

British Aphasiology Society

NEWSLETTER SUMMER 2006

BAS Research in Progress Meeting

CALL FOR PAPERS

Would you like the opportunity to present your current work with an extended time for discussion and questions?

The next research in progress meeting will be held at Newcastle University on 2nd November 2006.

The theme for the day will be 'Verbs and Sentences'.

We would welcome abstracts on ongoing or prospective studies related to this topic.

Please email your abstract (max 300 words) to

Janet Webster: janet.webster@ncl.ac.uk by 31st July 2006.

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An invitation to join the BAS committee

September is approaching faster than you think! And with it comes the BAS Therapy Symposium in Plymouth ...and the AGM!! Over the next few months we are making some slight organisational changes to the way the committee operates, and in September 2006 several committee members will be standing down completely and others will be standing for re-election.

We are keen to see new members joining the committee at this stage, so if you have always thought you might welcome this opportunity, or if you have a colleague who needs a nudge in this direction, then we would be delighted to hear from you. You will see from the attached nominations form that we are particularly looking to recruit to certain posts, & we are therefore asking nominees to specifically identify which post they would be willing to take on.

The posts which are "up-for-grabs" include: **Student Prize Co-ordinator** and **Newsletter Editor**

If you would like more information on any of these posts, please contact **Emma Eaton** (emmajeaton@yahoo.com) who can let you have a "job description".

We look forward to hearing from you

1st UK Stroke Forum Conference

7-8 December 2006, Harrogate

The UK Stroke Forum, hosted by The Stroke Association, is a coalition of 20 organisations committed to promoting multidisciplinary stroke care and research.

As a member of the Forum, BAS is involved in shaping its activities, including the programme for the 1st UK Stroke Forum Conference.

BAS members may be interested in the following opportunities:

- **Discounted delegate fees** – BAS members qualify for reduced delegate fees (£160 by **Friday 30 June**, £210 thereafter).
- **Ideas fair** – Do you have an idea or innovation in stroke care, research or technology? Would you like to share it with the professional stroke community at the conference? Get in touch to find out more.

Call for abstracts – Abstracts are invited on all aspects of stroke research, including innovative service delivery and practices, ongoing trials of treatments and interesting cases (**deadline 6 September 2006**).

For more information on the UK Stroke Forum and to register for the conference, please visit www.ukstrokeforum.org or email Daniela Queen at ukstrokeforum@stroke.org.uk

Leading Practice Through Research award winners 2006

The Health Foundation has announced the latest winners of its Leading Practice Through Research award scheme. Five healthcare professionals have been collectively awarded a sum totalling over £420,000 to work on research projects that will make a direct difference to the quality of patient care. In addition, the winners also receive personal development training to enhance their leadership skills.

Stephen Thornton, Chief Executive of The Health Foundation commented, “Our Leading Practice Through Research awards are part of The Health Foundation’s portfolio of schemes designed to develop leaders who will improve the quality of healthcare for people throughout the UK. These five talented individuals have been selected for their research and leadership potential. Through their projects they will improve the patient experience and the quality and performance of healthcare delivery.”

The Leading Practice Through Research awards were launched in 2002 for a period of four years and this is the final round of winners. The five winners represent the fields of psychology, nursing, midwifery, health sciences and speech and language therapy, including Dr Anne Whitworth - Speech and Language Therapist / Director of Clinical Education and Senior Lecturer at the University of Newcastle upon Tyne:

Integrating impairment and social models of healthcare: treating sentence level difficulties in aphasia and making a difference

This project will look to develop a range of effective therapies for people with aphasia which will draw on models of how language is processed and integrate these with methods that will reflect their individual communication needs in daily life. Anne will evaluate the ability of different strategies to produce improvements in language processing skills and, specifically, focus on people who experience difficulties in understanding or combining words into sentences. She will work in collaboration with regional speech and language therapists in assessing patients with aphasic impairments, carrying out interventions and disseminating outcomes. Anne will test out hypotheses concerning how language is impaired in the event of neurological damage. Ultimately, the project aims to show whether different underlying deficits respond differentially to specific therapies. The importance of patients' specific communications needs and their real-life goals are a central part of the study.



Interview: Ruth Herbert, Chair of BAS

Department of Human Communication Sciences, The University of Sheffield

What does your current work involve? Reading, writing, and some maths it seems, at its most basic. What was all that extra education in aid of? A more complex analysis reveals that I have responsibilities for various aspects of undergraduate training, and for aphasia research projects I am involved in. It's easy getting the data, and less easy making sense of it and presenting it in a way that is accessible to various groups. I have some power too, not hiring and firing, but some decision-making emanates from my little den. And I undergo some stress in terms of deadlines and conference appearances. I guess a good balance between those three are essential to keeping up enthusiasm.



How did you get into working with people with aphasia? When I trained cognitive neuropsychology had begun to have a huge impact on the clinical management of aphasia, and the logic and transparency of this discipline continues to appeal to my tidy reductionist mind. I was lucky in having the chance to work with people with aphasia immediately after qualifying, which gave me a chance to develop in that direction.

Where do you think the greatest challenges in Aphasiology will be over the next ten years? In the UK, maintaining and increasing services to people with aphasia. It is sickening to see these being eroded and I fear we may become the poor person of Europe if we carry on as we are doing. How we address this crisis is another matter and I see BAS contributing to this through supporting research into the level of services and any changes to current provision, and the type of interventions that are most effective.

Three things that would make the greatest difference to your life right now? i. Friends living nearby. Everyone is so scattered. I would love the cosy community thing I used to hate when I was younger. ii. Lack of water to look at except that which falls from the sky on my head. iii. Warmth. I am always cold in Sheffield. If it could be relocated near to Crete that would be just peachy. That would also solve the water issue. Alternatively I could learn Greek and emigrate taking all my friends with me.

Where is the most stimulating place you have been to and why? Can't answer this one. It's always the next place I go to. I felt really at home in Sri Lanka on a recent holiday there. But then went to St Petersburg to talk to therapists about aphasia, and fell in love with the city. So next up is Clacton this weekend - I'll let you know how I get on.

Three frivolous things that help you get through a day i. Music. This is not frivolous but I am addicted to discovering music and spend a fortune on CDs. I love getting stuff when I am away - even in Clacton - and the more bizarre the better. Russian hip hop is interesting I found. ii. Counting. I count everything in sight. Drives me mad at times. But it is there and gets me through the day I suppose. Except clearly I can't count very well as I only have two things here. Ah well.

Where do you see yourself in ten years time? That's a long way off. Can't remember back 10 years. In fact I'd rather not think about that one.

One piece of advice you would give to someone starting out in the field of Aphasiology Talk to people about the ideas that excite you. Anyone worthwhile in aphasia research will respond with enthusiasm, no matter what their position is. It's really hard doing therapy or research on your own, so building up relationships with like-minded people is the bedrock to success and survival.



THE TAVISTOCK TRUST FOR APHASIA

Registered Charity No. 1015323

SMALL GRANTS SCHEME

The Tavistock Trust for Aphasia is making up to £1,000 available for small grants each month.

Applications are invited from people with aphasia, carers or groups.

The purpose of these grants is to improve the quality of life for those with aphasia and their carers.

This may include outings, equipment, materials and initial assessments.

Applications will be considered at the end of each month as our aim is to ensure that the money reaches the grantee as quickly as possible

To apply download an application form from their website: www.aphasiatavistocktrust.org

BAS Student prize winners 2005

PROJECT PRIZE: Agrammatism in Modern Greek: Aspects of Production and Comprehension

Recently, the question of whether the deficient production and comprehension patterns exhibited by Broca's aphasics is an indication of competence or performance limitations has become a central focus of cross-linguistic studies of agrammatism, including the present single-case one. Based on the notion of a hierarchical and structural relationship of the functional categories within the sentence structure, the bulk of research conducted on agrammatic patients' production and comprehension patterns describes a systematic deletion or total impairment of the functional rather than the lexical heads.

The data of the present study were collected through different tasks checking the expressive as well as the receptive language abilities of a Greek speaking, non-fluent aphasic, diagnosed as a Broca's aphasic on the basis of the Greek version of the Boston Diagnostic Aphasia Examination (BDAE: Goodglass and Kaplan 1972) standardised by Dr. Mary H. Kosmidis.

The specific patient's agrammatism involved a range of linguistic impairments in language production co-occurring with a less extended comprehension deficit. With respect to the performance/competence dilemma set from the beginning of this project, the evidence suggests that the deficit in agrammatism cannot be described in terms of a structural account but rather by means of difficulties in the implementation of grammatical knowledge; in other words--and in contrast to many investigators suggesting a catastrophic loss of grammatical competence (e.g. Ouhalla)--it is argued that agrammatic production, like agrammatic comprehension, is to a significant extent a performance deficit rather than a loss of linguistic competence.

In this project, we also try to offer an account of the patient's performance related to the specific properties of his mother tongue i.e. Greek, and we discuss the implications of this performance for current theoretical approaches developed to account for the linguistic deficits in Broca's aphasia. The main reason for this was the observation that the manifestations of Broca's aphasia differ across different language structures and thus the cross-linguistic evidence is crucial in order to understand better the nature of linguistic disorders in aphasic performance.

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- **JOINT PROJECT PRIZE: Eleni Peristeri, Aristotle University of Thessaloniki, Greece:**
Agrammatism in Greek: aspects of production and comprehension

British Aphasiology Society Student Prizes 2006/2007

The British Aphasiology Society invites entries for the Student Project Prize and Student Essay Prize.

The BAS Student Project Prize: £200 will be awarded for the best student project on any topic relating to acquired aphasia. The project or dissertation should have been submitted as part of the normal examination procedure in the final year of an undergraduate or postgraduate course (Masters level). The prize will be divided equally between the winning student and his/her educational establishment.

The BAS Student Essay Prize: £100 will be awarded for the best essay on any topic relating to acquired aphasia. Entrants should be undergraduate or postgraduate students (Masters level). The prize will be divided on the basis of £75 to the winning student and £25 to his/her educational establishment.

Closing date for both prizes: 7/7/06

Guidelines for the student prizes are available on the, the BAS web page, or contact:

Sonja Turner, Speech & Language Therapist, Community Stroke Services, St Nicholas' Hospital, Jubilee Road, Gosforth . NE3 3XT Tel and Fax: 0191 2332219 Email: sonja.turner@nmht.nhs.uk

Computers & aphasia



Shawn Dewsbury writes: I had a stroke six years ago, and since then have become interested in strokes and how people cope with aphasia. Five years ago, I was asked by "Speakability" to help manage a group for aphasia in Mansfield, Nottinghamshire. Our first priority was to boost our membership. It soon became clear that our members wanted help improving their speech.

I soon became interested in computers and the software designed to help people with aphasia communicate. Computers are popular in all walks of life; and speech therapy is no exception, there are numerous software packages available ranging from programmes that include Bungalow and React to sophisticated packages e.g. Larigraphica (a complete computer system) and Step-by-Step (accessible on-line) developed at the Frenchay hospital, Bristol.

Setting up a computer system and just providing software will not work. People who have had a stroke may also have physical disabilities and probably have difficulty writing, drawing and operating a computer. Clinical depression can be severe in stroke patients and may inhibit the ability to retrieve speech. The type of aphasia may also impact on this method of treatment. Alex Davies (a SLT in Bristol) was interested in our work at Mansfield and provided advice at the outset. To set up a computer system in Mansfield we required financial assistance, therefore Mary Greaves (our secretary at that time) and myself applied for funding. We decided that if we were to successfully establish the computer group then it would be sensible to employ a SLT to help us. With the support of our group we applied to Lloyds T.S.B. for a grant to fund this project and after a visit by an executive of the bank to ensure the money (£9,996) was going to be well spent, we received our cheque.

Rosy Russell our SLT works alongside four assistants who each have a client and a laptop computer. Rosy takes a supervisory role overseeing all of the computers and offers help if required. She also assists new members and anyone experiencing difficulty with particular aspects of the software. Most of our assistants have aphasia and it is certainly not beyond them to sort out any problems that arise. Our members, Peter Martin and John Charles do an excellent job trying to get people speaking again. We use software developed by React and Bungalow as well as software for other learning difficulties. Sessions using the computer are relaxed with no obligation to take part, we have laptop computers and our members can take them home along with the software they require.

Members of our club are encouraged to get the best out of this speech training. It is an excellent way of gaining self-confidence in all aspects of life, aphasia sufferers will be aware that just speaking on the telephone can be a vital achievement. Whilst we at Mansfield have been fortunate to receive funding for this project, it is not available to all. The N.H.S. could consider this type of therapy for the 'long-term' treatment of aphasia.



React v2

Since 1998, React has been a leading product for aphasia rehabilitation, sold to both speech and language therapists and private individuals throughout most English speaking countries. The program is currently being completely re-written and updated by therapists from NHS Borders in Scotland and Propeller Multimedia. The sections in react2 are almost the same as the original version, but with an additional section on life skills, covering pragmatics. There are many more tasks within them and the range of exercises has been

greatly increased (approximately 8000 compared to 1700 in the original version). Each exercise has been carefully graded in both the use of vocabulary and task complexity.

Other features in React v2 include:

All new bold and clear full screen graphics that resize to any monitor resolution; New easy to use menu system with simple, clear control buttons; Control bar shows progression through each exercise; Exercises are now randomised, therefore repeating an exercise brings up a totally new *sequence* of images. The Clinical version of the program enables a therapist to alter and select individual controls within the program to suit their specific needs, e.g. items such as feedback sounds, colours and many others can be pre-selected. The results module has also been completely re-written to offer new analysis features.

A new licensing system is being introduced and it is also planned to set up an internet access licence for remote use. Upgrade options will be available to all existing licensed users. React v2 was launched at the RCLST conference in Belfast in May, and it is hoped to have the first version ready to purchase by late summer.

Enquiries to Gordon Russell at Propeller Multimedia on 01896 833528 or enquiries@propeller.net or visit the website on www.propeller.net

Book Review:**Fluent Aphasia: Cambridge Studies in Linguistics 107**

Susan Edwards (2005)
 ISBN 0-521-79107-3,
 Cambridge University Press, £45

This book provides an exploration of the language processing systems of people with fluent aphasia, with the emphasis on their grammatical abilities and impairments, as well as their lexical retrieval skills. It aims to review and re-examine previous accounts of fluent aphasia, to introduce new ways of analysing it by using connected speech samples and comparing it with non-fluent aphasia, and “to help the reader to understand a little about what a person with fluent aphasia experiences”.

It begins with an interesting discussion of the history of the classification of aphasia, from the work of Wernicke himself to the “neoclassical” Boston School (e.g. Goodglass and colleagues). It is argued that to dismiss syndromic classifications in favour of the individual descriptions of aphasia favoured by cognitive neuropsychology is to risk throwing the baby out with the bath water. This is followed by descriptions of fluent aphasia and an introduction to the main argument of the book, that fluent aphasia should be examined from a grammatical as well as a lexical point of view. Different methods of assessing fluent aphasia are then examined and their shortcomings discussed.

This is followed by a more detailed examination of connected speech samples of fluent aphasia, through which the often assumed intact sentence structure and good grammatical skills of fluent aphasia are exposed as a myth.

While deficits are less predictable than those seen in the agrammatism of non-fluent aphasia and grammatical processing is not damaged per se, it is argued that processing in fluent aphasia is unreliable, and difficulties are compounded by increasing grammatical complexity and by interactions with lexical retrieval difficulties.

The structure of the book is sometimes unclear, primarily because of problems distinguishing between sections and sub-sections. This can make the arguments hard to follow. In addition, as the author acknowledges, the book is intended for readers from various disciplines, making it difficult to pitch: parts of it are highly technical and more within the grasp of the linguist than the clinician. However, overall, this book is interesting for readers from all backgrounds as a discussion point rather than a “how-to” toolkit. The historical perspective on ways of classifying and examining aphasia is a useful reminder that we are still dealing, by and large, with the nebulous. For those of us who were brought up on PALPA, the exhortation to look beyond the single word in our assessment and treatment is especially hard-hitting. While the analysis of connected speech is more fraught with difficulties than confrontation naming tests, it is a necessity, when fluent aphasia is so much more than the sum of its parts.

The book finishes by putting the human back into the science, with a detailed description of a research participant. This offers a glimpse into the frustrating and bewildering world of the person with fluent aphasia, a world which theorists and clinicians alike still struggle to negotiate.

**Emma Eaton, Speech and Language Therapy
 Egerton Unit, Conquest Hospital, Hastings,
 East Sussex**

Research Round-up

Drawing as a facilitator of word finding in aphasia

Drawing in aphasia therapy has been used predominately as a substitution for speech or to augment communication when other modalities are non-functional. The value of drawing as a route for facilitating verbal expression has not been a focus of prior research. The authors compared the usefulness of drawing and writing as compensatory strategies for improving naming in individuals with aphasia. Activation patterns of writing and drawing in healthy adults were examined using functional MRI. Clinical results suggest that drawing facilitated naming, whereas writing diminished accurate naming responses, and that drawing quality is not relevant to this facilitatory effect. Functional MRI findings revealed strong bi-hemispheric activation of semantic and phonological networks while drawing.

Farias, D., Davis, C., and Harrington, G. (2006). Drawing: Its contribution to naming in aphasia. *Brain and Language*, 97, 53-63.

GP consultations and people with communication disabilities

This paper explores the communication process between people with communication disabilities and GP staff. Eight focus groups were held - four with GP practices, two with people with intellectual disability and two with people who had had a stroke. Picture symbols and Talking Mats were used to assist the participants with communication disability. Twenty GP staff, 12 people with aphasia and six people with learning disability were interviewed. GP staff expressed frustration with not being understood and not understanding but there was a lack of awareness of the reasons behind these difficulties. They all said they mainly relied on carers. They recognized the significance of poor communication in terms of access to health services and agreed that the extent of the problem was greater than they had previously believed. People with communication disability described significant problems before, during and after the consultation. Although some acknowledged that they needed help from their carer, most objected to staff speaking to the carer and not to them. The main priorities for GP staff were the need for relevant training and simple resources. The main priorities for people with communication difficulty were continuity of staff, trust, better GP staff communication skills, and less reliance on carers.

Murphy, J. (2006). Perceptions of communication between people with communication disability and general practice staff. *Health Expectations: An International Journal of Public Participation in Health Care & Health Policy*, 9, 49-59.

ANNOUNCEMENT

British Aphasiology Society Biennial International Conference, 10 – 12 September 2007, Edinburgh



Invited Speakers include: Sharon Abrahams, Thomas Bak, Miriam Brazzelli, Alfonso Caramazza, Gianna Cocchini, Roberto Cubelli, Pamela Enderby, Fernanda Ferreira, Sue Franklin, Argye Hillis, David Howard, Marjorie Lorch, Katie Overy, Martin Pickering, and Klaus Willmes.

Call for Papers and symposia will open on 4th September 2006 via www.bas.org.uk.

For further information, please contact www.bas.org.uk

Hosted by THE UNIVERSITY of EDINBURGH

Venue and Social Programme:

The conference will take place at **Our Dynamic Earth**, one of Scotland's premier conference venues, offering stunning views of the Scottish Parliament, the Palace of Holyroodhouse, and Salisbury Crags. Interested readers can explore this venue's attractions at www.dynamicearth.co.uk

Conference guests will enjoy an **Evening Wine Reception** on Sunday 9th September hosted by the Lord Provost of Edinburgh at the City Chambers

and a special **21st Birthday Gala Dinner** with traditional Scottish entertainment.

Proposed programme includes:

- Awareness of language deficits
- Cognitive models of aphasia therapy
- Social aspects of aphasia
- Reading and writing in aphasia
- Historical perspectives
- Language in neurodegenerative conditions
- Language relearning
- Sentence comprehension and production
- Conversation and dialogue
- Debate on evidence based therapy

Are you thinking of attending a conference this year? Do you need financial support?

BAS Events Grants support people attending the BAS International Conference or Therapy Symposium. You may apply for up to £200.

The Support Fund for Conferences (non-BAS) supports members attending other conferences. You may apply for up to £400. Overseas members may only apply to attend UK conferences. (This fund is only available to people who have been BAS members for at least a year).

Funding is available whether or not you are presenting work, but priority is given to presenters. Awards can cover registration, accommodation, travel expenses and other essentials. Applications are considered by the BAS Committee in July. You may submit a retrospective application for a conference you have already attended this year. BAS is particularly keen to support members who have limited access to funding from other sources. (If you have previously received funding, you may not re-apply for at least 2 years). The deadline for applications is 30th June 2006.

For further information and an application form, visit www.bas.org.uk or contact:

Roz Rosenblatt, BAS Conference Support Fund Organiser, Speakability, 1 Royal Street, London SE1 7LL. Tel: 020 7261 9572; Fax: 020 7928 9542; Email: roz@speakability.org.uk

EVENTS DIARY

- **INS/GNP/SVNP Mid-Year Meeting, From Plasticity to Rehabilitation.**
July 26—30, 2006. University of Zurich Irchel, Zurich, Switzerland
www.psychologie.unizh.ch/neuropsy/INS2006/index.html
- **British Aphasiology Society:Therapy Symposium.** September 4th – 5th 2006. College of St Mark & St John, Plymouth **For more information and to book online go to www.ncore.org.uk**
- **The Science of Aphasia (SoA) Conference: Neurocognition of Language - innovative aspects.**
7-12th Sept. 2006 Sardinia **Please see website for further details: www.soa-online.com**
- **Making New Connections 2**, 13th-15th September 2006 at City University, London
The conference highlights new developments and common themes in working with children and adults who have language disabilities - www.city.ac.uk/ems/makingnewconnections.html or Enquiry Line: 020 7040 8037
- **The Academy of Aphasia 44th Annual Meeting**, October 15th - 17th, 2006, Hotel Grand Pacific, Victoria, British Columbia, Canada **For more information: www.academyofaphasia.org**
- **BAS Research in Progress Meeting**, 2nd November 2006, Newcastle University .
Abstracts to Janet Webster: janet.webster@ncl.ac.uk by 31.07.06
- **Oliver Zangwill Centre 10th Anniversary Conference: Theory, Therapy and Social Outcomes in Holistic Brain Injury Rehabilitation**, 16/17 November 2006, The Oliver Zangwill Centre, Princess of Wales Hospital, Ely
Tel: +44 (0)1353 652165 Fax: +44 (0)1353 652164 or email: alison.gamble@ozc.nhs.uk www.oliverzangwill.nhs.uk
- **1st UK Stroke Forum Conference**, 7-8 December 2006, Harrogate **For more information on the UK Stroke Forum and to register for the conference, please visit www.ukstrokeforum.org or email Daniela Queen at ukstrokeforum@stroke.org.uk**

Connect courses:

Evaluations and Outcomes in Aphasia Care *4th July 2006*

Including People with Aphasia in Stroke Research *27th September 2006*

New Ways of Managing Stroke Disability:dare to be different *5th October 2006 & 12th December 2006*

Stroke Service Consultation *16th January 2007*

For more information call Maria McDonnell Tel. 020 7367 0866 or email mariamcdonnell@ukconnect.org

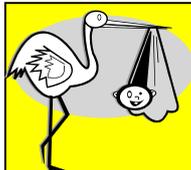


Do you want to receive the BAS newsletter by e-mail?

This is the quickest and most cost-effective way for us to distribute the newsletter.

Please contact **Annette Cameron**,
BAS Membership Secretary
with your e-mail address

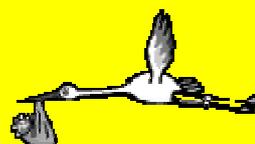
annette.cameron@nhs.net



CONGRATULATIONS!

Jenni Crisp, former Chair of BAS, has had a baby girl - called Nina, weighing a very good 7lb 9oz.

Deborah Cairns has had a baby girl, too.
Eleanor arrived safely on March 10th, weighing 7lb 8oz





British Aphasiology Society Therapy Symposium College of St Mark & St John, Plymouth, September 4th – 5th 2006

The BAS Therapy Symposium provides an unparalleled opportunity for aphasia therapists to describe, in detail, therapy interventions in a series of hour-long presentations. Each presentation is then followed by a half-hour collaborative discussion between the speaker, an expert panel and the audience. The result is that delegates leave the symposium not only inspired but also with sufficient information to replicate or extend the therapy ideas that have been discussed.

This year's programme has been carefully selected to represent the diversity of aphasia therapy, to give a platform for innovative practice and involve people with aphasia in a number of presentations, as the

Bridging The Gap Between Language Therapy and Conversation: The Way Towards Generalisation? Jon Hunt, Bristol

Errorless and Errorful Learning of Verbs and Nouns in Aphasia: A Case-Series Study. Paul Conroy, Manchester.

Applying the Principles of Neurolinguistic Programming (NLP) within the Context of a Communication Group for People with Aphasia. Maggie Wallis, Inverness.

An Evaluation of a Treatment of Word-Sound Deafness in an Aphasic Patient. Dorte Hessler & Nicole Stadie, Potsdam.

Working with the Family of a Man with Severe Aphasia to Improve Conversation and Manage Emotions. Claire Thomas & Ray Wilkinson, London.

Living with Aphasia: People in Partnership. Jackie Davies, Cardiff.

While the main programme is now complete, there is still time to submit an abstract for a poster presentation (closing date June 30th 2006).

Contact Claire.Gatehouse@pcs-tr.swest.nhs.uk for more details.

The start (10.30am) and finish (3.30pm) times have been organized so that delegates can travel to the Symposium on day 1 and return on day 2, thus reducing accommodation costs.

For further information on the Symposium contact Emily Burtenshaw - eburtenshaw@marjon.ac.uk

BAS Members Conference Fee:

Conference only £100; Conference + one night accommodation (Halls of Residence*) £125; Conference + two nights accommodation (Halls of Residence*) £150

Non BAS Member Conference Fee (inc. membership):

Conference only £115; Conference + one night accommodation (Halls of Residence*) £140; Conference + two nights accommodation (Halls of Residence*) £165

(*NB Hall of Residence rooms do not have en-suite facilities. There are a number of other hotels within easy reach of the College)

Social Event: Join us for an informal meal at Cuisine Spontaneé, in the historic Barbican area of Plymouth. A perfect opportunity to relax and mingle. All diets catered for. Cost: £18 per head, *inclusive of wine.*

See NCore website for further booking details and sample menus.

Book on-line at www.ncore.org.uk Telephone 01332 254679