Background: Many speakers with non-fluent aphasia (NFA) are able to produce some well-formed word combinations such as '*I like it*' or '*I don't know*', although they may not use variations such as '*He likes it*' or '*I don't know that person*'. This suggests that these utterances represent fixed forms.

Aims: This case series investigation explored the impact of a novel intervention aimed at enhancing the connected speech of individuals with NFA. The intervention, motivated by usage-based principles, involved filling open slots in semi-fixed sentence frames.

Methods & Procedures: Five participants with NFA completed a 6-week intervention programme. The intervention trained participants to insert a range of different lexical items into the open slots of high-frequency phrases such as '*I like it*' to enable more productive sentences (e.g., '*they like flowers*'). The outcomes and acceptability were examined: The primary outcome measure focused on changes in connected narrative, and the availability of trained constructions (e.g., '*I like it*') was explored through a story completion test. Two baseline measures of behaviour were taken prior to intervention, and outcomes assessed immediately after intervention and at a 6-week maintenance assessment.

Outcome & Results: A pre-/post-treatment comparison of connected speech measures showed evidence of enhanced connected speech for two of the five participants (P2 and P5). An analysis of story completion test scores revealed positive change for two participants (P1 and P2). Findings were mixed with regard to baseline stability of outcome measures and post-intervention stability of language changes. The intervention was acceptable to all participants.

Conclusion & Implications: While this pilot study yielded promising findings with regard to the intervention's acceptability and increased connected speech for some participants, the findings were mixed across the sample of five participants. This research helps inform hypotheses and selection criteria for future studies.