred care, ensuring that a satisfactory standard of safe and high-quality care is provided to some individuals. The student's adherence to the appropriate standards and frameworks is satisfactory, demonstrating sufficient core values of care when assisting the adult nursing team with clinical skills.	2	The student demonstrates reasonably effective communication skills when assisting with delegated clinical skills for adults. The student sometimes ensures that appropriate communication techniques are adopted to enhance the experience of the individual and family members / carers as appropriate when assisting with delegated clinical skills for adults. The student's use of technical language is partially accurate, and they sometimes demonstrate active listening to meet the needs of the individuals.	2	The student's adherence to and compliance with health and safety regulations and legislation that keeps individuals safe when assisting with delegated clinical skills is satisfactory. The student sometimes monitors and maintains the clinical environment and demonstrates sufficient infection prevention and control procedures.

Band	Person-centred care and service frameworks		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates minimally effective person-centred care, meaning that a limited standard of safe and high-quality care is provided to most individuals. The student's adherence to the appropriate standards and frameworks is poor, demonstrating limited core values of care when assisting the adult nursing team with clinical skills.	1	The student demonstrates minimally effective communication skills when assisting with delegated clinical skills for adults. The student occasionally ensures that appropriate communication techniques are adopted to enhance the experience of the individual and family members / carers as appropriate when assisting with delegated clinical skills for adults. The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening to meet the needs of the individuals.	1	The student's adherence to and compliance with health and safety regulations and legislation that keeps individuals safe when assisting with delegated clinical skills is poor. The student rarely monitors and maintains the clinical environment and demonstrates limited infection prevention and control procedures.
0	No evidence demonstrated or nothing worthy of credit.					

Supporting the Midwifery Team

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of the delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Application of best practice, agreed ways of working and regulations / legislation in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Use of equipment and / or materials and / or resources in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Processing, recording, reporting and storing data and / or handling information in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the delegated tasks, interventions and procedures when assisting and / or supporting the midwife / midwifery team, which is sustained throughout the student's practice.	4	The student demonstrates highly effective application of the delegated tasks, interventions and / or procedures that is consistently in line with best practice and agreed ways of working. The student's adherence to the appropriate regulations / legislation is excellent , working in a way that is always within the scope of their role and responsibilities.	4	The student demonstrates highly proficient use of the equipment and / or materials and / or resources, which are always applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a highly effective way and always ensures that equipment and / or materials and / or resources are available, correctly located and calibrated as applicable.	4	The student processes, records, reports and stores data and / or handles information in a highly effective and clear way when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support. The student consistently processes, records, reports and stores data and / or handles information in line with local and national policies, keeping all relevant information confidential and supporting others to do so.

Band	Demonstration of knowledge and understanding of the delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Application of best practice, agreed ways of working and regulations / legislation in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Use of equipment and / or materials and / or resources in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Processing, recording, reporting and storing data and / or handling information in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good knowledge and understanding of the delegated tasks, interventions and procedures when assisting and / or supporting the midwife / midwifery team, which is largely sustained throughout the student's practice.	3	The student demonstrates effective application of the delegated tasks, interventions and / or procedures that is mostly in line with best practice and agreed ways of working. The student's adherence to the appropriate regulations / legislation is good , working in a way that is usually within the scope of their role and responsibilities.	3	The student demonstrates proficient use of the equipment and / or materials and / or resources, which are usually applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in an effective way and mostly ensures that equipment and / or materials and / or resources are available, correctly located and calibrated as applicable.	3	The student processes, records, reports and stores data and / or handles information in an effective and mostly clear way when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support. The student generally processes, records, reports and stores data and / or handles information in line with local and national policies, keeping most relevant information confidential and largely supports others to do so.

Band	Demonstration of knowledge and understanding of the delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Application of best practice, agreed ways of working and regulations / legislation in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Use of equipment and / or materials and / or resources in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Processing, recording, reporting and storing data and / or handling information in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory knowledge and understanding of the delegated tasks, interventions and procedures when assisting and / or supporting the midwife / midwifery team, which is partially sustained throughout the student's practice.	2	The student demonstrates a reasonably effective application of the delegated tasks, interventions and / or procedures that is sometimes in line with best practice and ways of working. The student's adherence to the appropriate regulations / legislation is satisfactory , working in a way that is sufficiently within the scope of their role and responsibilities.	2	The student demonstrates sufficient use of the equipment and / or materials and / or resources, which are sometimes applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a reasonably effective way and sometimes ensures that equipment and / or materials and / or resources are available, correctly located and calibrated as applicable.	2	The student processes, records, reports and stores data and / or handles information in a reasonably effective and partially clear way when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support. The student sometimes processes, records, reports and stores data and / or handles information in line with local and national policies, keeping some relevant information confidential and sometimes supports others to do so.

Band	Demonstration of knowledge and understanding of the delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Application of best practice, agreed ways of working and regulations / legislation in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Use of equipment and / or materials and / or resources in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team		Processing, recording, reporting and storing data and / or handling information in relation to a delegated task, intervention and / or procedure when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the delegated tasks, interventions and procedures when assisting and / or supporting the midwife / midwifery team, which is fragmented throughout the student's practice.	1	The student demonstrates minimally effective application of the delegated tasks, interventions and / or procedures that is rarely in line with best practice and agreed ways of working. The student's adherence to the appropriate regulations / legislation is poor , working in a way that is minimally within the scope of their role and responsibilities.	1	The student demonstrates poor use of the equipment and / or materials and / or resources, which are rarely applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources with limited effectiveness and rarely ensures that equipment and / or materials and / or resources are available, correctly located and calibrated as applicable.	1	The student processes, records, reports and stores data and / or handles information in a minimally effective and clear way when assisting and / or supporting the midwife / midwifery team with clinical tasks and / or treatments and / or provision of care and support. The student rarely processes, records, reports and stores data and / or handles information in line with local and national policies, keeping little relevant information confidential and rarely supports others to do so.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Woman-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates highly effective woman-centred care, ensuring that an excellent standard of safe and high-quality care that maintains privacy and dignity is always provided. The student demonstrates an excellent understanding of and adherence to current standards, policies and frameworks, demonstrating exceptional core values of care when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures.	4	The student demonstrates highly effective communication skills when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student ensures that communication used is always sensitive, compassionate and respectful and responds to verbal and non-verbal cues highly effectively, to enhance the experience and meet the needs of the woman and their partner / families, as appropriate. The student uses technical language with accuracy and always demonstrates active listening.	4	The student's adherence to and compliance with health and safety regulations and guidelines that ensure the safety of all within the maternity / birthing environment is excellent. The student always ensures a clean and safe environment is maintained, demonstrating highly effective infection prevention and control procedures when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student is fully aware of their own limitations and always works within them to safeguard the woman's wellbeing.

Band	Woman-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates effective woman-centred care, ensuring that a good standard of safe and high-quality care that maintains privacy and dignity is generally provided. The student demonstrates a good understanding of and adherence to current standards, policies and frameworks, demonstrating good core values of care when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures.	3	The student demonstrates effective communication skills when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student ensures that communication used is mostly sensitive, compassionate and respectful and responds to verbal and non-verbal cues effectively, to enhance the experience and meet the needs of the woman and their partner / families, as appropriate. The student's use of technical language is generally accurate, and they mostly demonstrate active listening.	3	The student's adherence to and compliance with health and safety regulations and guidelines that ensure the safety of all within the maternity / birthing environment is good. The student mostly ensures a clean and safe environment is maintained, demonstrating effective infection prevention and control procedures when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student is generally aware of their own limitations and mostly works within them to safeguard the woman's wellbeing.

Band	Woman-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates reasonably effective woman-centred care, ensuring that a satisfactory standard of safe and high-quality care that maintains privacy and dignity is sometimes provided. The student demonstrates satisfactory understanding of and adherence to current standards, policies and frameworks, demonstrating sufficient core values of care when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures.	2	The student demonstrates reasonably effective communication skills when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student sometimes ensures that communication used is sensitive, compassionate and respectful and responds moderately effectively to verbal and non-verbal cues, to enhance the experience of and meet the needs of the woman and their partner / families, as appropriate. The student's use of technical language is partially accurate, and they sometimes demonstrate active listening.	2	The student's adherence to and compliance with health and safety regulations and guidelines that ensure the safety of all within the maternity / birthing environment is satisfactory. The student sometimes ensures a clean and safe environment is maintained, demonstrating sufficient infection prevention and control procedures when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student shows some awareness of their own limitations and they work sufficiently within them, but this may risk failure to safeguard the woman's wellbeing.

Band	Woman-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic woman-centred care, meaning that a limited standard of safe and high-quality care that maintains privacy and dignity is rarely provided. The student demonstrates limited understanding of and adherence to current standards, policies and frameworks, demonstrating poor core values of care when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures.	1	The student demonstrates minimally effective communication skills when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student rarely uses communication that is sensitive, compassionate and respectful and is minimally effective at responding to verbal and non-verbal cues, to enhance the experience of and to meet the needs of the woman and their partner / families, as appropriate. The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening.	1	The student's adherence to and compliance with health and safety regulations and guidelines that ensure the safety of all within the maternity / birthing environment is poor. The student rarely ensures a clean and safe environment is maintained, demonstrating limited infection prevention and control procedures when assisting and / or supporting the midwife / midwifery team with delegated tasks, interventions and procedures. The student shows limited awareness of their own limitations, and they rarely work within them, which risks failure to safeguard the woman's wellbeing.
0	No evidence demonstrated or nothing worthy of credit.					

Supporting the Mental Health Team

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of mental health conditions and / or mental wellbeing and treatments		Application of best practice and agreed ways of working when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team		Use of strategies and / or techniques for support and care when assisting to carry out appropriate therapeutic interventions as delegated by the mental health team		Observing, recording, selecting and / or presenting / reporting data and / or handling information when assisting to carry out appropriate clinical interventions and / or care or support for individuals as delegated by the mental health team	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates a highly effective application of knowledge of mental health conditions and mental wellbeing and / or an excellent understanding of how mental health conditions and wellbeing can impact on the individual and others in terms of emotions, thinking and behaviour, which is sustained throughout the student's practice.	4	The student demonstrates a highly effective application of delegated therapeutic interventions and / or care or support for individuals, which is consistently in line with best practice guidelines and agreed ways of working. The student is highly effective at working collaboratively with individuals, carers and other healthcare professionals to support mental health needs, which is always within scope of role.	4	The student always assists registered practitioners to implement appropriate strategies and / or techniques in a highly effective way. The student provides excellent support for individuals with mental health and wellbeing needs that always suits the particular purpose.	4	The student observes, records, selects and / or represents / reports data and / or information in a highly effective and clear way when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team.

Band	Demonstration of knowledge and understanding of mental health conditions and / or mental wellbeing and treatments		Application of best practice and agreed ways of working when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team		Use of strategies and / or techniques for support and care when assisting to carry out appropriate therapeutic interventions as delegated by the mental health team		Observing, recording, selecting and / or presenting / reporting data and / or handling information when assisting to carry out appropriate clinical interventions and / or care or support for individuals as delegated by the mental health team	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates an effective application of knowledge of mental health conditions and mental wellbeing and / or a good understanding of how mental health conditions and wellbeing can impact on the individual and others in terms of emotions, thinking and behaviour, which is generally sustained throughout the student's practice.	3	The student demonstrates an effective application of delegated therapeutic interventions and / or care or support for individuals, which is usually in line with best practice guidelines and agreed ways of working. The student is effective at working collaboratively with individuals, carers and other healthcare professionals, which is usually within scope of role.	3	The student usually assists registered practitioners to implement appropriate strategies and / or techniques in an effective way. The student provides good support for individuals with mental health and wellbeing needs that generally suits the particular purpose.	3	The student observes, records, selects and / or represents / reports data and / or information in an effective and mostly clear way when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team.

Band	Demonstration of knowledge and understanding of mental health conditions and / or mental wellbeing and treatments		Application of best practice and agreed ways of working when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team		Use of strategies and / or techniques for support and care when assisting to carry out appropriate therapeutic interventions as delegated by the mental health team		Observing, recording, selecting and / or presenting / reporting data and / or handling information when assisting to carry out appropriate clinical interventions and / or care or support for individuals as delegated by the mental health team	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates reasonable application of knowledge of mental health conditions and mental wellbeing and / or a satisfactory understanding of how mental health conditions and wellbeing can impact on the individual and others in terms of emotions, thinking and behaviour, which is partially sustained throughout the student's practice.	2	The student demonstrates a reasonably effective application of delegated therapeutic interventions and / or care or support for individuals, which is sometimes in line with best practice guidelines and agreed ways of working. The student is reasonably effective at working collaboratively with individuals, carers and other healthcare professionals, which is sufficiently within scope of role.	2	The student sometimes assists registered practitioners to implement appropriate strategies and / or techniques in a reasonably effective way. The student provides satisfactory support for individuals with mental health and wellbeing needs that partially suits the particular purpose.	2	The student observes, records, selects and / or represents / reports data and / or information in a reasonably effective and partially clear way when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team.

Band	Demonstration of knowledge and understanding of mental health conditions and / or mental wellbeing and treatments		Application of best practice and agreed ways of working when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team		Use of strategies and / or techniques for support and care when assisting to carry out appropriate therapeutic interventions as delegated by the mental health team		Observing, recording, selecting and / or presenting / reporting data and / or handling information when assisting to carry out appropriate clinical interventions and / or care or support for individuals as delegated by the mental health team	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates limited application of knowledge of mental health conditions and mental wellbeing and / or a basic understanding of how mental health conditions and wellbeing can impact on the individual and others in terms of emotions, thinking and behaviour, which is fragmented throughout the student's practice.	1	The student demonstrates minimally effective application of delegated therapeutic interventions and / or care or support for individuals, which is occasionally in line with best practice guidelines and agreed ways of working. The student is minimally effective at working collaboratively with individuals, carers and other healthcare professionals, which is minimally within scope of role.	1	The student occasionally assists registered practitioners to implement appropriate strategies and / or techniques in a minimally effective way. The student provides basic support for individuals with mental health and wellbeing needs that rarely suits the particular purpose.	1	The student observes, records, selects and / or represents / reports data and / or information in a minimally effective and clear way when assisting to carry out appropriate therapeutic interventions and / or care or support for individuals as delegated by the mental health team.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Person-centred, holistic care and service frameworks		Communication and effective relationships		Health and safety and risk management	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent person-centred, holistic care, ensuring that they always involve the individuals when supporting with mental health conditions. The student's adherence to and compliance with the appropriate guidelines, policies and service frameworks for mental health is excellent, demonstrating consistency in care provided within their role to support individuals with mental health conditions.	4	The student demonstrates highly effective communication skills and, where appropriate, successfully uses them to overcome barriers that prevent the building and sustaining of effective relationships. The student's tone, register and level of detail is excellent and always reflects the level and experience of the audience and purpose. The student uses technical language with accuracy, and they always demonstrate active listening to meet the needs of the individuals.	4	The student's ability to follow health and safety and / or risk assessment processes identified by the mental health team is excellent when assisting to carry out delegated therapeutic interventions and / or support strategies with individuals. The student's application of knowledge of scope of safe practice is highly effective, and they always work within the limitations of their role, safeguarding the individual's wellbeing.

Band	Person-centred, holistic care and service frameworks		Communication and effective relationships		Health and safety and risk management	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good person-centred, holistic care, usually ensuring that they involve the individuals when supporting with mental health conditions. The student's adherence to and compliance with the appropriate guidelines, policies and service frameworks for mental health is good, demonstrating generally consistent care provided within their role to support individuals with mental health conditions.	3	The student demonstrates effective communication skills and, where appropriate, uses them generally successfully to overcome barriers that prevent the building and sustaining of effective relationships. The student's tone, register and level of detail is good and generally reflects the level and experience of the audience and purpose. The student's use of technical language is generally accurate, and they usually demonstrate active listening to meet the needs of the individuals.	3	The student's ability to follow health and safety and / or risk assessment processes identified by the mental health team is good when assisting to carry out delegated therapeutic interventions and / or support strategies with individuals. The student's application of knowledge of scope of safe practice is effective and they usually work within the limitations of their role, safeguarding the individual's wellbeing.

Band	Person-centred, holistic care and service frameworks		Communication and effective relationships		Health and safety and risk management	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory person-centred, holistic care, sometimes ensuring that they involve the individuals when supporting with mental health conditions. The student's adherence to and compliance with the appropriate guidelines, policies and service frameworks for mental health is satisfactory, demonstrating partially consistent care provided within their role to support individuals with mental health conditions.	2	The student demonstrates reasonably effective communication skills and, where appropriate, uses them somewhat successfully to overcome barriers that prevent the building and sustaining of effective relationships. The student's tone, register and level of detail is satisfactory and sometimes reflects the level and experience of the audience and purpose. The student's use of technical language is partially accurate and sometimes demonstrates active listening to meet the needs of the individuals.	2	The student's ability to follow health and safety and / or risk assessment processes identified by the mental health team is satisfactory when assisting to carry out delegated therapeutic interventions and / or support strategies with individuals. The student's application of knowledge of scope of safe practice is satisfactory and they work sufficiently within the limitations of their role, but this may risk failure to safeguard the individual's wellbeing.

Band	Person-centred, holistic care and service frameworks		Communication and effective relationships		Health and safety and risk management	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic person-centred, holistic care, occasionally ensuring that they involve the individuals when supporting with mental health conditions. The student's adherence to and compliance with the appropriate guidelines, policies and service frameworks for mental health is poor, demonstrating limited consistency in care provided within their role to support individuals with mental health conditions.	1	The student demonstrates minimally effective communication skills and, where appropriate, uses them with limited success to overcome barriers that prevent the building and sustaining of effective relationships. The student's tone, register and level of detail is basic and rarely reflects the level and experience of the audience and purpose. The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening to meet the needs of the individuals.	1	The student's ability to follow health and safety and / or risk assessment processes identified by the mental health team is poor when assisting to carry out delegated therapeutic interventions and / or support strategies with individuals. The student's application of knowledge of scope of safe practice is limited and they rarely work within the limitations of their role, which risks failure to safeguard the individual's wellbeing.
0	No evidence demonstrated or nothing worthy of credit.					

Supporting the Care of Children and Young People

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of the clinical tasks and / or treatments and / or provision of care and support		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks and / or treatments and / or provision of care and support		Use of equipment and / or materials and / or resources in relation to clinical tasks and / or treatments and / or provision of care and support		Recording, using, selecting and / or presenting data and / or handling information in relation to clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the delegated clinical tasks and treatments and / or provision of care and support, which is sustained throughout the student's practice.	4	The student demonstrates a highly effective application of the clinical tasks, treatments and / or provision of care and support that is consistently in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is excellent and demonstration of the clinical tasks, treatments and / or provision of care and support is always within the scope of their role and responsibilities.	4	The student demonstrates a highly proficient use of the equipment and / or materials and / or resources, which are always applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a highly effective way and always ensures that the equipment and / or materials and / or resources are available, correctly located and serviceable, as applicable.	4	The student records, uses, selects and / or presents data and / or handles information in a highly effective and clear way when assisting with delegated clinical tasks and treatments and / or providing care and support. The student consistently records, uses, selects and / or presents and handles information in line with all local and national policies. The student is highly effective at developing and adhering to care and assessment plans and clarifying complex information, as appropriate.

Band	Demonstration of knowledge and understanding of the clinical tasks and / or treatments and / or provision of care and support		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks and / or treatments and / or provision of care and support		Use of equipment and / or materials and / or resources in relation to clinical tasks and / or treatments and / or provision of care and support		Recording, using, selecting and / or presenting data and / or handling information in relation to clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good knowledge and understanding of the delegated clinical tasks and treatments and / or provision of care and support, which is largely sustained throughout the student's practice.	3	The student demonstrates effective application of the clinical tasks, treatments and / or provision of care and support that is mostly in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is good and demonstration of the clinical tasks, treatments and / or provision of care and support is usually within the scope of their role and responsibilities.	3	The student demonstrates a proficient use of the equipment and / or materials and / or resources, which are usually applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in an effective way and mostly ensures that the equipment and / or materials and / or resources are available, correctly located and serviceable, as applicable.	3	The student records, uses, selects and / or presents data and / or handles information in an effective and mostly clear way when assisting with delegated clinical tasks and treatments and / or providing care and support. The student generally records, uses, selects and / or presents and handles information in line with most local and national policies. The student is effective at developing and adhering to care and assessment plans and clarifying complex information, as appropriate.

Band	Demonstration of knowledge and understanding of the clinical tasks and / or treatments and / or provision of care and support		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks and / or treatments and / or provision of care and support		Use of equipment and / or materials and / or resources in relation to clinical tasks and / or treatments and / or provision of care and support		Recording, using, selecting and / or presenting data and / or handling information in relation to clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory knowledge and understanding of the delegated clinical tasks and treatments and / or provision of care and support, which is partially sustained throughout the student's practice.	2	The student demonstrates reasonably effective application of the clinical tasks, treatments and / or provision of care and support, which is sometimes in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is satisfactory and demonstration of the clinical tasks, treatments and / or provision of care and support is sufficiently within the scope of their role and responsibilities.	2	The student demonstrates sufficient use of the equipment and / or materials and / or resources, which are sometimes applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources in a reasonably effective way and sometimes ensures that the equipment and / or materials and / or resources are available, correctly located and serviceable, as applicable.	2	The student records, uses, selects and / or presents data and / or handles information in a reasonably effective and partially clear way when assisting with delegated clinical tasks and treatments and / or providing care and support. The student sometimes records, uses, selects and / or presents and handles information in line with some local and national policies. The student is reasonably effective at developing and adhering to care and assessment plans and clarifying complex information, as appropriate.

Band	Demonstration of knowledge and understanding of the clinical tasks and / or treatments and / or provision of care and support		Application of best practice, agreed ways of working and regulations / legislation in relation to clinical tasks and / or treatments and / or provision of care and support		Use of equipment and / or materials and / or resources in relation to clinical tasks and / or treatments and / or provision of care and support		Recording, using, selecting and / or presenting data and / or handling information in relation to clinical tasks and / or treatments and / or provision of care and support	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the delegated clinical tasks and treatments and / or provision of care and support, which is fragmented throughout the student's practice.	1	The student demonstrates minimally effective application of the clinical tasks, treatments and / or provision of care and support, which is rarely in line with best practice techniques and agreed ways of working. The student's adherence to the appropriate regulations / legislation is poor and demonstration of the clinical tasks, treatments and / or provision of care and support is minimally within the scope of their role and responsibilities.	1	The student demonstrates poor use of the equipment and / or materials and / or resources, which are rarely applied with accuracy and precision. The student monitors and maintains equipment and / or materials and / or resources with limited effectiveness and rarely ensures that the equipment and / or materials and / or resources are available, correctly located and serviceable, as applicable.	1	The student records, uses, selects and / or presents data and / or handles information in a minimally effective and clear way when assisting with delegated clinical tasks and treatments and / or providing care and support. The student rarely records, uses, selects and / or presents and handles information in line with few local and national policies. The student is minimally effective at developing and adhering to care and assessment plans and clarifying complex information, as appropriate.
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Person-centred and family-centred care and service frameworks		Communication techniques and strategies		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates an excellent ability to maintain duty of care, acting in the best interests and considering the rights of the child or young person consistently when assisting with delegated clinical tasks and treatments and / or providing care and support. The student applies highly effective person-centred and family-centred care, demonstrating excellent knowledge and understanding of the role of families and carers in the care and support of children and young people. The student's adherence to and application of the appropriate service frameworks is excellent.	4	The student demonstrates highly effective, age-appropriate communication techniques and always implements strategies to deal with any barriers to communication, showing an excellent ability to develop positive relationships. The student always ensures that appropriate communication techniques are adopted to deliver holistic support when working in partnership with families and carers. The student uses age-appropriate technical language with accuracy, and they always demonstrate active listening and questioning for clarity.	4	The student's adherence to and compliance with health and safety regulations and legislation and principles that keep children and young people safe is excellent when assisting with delegated clinical tasks and treatments and / or providing care and support. The student always monitors and maintains the clinical environment and demonstrates highly effective infection prevention and control procedures.

Band	Person-centred and family-centred care and service frameworks		Communication techniques and strategies		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates a good ability to maintain duty of care, acting in the best interests and considering the rights of the child or young person when assisting with delegated clinical tasks and treatments and / or providing care. The student applies effective person-centred and family-centred care, demonstrating good knowledge and understanding of the role of families and carers in the care and support of children and young people. The student's adherence to and application of the appropriate service frameworks is good.	3	The student demonstrates effective, age-appropriate communication techniques and implements strategies to deal with any barriers to communication, showing good ability to develop positive relationships. The student usually ensures that appropriate communication techniques are adopted to deliver holistic support when working in partnership with families and carers. The student's use of age-appropriate technical language is generally accurate, and they usually demonstrate active listening and questioning for clarity.	3	The student's adherence to and compliance with health and safety regulations and legislation and principles that keep children and young people safe is good when assisting with delegated clinical tasks and treatments and / or providing care and support. The student mostly monitors and maintains the clinical environment and demonstrates effective infection prevention and control procedures.

Band	Person-centred and family-centred care and service frameworks		Communication techniques and strategies		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates some ability to maintain duty of care, sometimes acting in the best interests and considering the rights of the child or young person when assisting with delegated clinical tasks and treatments and / or providing care and support. The student applies reasonably effective person-centred and family-centred care, demonstrating satisfactory knowledge and understanding of the role of families and carers in the care and support of children and young people. The student's adherence to and application of the appropriate service frameworks is satisfactory.	2	The student demonstrates reasonably effective, age-appropriate communication techniques and sometimes implements strategies to deal with any barriers to communication, showing a reasonable ability to develop positive relationships. The student sometimes ensures that appropriate communication techniques are adopted to deliver holistic support when working in partnership with families and carers. The student's use of age-appropriate technical language is partially accurate, and they sometimes demonstrate active listening and questioning for clarity.	2	The student's adherence to and compliance with health and safety regulations and legislation and principles that keep children and young people safe is satisfactory when assisting with delegated clinical tasks and treatments and / or providing care. The student sometimes monitors and maintains the clinical environment and demonstrates sufficient infection prevention and control procedures.

Band	Person-centred and family-centred care and service frameworks		Communication techniques and strategies		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates a limited ability to maintain duty of care, rarely acting in the best interests and considering the rights of the child or young person when assisting with delegated clinical tasks and treatments and / or providing care and support. The student applies person-centred and family-centred care with minimal effectiveness, demonstrating basic knowledge and understanding of the role of families and carers in the care and support of children and young people. The student's adherence to and application of the appropriate service frameworks is poor.	1	The student demonstrates minimally effective, age-appropriate communication techniques and rarely implements strategies to deal with any barriers to communication, showing a limited ability to develop positive relationships. The student occasionally ensures that appropriate communication techniques are adopted to deliver holistic support when working in partnership with families and carers. The student's use of age-appropriate technical language is limited in accuracy, and they rarely demonstrate active listening or questioning for clarity.	1	The student's adherence to and compliance with health and safety regulations and legislation and principles that keep children and young people safe is poor when assisting with delegated clinical tasks and treatments and / or providing care and support. The student rarely monitors and maintains the clinical environment and demonstrates limited infection prevention and control procedures.
0	No evidence demonstrated or nothing worthy of credit.					

Supporting the Therapy Teams

Scenario-specific skills marking grid

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent knowledge and understanding of the delegated therapeutic tasks or interventions, which is sustained throughout the student's practice. The student applies knowledge of the therapy support role highly effectively when supporting the therapy team with therapeutic tasks and interventions.	4	The student demonstrates a highly effective application of the delegated therapeutic tasks or interventions that is consistently in line with best practice techniques, to enable individuals to meet optimum potential in relation to either or both physical and mental wellbeing. The student's ability to follow standard approaches to manage, rehabilitate or maximise an individual's function is excellent and always within the scope of their role and responsibilities.	4	The student demonstrates a highly proficient use of equipment, kit and devices and / or materials and / or resources, which are always applied with accuracy and precision. Where appropriate, the student monitors and maintains equipment, kit and devices and / or materials and / or resources in a highly effective way.	4	The student records, uses and / or presents data and / or information in a highly effective and clear way when supporting the therapy team with therapeutic tasks and interventions. The student demonstrates an excellent ability to organise information to ensure clear guidelines of requirements of the therapeutic task, in a way that is always in line with care plans and progression.

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
				The student demonstrates an excellent level of respect for the particular shared functions of allied health professionals by being highly effective at working collaboratively when supporting the therapy team with therapeutic tasks and interventions, as appropriate.				

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good knowledge and understanding of the delegated therapeutic tasks or interventions, which is largely sustained throughout the student's practice. The student applies knowledge of the therapy support role effectively when supporting the therapy team with therapeutic tasks and interventions.	3	The student demonstrates an effective application of the delegated therapeutic tasks or interventions that is usually in line with best practice techniques, which generally enables individuals to meet optimum potential in relation to either or both physical and mental wellbeing. The student's ability to follow standard approaches to manage, rehabilitate or maximise an individual's function is good and usually within the scope of their role and responsibilities.	3	The student demonstrates a proficient use of equipment, kit and devices and / or materials and / or resources effectively, which are usually applied with accuracy and precision. Where appropriate, the student monitors and maintains equipment, kit and devices and / or materials and / or resources in an effective way.	3	The student records, uses and / or presents data and / or information in an effective and mostly clear way when supporting the therapy team with therapeutic tasks and interventions. The student demonstrates a good ability to organise information to ensure clear guidelines of requirements of the therapeutic task, in a way that is usually in line with care plans and progression.

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
				The student demonstrates a good level of respect for the particular shared functions of allied health professionals by being effective at working collaboratively when supporting the therapy team with therapeutic tasks and interventions, as appropriate.				

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory knowledge and understanding of the delegated therapeutic tasks or interventions, which is partially sustained throughout the student's practice. The student applies knowledge of the therapy support role reasonably effectively when supporting the therapy team with therapeutic tasks and interventions.	2	The student demonstrates reasonably effective application of the delegated therapeutic tasks or interventions, which is sometimes in line with best practice techniques, which partially enables individuals to meet optimum potential in relation to either or both physical and mental wellbeing. The student's ability to follow standard approaches to manage, rehabilitate or maximise an individual's function is satisfactory and sufficiently within the scope of their role and responsibilities.	2	The student demonstrates a sufficient use of equipment, kit and devices and / or materials and / or resources, which are sometimes applied with accuracy and precision. Where appropriate, the student monitors and maintains equipment, kit and devices and / or materials and / or resources in a reasonably effective way.	2	The student records, uses and / or presents data and / or information in a reasonably effective and partially clear way when supporting the therapy team with therapeutic tasks and interventions. The student demonstrates a satisfactory ability to organise information to ensure clear guidelines of requirements of the therapeutic task, in a way that is sometimes in line with care plans and progression.

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
				The student demonstrates some level of respect for the particular shared functions of allied health professionals by being reasonably effective at working collaboratively when supporting the therapy team with therapeutic tasks and interventions, as appropriate.				

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic knowledge and understanding of the delegated therapeutic tasks or interventions, which is fragmented throughout the student's practice. The student applies knowledge of the therapy support role with minimal effectiveness when supporting the therapy team with therapeutic tasks and interventions.	1	The student demonstrates minimally effective application of the delegated therapeutic tasks or interventions that is rarely in line with best practice techniques, which rarely enables individuals to meet optimum potential in relation to either or both physical and mental wellbeing. The student's ability to follow standard approaches to manage, rehabilitate or maximise an individual's function is poor and minimally within the scope of their role and responsibilities.	1	The student demonstrates a poor use of equipment, kit and devices and / or materials and / or resources, which are rarely applied with accuracy and precision. Where appropriate, the student monitors and maintains equipment, kit and devices and / or materials and / or resources in a minimally effective way.	1	The student records, uses and / or presents data and / or information in a minimally effective and clear way when supporting the therapy team with therapeutic tasks and interventions. The student demonstrates a basic ability to organise information to ensure clear guidelines of requirements of the therapeutic task, in a way that is rarely in line with care plans and progression.

Band	Demonstration of knowledge and understanding of therapeutic tasks and interventions when supporting the therapy team		Application of best practice / standard approaches, agreed ways of working and teamwork when supporting the therapy team with therapeutic tasks and interventions		Use of equipment, kit and devices and / or materials and / or resources when supporting the therapy team with therapeutic tasks and interventions		Recording, using and / or presenting data and / or information when supporting the therapy team with therapeutic tasks and interventions	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
				The student demonstrates a limited level of respect for the particular shared functions of allied health professionals by being minimally effective at working collaboratively when supporting the therapy team with therapeutic tasks and interventions, as appropriate.				
0	No evidence demonstrated or nothing worthy of credit.							

Underpinning skills marking grid

Band	Person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
4	4	The student demonstrates excellent duty of care, seeking and actioning advice from healthcare professionals where appropriate and adapting care and support to meet the needs of the individual. The student ensures that an excellent standard of safe and high-quality person-centred care is provided to all individuals. The student consistently encourages individuals to be independent and self-reliant, promoting self-management and skills for every day.	4	The student demonstrates highly effective non-judgemental ways of communication when supporting the therapy team with a range of therapeutic tasks and interventions. The student always speaks with a tone and register that reflects the audience and purpose. The student uses technical language with accuracy, and they always demonstrate active listening to meet the needs of the individuals.	4	The student's adherence to the required national guidelines and health and safety policies for the particular area of therapy support is excellent. The student always monitors and maintains the health and safety of the therapy environment and the safety of individuals within the environment when supporting the therapy team with a range of therapeutic tasks and interventions, by applying high standards of practice, using excellent knowledge and understanding of health and safety. The student always works within their own competence, demonstrating full awareness of their own limitations to safeguard the individual's wellbeing.

Band	Person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
3	3	The student demonstrates good duty of care, usually seeking and actioning advice from healthcare professionals where appropriate and adapting care and support to meet the needs of the individual. The student ensures that a good standard of safe and high-quality person-centred care is provided to most individuals. The student generally encourages individuals to be independent and self-reliant, promoting self-management and skills for every day.	3	The student demonstrates effective non-judgemental ways of communication when supporting the therapy team with a range of therapeutic tasks and interventions. The student usually speaks with a tone and register that reflects the audience and purpose. The student's use of technical language is generally accurate, and they demonstrate active listening to meet the needs of the individuals.	3	The student's adherence to the required national guidelines and health and safety policies for the particular area of therapy support is good. The student usually monitors and maintains the health and safety of the therapy environment and the safety of individuals within the environment when supporting the therapy team with a range of therapeutic tasks and interventions by applying good standards of practice, using good knowledge and understanding of health and safety. The student usually works within their own competence, demonstrating general awareness of their own limitations to safeguard the individual's wellbeing.

Band	Person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
2	2	The student demonstrates satisfactory duty of care, sometimes seeking and actioning advice from healthcare professionals where appropriate and adapting care and support to meet the needs of the individual. The student ensures that a satisfactory standard of safe and high-quality person-centred care is provided to most individuals. The student sometimes encourages individuals to be independent and self-reliant, promoting self-management and skills for every day.	2	The student demonstrates reasonably effective non-judgemental ways of communication when supporting the therapy team with a range of therapeutic tasks and interventions. The student sometimes speaks with a tone and register that reflects the audience and purpose. The student's use of technical language is partially accurate, and they sometimes demonstrate active listening to meet the needs of the individuals.	2	The student's adherence to the required national guidelines and health and safety policies for the particular area of therapy support is satisfactory. The student sometimes monitors and maintains the health and safety of the therapy environment and the safety of individuals within the environment when supporting the therapy team with a range of therapeutic tasks and interventions, by applying sufficient standards of practice, using satisfactory knowledge and understanding of health and safety. The student sometimes works within their own competence, demonstrating partial awareness of their own limitations, which may risk failure to safeguard the individual's wellbeing.

Band	Person-centred care		Communication		Health and safety	
	Mark	Descriptor	Mark	Descriptor	Mark	Descriptor
1	1	The student demonstrates basic duty of care, occasionally seeking and actioning advice from healthcare professionals where appropriate and adapting care and support to meet the needs of the individual. The student demonstrates a limited standard of safe and high-quality person-centred care that is provided to most individuals. The student rarely encourages individuals to be independent and self-reliant, promoting self-management and skills for every day.	1	The student demonstrates minimally effective non-judgemental ways of communication when supporting the therapy team with a range of therapeutic tasks and interventions. The student occasionally speaks with a tone and register that reflects the audience and purpose. The student's use of technical language is limited in accuracy, and they rarely demonstrate active listening to meet the needs of the individuals.	1	The student's adherence to the required national guidelines and health and safety policies for the particular area of therapy support is poor. The student rarely monitors and maintains the health and safety of the therapy environment and the safety of individuals within the environment when supporting the therapy team with a range of therapeutic tasks and interventions, by applying poor standards of practice, using basic knowledge and understanding of health and safety. The student rarely works within their own competence, demonstrating occasional awareness of their own limitations, which risks failure to safeguard the individual's wellbeing.
0	No evidence demonstrated or nothing worthy of credit.					

Assignment 3: professional discussion assessment (PDA)

Outline of professional discussion assessment (PDA)

The purpose of the occupational specialism (OS) element of the professional discussion is to ensure that students have the opportunity to show their core knowledge and skills, as well as the key skills from their chosen OS.

One of the main reasons why this method of assessment is judged to be appropriate and valid in assessing the competence of students is the current focus in healthcare professions to train reflective practitioners.

The assessment timings for the professional discussion are as follows:

Assignment title	Assessment length	Maximum raw mark	% weighting
Professional discussion	1 hour (plus 45 minutes preparation time)	96	30%

For each OS, NCFE will externally set three themes with two questions per theme, split into Part A and Part B (1 A, 1 B, 2 A, 2 B constitutes one theme). The themes and questions will be set in such a way to make sure that every performance outcome (PO), both in the core and option OS, is covered.

Students will be required to collate evidence of 'significant learning experiences', gained as part of the teaching and learning and the industry placement, which covers the knowledge, skills and behaviours in their chosen OS (as outlined in the Qualification Specification).

Delivery of professional discussion assessment (PDA)

The total time for the assessment is 1 hour 45 minutes. This should be split into 45 minutes preparation time and 1 hour assessment time.

The permitted time must **not** be increased unless a reasonable adjustment has been agreed for a student in accordance with the Access Arrangements and Reasonable Adjustments Policy, which can be found on the NCFE website.

The permitted time must **not** be decreased. Students must be given the opportunity to complete the full amount of time for the external assessment task. Providers must take this into account when timetabling the session.

Students will be supported through the guided learning hours (GLH) by tutors, to gather a portfolio of reflective accounts (either as a written / electronic journal or diary), demonstrating ongoing professional development. These should incorporate knowledge, skills, behaviours and professional values, developed by the student, including any feedback received and how this changed and / or developed their practice.

Providers are encouraged to share examples of reflective cycles, such as Kolb's reflective cycle or Gibbs' reflective cycle, to support students' practice and familiarise them with the steps required to becoming a reflective practitioner.

Guidance, including a template, will be provided by NCFE to ensure a standardised approach is taken across providers (the template is included with the sample assessment materials (SAMs)).

We recommend that providers' staff provide ongoing developmental feedback to students to support integration of best practice and as an opportunity for students to practise discussion of experiences in a professional manner.

The reflective account portfolio will then be used to underpin discussions in the PDA but will otherwise not be marked.

We recommend that providers' staff are fully equipped with the appropriate resources to support the delivery process, for example, when providing a suitable environment for the students' 45 minutes preparation time, by supplying the assessment materials (themes and questions), thus allowing students to formulate an appropriate reflective account to support their professional discussion. Tutors should allow the students to use this time to make notes that can only be taken from their reflective account portfolios.

The discussion supervisor should be someone who has enough subject knowledge and familiarity with the qualification content to be able to ask appropriate follow-up questions. The discussion supervisor can ask 3 additional questions per theme, plus a final question that gives the student a chance to expand or clarify any of their points. In total, this equates to 4 questions per theme and 12 questions per discussion. Example questions are given in the guidance, and the facilitator will decide what to ask and when. Wording of questions can be amended to suit the facilitator's tone, but the core message and content should not be altered to change or combine questions. It is especially important that there are no exploratory, subject-specific questions asked; the questions should be about the experience only.

During the discussion, the question parts (for example, Question 1, Part A and Part B) should be asked chronologically to support structuring the student's answer. When stated, the student will have to refer to the same example in both parts but can also draw on multiple examples to illustrate their point. The question is always treated as a whole in marking.

Providers are responsible for accessing audio-visual (AV) recording equipment and must run through positioning checks to make sure that all discussions are clear and audible. Recordings are then to be sent directly to an external examiner for assessment.

Assessment conditions of professional discussion assessment (PDA)

The PDA will take place between a member of the providers' staff and the student.

Students and tutors are required to sign Declarations of Authenticity to confirm that the work is their / the student's own. The declaration forms can be found on the NCFE website. This is to ensure authenticity and to prevent potential malpractice and maladministration. Students must be made aware of the importance of this declaration and the impact this could have on their overall grade, if the evidence was found not to be the student's own work. For example, students must be aware that:

- during the preparation time, providers' staff will distribute the assessment materials (themes **and** questions) so that students can select an appropriate reflective account to support the professional discussion and make notes on the template provided
- during the 45 minutes, students will make notes to support their discussion – this should be immediately prior to the discussion
- they will use assessment materials provided and their own reflective account portfolio to produce notes that will support and guide their answers appropriately
- they are allowed to use this preparation time to make notes but may only have access to their reflective account portfolios
- there is no limit on the number of notes that a student can take into the discussion, but the intention is that this assessment reflects an authentic professional conversation, so excessive, script-style notes are likely to hinder, not benefit, a student especially when spontaneous questions are asked
- there should be no unsupervised period between the preparation and the professional discussion
- they will enter the allocated room, bringing their notes and reflective account portfolio
- providers' staff will check that it is the correct student (name and unique learner number check) – staff members should already be aware if a student has additional learning needs and requires extra time
- providers' staff should carry out sound checks to make sure the student is clearly heard on the recording
- they will be required to provide a verbal response to the questions posed in each theme – there are 3 themes in total and each theme has 2 sub-questions (for example, theme 1 has Question 1 part (a) and (b) and Question 2 part (a) and (b)) – the students have a **maximum** of 1 hour to answer the questions posed by a staff member for all 3 themes
- the professional discussion is audio-visually recorded to capture all knowledge and skills provided in the student's answers
- the discussion supervisor has the opportunity to ask an additional 12 questions per discussion (4 per theme):
 - the discussion supervisor has the opportunity to ask 3 additional questions per theme (refer to assessment materials for question content)
 - the discussion supervisor **must** ask if the student would like to add or clarify anything at the end of each theme, before moving on to the next theme, as the student cannot return to a theme once the discussion has progressed to the next theme
 - the wording of questions can be amended to suit the facilitator's tone, but the core message and content should not be altered to change or combine questions
- the additional questions are optional, and so it would be preferable that a supervisor with experience of this type of assessment conducts the conversation
- during the assessment, providers' staff will read from the assessment materials and are able to provide allocated prompts to students as directed in the guidance documents
- the whole assessment is audio-visually recorded
- **all** materials must be left in the room – including the student's reflective account portfolio
- the audio-visual recordings are then sent to an external examiner to be assessed (see below).

Submission of assessment materials for professional discussion assessment (PDA)

The professional discussion assessment must be completed and uploaded as a whole and not in separate sections. The submission of students' assessment evidence must be done before the submission date specified for the assessment window. Tutors are encouraged to ensure that students follow the filename conventions specified in the external assessment tasks for each individual document. These files should be uploaded to the portal. If the file is over 2GB in size, please contact NCFE for further guidance.

Resources for professional discussion assessment (PDA)

Resources required to complete the professional discussion assessment are to include the following:

- audio-visual (AV) recording equipment that captures questions posed by the staff member and all responses provided by the student
- a suitable environment for preparation activity and for the professional discussion to take place
- assessment materials that are clearly printed
- the student's own reflective portfolio
- a clock or stopwatch
- assessment material (themes and questions) provided to support preparation for the professional discussion
- a reflective account portfolio (available during preparation time only) containing evidence of significant learning experiences gained as part of the teaching and learning and the industry placement.

Document information

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Change History Record

Version	Description of change	Approval	Date of issue
v1.0	Live version publication – practical activity updates to reflect 2026 to 2027 assessments		September 2026