
FOR A NEW MIDWIFE IN A SMALL HOSPITAL, AND THE LEADERS WHO SUPPORT HER

A first-year plan for a new midwife

New midwives in hospitals with low birth numbers often have no other midwife nearby. A plan with a mentor outside the physician chain, and with set points where the midwife and her leaders check in, helps her grow in judgment, feel supported and stay. Adjust every date and milestone to your hospital, your volumes and your credentialing rules.

Before day one

FOCUS	Credentialing and privileges; state license and prescriptive authority confirmed; orientation scheduled; introductions to the physicians, nurses, ED and lab leads the midwife will rely on.
MENTORING	Mentor call to set goals and share what to expect.
LEADERS	Leaders agree on scope of practice, call expectations and who the midwife calls first for a consult.

Weeks 1 to 4

FOCUS	Orientation to the unit, protocols, equipment and charting. Shadow, then see patients with a colleague close by. Walk through the consult and transfer pathways and the emergency drills.
MENTORING	Weekly mentor call.
LEADERS	Leader check-in at week 2 and week 4: what is going well, what is missing.

Months 2 and 3

FOCUS	Independent clinic as privileges allow. First supervised call shifts. Join a drill. Bring two or three cases to the mentor for reflection each month.
MENTORING	Calls every two weeks, plus on-demand calls when a question can't wait.
LEADERS	30- and 90-day review with the midwife and her leaders against the milestones below.

Months 4 to 6

Illustrative sample. Adjust to your hospital, volumes and credentialing rules. catchmentnursing.com

FOCUS	independent call as privileges allow. Practice the consult and transfer conversations, including the hard ones. Start a small project the unit needs, such as a protocol update or a patient handout.
MENTORING	Monthly mentor call plus on-demand.
LEADERS	Six-month review: workload, call burden, relationships with colleagues, and whether the role is what everyone expected.

Months 7 to 12

FOCUS	Take the lead on a drill or teaching session. Precept or orient the next new colleague, if the unit has one. Plan the second year: skills to deepen, scope to grow.
MENTORING	Monthly mentor call, tapering as confidence allows.
LEADERS	Twelve-month review and a second-year plan agreed with leaders.

Milestones to agree on in the first month

MILESTONE	TARGET	DONE
Privileges granted and orientation complete		☐
Independent clinic visits		☐
First supervised call shift		☐
Independent call		☐
Has used each consult and transfer pathway at least once, in practice or in a drill		☐
Has taken part in an emergency drill		☐
Six-month and twelve-month reviews held		☐

Mentoring supports the midwife’s judgment and growth. It does not replace your hospital’s consult and transfer pathways or physician backup.