

Can evidence-based practice be **disempowering** for allied health clinicians?

An exploration of the experiences of speech pathologists working in acute aphasia management

Evidence-based practice (EBP) demonstrates **effectiveness** and **efficiency** in clinical practice. It requires the **integration** of



Evidence-based **aphasia** services in the **acute hospital** setting:

- Improve communication outcomes
- Reduce adverse events
- Increase patient satisfaction



Current aphasia services provision in acute hospitals is **not** consistent with best-practice.



Semi-structured, in depth **interviews**



14 Australian **speech pathologists**



Inductive **thematic analysis**



To understand SPs' concept of EBP for acute aphasia

Restricted conceptualisation of EBP



Uneven weighting of different streams of evidence

Poor relationship with the research literature



Perceived lack of clinical utility within research

Unmet desire to provide best practice to people with aphasia



Perception of evidence-practice gap

Disempowering influence of EBP on acute aphasia management
"EBP is in the back of your mind, but there's nothing I can do about it"

Recommendations:



Improve **knowledge transfer & exchange**



Build **confidence, self-efficacy & agency** in SPs



Support **relationship centred** model of care



Enhance **communication culture** in acute hospitals