THE ROLE OF THE CLINICAL FELLOWSHIP IN DEVELOPING EVIDENCE-BASED CLINICIANS

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WHAT IS EBP?
Evidence-based practice (EBP) is a method for clinical decision-making that integrates the best current evidence with clinical experience and client preferences (Sackett et al., 2000; Ylvisaker et al., 2002) within a context of resource availability (DiCenso et al., 1998). When practicing from an evidence-based perspective, clinicians must critically evaluate their choices for assessment and treatment of individual clients. EBP shifts the focus from intuition/judgment-driven to data-driven care (Frattali & Worrall, 2002).

WHY EBP?
Potential benefits of EBP include: improved quality of care, increased accountability, encouragement of critical science, shaping the focus of clinical research, & creating unity between academic and clinical enterprises (Apel, 1999; Apel & Scudder, 2005; Apel & Self, 2003; Dollaghan, 2004; Justice & Fey, 2004).

PURPOSE OF CURRENT STUDY
Several studies have demonstrated the importance of EBP across disciplines, yet highlight barriers to achieving EBP implementation (e.g., McAlistier et al., 1999; Meline & Paradiso, 2003; Pollock et al., 2003; Rappolt & Tassone, 2003). The onus has fallen largely on academic programs to teach requisite knowledge and skills. Zipoli and Kennedy (2005) suggested that implementation of EBP was best predicted by BOTH exposure to EBP in graduate school as well as during the Clinical Fellowship (CF). It is hypothesized that training future evidence-based clinicians requires both knowledge & skills as well as practical strategies to achieve EBP in everyday practice. The purpose of the current survey study was to describe knowledge, attitudes, beliefs, and use of EBP among recent alumni from Portland State University and their CF supervisors, and to relate these to the graduate school and CF experiences.

REFERENCES
- Ashley Shank, who assisted with data cleaning.

CONCLUSIONS
- Recent PSU Alumni reported they possess adequate knowledge and skills for EBP.
- Alumni reported barriers to EBP (time, resources, evidence) similar to literature.
- Alumni reported stronger EBP focus in graduate school compared to CF experiences.
- CF Supervisors reported they possess adequate knowledge and skills for EBP.
- Supervisors reported time and evidence as main barriers to EBP.
- Supervisors reported stronger EBP focus in graduate school compared to CF experiences.
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- Supervisors reported stronger EBP focus in graduate school compared to CF experiences.

RECOMMENDATIONS
- Continue to make evidence resources (e.g., practice guidelines, Web resources) available.
- Explore methods to ensure CF supervisors have the knowledge and skills to conduct EBP.
- Consider transition programs to facilitate transfer of EBP knowledge & skills into the CF.
- Consider training workshops to teach knowledge and skills to access, evaluate, and integrate research findings into everyday clinical practice, especially.
- "Train the Trainer" workshops for Supervisors.

FUTURE RESEARCH
- Re-analyze data to predict use of EBP based on grad school and CF experiences.
- Replicate survey at national level.
- Evaluate impact of explicit CF supervisor training on mentee use of EBP.