



## Students' perceptions of the follow-through experience in 3 year bachelor of midwifery programmes in Australia

Joanne Gray, RM RN BHlthSc MNurs PhD (Associate Dean: Teaching and Learning), Nicky Leap, RM MM DMid (Adjunct Professor of Midwifery), Annabel Sheehy, RM BMid (Hons) (Research Midwife), Caroline S.E. Homer, RM MN MMedSc (ClinEpi) PhD (Professor of Midwifery)\*

Centre for Midwifery, Child and Family Health, Faculty of Health, University of Technology Sydney, PO Box 123, Broadway NSW 2007 Australia

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### ABSTRACT

**Background:** providing opportunities for students to participate in midwifery continuity of care experiences is a challenge in many midwifery education programmes. The 'follow-through experience' was a deliberate strategy introduced into midwifery education programmes in Australia to ensure that students experienced midwifery continuity of care. The follow through experience provides an opportunity for midwifery students to follow a pre-determined number of women through pregnancy, labour and birth and into the early parenting period.

**Aim:** the aim of this study was to explore the follow-through experience in the 3 year Bachelor of Midwifery (direct entry) in Australia to better understand its impact on midwifery students and to identify the learning that is associated with this experience.

**Methods:** a qualitative methodology was used. Data were collected from former and current Bachelor of Midwifery students through a survey and telephone interviews. Students from all 3-year pre-registration Bachelor of Midwifery programmes in Australia were invited to participate. A thematic analysis was undertaken. Constructivist learning theories were used to identify whether learning occurred in the context of the follow-through experience.

**Findings:** students do learn from their engagement in midwifery continuity of care experiences. Learning was characterised by the primacy of the relationship with the women. Students also identified the challenges they faced which included recruitment of women and finding the time to fully engage with the follow-through experience. Difficulties were identified around the different requirements of the follow-through experience, the lack of support at times for students and the incongruence with the existing maternity system. These issues impacted on students' ability to engage in and maximise their learning.

**Conclusions:** the follow-through experience is an innovative midwifery education strategy that facilitates learning for midwifery students. Challenges need to be addressed at a systematic level and new strategies developed to support the learning opportunities presented by the follow-through experience.

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### Introduction

In Australia, registration as a midwife can be gained through both undergraduate and post-graduate (post-nursing) programmes, including double degree programmes in nursing and midwifery. As there are a number of different programmes in Australia that lead to registration as a midwife, for clarity, this research focussed only on the 3 year Bachelor of Midwifery programmes. In Australia, students in Bachelor of Midwifery

3-year (direct entry) programmes follow a traditional university pathway where they attend classes during semester and are placed in the clinical setting (usually a hospital's maternity unit) for a block period of time. During this time, students are unpaid and supernumerary to the staffing of the maternity units. In addition to this rostered clinical experience, students undertake what was initially called the 'follow-through experience'.

At the time of its introduction, the follow-through experience was an innovation in midwifery education in Australia. A similar type of experience, known as caseloading, can however be found in some programmes in the UK (Rawnsion, 2011). The follow-through experience provides midwifery students with an opportunity to provide continuity of care to women during pregnancy,

\* Corresponding author.

E-mail address: [caroline.homer@uts.edu.au](mailto:caroline.homer@uts.edu.au) (C.S.E. Homer).

labour and birth and the early parenting period (Hattem et al., 2008). Essentially, the follow-through experience requires the student to meet with a woman during her pregnancy on a regular basis, attend the woman's birth and meet with her in the early postpartum period.

The follow-through experience was first written into the 'Standards for Accreditation of 3 Year Bachelor of Midwifery Programmes' in Australia in 2001 (Australian College of Midwives, 2001), as a means to ensure students experienced continuity of care. The first 3-year Bachelor of Midwifery direct entry programmes began in Australia in 2002. The follow-through experience is now included in all Australian pre-registration midwifery programmes including post-graduate diplomas in midwifery. The follow-through experience was initially defined as:

..... the ongoing midwifery relationship between the student and the woman from initial contact in early pregnancy through to the weeks immediately after the woman has given birth, across the interface between community and hospital settings. Where the program is a three (3) year Bachelor of Midwifery, in the second and third year 'follow-through' will include students providing midwifery care to women with appropriate supervision (Australian College of Midwives, 2001, p. 2).

At the time, the follow-through experience was a new concept for midwifery education in Australia as no pre-registration midwifery programmes had placed such emphasis on students developing relationships with women or engaging in midwifery continuity of care. The original concept of the follow-through experience aimed to be 'placements with women', rather than 'placements within institutions' providing an opportunity for the student to experience the midwife–mother relationship (Kirkham, 2000). The other intention of the follow-through experience was to enable students to spend time with women between the hospital and community settings to ensure that their midwifery experience was not limited to the standard clinical placements in the hospital. Experience of midwifery continuity of care was important for students as few of these opportunities existed in Australia at the time as reflected in the literature (ACMI, 1999; Brodie, 2002; Leap, 2003; Homer et al., 2008).

The follow-through experience in Australia is based on similar experiences in New Zealand, Canada and the UK, but required adaptation for the Australian setting (Leap and Barclay, 2002). The original Australian national standards required students to complete 30 follow-through experiences during their 3-year programme: however, there was considerable variation across universities about how they were managed. Differences included recruitment procedures, guidelines for meeting with women, documentation of the experience, requirement for academic assessment and the requirement for attendance during labour and birth. Anecdotally, there have also been questions as to the usefulness of the follow-through experience in terms of student's learning and whether it is worth all the challenges. It was important, therefore, to examine this experience and its contribution to student learning.

The aim of the study was to explore the follow-through experience in order to better understand its impact on students and to identify the associated learning (Gray, 2010). A multi-method study was undertaken with data collected during 2006 and 2007 using a national survey, telephone interviews with students and interviews with key stakeholders and midwifery course co-ordinators. This paper only presents data from the telephone interviews.

## Methods

A qualitative descriptive design was used. Data were collected from 28 former and current Bachelor of Midwifery students

through telephone interviews. Ethical approval was gained from the University's Human Research Ethics Committee.

Three-year, pre-registration Bachelor of Midwifery students and recent graduates from this programme were invited to participate. At the time of the study there were six active programmes in Australia in three jurisdictions {Victoria (3), New South Wales (1) and South Australia (2)}. Data from these universities indicated that at point of data collection, there were approximately 150 graduates from these programmes with 450 students enrolled.

Participants were recruited for the survey through advertising in *Australian Midwifery News* (the newsletter of the Australian College of Midwives), on the Australian College of Midwives website and through the Bachelor of Midwifery Student Collective (an online discussion forum). Participants were provided with a web address for the survey, assured anonymity in participation and provided with contact details for the researcher. Out of the 101 students who responded to the survey, 65 completed an additional section of the survey indicating their willingness to participate in telephone interviews.

A random sample of these 65 participants was selected across each state and from each year of the programme, as well as graduates. The researcher made contact with the students and the timing of the interviews was arranged. The participants were sent a consent form, information sheet and the questions prior to the interview. *The interviews were conducted in 2007.*

Telephone interviews enabled the inclusion of participants from a wide variety of geographical locations in Australia. Although the interviews used targeted questions, they were semi-structured as it was important for the student to be able to give their own interpretation of their experiences (see Fig. 1). The length of the interviews varied with the maximum being 1 hr. Participants were reminded throughout the interview that it was being recorded. Confidentiality was maintained throughout as all identifying factors have been removed. Participants were informed they could withdraw from the research at any time they wished.

As the first author was the course co-coordinator of the programme in one state, to ensure anonymity, a midwifery colleague who had experience working with undergraduate midwifery students conducted the interviews in that state and their recorded interviews were not listened to by the first author. She only had access to the transcribed data which was de-identified. The telephone interviews were recorded using a digital recording device and transcribed verbatim by an independent transcribing service.

Data collection ceased after 28 interviews were undertaken due to data saturation. The sample was representative across all years of student enrolment, completed students and the jurisdictions in which the students were enrolled (Table 1).

Inductive analysis of data was conducted using a thematic analysis method to intentionally seek meanings related to this

1. Tell me about how the follow-through experience is/was organised in your course?
2. Did you enjoy your participation in the follow-through experience?
3. What do you feel that you learnt from your involvement in the follow-through experience?
  - a. **Follow-up:** How do you know that you achieved learning from this experience?
4. Do you feel that the follow-through experience is/was a necessary part of your course?
  - a. **Follow-up:** Why was this?
5. Do you think that the requirement of 30 experiences is realistic?
  - a. **Follow-up:** If not, what would be a better number?
6. What do you feel are/were the features of this experience that assisted your learning?
7. What do you feel are/were the features of this experience that did not assist your learning?
8. Is there anything else that you like to tell me about the follow-through experience

Fig. 1. Telephone Interview Questions.

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