

T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Care of Children and Young People

Assignment 1 - Case study stimulus materials

Assignment brief insert

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Case study stimulus materials

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Item A: initial occupational therapy assessment extract

Community occupational therapy initial assessment

Name: Elodie Church	DOB: 20/10/2006	Age: 16
GP: Dr Gloucester - Parade Surgery	Referral date: 05/04/2022 Initial Assessment date: 05/05/2022 Assessor: A. Bodin	

Elodie was diagnosed with chronic fatigue syndrome in January 2022 after attending various neurological assessments with Dr Smith, consultant neurologist. Prior to her diagnosis, Elodie had not been hospitalised and had not been diagnosed with any underlying health conditions.

Elodie was admitted to hospital in June 2021 after collapsing whilst playing at a county netball match. Investigations could not find any underlying health conditions and all physiological tests came back normal. Elodie had experienced a prolonged sore throat from February to June 2021, which had been diagnosed as a viral infection.

Physically, Elodie suffers from frequent headaches, aching muscles and other bodily pains. She experiences a disturbed sleep wake cycle. She experiences high levels of fatigue, especially after physical or mental exertion. Eating patterns have become erratic.

Family and friends:

Elodie is an only child and lives with both parents. Elodie has some close friends from college and the netball team.

Education:

Elodie is in her first year at college and is planning to go to university. She wants to follow a degree programme in adult nursing. Elodie enjoys college and has been achieving well on her course. Elodie's attendance at college has decreased over the past few months due to fatigue, particularly in the mornings.

Hobbies and interests:

Elodie likes drawing, watching films and having pizza with friends. She likes to spend time with her mum baking and watching comedy films with her dad.

Assessment of difficulties/barriers – client self-assessment

Physical	Cognitive
Experiences frequent headaches, muscle and joint pain. Takes co-dydramol as required.	Tires quickly. Finds it hard to concentrate for too long. Experiences 'brain fog' when fatigued. Experiences cognitive dysfunction including difficulty in making

<p>Has difficulty with daily function tasks including personal hygiene (showering and washing hair) and daily living (particularly preparing meals) as experiences high levels of fatigue.</p> <p>Elodie experiences bloating and constipation which is uncomfortable, and eating can be erratic at times.</p> <p>Elodie mentioned that her clothes are bigger on her.</p>	<p>decisions, retaining information (short-term memory), processing and planning thoughts.</p> <p>Sometimes starts a task and then forgets what she is doing. Struggles to find words when fatigued.</p> <p>Has been struggling to keep up with college work – writing and reading are difficult as she finds these physically tiring.</p> <p>Elodie is worried about not being able to complete her assignment work on time and finish the first year. She is concerned she will have to leave college. She is anxious about not being able to follow her career aspirations due to her condition.</p>
<p>Emotional</p> <p>Experiences low mood. Has found it difficult to understand what is happening. Finds it hard and expresses frustration at not being able to carry out tasks as before.</p> <p>Elodie describes herself as feeling 'numb' and says she feels anxious about being away from home and her parents. She has been spending more time in her room.</p> <p>She expresses anxiety about the future. She says she is starting to feel like a burden. Elodie wants to understand more about her condition, so it doesn't feel so scary.</p>	<p>Social</p> <p>Has found keeping in contact with friends difficult as she is too tired to go out. Her friends have visited but she is often so tired that she can only see them for a short time and these visits seem to be occurring less.</p> <p>She has stopped playing in the county netball team and she really misses this. Elodie states that she feels anxious about going out with her friends when she does feel 'better' so often makes excuses not to go.</p> <p>Misses being able to bake and cook with mum. She enjoyed watching films at the cinema with friends and going out for pizza.</p>

Current support

<p>Physical</p> <p>Elodie negotiates the stairs using the banister. The family have a walk-in shower.</p>	<p>Cognitive</p> <p>College is aware of Elodie's situation and gave her extensions to complete outstanding assignment work. Tutor has offered tutorial support for Elodie.</p>
<p>Emotional</p> <p>Parents are supportive. Elodie does not speak to friends about her condition as she does not want to burden them.</p>	<p>Social</p> <p>Elodie has a small group of friends and tries to keep in touch, but this is difficult due to her being so tired. Interaction with peers has lessened.</p> <p>Elodie has had to withdraw from the netball team and now rarely sees the team.</p>

Item B: parental feedback – extract from occupational therapy assessment

The mother described Elodie as an engaging and confident teenager before she experienced her viral infection and collapse. She now sees her daughter losing confidence in her abilities: 'Completing everyday tasks such as showering or making something to eat wipes her out, let alone her going out with friends – she hasn't done that in months.'

Physically, Elodie tires quickly and some mornings she has been unable to get out of bed. When she is experiencing a low, she can sleep for 3 to 4 hours in the afternoon, then go to bed after eating tea and sleep through until morning but still feels tired when she wakes.

The mother states that a couple of family friends have suggested Elodie just needs to 'get out there' and 'it's all in the mind.' Mother admits that sometimes she finds it a bit frustrating because it has influenced family life. 'You know, we used to do a lot of cooking and baking together, but Elodie finds it hard to stand up for prolonged periods of time when she is feeling unwell, so that has virtually stopped.' The mother is concerned that Elodie's weight seems to have dropped and that she looks pale at times.

Her mother is concerned that Elodie, although very capable, is now struggling to keep up with her work at college and has found it hard to ask for help with managing her studies. When she feels 'well', she works really hard but feels exhausted afterwards and must rest for 2 or 3 days. Her mother described Elodie's mood as 'quite low.' Her mother is concerned that Elodie finds it hard to talk about her condition. Parents are supportive of Elodie's difficulties but find it frustrating not knowing why or how it happened. They have had some information from the consultant when Elodie got her diagnosis but do not know the best way to help her manage her condition. The mother states, 'we just want her to get better so she can get on with her life.'

Item C: occupational therapy observation of daily living skills (DLS) extract

Client: Elodie Church

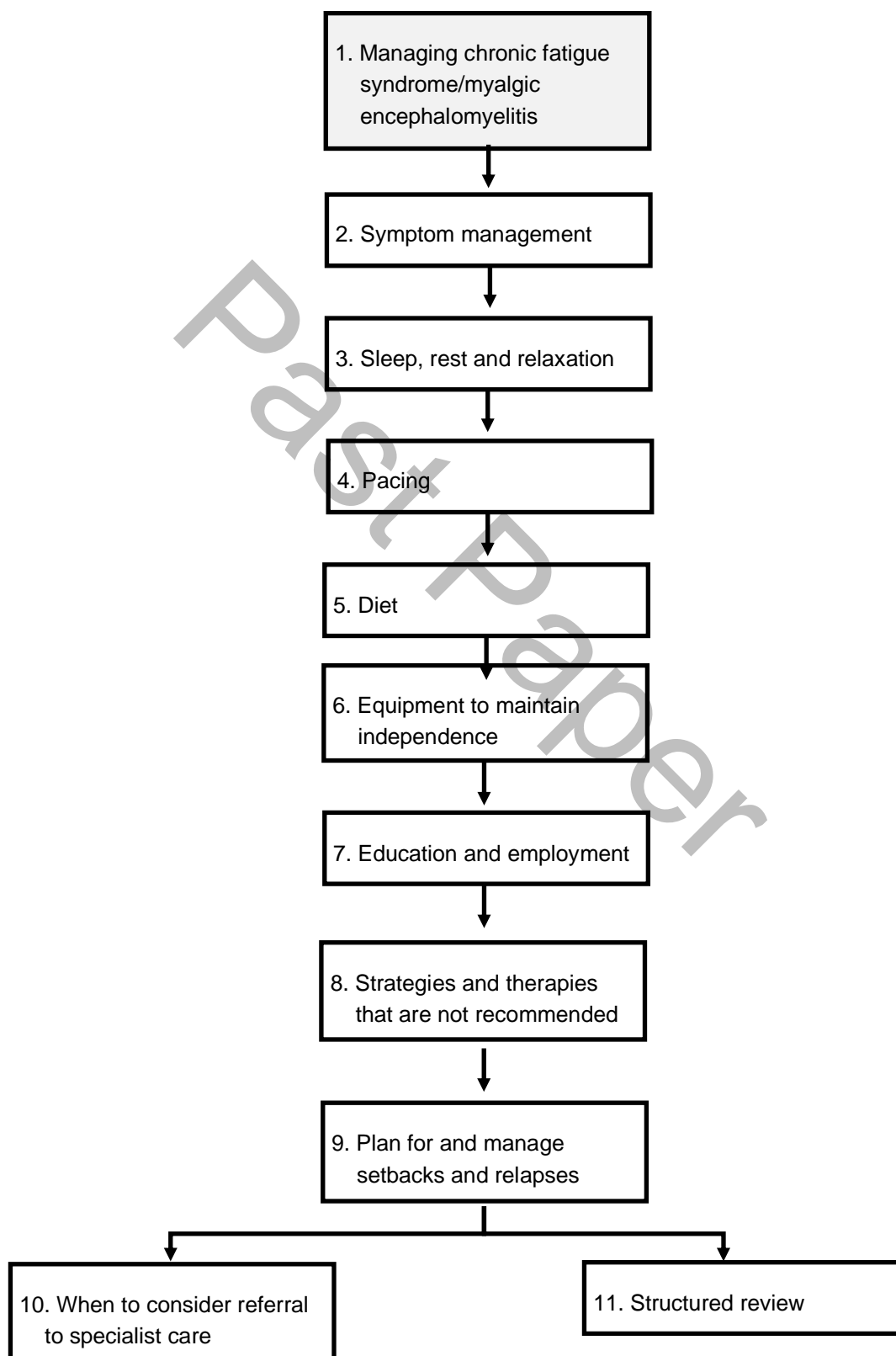
Date: 05/05/2022

Observation: making lunch – sandwich and cup of tea

Elodie started by making herself a cheese sandwich. She could access all of the items and equipment required to carry out the task. This involved frequent movements around the kitchen to get the equipment. Elodie was able to use and hold lighter things, such as the plate and the knife, with little difficulty. She found it more difficult to lift and hold the kettle to fill it with water. Elodie had to use both hands to support the weight of the kettle when filling and pouring hot water into the mug.

Client feedback: Elodie explained that today was a 'relatively good one' and she felt able to take the sandwich and mug into the lounge on a tray to eat it. Elodie stated that she often feels her legs aching when she is standing at the worktops to make food and would like to sit down.

Item D: NICE flowchart for chronic fatigue syndrome/myalgic encephalomyelitis management



National Institute for Health and Care Excellence (NICE) guidelines on chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) management:

1.7 Management of setbacks/relapses:

1.7.1.1 People with CFS/ME should be advised that setbacks/relapses are to be expected as part of CFS/ME.

1.7.1.2 Healthcare professionals and people with CFS/ME should develop a plan for managing setbacks/relapses with the individual and share with others if agreed by individual.

1.7.2.1 Setbacks/relapses may be triggered by factors such as unexpected/unplanned activities, poor sleep, infection, or stress. Healthcare professionals, in discussion with the person with CFS/ME, should try to identify the cause(s).

1.7.2.2 When managing a setback/relapse, the management plan should be reviewed, taking into account the person's experience, possible causes of the setback/relapse, the nature of the symptoms, the severity and duration of the setback/relapse, and the current management plan.

1.7.2.3 When managing setbacks, healthcare professionals should put strategies in place that include a holistic approach.

1.7.3 After a setback/relapse:

1.7.3.1 After a setback/relapse, healthcare professionals should review the person's activity levels to re-establish a baseline and review the management plan. A gradual return, when possible, to previous exercise and functional routines should be encouraged. Activity should be increased gradually.

Adapted from National Institute for Health and Care Excellence (2007). *Chronic fatigue syndrome/myalgic encephalomyelitis: diagnosis and management*. Available at: www.nice.org.uk/guidance/ng206 (Accessed: 15 February 2023).

Item E: management plan

Client:	DOB:
Client likes/strengths	
Multidisciplinary team members/other individuals	

Client goals and actions	
Goal 1	Action 1
	Action 2
Goal 2	Action 1

	Action 2
Goal 3	Action 1
	Action 2

Item F: sleep and relaxation information

How to sleep better

Tired of tossing and turning at night? These simple tips will help you sleep better and be more energetic and productive during the day.

How can I get a better night's sleep?

Sleeping well directly affects your mental and physical health. Fall short and it can take a serious toll on your daytime energy, productivity, emotional balance, and even your weight. Yet many of us regularly toss and turn a night, struggling to get the sleep we need.

Getting a good night's sleep may seem like an impossible goal when you're wide awake at 3am, but you have much more control over the quality of your sleep than you probably realise. Just as the way you feel during your waking hours often hinges on how well you sleep at night, so the cure for sleep difficulties can often be found in your daily routine.

Unhealthy daytime habits and lifestyle choices can leave you tossing and turning at night and adversely affect your mood, brain and heart health, immune system, creativity, vitality, and weight. But by experimenting with the following tips, you can enjoy a better sleep at night, boost your health, and improve how you think and feel during the day.

Tip 1: Keep in sync with your body's natural sleep-wake cycle

Getting in sync with your body's natural sleep-wake cycle, or circadian rhythm, is one of the most important strategies for sleeping better. Even if you keep a regular sleep-wake schedule, you'll feel much more refreshed and energised than if you sleep the same number of hours at different times, even if you only alter your sleep schedule by an hour or 2.

Try to go to sleep and get up at the same time every day. This helps set your body's internal clock and optimise the quality of your sleep. Choose a bedtime when you normally feel tired, so that you don't toss and turn. If you're getting enough sleep, you should wake up naturally without an alarm. If you need an alarm clock, you may need an earlier bedtime.

Avoid sleeping in – even on weekends. The more weekend/weekday sleep schedules differ, the worse the jetlag-like symptoms you'll experience. If you need to make up for a late night, opt for a daytime nap rather than sleeping in. This allows you to pay off your sleep debt without disturbing your natural sleep-wake rhythm.

Be smart about napping. While napping is a good way to make up for lost sleep, if you have trouble falling asleep or staying asleep at night, napping can make things worse. Limit naps to 15 to 20 minutes in the early afternoon.

Start the day with a healthy breakfast. Among lots of other health benefits, eating a balanced breakfast can help sync up your biological clock by letting your body know that it's time to wake up and get going. Skipping breakfast on the other hand, can delay your blood sugar rhythms, lower your energy, and increase your stress, factors that may disrupt sleep.

Fight after-dinner drowsiness. If you get sleepy way before your bedtime, get off the couch and do something mildly stimulating, such as washing the dishes, calling a friend, or getting clothes ready for the next day. If you give in to the drowsiness, you may wake up later in the night and have trouble getting back to sleep.

Tip 2: Control your exposure to light

Melatonin is a naturally occurring hormone controlled by light exposure that helps regulate your sleep-wake cycle. Your brain secretes more melatonin when it's dark—making you sleepy—and less when it's light—making you more alert. However, many aspects of modern life can alter your body's production of melatonin and shift your circadian rhythm. Here's how to influence your exposure to light:

During the day:

Expose yourself to bright sunlight in the morning. The closer to the time you get up, the better. Have your coffee outside, for example, or eat breakfast by a sunny window. The light on your face will help you wake up.

Spend more time outside during daylight. Take your work breaks outside in sunlight, exercise outside, or walk your dog during the day instead of at night.

Let as much natural light into your home or workspace as possible. Keep curtains and blinds open during the day and try to move your desk closer to the window.

If necessary, use a light therapy box. This simulates sunshine and can be especially useful during short winter days.

At night:

Avoid bright screens within 1–2 hours of your bedtime. The blue light emitted by your phone, tablet, computer, or TV is especially disruptive. You can minimise the impact by using devices with smaller screens, turning the brightness down, or using light-altering software such as f.lux.

Say no to late-night television. Not only does the light from a TV suppress melatonin, but many programs are stimulating rather than relaxing. Try listening to music or audio books instead.

Don't read with backlit devices. Tablets that are backlit are more disruptive than e-readers that don't have their own light source.

When it's time to sleep, make sure the room is dark. Use heavy curtains or shades to block light from windows or try a sleep mask. Also consider covering up electronics that emit light.

Keep the lights down if you get up during the night. If you need some light to move around safely, try installing a dim nightlight in the hall or bathroom or using a small flashlight. This will make it easier for you to fall back to sleep.

Tip 3: Exercise during the day

People who exercise regularly sleep better at night and feel less sleepy during the day. Regular exercise also improves the symptoms of insomnia and sleep apnea and increases the amount of time you spend in the deep, restorative stages of sleep.

- the more vigorously you exercise, the more powerful the sleep benefits, but even light exercise—such as walking for just 10 minutes a day—improves sleep quality

- it can take several months of regular activity before you experience the full sleep-promoting effects, so be patient and focus on building an exercise habit that sticks

For better sleep, time your exercise right

Exercise speeds up your metabolism, elevates body temperature, and stimulates hormones such as cortisol. This isn't a problem if you're exercising in the morning or afternoon, but too close to bed and it can interfere with sleep.

Try to finish moderate to vigorous workouts at least 3 hours before bedtime. If you're still experiencing sleep difficulties, move your workouts even earlier. Relaxing, low-impact exercises such as yoga or gentle stretching in the evening can help promote sleep.

Tip 4: Be smart about what you eat and drink

Your daytime eating habits play a role in how well you sleep, especially in the hours before bedtime.

Focus on a heart-healthy diet. It's your overall eating patterns rather than specific foods that can make the biggest difference to your quality of sleep, as well as your overall health. Eating a Mediterranean-type diet rich in vegetables, fruit, and healthy fats—and limited amounts of red meat—may help you to fall asleep faster and stay asleep for longer.

Cut back on sugary foods and refined carbs. Eating lots of sugar and refined carbs such as white bread, white rice, and pasta during the day can trigger wakefulness at night and pull you out of the deep, restorative stages of sleep.

Limit caffeine and nicotine. You might be surprised to know that caffeine can cause sleep problems up to 10 to 12 hours after drinking it! Similarly, smoking is another stimulant that can disrupt your sleep, especially if you smoke close to bedtime.

Avoid big meals at night. Try to make dinnertime earlier in the evening, and avoid heavy, rich foods within 2 hours of bed. Spicy or acidic foods can cause stomach trouble and heartburn.

Avoid alcohol before bed. While a nightcap may help you relax, it interferes with your sleep cycle once you're out.

Avoid drinking too many liquids in the evening. Drinking lots of fluids may result in frequent bathroom trips throughout the night.

Night-time snacks may help you to sleep

For some people, a light snack before bed can help promote sleep. For others, eating before bed leads to indigestion and makes sleeping more difficult. If you need a bedtime snack, try:

- half a turkey sandwich
- a small bowl of whole-grain, low-sugar cereal
- milk or yogurt
- a banana

Tip 5: Wind down and clear your head

Do you often find yourself unable to get to sleep or regularly waking up night after night? Residual stress, worry, and anger from your day can make it very difficult to sleep well. Taking steps to manage your overall stress levels and learning how to curb the worry habit can make it easier to unwind at night. You can also try developing a relaxing bedtime ritual to help you prepare your mind for sleep, such as practicing a relaxation technique, taking a warm bath, or dimming the lights and listening to soft music or an audiobook.

Problems clearing your head at night can also stem from your daytime habits. The more overstimulated your brain becomes during the day, the harder it can be to slow down and unwind at night. Maybe, like many of us, you're constantly interrupting tasks during the day to check your phone, email, or social media. Then when it comes to getting to sleep at night, your brain is so accustomed to seeking fresh stimulation, it becomes difficult to unwind.

Help yourself by setting aside specific times during the day for checking your phone and social media and, as much as possible, try to focus on one task at a time. You'll be better able to calm your mind at bedtime.

A deep breathing exercise to help you sleep

Breathing from your belly rather than your chest can activate the relaxation response and lower your heart rate, blood pressure, and stress levels to help you drift off to sleep:

- lay down in bed and close your eyes
- put one hand on your chest and the other on your stomach
- breathe in through your nose, the hand on your stomach should rise, the hand on your chest should move very little
- exhale through your mouth, pushing out as much air as you can while contracting your abdominal muscles, the hand on your stomach should move in as you exhale, but your other hand should move very little
- continue to breathe in through your nose and out through your mouth, try to inhale enough so that your lower abdomen rises and falls, count slowly as you exhale

A body scan exercise to help you sleep

By focusing your attention on different parts of your body, you can identify where you're holding any stress or tension and release it.

- lie on your back, legs uncrossed, arms relaxed at your sides, eyes closed, focus on your breathing for about 2 minutes until you start to feel relaxed
- turn your focus to the toes of your right foot, notice any tension while continuing to also focus on your breathing
- imagine each deep breath flowing to your toes, remain focused on this area for at least 3 to 5 seconds
- move your focus to the sole of your right foot, tune in to any sensations you feel in that part of your body and imagine each breath flowing from the sole of your foot, then move your focus to your right ankle and repeat
- move to your calf, knee, thigh, hip, and then repeat the sequence for your left leg, from there, move up your torso, through your lower back and abdomen, your upper back and chest, and your shoulders (pay close attention to any area of the body that feels tense)
- after completing the body scan, relax, noting how your body feels (you should feel so relaxed you can easily fall asleep)

Tip 6: Improve your sleep environment

A peaceful bedtime routine sends a powerful signal to your brain that it's time to wind down and let go of the day's stresses. Sometimes even small changes to your environment can make a big difference to your quality of sleep.

Keep your room dark, cool and quiet

Keep noise down. If you can't avoid or eliminate noise from neighbours, traffic, or other people in your household, try masking it with a fan or sound machine. Earplugs may also help.

Keep your room cool. Most people sleep best in a slightly cool room (around 65° F or 18° C) with adequate ventilation. A bedroom that is too hot or too cold can interfere with quality sleep.

Make sure your bed is comfortable. Your bed covers should leave you enough room to stretch and turn comfortably without becoming tangled. If you often wake up with a sore back or an aching neck, you may need to experiment with different levels of mattress firmness, foam toppers, and pillows that provide more or less support.

Reserve your bed for sleep.... By not working, watching TV, or using your phone, tablet, or computer in bed, your brain will associate the bedroom with just sleep ..., which makes it easier to wind down at night.

Tip 7: Learn ways to get back to sleep

It's normal to wake briefly during the night but if you're having trouble falling back asleep, these tips may help:

Stay out of your head. Hard as it may be, try not to stress over your inability to fall asleep again, because that stress only encourages your body to stay awake. To stay out of your head, focus on the feelings in your body or practice breathing exercises. Take a breath in, then breathe out slowly while saying or thinking the word, "Ahhh." Take another breath and repeat.

Make relaxation your goal, not sleep. If you find it hard to fall back asleep, try a relaxation technique such as visualization, progressive muscle relaxation, or meditation, which can be done without even getting out of bed. Even though it's not a replacement for sleep, relaxation can still help rejuvenate your body.

Do a quiet, non-stimulating activity. If you've been awake for more than 15 minutes, get out of bed and do a quiet, non-stimulating activity, such as reading a book. Keep the lights dim and avoid screens so as not to cue your body that it's time to wake up.

Postpone worrying and brainstorming. If you wake during the night feeling anxious about something, make a brief note of it on paper and postpone worrying about it until the next day when it will be easier to resolve. Similarly, if a great idea is keeping you awake, make a note of it on paper and fall back to sleep knowing you'll be much more productive after a good night's rest.

Adapted from: Melinda Smith, M., Robinson L. and Segal R. (2021). *How to Sleep Better*. Available at: www.helpguide.org/articles/sleep/getting-better-sleep.htm (Accessed: 15 February 2023).

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