

**Title: New graduate midwives'
experiences of their transition
support programs**

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Master of Midwifery (Hons)

CERTIFICATE OF AUTHORSHIP/ORIGINALITY

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

Signature of Student

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ABSTRACT

Background: The transition from student to registered midwife is a critical period for a new graduate. The literature suggests that well-designed ‘transition support programs’ (TSPs) assist graduates to successfully take up their roles as registered clinicians. While TSPs for midwives exist in NSW, Australia, there appears to be an adhoc approach to their design, implementation and effectiveness.

Aim: To identify the type of support offered to newly graduated midwives during their transition year and to increase knowledge and understanding of new midwives’ expectations and experiences of this support.

Method: This descriptive qualitative study was undertaken in three phases. In phase one 14 maternity hospitals within three Sydney Area Health Services (AHS) provided details of their TSPs. In phase two, 31 newly graduated midwives participated in telephone interviews (18 at the beginning of their transition year and 29 at the end). An additional 7 participated in focus groups. In phase three interviews with 16 experienced midwives canvassed perceptions of the support their facility offered the new graduates. Latent and manifest content analysis was used to analyse the data.

Findings: The approach to transition support varied across and within AHSs: some sites offered no program. Whilst differences existed between the TSPs they shared common elements such as clinical rotations and study days. At the beginning of their TSP midwives expected that the opportunities provided to them would consolidate their knowledge and clinical skills. In addition they expected to be supported by colleagues to gain confidence. On completion of their transition period, some midwives’ experiences were at odds with the details of the programs initially outlined by the AHSs. The discrepancy between the expected and actual program resulted in increased stress and anxiety for midwives, especially in birth suite. Midwives were critical of the lack of promised supernumerary time

as well as limited access to midwifery continuity of care models. While approximately 60% believed that they had met their goals and been well supported more than 16% of the midwives had left their TSP before the end of their first year of clinical practice.

Conclusion: This study has provided a unique insight into the expectations and experiences of midwives as they start their professional careers. It has also provided much needed information on the structure and content of programs offered within three AHSs. It is anticipated that the findings will provide evidence to assist in the development of TSPs that successfully meet the needs of the graduate, the childbearing women they care for and the organisations in which they work.