

Reflection On Primary Under Supervision Experiences

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I experienced quite a bit of personal and professional growth this term and wrapped up my clinical experiences for this class feeling confident as well as filled with excitement about meeting my future goals. While I am taking CLNC 3040 concurrently with this class during this term, I decided to break up my reflection upon experiences based on when I submitted my clinical experience logs and hours for this class so that I could show appropriate progression in skills and the building upon the experiences I had encompassing the hours needed for CLNC 3030.

My biggest accomplishment for this class was completing my first two continuity of care clients. I had been seeing both of these clients since I was in Phase Two and it was an amazing feeling to be able to participate in their care. Both births were straightforward and fairly fast, and while I recognize the importance of having some experience with complications prior to graduating, these births boosted my confidence in a way that positively impacted how I approach my role in client's care as the Primary Under Supervision student. I received positive feedback from both clients as well as my preceptor throughout care. My preceptor had been asking me to be more of the primary - to really step into that role - which I was struggling with due to a very negative experience with my first preceptor. When reviewing these births, my preceptor was pleased with how I managed the births. Her only comment was that when I walk into a birth where things are moving quickly I need to assess what needs doing first rather than "going by the books". This comment was due to me trying to get antibiotics set up at one of the births when it was pretty obvious the birth was imminent. I realized after the fact that even though the plan had been to give the client the IV antibiotics for GBS that the birth was going to happen either while I was administering them or shortly after and the more appropriate response would have

been discussing that with the client and seeing what they wanted rather than stepping away to prepare the medication.

The other birth I attended this term was not a continuity of care client, however like the other two births I had seen this client frequently in Phase Two as well as Phase Three and so had developed a great relationship with them. This birth also boosted my confidence as it was not a typical labor or birth and did not go the way any of us had thought it would. I was able to really use skills and information that was presented in my MDWF 3030 class last term to help reduce a compound hand presentation easily and without hesitation or anxiety. I know if this birth had been one of my firsts in Phase Three I would have been very nervous about trying to do anything manually to help with the delivery and my confidence about knowing when it was appropriate to intervene would not have been the same. As it was, the birth went smoothly with only minimal assistance from me and everyone was very pleased with the outcome.

The biggest challenge I have encountered is the lack of opportunity to do cervical and vaginal exams. My preceptor is very open to me doing them, provided the client consents, however there just haven't been a lot of clinical situations where one is warranted. I was able to do one cervical exam during a prenatal appointment and I will say that my heart kind of sank a little as I was able to very easily feel the baby's head but could not find the cervix at all. When debriefing with my preceptor she agreed that in that particular case the cervix was not easy to find and that with more practice I would get it eventually. I know this to be true - like any skill it takes time and practice - however I tend to be hard on myself when things don't come naturally to me. I have heard many midwives, nurses, and hospital providers say that it took them a year or longer to really get confident with cervical exams so I try and keep that in perspective as well.

My current placement is night and day compared to what I was experiencing two years ago. I feel well supported and like my preceptor is very invested in my education and progression as a midwife. I have noticed more and more that I am able to rely on that and not second-guess myself or the safety of this placement. This has changed my learning and growth patterns for the better, as I really do feel good about making and voicing my opinions and clinical suggestions. Rather than waiting for the invitation to step forward or do a thing that is needed in the moment, I just do it and know that if my preceptor has a concern she will voice it in a non-harmful or hurtful way and correct things with an explanation as to why. This has only happened a handful of times, however even in these moments I feel supported and know how invaluable the experience was. I spend time reflecting on each birthing experience along with clinical encounters with some frequency, knowing that I can approach my preceptor with thoughts or questions at any time. This has supported the growth and development of my clinical judgment so much over the past few months.