



T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Supporting the Care of Children and Young People

Assignment 3 - Professional discussion - Pass

Guide standard exemplification materials

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T Level Technical Qualification in Health, Supporting the Care of Children and Young People

Occupational specialism assessment

Guide standard exemplification materials

Supporting the Care of Children and Young People

Assignment 3

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Introduction

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

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

In assignment 3, the student must reflect on their own practice as a form of learning and continuing development. The student must answer questions and discuss their learning experiences in a professional manner.

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

Theme 1: using play or distraction techniques to provide care and support

Using a play or distraction technique to provide care and support and promote self-help and independence to children and young people through a clinical or therapeutic procedure.

Question 1

Part A

Describe a situation when you have used an appropriate therapeutic play strategy or distraction technique to support a child or young person through a clinical or therapeutic procedure.

Part B

Explain why an appropriate therapeutic play strategy or distraction technique provides care and support to a child or young person, referring to your own experience.

Question 2

Part A

Explain how you have applied knowledge of person-centred care to help promote independence and self-help to the child or young person. You should refer to the situation in question 1 in your answer.

Part B

Reflect on how this experience has influenced your practice by identifying any limitations and future development needs.

Student evidence

Question 1

Part A and B

When I was on placement at the hospital, I worked in the education department with teachers and play therapists. My role was to help children learn when they were hospital for a long time. They would come when they felt able to like for an hour or so.

The play therapist asked me to work with 2 girls because they were going to go through a clinical procedure. I had to meet with the girls beforehand to find out some information about them like their ages, how long they have been in hospital and what they are going to have done. I also needed to find out what sort of things they like so I can make the session interesting for them. After I had met with them, I decided to do an arts and craft session where they would paint a glass jar they could keep. I chose this activity because it would be fun and help them to take their mind off what was happening and help them feel less anxious. I explained that they could use the jar to keep things safe, a bit like a treasure chest.

I organised the jars and paints for the session, and they really liked painting the jar and talking about the colours and patterns. They were really pleased with their finished jars and asked if they could do another one. They said that it helped them not to worry about the procedure. I was really pleased it worked well. I think play therapy is a good idea because the session I organised will help to take their mind off the procedure, so they hopefully won't feel scared about it. I think that play therapy helps children to talk about their worries and the jar exercise was fun for them so they may be more confident next time they have to go through something that might be bit frightening.

Question 2

Part A and B

In this situation I used person-centred care because I really thought about the age of the children and what types of activities they might like. I think this type of activity would not be very appropriate for younger children because of the glass. I enjoyed talking with the girls, they were nice, and I think it was important to find out about them before organising a session. I was a bit nervous when I was first asked to do this and was worried, I might not do a good job, but the girls said it was cool so that really boosted my confidence. I think I need to learn more about different play therapy activities I could use with younger children because I know about some of them but wouldn't be exactly sure which would be the best one to use.

Theme 2: working as part of a team

Working as part of a team to support children and young people and their carers specifically, to assist in teaching parenting skills to promote and support health and wellbeing.

Question 3

Part A

Describe the underlying principles behind different parenting skills that can be used to promote the parent and child/young person bond.

Part B

Explain these principles and how they can be used by practitioners to strengthen the parent and child/young person bond.

Question 4

Part A

Explain how you assisted in teaching parenting skills with the aim of promoting the health and wellbeing of a child or young person in your care.

Part B

Reflect on working as part of a team within the scope of your role and responsibilities and from this, identify any future developmental needs.

Student evidence

Question 3

Part A and B

There are numerous principles behind parenting skills that can promote bonding. Examples might include:

Consistency – the parent being clear about their expectations of the child. This will help the child feel more secure in the relationship. The child needs to know what they can and can't do.

Appropriate boundaries – like bedtimes, mealtimes, being told off/rules. All need to be appropriate to age and must be given consistently otherwise they won't work.

Love and nurture – affection like cuddles, telling the child when they have done something well, giving them praise.

Engagement – doing things together and giving eye contact so the child knows you are interested in them.

All of these principles are really important in parenting, Practitioners can support parents in the bonding process by teaching parents about these principles. Some parents may not realise how important some principles are, particularly eye contact and clear boundaries. Explaining all of these principles will help parents understand bonding and what they can do to help the relationship with their child.

Question 4

Part A and B

When I was on placement at the nursey school, I helped in assisting a senior nursery assistant in a talk with parents who were having difficulties with their 4 year old. I helped by getting some examples together of reward charts that the parents could use and I went through a leaflet with them that the nursery had designed called 'Top Tips for Clear Communication'. I learnt a lot from this experience. I liked helping to support the parents with their child. I think more understanding of development in babies would be useful because I feel more confident working with older children. Also working as part of a team was fun and I enjoyed listening to the other team members and have realised you can learn a lot from working with different people. I enjoyed being part of a team although I was a bit nervous because it was the first time working in a team like this. I think I worked well in the team, I listened well and followed instructions, I need to develop my confidence in putting my ideas forward.

Theme 3: Following good practice

Following good practice when assisting with designated clinical tasks. Specifically undertaking 2 physiological measurements, including the importance of making reasonable adjustments for the child or young person and accurate record keeping.

Question 5

Part A

Common physiological measurements include weight, height and body temperature. Referring to your own experience, identify 2 other common physiological measurements and outline the method you used to take them in the treatment of a child or young person.

Part B

Explain the importance of recording results of physiological measurements accurately. You **must** refer to the experience outlined in question **5A** in your response.

Question 6

Part A

Evaluate your experience of meeting the individual needs of a child or young person's reasonable adjustments during routine clinical tasks.

Part B

Analyse how you upheld good working practice when carrying out routine clinical tasks, identifying any areas for future development.

Student evidence

Question 5

Part A and B

I measured blood sugar using a pen that pricked the finger to draw a little bit of blood. I used this on placement at the GP practice when the nurse asked me to test the blood of a 14 year old patient. I asked them to hold out their hand and I cleaned their index finger before using the pen. I then used a test strip and put it on the blood and then put this in the test machine. The machine gives you a blood sugar reading.

I also used a pulse oximeter with this patient to measure their pulse rate. This was easy to do as it just clips onto their finger.

It is important to report results like this accurately as they are used to determine what might be wrong with a patient. If you did not record them accurately, they might end up having the wrong treatment which might make them worse. In my patient, it was really important that I recorded these accurately as they had diabetes. That was being monitored and inaccurate results could lead the GP to change their medication or treatment incorrectly.

Question 6

Part A and B

There have been a few separate occasions when I have met individual needs. The girl who had diabetes was only 14 years old. I made sure that I communicated well with her by asking questions about herself to help her feel relaxed and by explaining what I was doing. I made sure I spoke clearly and was friendly. I could see that she was upset, and I asked her if she was okay. She said that she hated having diabetes because she must think about what foods she must avoid, and it felt difficult. I responded that I understood it must be hard but there is a lot of support available especially for young people with diabetes and I could give her some information. I also asked if she could speak to someone in her family and she said her mum. She seemed to brighten up a bit after that. I was pleased I could help.

I always uphold good practice by following the right policies and procedures. Sometimes this means double checking them if I can't remember, but I would rather do something a little slower and get it right than rush and make a mistake. I'm also good at all of the hygiene steps I need to follow. A development area for me is definitely feeding back to families. I don't know if it's because of my age but I don't feel like they would really listen to me yet. I need to work on my communication skills to improve this I think.

Examiner commentary

The evidence presented shows an understanding of the topic areas selected and the answers provided meet the demands of each question. The student has been able to draw on their own placement experiences to demonstrate their understanding of working in a person-centred way, for example in theme one using play therapy techniques. Their reflections demonstrate they understand the needs of different patients and some of the ways care can be adapted to meet their needs. They have shown they understand and respond appropriately when undertaking physiological measurements, for example in theme 3, and in relation to their patient with diabetes. Although the facts are understood, for example in relation to the procedures for physiological measurements, they are brief in detail in places and occasionally lack technical terminology. The student was able to suitably reflect on their own practice including working as part of a team, identifying areas for further development, for example in theme 2 they identified the need to develop the skill of speaking up within a team and sharing ideas. They are aware of the limits of their own role and how to promote safe and effective care.

Overall grade descriptors

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

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

Occupational specialism grade descriptors *

Grade	Demonstration of attainment
Pass	<p>A pass grade student can:</p> <ul style="list-style-type: none"> • communicate the relationship between person centred care and health and safety requirements in healthcare delivery by: <ul style="list-style-type: none"> ○ demonstrating working in a person-centred way, taking relevant and sufficient precautions to protect the safety and physical and mental wellbeing of individuals ○ recognising and responding to relevant healthcare principles when implementing duty of care and candour, including demonstrating sufficient knowledge of safeguarding individuals and maintaining confidentiality ○ following standards, codes of conduct and health and safety requirements/legislation to maintain a sufficiently safe working environment ○ demonstrating use of an adequate range of techniques, equipment and resources safely to promote sufficient levels of cleanliness and decontamination required for satisfactory infection prevention and control • communicate knowledge of national and local structures, definitions of clinical interventions and the scope and limitations of their healthcare role within it, by: <ul style="list-style-type: none"> ○ adequately following current best practice and codes of conduct across relevant boundaries, relevant to assisting with scenario specific, clinical and therapeutic interventions ○ working adequately as part of a team to assist registered health professionals with delegated tasks and interventions, supporting individuals to meet their care needs to a satisfactory standard (including maintaining individual's privacy and dignity) and communicating effectively, contributing to handovers, seeking help, advice and information, and responding sufficiently to service users views to maintain effective provision of services ○ gathering sufficient evidence, contributing to, following and recording information in care plans/records relevant to tasks and interventions, structuring these sufficiently to allow understanding in line with local and national legislation and policies and preserving individuals' rights ○ maintaining a record of professional development with evidence of using feedback to develop knowledge, skills, values and behaviours consistently with sufficient ability to reflect on practice and thereby improve performance adequately • communicate sufficiently reliable levels of knowledge of the physiological states that are

Grade	Demonstration of attainment
	<p>commonly measured by healthcare support workers including why, when and what equipment/techniques are used by:</p> <ul style="list-style-type: none"> ○ working as part of a team to use relevant equipment effectively and safely and following correct monitoring processes ○ calculating scores, reporting and differentiation of normal and abnormal results to the relevant registered professional ○ applying knowledge of policy and good practice techniques when undertaking all physiological measurements, checking when uncertain and consistent with instructions and guidance
Distinction	<p>A distinction grade student can:</p> <ul style="list-style-type: none"> ● communicate adeptly the relationship between person centred care and health and safety requirements in healthcare delivery by: <ul style="list-style-type: none"> ○ demonstrating flexible and constructive person-centred care, taking appropriate precautions reliably, making sound decisions to protect the safety and physical and mental wellbeing of individuals ○ alertness and responsiveness to relevant healthcare principles when implementing duty of care and candour, including the demonstration of exceptional sensitivity and accurate knowledge of safeguarding individuals and maintaining confidentiality ○ commitment to following all required standards, codes of conduct and health and safety requirements/legislation decisively to maintain a safe, healthy working environment ○ demonstrating proficient use of an extensive range of techniques to promote optimum levels of cleanliness and decontamination required for effective infection prevention and control ● communicate knowledge of national and local structures, definitions of clinical interventions and the scope and limitations of their healthcare role within it, by: <ul style="list-style-type: none"> ○ following current best practice and agreed ways of working highly relevant to assisting with scenario specific, care-related tasks consistently and reliably, whilst fully supporting individuals to meet their care needs including maintaining the individual's privacy and dignity to a high standard ○ working adequately as part of a team to assist registered health professionals with delegated tasks and interventions, supporting individuals to meet their care needs to a satisfactory standard (including maintaining individual's privacy and dignity and communicating effectively), contributing to handovers, seeking help, advice and information, and responding sufficiently to service users views to maintain effective provision of services ○ gathering extensive evidence consistently, interpreting, contributing to, following and recording information in care plans/records highly relevant to tasks and interventions, structured accurately and legibly and in line with local and national policies, while preserving and promoting individuals' rights ○ maintaining a record of professional development to develop knowledge, skills, values and

Grade	Demonstration of attainment
	<p>behaviours consistently with the ability to reflect on practice enthusiastically, using the feedback to initiate new learning and personal practice development to improve performance with developing proficiency</p> <ul style="list-style-type: none"> • communicate exceptional levels of knowledge of the physiological states that are commonly measured by healthcare support workers including why, when and what equipment/techniques are used by: <ul style="list-style-type: none"> ○ working as part of a team to use relevant equipment accurately and safely, and consistently following correct monitoring processes ○ calculating scores, reporting the differentiation of normal and abnormal results adeptly, consistently and reliably to the relevant registered professional ○ applying knowledge of policy and good practice techniques proficiently when undertaking all physiological measurements, checking when uncertain, solving problems, and following instructions and guidance with energy and enthusiasm

* “threshold competence” refers to a level of competence that:

- signifies that a student is well placed to develop full occupational competence, with further support and development, once in employment
- is as close to full occupational competence as can be reasonably expected of a student studying the TQ in a classroom-based setting (for example in the classroom, workshops, simulated working and (where appropriate) supervised working environments)
- signifies that a student has achieved the level for a pass in relation to the relevant occupational specialism component

Document information

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Change History Record

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v1.0	Published final version.		June 2021
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