

ASSBI Newsletter

Australasian Society for the Study of Brain Impairment

March 2020

Issue 70

Working together to improve the lives of people with brain impairment



ASSBI COMMITTEES

[EXECUTIVE](#)

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WORDS FROM YOUR PRESIDENT



As I write my President's report for this first issue of the Newsletter for the year, I reflect upon the ravages that have torn Australasia apart during 2019. The toll from natural disasters alone was

horrendous.

After years of drought, Australia was a tinderbox waiting to explode. It started in the spring of September 2019, when 50 fires were reported to be burning in the state of Queensland. Later that month more fires ignited in far-flung areas across the country. Come November, every state and territory in Australia was on fire. By December, smoke and ash had drifted across the Tasman Sea to New Zealand, and even across the Pacific Ocean to South America. The scale of the megafires, which raged for five months, was unprecedented, releasing 400 megatonnes of carbon dioxide into the atmosphere. More than 12 million hectares of land was scorched - larger than the land-mass of Portugal, and an estimated 1.25 billion animals were burned



alive – kangaroos and koalas, kookaburras and cockatoos. People were stranded on beaches and rescued by navy ships. More than 2,000 homes were destroyed. Many people lost their livelihoods; 33 lost their lives.

New Zealand also experienced wildfires during 2019. The Pigeon Valley wildfire in Waimea Valley burned for three weeks over an area of 2,000 hectares and

saw 2,500 people evacuated from their homes. But it is New Zealand's central position in the Pacific Basin "Ring of Fire" that makes it so prone to volcano and earthquake activity.

New Zealand has some 14,000 earthquakes each year, although only a fraction of them are strong enough to be felt. We all remember the devastating earthquake of 2011 that almost ruined the city of Christchurch, including its beautiful Gothic revival cathedral; some 11,000 homes and buildings were destroyed, the death toll was 185, with thousands more people injured. The volcanic eruption on White Island last year affected all 47 people present on the island at the time, mainly tourists, with 21 deaths and the remaining 26 survivors being critically injured predominantly by severe burns, rocks hurtled from the crater, and inhalation of toxic gases.



What is the role of natural disasters as a cause of acquired brain injury? Impairment occurs not only in cognitive, neurobehavioural and motor-sensory function, but also secondary emotional consequences with anxiety, fear, stress, grief, depression. Hypoxic brain injury and its characteristic features of compromised memory, vision, speech and motor function can occur after snow avalanches, near drownings in floods and tsunamis, and inhalation of smoke and toxic fumes from wildfires, together with severe burns that may cause neuroinflammation. Traumatic brain injury is a common consequence of falling debris in earthquakes, volcano eruptions, hurricanes and tornados. Lightning strikes, the bolt from the blue, can have both transient and permanent effects on neurocognitive and motor function. In our clinical practice, we should be aware that natural disasters can have potentially devastating effects not only emotionally, but also on cognition, behaviour, and motor-sensory function.

On a final note, in the December 2019 edition of the Newsletter, I heralded

that ASSBI is to undertake an external review – its first in 43 years of operation. The ASSBI Executive is moving forward on planning for this event. At the annual conference to be held in Perth in May, we will be conducting a survey of the membership. The more responses we receive, the better we will be able to plan the review. Do please respond!

My very best wishes to you all and looking forward to seeing you in Perth for the annual conference,
Robyn Tate
President

SOCIAL MEDIA



Like us on [Facebook](#),
[Follow ASSBI](#) on Twitter
Become a contact on LinkedIn

If you have anything interesting you would like tweeted or mentioned on facebook, contact Lizzie or Travis via admin@assbi.com.au.

WEBSITE

Signing in whether you are a member or not will give you the opportunity to update your own information **including your email address**. It will also give you access to *Brain Impairment if you are a member*. If you want to change your email address login with your old email address or [email Matthew](mailto:email@assbi.com.au) to change it prior to you logging in. <https://www.assbi.com.au>

We would like to collect stats such as your discipline and where you come from to get a better idea of our community.

When your membership is due you will receive a couple of reminder emails and you can renew and pay online by Visa, MasterCard and PayPal if you have an account. You can also transfer your fees via the bank – if you do this email [Margaret](mailto:Margaret@assbi.com.au) so she can put your payment through. NO CHEQUES PLEASE.

If you have anything you wish to go onto the site or have any feedback please email me at admin@assbi.com.au.
Matthew, Webmaster's sidekick

CEO'S REPORT



Enjoy this newsletter and don't forget to get copy for the June Newsletter to me by 15th May 2020.

2020 Conference is coming up fast. Don't forget to register before early bird closes on 31st March.

Paul Telling from StoryTellers who did all the wonderful storyboards at our 2019 conference in NZ has been working with Di Winkler of the Summer Foundation, have a read below.

Cheers, Margaret Eagers, CEO

NEWS

Using a Visual Storyteller to enhance workshop experiences and output

The Summer Foundation recently engaged people with disability in the development of our research program.

Over two workshops, people with neurological disability and complex needs provided their wisdom and insights over a number of topics. A fantastic addition to these workshops was a Visual Storyteller, Paul Telling. We were introduced to Paul's fabulous work at the ASSBI/NZRA Inaugural Trans-Tasman Conference in Wellington in 2019.



Paul was engaged to summarize the content generated in the workshops in real time. There was terrific value in providing workshop participants with a live visual

summary which utilised pictures and words to capture key points and make abstract concepts tangible. Paul produced accessible and inclusive summaries of the content from workshop activities, as well as visual representations of the links between topics that were discussed. The visual story-board also captured the emotion and energy of discussions through the use of captivating images. Importantly, the story-board created opportunities for people to provide feedback and input beyond the activities, therefore enhancing the accuracy of the insights gained from the workshops. Overall, the use of a visual storyteller enhanced collaboration, and allowed for real-time reflection and interpretation of workshop output. Click [here](#) for more

information on Visual Storytellers. Click [here](#) for more information about the Summer Foundation research program.

Research findings supporting the TBIconneCT program

Two recent publications have reported data supporting the efficacy of the TBIconneCT program. A publication in the Journal of Speech, Language, and Hearing Research reports that this program improved the conversations between people with TBI and their communication partners (https://pubs.asha.org/doi/10.1044/2019_JSLHR-19-00076). Another publication in the Journal of Head Trauma Rehabilitation reports that this program improved participants' self-reported communication skills (<https://doi.org/10.1097/HTR.0000000000000554>). The TBIconneCT program is available for purchase through ASSBI (<https://assbi.com.au/TBIconneCT-Clinician-Manual>).



The WFNR Presidium is calling for

people who are willing to join the WFNR Nominating Committee. The task of this Committee is to nominate candidates for positions as officers of the WFNR. All interested parties should send a letter of interest and short CV to traceymole@wfnr.co.uk by 17 April 2020.

CALL FOR NOMINATIONS

The Nomination Committee of the World Federation for NeuroRehabilitation (WFNR) invites nominations for the positions of **President Elect**, **Secretary-General** and two **Members at Large**. The positions will all become vacant in October 2020 when the current incumbents reach the end of their term of office. WFNR is a multidisciplinary organisation and welcomes nominations from any member of the multidisciplinary team.

General criteria for all nominees:

- Active member in good standing of WFNR
- Knowledgeable about WFNR's mission and objectives
- Ability to demonstrate a special commitment to WFNR through tenure of membership and participation in the organisation

ASSBI STUDENTS

We are still recruiting for Ambassadors for 2020 [CLICK HERE](#) for more information and to apply

Newcastle

Newcastle Chapter (Winifred Asare-Doku, Kimberley Wallis, Lucy Fry and Avni Kumar) organised the second event of the year, a Trivia Night on 18th October 2019 at the Advanced Technology Center, Callaghan Campus. Both undergraduates, postgraduates and community members attended the movie night. Lucy gave a short five-minute presentation on the mission of ASSBI, and how to join ASSBI. Pizza and drinks were served. In all, the event was a success!

Don't forget as a member you will get a significant discount to the ASSBI 2020 Conference and the workshops

[CLICK HERE](#) to join or renew

- Ability to accomplish tasks on schedule and to work effectively with other people
- Understanding and agreement to the necessary commitment of time and Presidium activities

Please submit the name(s) of the individual(s) in question, together with their CV, a brief description of their vision for WFNR and confirmation of their willingness to stand for election. This information should reach the WFNR Nomination Committee by **17 April 2020**.

Please submit nominations to:

Tracey Mole
Executive Director
WFNR
Tel/Fax: +44 (0)191 2595547
traceymole@wfnr.co.uk
www.wfnr.co.uk

NEW ARTICLE

ARTICLE 2019 First View – Brain Impairment
DOI:

<https://doi.org/10.1017/BrImp.2019.32>
Carmichael, J; Gould, K; Hicks, A; Feeney, T and Ponsford, J

Understanding Community ABI Therapists' Preferences for Training in and Implementing Behaviour Interventions: A Focus on Positive Behaviour Support *What the study is about*

Following acquired brain injury (ABI), people may present with distressing and persistent challenging behaviours, such as aggression, inappropriate social behaviours and lack of initiation. These behaviours may place the person with brain injury and others at risk of harm and impede the person's ability to reintegrate back into the community. Research suggests that not all individuals with ABI who present with challenging behaviours receive satisfactory behaviour support. Potentially, this results from barriers therapists face to being trained in and implementing behaviour interventions. Positive Behaviour Support (PBS) is one approach that aims to improve the person's quality of life and proactively reduce challenging behaviours through environmental modification, skill-building and supporting engagement in meaningful relationships and activities. The intervention is designed and implemented in collaboration with the person and their natural supports (e.g., family, carers). Although there is a growing evidence base for PBS, it is not known how widely PBS or other intervention approaches are currently used by community ABI therapists to address challenging behaviours. This study aimed to investigate Australian community ABI therapists' experiences of using, training in and implementing behaviour interventions, with a focus on PBS.

What we did

We designed and distributed an online survey asking 136 community ABI therapists about their experiences with behaviour interventions and PBS specifically. Participants included occupational therapists, clinical neuropsychologists, clinical psychologists, speech therapists, physiotherapists, case managers and coordinators. We used a modified version of the Organisational Readiness for Implementing Change Scale to measure participants' readiness to learn and implement new behaviour interventions. Data were analysed by computing

frequency and descriptive statistics and through content analysis, non-parametric group comparisons and multiple regression.

What we found

Participants identified a range of approaches as important in addressing challenging behaviours including teamwork and collaboration, person-centred practice, working with antecedents, environmental modification, improving quality of life and skill-building. These approaches were consistent with PBS. In general, participants expressed a high level of desire and readiness to learn and implement new behaviour interventions, preferring part-day face-to-face workshops, online courses/webinars and clinical supervision to train in this area. However, 80% reported facing one or more barriers to training and implementation. Major barriers were lack of time, organisational funding and confidence and disengagement of the individual's support network. Participants with higher confidence in using behaviour interventions ($b = 0.31, p = .002$) and fewer barriers ($b = -0.30, p = .002$) were predicted to have greater readiness to learn and implement new behaviour interventions. Confidence, past training experiences and future training preferences did not appear to differ based on clinical role/discipline. The results suggest that community ABI therapists support PBS-consistent approaches to addressing challenging behaviours and would be receptive to training in PBS. Moreover, this study provides valuable information to tailor strategies for the clinical translation of behaviour interventions to specific barriers and preferences of community ABI therapists.

Acknowledgements

The authors would like to thank the participants for giving their time for this study and the Transport Accident Commission (through the Institute for Safety Compensation and Recovery Research) for their generous funding of the research.

PROFESSIONAL DEVELOPMENT

If you would like to see someone give a workshop or webinar in your State or know of anyone coming to Australia in 2020 who would like to give a workshop or webinar for ASSBI members, please email Margaret and we will endeavour to organise a full/half day workshop or a webinar. If someone you suggest agrees to present for

ASSBI you will receive a complementary registration.

ASSBI WEBINAR



ASSBI is proud to present a 60 minute Webinar entitled
"A novel intervention to increase leisure, social and community activity after brain injury: the Programme for Engagement, Participation and Activities (PEPA)"
by Prof Robyn Tate
9th March 2020 1.00 - 2.00
watch via Zoom or purchase to view on demand

1pm Monday 9th March Professor Robyn Tate will present a 60-minute Webinar via Zoom entitled *"A novel intervention to increase leisure, social and community activity after brain injury: the Programme for Engagement, Participation and Activities (PEPA)"*

To find out more [click here](#) or [click here](#) for costs and [REGISTER HERE](#)

ASSBI WORKSHOP



Nocebo Hypothesis Cognitive Behavioural Therapy (NH-CBT) for Functional Neurological Symptoms
Dr Matt Richardson
This is a full day workshop (9.00-4.30) being held in Melbourne
18 March 2020
Target audience: Clinical Psychologists, Neuropsychologists, Occupational Therapists, Speech & Language Therapists and Physiotherapists working with people with

9am Wednesday 18th March Dr Matt Richardson present a full-day workshop at La Trobe University, Bundoora, Melbourne. This workshop will also be available via Zoom to watch live only. We will not be recording it. It is entitled *"Nocebo Hypothesis Cognitive Behavioural Therapy (NH-CBT) for Functional Neurological Symptoms"*

To find out more [click here](#) or [click here](#) for costs and [REGISTER HERE](#)

ASSBI CONFERENCES

ASSBI's 43rd Conference #assbi2020



AUSTRALASIAN SOCIETY FOR THE STUDY OF BRAIN IMPAIRMENT (ASSBI)
Pan Pacific Hotel, Perth WA
7-9 May 2020
43rd ASSBI Brain Impairment Conference
Getting on with the business of living

[Go to the ASSBI website to keep up to date](#)

We are hosting a public forum the day prior **Living well after acquired brain injury (ABI) – a forum for anyone with an interest in long term management of ABI.**

Wednesday 6th May 2020. 10.30am to 4pm

This public forum will be held at Technology Park, 2 Brodie-Hall Dr, Bentley, WA

Everyone is welcome to attend part of, or the whole of the day which is being sponsored by Brightwater Care Group. If staying for the whole day please note that lunch will NOT be provided.

Please register your interest by

- ticking the box on the registration form or, if not attending the conference,
- by emailing Barby Singer at b.singer@ecu.edu.au

Morning session – (10.30-12.00pm)

Research perspectives

Research students, clinicians and services providers will present short, entertaining talks on living well after brain injury. Topics will range from post-concussion syndrome to mood disorders.

Afternoon session – (1.00-4.00pm)

Insights from the experts

There will be talks from

- Sally Sandover
- Nic Emmerson
- Lynne Turner-Stokes
- Mathilde Chevignard
- Bronwyn Hemsley
- Beth Armstrong
- Juli Cofin

REGISTRATION is OPEN

For the conference and early bird closes on 31st March so sign up for a workshop and/or the conference ASAP. Prices are the same as they have been for the last 5 years. \$140 for a half-day workshop and \$499 for the conference if you are an ASSBI member. \$299 if you are an ASSBI student member. ASSBI student members also get conference workshops for a discounted \$110 each.

PRESIDENTIAL ADDRESS

Will be given by Professor Robyn Tate this year. It is entitled: **Highlights and lowlights in single-case intervention research: a chequered history**. Single-case research in health interventions has a long and fascinating history, spanning more than 150 years, with the studies of Broca (1861) and Wernicke (1874) being early contributions. Despite a promising start, single-case research received a severe and debilitating kick in the teeth, often attributed to the rise of group-based research methodologies and

inferential statistics in the early part of the twentieth century. This, together with the prominent sway given to the randomised controlled trial, effectively prevented any competing methodologies being attributed any scientific credibility at all. During the past 50 years, however, there have been major advances in single-case methodology, including the development of a range of research designs and their applications, attention to scientific rigour of the methodology, an explosion of data analytic techniques, and its uptake in some quarters of the medical establishment. This presentation traces these and other milestones in the history of single-case intervention research.

INVITED KEYNOTE SPEAKERS

Professor Mathilde Chevignard -



France

Mathilde will be giving a half-day workshop entitled **Organization, development and characteristics of services for teenagers**

and young adults who sustained childhood acquired brain injury: specific challenges and possible solutions and a keynote address entitled **Long-term outcomes and transition to adulthood following childhood acquired brain injury**. This talk would be based on results of cohorts follow-up we have performed here, in childhood severe TBI (TGE cohort) and in medulloblastoma cohorts). [CLICK HERE](#) for her bio

Professor Lyn Turner Stokes - UK



Lyn will be giving a half-day workshop entitled **GAS without tears – finding the right balance for goal setting in rehabilitation** and a keynote address entitled:

Tough Decisions around Catastrophic Brain Injury – An International Perspective. [CLICK HERE](#) for her bio

Professor Bronwyn Hensley – Australia



Bronwyn will be facilitating a half-day workshop entitled **Crafting A Robust Social Media Strategic Plan for Professional Practice: Development,**

Intervention, and Advocacy Online. This workshop is an active-learning forum for

delegates aiming to (a) move the evidence base, gathered over the past decade, into their development and implementation of a practice-based social media strategic plan, and (b) increase the safety and enjoyment of health professionals using social media as a communication intervention with clients and as a means to advocate for their client groups.

Bronwyn will also be giving a Keynote Address entitled **People with Communication Disability Thriving, Thriving, and Surviving as Technology Advances** on the use of mainstream technologies, including smart home devices, virtual reality, social media, and 3D printing to improve the participation, inclusion, and safety of people with communication disability and dysphagia. [CLICK HERE](#) for her bio

ABSTRACTS for Profs Armstrong and Coffin's Keynote and Workshop

KEYNOTE

Improving services for Aboriginal Australians after brain injury: Current initiatives and findings to date

Recent research has provided insights from Aboriginal people with brain injury and their families around their journeys of recovery that involve geographical, cultural and linguistically diverse issues. One of the biggest barriers is communication, and without a culturally secure care in place, many Aboriginal Australians are simply not recovering to their full potential. The keynote address will explore the journeys of Aboriginal Australians after stroke and traumatic brain injury, highlighting ongoing challenges faced, as well as family and community resources that assist recovery, and new service initiatives aimed at improving access to rehabilitation. The presentation will also outline a program of research informed by Aboriginal people with brain injury and their families. The research involves the co-design of all new initiatives by Aboriginal and non-Aboriginal researchers, clinicians and Aboriginal



community members. The presentation will provide the background to, findings to date and current initiatives to improve service delivery including

the WA based Healing Right Way clinical trial – the first of its kind in brain injury involving Aboriginal people specifically. The role of cultural security training of hospital staff and the employment of Aboriginal Brain Injury Coordinators throughout WA

will be discussed, with implications for national practice proposed.

WORKSHOP 4

What does culturally secure brain injury care look like for Aboriginal Australians?

This workshop will provide participants with practical ways of implementing culturally secure practice with Aboriginal patients with brain injury in both acute and rehabilitation contexts. It will discuss the concept of cultural security (Coffin, 2007) in relation to brain injury. Cultural security refers to ensuring that Aboriginal cultural values, world views and ways of working are incorporated at each level and stage of the acute and rehabilitation service and that services will not compromise the



and expectations of Aboriginal people. During the workshop, institutional policies and procedures, team practices and individual attitudes will be discussed as they relate to the care of Aboriginal people after brain injury. Authentic clinical scenarios involving Aboriginal people with brain injury will be provided emanating from the Missing Voices and Healing Right Way projects. Participants will also be encouraged to present scenarios from their own work contexts and discuss both challenges and facilitators to culturally secure care in the brain injury context. Outcomes for workshop attendees:

1. Understanding of the concept of cultural security.
2. Practical ways forward for the implementation of culturally secure care for Aboriginal Australians with brain injury.
3. Ability to translate notions of cultural security to their own workplace.

Professor Beth Armstrong - Australia



Beth Armstrong will be co-presenting with Juli Coffin - giving a half-day workshop entitled: **What does culturally secure brain injury care look like for Aboriginal Australians?** and

a keynote address entitled: **Improving services for Aboriginal Australians after brain injury: Current initiatives and findings to date.** [CLICK HERE](#) for her bio

Professor Juli Coffin - Australia



Juli Coffin will be co-presenting with Beth Armstrong - giving a half-day workshop and a keynote address. [CLICK HERE](#) for her bio

Sponsorships are still open, if you wish to sponsor/partner with ASSBI [email Margaret](#)



ASSBI's 44th Conference



#headstogether2021

The 44th Conference will be held in conjunction with INS and CCN and will be known as the 6th Pacific Rim

Conference. It will be run in Melbourne on 1st – 3rd July with workshops on 30th June 2021.

The theme of the conference is **Putting our heads together to change lives**

Co-Convenors for the conference are:
ASSBI Representative – Dana Wong
INS Representative – Travis Wearne
CCN Representative – Kerry Pike
Steering Committee: Vicki Anderson, Jacinta Douglas and Simon Crowe.

Confirmed Presidential Addresses are from Olivier Piguat (ASSBI) and Skye McDonald (INS)

PUT THESE DATES INTO YOUR DIARY

Call for abstracts opens:

31st July 2020

Conference Workshops:

Wednesday 30th June 2021

Conference:

Thursday 1st – Saturday 3rd July 2021

If you are already on any of MERS Events' distribution lists or the ASSBI list (run by Margaret Eagers) you need do nothing as you will be notified as usual. If you are not

and want to be then drop an email to mers@exemail.com.au

Past Workshops and Webinars are available for download as video files

#assbiworkshops

[CLICK HERE](#) to see more and order Jessica Trevena-Peters, Jennie Ponsford, Adam McKay, Dana Wong, Neera Kapoor, Alinka Fisher and Caroline van Heugten have all presented full day training workshops and 90 min webinars over the last 2 years. If you missed this Continuing Education the first time around and would like to access it now please go to the website, download the order form and order one or all of them.

BRAIN IMPAIRMENT

ASSBI's multidisciplinary Journal

To login to the BI site of CUP, just **login** to the ASSBI website and [click on this link](#) to get directed to the Brain Impairment page of the CUP website, if you require any help with this please email [Margaret](#). To read some of the articles from the author's perspective [click here](#) *New issue due out this month*

*Jennifer Fleming and Grahame Simpson
Co-Editors*

ASSBI RESOURCES

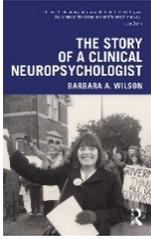
ASSBI Resources is going from strength to strength. Our website has been improved to provide more information about all our products (check it out!) and to make it more accessible to people searching for evidence-based resources on-line. We have now introduced PDF versions of most of our products for local buyers as well as overseas. These cost less than the printed versions making them even more affordable. With 10% off for ASSBI and INS members, there is simply no reason not to stock up!

There are now 3 items available for our UK colleague's **postage free**: TASIT, TASIT-S and MEC order in the usual way.

Non-members have access to some free downloads too – [click here](#) to see the full list of manuals **and** free to downloads on offer

Skye McDonald, Resources Manager

Book



The Story of a Clinical
Neuropsychologist

Barbara A. Wilson

[Click here for more](#)

Opportunities for Involvement

There are a lot of colleagues out there wanting your help, have a look and see if you can help out

[CLICK HERE TO SEE ALL REQUESTS FOR HELP](#)

A research study you may be interested in is taking place in **Victoria** via the Centre of Research Excellence in Aphasia, La Trobe University and Catholic University Mainz, Germany.

The research team is led by Prof Miranda Rose and Prof Sabine Corsten, with support from Dr Michelle Attard and Ms Almut Plath.

The team is seeking research participants to be involved in a **focus group** study about a German **biographic-narrative intervention for improving wellbeing and quality of life for people with aphasia**.

About the biographic-narrative intervention: It aims to address quality of life for people with aphasia through the retelling of one's life story. The current program involves a mixture of individual and group-based sessions totalling 12 meetings and 18 hours of contact over 10 weeks. These sessions have been facilitated mainly by a speech-language pathologist, who moderates the discussion focussing the past, the present, and the future regarding biography-relevant topics.

The study might be a good fit for you if:

- you live in Victoria, Australia
- you work as a speech-language pathologist, occupational therapist, psychologist, social worker, allied health assistant, or allied health community rehabilitation manager
- you work in subacute, community rehabilitation, and/or community health setting(s) as part of your role
- your caseload includes people with aphasia

- you have the ability to participate in a 70-minute focus group conducted in English

Please click here to access more information and contact details

VaLiANT (Valued Living After Neurological Trauma) group program

Dr Dana Wong and team are currently recruiting participants for VaLiANT which is being run at the La Trobe Psychology Clinic as part of a randomised controlled trial. VaLiANT is designed to enhance psychological adjustment/wellbeing by focusing on valued living - i.e., participating in activities that are consistent with personal values - after acquired brain injury. It is a newly developed intervention that integrates cognitive rehabilitation (using evidence-based compensatory strategies) and psychological therapy (using techniques and principles from Acceptance and Commitment Therapy). Participation is free. It is for adults aged 18+ who:

- have had an **ABI** (including stroke, TBI or other non-degenerative ABI)
- could attend the **8-week program at the La Trobe Psychology Clinic** (in Bundoora, VIC)
- have experienced **cognitive and/or emotional changes post-ABI that have impacted on their participation in valued activities**.

Participants may be randomised to receive the intervention immediately or after a 4-month waiting period. However, we are using a 2:1 randomisation schedule which means that participants are more likely to receive the intervention straight away. If you would like to make a referral, please email valiant@latrobe.edu.au or call (03) 9479 1679. More info is also here: <https://www.latrobe.edu.au/psychology-clinic/services/group-programs/valiant-group>.

Assessment and management of early recovery after TBI

Just a quick reminder that Jennie Ponsford and her team still need clinicians to complete their survey. The survey will take approx. 15 mins to complete and all responses are completely anonymous. [CLICK HERE](#) to complete the survey.

Patient Reported Outcome Measures Project - Survey

We request your support to feedback on the way Patient Reported Outcome Measures (PROMs) are summarised and

provided to hospitals and clinicians. We ask you to consider completing the following survey (further details below).

Patient reported outcome measures (PROMs) ask patients to assess elements of their own health, quality of life, and functioning. This information can be used to show how healthcare interventions and treatments affect these aspects of a person's day-to-day life.

Background:

The Victorian Agency for Health Information (VAHI) has appointed staff from the Public Health & Health Services Research group, Stroke Division, Florey Institute of Neuroscience and Mental Health to summarise the evidence base and facilitate a process to determine the best methods for future implementation of PROMs into quality improvement initiatives. A multidisciplinary project working group, met to discuss and refine PROMs feedback templates. Stroke has been used as a case study for this project, however, the broader scope of this work also includes other disease areas, clinical quality registries and clinical specialties collecting and reporting PROMs in routine practice.

Survey:

As part of the next stage of this project, we seek your assistance in further testing a selection of PROMs templates to determine those that are most readily understood and have greatest perceived utility. The survey can be accessed through <https://www.surveymonkey.com/r/MFRH9H>. **The survey will be open until Friday 6th December.** We thank you for your time and support with this important project.

If you have any questions or further comments, please contact: Violet Marion violet.marion@florey.edu.au or 03 9035 7080.

Thank you for your support with this work.

Kind regards,

Dominique Cadilhac

Investigating novel treatments for Alzheimer's disease and Mild Cognitive Impairment

Researchers at the Epworth Centre for Innovation in Mental Health (ECIMH) are exploring whether gentle brain stimulation can improve thinking and memory problems in individuals with Alzheimer's disease and in people who meet criteria for Mild Cognitive Impairment (MCI).

The two types of non-invasive stimulation we are investigating are transcranial magnetic stimulation (TMS)

and transcranial alternating current stimulation (tACS). TMS uses a magnetic pulse to increase activity in the brain. tACS is a gentle electrical stimulation that is self-administered in the comfort of your own home, following comprehensive training.

Participation may involve assessments of thinking and memory skills, questionnaires about daily activities, as well as recording of brain activity through electroencephalography (EEG).

We are seeking volunteers who

- Are aged 50 - 95 years
- Have a diagnosis of mild-to-moderate Alzheimer's disease **OR** meet criteria for MCI
- Are interested in participating

For more information, contact:

Dr Melanie Emonson

Phone: (03) 9805 4346

Email: melanie.emonson@monash.edu

Epworth Centre for Innovation in Mental Health

888 Toorak Rd, Camberwell VIC 3124

www.epworth.org.au/mentalhealth

These studies have been approved by The Alfred Human Research Ethics Committee (372/15; 480/16; 274/18) and Monash Health Human Research Ethics Committee (RES-18-0000646A).

Recruiting for CREST Concussion Study

The Neurotrauma team at Curtin University and the Perron Institute, led by Professor Lindy Fitzgerald, are currently recruiting participants for an exciting new study on concussion- the CREST Concussion REcovery STudy. This study is the largest of its kind in Western Australia and involves a range of techniques that are at the forefront of concussion research.

The aim of the study is to identify factors which may predict individuals at increased risk of delayed recovery following concussion to better manage treatment and improve recovery.

Within the past 48 hours have you sustained a concussion injury from any cause (e.g. falls, transport accidents, sports-related concussions), been diagnosed by a medical doctor and aged between 18-65 years?

For more information or to see if you are eligible, please emails concussionstudy@curtin.edu.au or phone 0466 526 849.

"COMPARE RCT now at 90% recruitment!"

COMPARE Do you know someone in Australia or New Zealand



with aphasia after stroke (>6 months after stroke onset)?

Would they be interested in participating in a study comparing two intensive aphasia therapies (Constraint induced aphasia therapy ; Multi-modality aphasia therapy)?

Would they like the opportunity to contribute to the aphasia intervention evidence base and receive 30 hours of aphasia therapy?

Please contact us on **(03) 9479 2776**, compareaphasia@latrobe.edu.au or via our website www.latrobe.edu.au/COMPARE.

Remaining spots filling fast.

Speech pathology for adults following traumatic brain injury (TBI)

Our research team are exploring the lived experiences of adults when receiving speech pathology services in community settings (e.g. community-rehabilitation services, day hospital, private practice). The study is open to adults following TBI and/or

their significant others in the Brisbane, Logan, Ipswich areas and surrounds and involves a one-hour face-to-face interview at the participant's home or a location convenient to them. All participants can go into a draw to win a \$50 Coles/Myer voucher. For more information about the study go to <https://sites.google.com/griffithuni.edu.au/speechpathologystudy/home> or contact Crystal Kelly (crystal.kelly@griffith.edu.au). GU ref no: 2019/512

Light Therapy for ABI Study

We are currently seeking referrals for a randomised controlled trial evaluating the impact of **in-home light therapy** on post-brain injury **fatigue**, as well as daytime sleepiness, sleep quality and mood. The study entails 7 study visits over a 5 to 6 month period in the participant's home and exposure to a tailored light therapy program. Ceiling lights and lamps are installed by a certified electrician, using participant's pre-existing fixtures.

It is for adults aged 18+ who:

- Have had a **TBI** (mild, moderate or severe)
OR

- **Stroke**
- Reports experiencing significant **fatigue**
- Is 3+ months post-injury (participants may also be many years post-injury eg. 20-30 years).
- Lives within the greater **Melbourne** area (up to 2 hr drive).

The study has been developed at Monash University in conjunction with the Monash-Epworth Rehabilitation Research Centre (MERRC) by Professors Jennie Ponsford, Shantha Rajaratnam, Steven Lockley and myself. The project has been approved by the Epworth HealthCare Human Research Ethics Committee.

If you would like any further information or would like to refer a potential participant, please don't hesitate to contact me at laura.connolly@monash.edu or 0419 372 468.

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