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## Section 3: Clinical Expertise Component



### Overview

For this module, the strategies related to determining clinical expertise are reviewed.

### Objectives

Identify the key strategies to implementation of evidence-based practice.

### Key Points

- Clinical Expertise is a fundamental source of knowledge for the development of an Evidence Based Practice project. Expert clinicians should be included in every step of project development.
- Clinical experts can help drive the search toward the discovery of evidence and give it context.<sup>2</sup>
- Data can be gathered from Clinical Experts through Interviews, emails, lecture notes, and personal interactions. Clinical Expertise recommendation may be included in the evidence table along with literature based evidence.
- Clinical Experts should attend project meetings as part of the team.
- Clinicians must be astute in determining the best research evidence relevant to a clinical problem or issue and apply their expertise not only in assessing the patient's problem but must also incorporate patient preferences or values before making management recommendations.<sup>4</sup>
- The clinical expert not only knows what needs to be achieved, based on mature and practiced situational discrimination, but knows how to achieve the goal as well. This refined discriminatory ability is what separates the expert from the proficient performer.<sup>3</sup>
- Expert practice is characterized by increased intuitive links between salient issues in the situation and ways of responding to them.<sup>6</sup>
- Clinical experts are seen as linking knowledge to practice with some clinical leadership and clinical scholarship skills displayed as well.<sup>5</sup>
- Clinical expert: hybrid of practical and theoretical knowledge. Clinically expert nurses are distinguished from their colleagues by their ability to efficiently make critical clinical decisions while grasping the whole nature of a situation.<sup>1</sup>
- Expertise influences nurses' clinical judgment and quality of care and develops when a nurse tests and refines both theoretical and practical knowledge in actual clinical situations. Further, expert nurses can recognize unexpected clinical responses and can alert others to potential problems before they occur.<sup>1</sup>
- "Expert" is defined (Oxford English Dictionary) as having special skill at a task or knowledge in a subject. Expertise should embrace both skills and knowledge. Expert nurses can be construed as a relatively expensive resource. Unless their value can be articulated, there is a risk that they can be perceived as replaceable by prescriptive guidelines.<sup>7</sup>
- The level of knowledge and skills developed by experts' results in them performing expert care without conscious awareness of the knowledge being used. This suggest clinical experts can rapidly and accurately assess a situation, execute appropriate decisions and high quality care, without consciously working through various alternatives. This combination of tactile, experiential, and theoretical knowledge produces best practice.<sup>7</sup>
- The local expert practitioner can assist with contextualizing the literature, provide a deep understanding of the population served and ensure that the project is more likely to be successfully implemented and sustained.

- Non-local experts can be accessed through professional organizations, clinical guidelines and editorial or other opinion pieces in the literature and can provide additional information and nuance for the interpretation of the research literature.

### Suggested Activities

Review the following articles and discuss:

<sup>1</sup>McHugh, M. & Lake, E. (2010). Understanding Clinical Expertise: Nurse Education, Experience, and the Hospital Context. *Research in Nursing & Health*. 33(4): 276-287. doi: 10.1002/nur.20388

<sup>2</sup>Ginex, P. (2018). Integrate Evidence with Clinical Expertise and Patient Preferences and Values. *Oncology Nursing Society (ONS) Voice*. March 22, 2018. <https://voice.ons.org/>

<sup>3</sup>Benner, P., Tanner, C., & Chesla, C. (1996). *Expertise in Nursing Practice: Caring, Clinical Judgment, and Ethics*. Springer Publishing Company (New York, New York). ISBN: 0-8261-8700-5

<sup>4</sup>Haynes, R., Devereaux, P., & Guyatt, G. (2002). Clinical Expertise in the Era of Evidenced Based Medicine and Patient Choice. *EBM Notebook*. 36 Volume 7 March/April 2002. doi: 10.1136ebm.7.2.36

<sup>5</sup>Mannix, J., Wilkes, L., & Jackson, D. (2013). Marking out the clinical expert/clinical leader/clinical scholar: perspectives from nurses in the clinical arena. *BMC Nursing*. 2013; 12:12. doi: 10.1186/1472-6955-12-12

<sup>6</sup>Benner, P. *From Novice to Expert: Excellence and power in clinical nursing practice*. Menlo Park, CA: Addison-Wesley; 1984.

<sup>7</sup>Christensen, M. & Hewitt-Taylor, J. (2005). From expert to tasks, expert nursing practice redefined? *Issues in Clinical Nursing* 15, 1531-1539. doi: 10.1111/j.1365-2702.2006.01601.x

### Discussion Questions

Ask participants to review topics of interest. Generate a discussion on ‘what makes a clinical expert?’

Questions can include:

1. What makes a clinical expert?
2. When would you seek a clinical expert?
3. What benefit would including a clinical expert in your clinical or systems questions bring?
4. What are the risks of not including a clinical expert on your team?

### Personal Commitment to EBP Exercise

1. Ask participants to reflect on complex issues that have benefitted by using a clinical expert. Share those lessons learned.
2. Identify who the clinical experts would be for your proposed project
  - a. Who should be on the team?
  - b. Who should be consulted for additional information?
3. What professional organizations and/or guidelines should be accessed?
4. How will you use what you learned in this lesson?

### Suggested Time: 90 mins