



Outcomes and Directions Report

2007 HCSNet Human Communication Disorders Workshop

Title: Tough Problems in Human Communication Disorders

Date: 15 September 2007

Location: The University of Queensland, St. Lucia, Queensland

AIMS OF THE WORKSHOP

In the assessment, treatment, and delivery of services to people with communication disorders, new technologies and research have added to existing models and methods, but limitations remain in the use of enabling approaches and technologies. The aim of this inaugural 1 day workshop from the HCSNet's Human Communication Disorders Priority Area was to bring together researchers, managers and industry leaders to address current or enduring problems, themes, and barriers to communication disorder management and to lay some groundwork towards addressing these questions via interdisciplinary collaboration.

WORKSHOP FORMAT

A series of 30 minute presentations presented the latest research in speech pathology, audiology, service delivery, and technology whilst highlighting problems that have impeded progress in managing adult and paediatric communication problems. Group discussions then addressed the issues that arose in an attempt to facilitate interdisciplinary partnerships and future linkages amongst the participants, and move towards collaborative avenues of resolution.

KEYNOTE PRESENTATION

The keynote speaker was by Professor Leslie Gonzalez-Rothi. Leslie is the Professor of Neurology, Clinical & Health Psychology, and Communicative Processes and Disorders at the University of Florida and is the Program Director of the Brain Rehabilitation Research Center of Excellence. Her presentation focused on Rehabilitation Neuroscience and the importance of a neuroscientific approach to the habilitation or rehabilitation of communication disorders.

IMPACT AND DISSEMINATION OF WORKSHOP OUTCOMES

There were five major outcomes that arose from the workshop:

1. A radio interview was conducted with Professor Helen Chenery on the content and outcomes of the workshop for Coast FM, Gosford, NSW.
2. A report was sent to Speech Pathology Australia (the national association for Speech Pathologists).
3. An ARC Linkage grant is in preparation with one of the major employers of professionals charged with the management of people with communication disorders (Queensland Health) to develop a longitudinal electronic database of employment patterns and workforce attrition of allied health professionals (including speech pathologists and audiologists).
4. Preliminary discussions are underway with the School of Information Technology and Electrical Engineering at the University of Queensland to develop a web-based continuing professional education module for health professionals around health informatics (e.g., use of electronic databases, electronic communication tools, ethics and privacy etc).
5. A web-based continuing professional development module around health leadership is being developed that will be available for allied health professionals working with people with CDs that will capacity build this workforce's managerial and leadership skills to set an appropriate future vision for the workforce and the services it provides, to implement the change agenda and review its impact and effectiveness.

DISCUSSION TOPICS AND THEMES

The following paragraphs provide a summary of the major discussion points arising from the papers presented at the workshop:

1. There is an urgent need to *create evidence* about the outcomes for people with communication disorders (CDs) and to understand better the many variables that contribute to patterns around evidence and outcomes.
 - a. What are the parameters that capture and measure both the external and internal factors driving outcomes for people with CDs?
 - b. Attention to the multiple levels relating to outcomes is required. For example, how do client or patient variables impact on outcome or effectiveness? Equally important, how do external factors such as frequency and intensity of services impact? What macro variables impact that are related to community characteristics or governmental policy (e.g., traffic changes, pension increases, changes to Medicare funding etc).
 - c. How do these factors or variables interact to modify/affect outcomes?
 - d. Research to collect and evaluate outcomes data and evidence of effectiveness or otherwise must be a priority funding area and must be a core feature of practice (that is, data is collected and analyzed as a routine part of clinical practice).
 - e. Opportunities to collaborate with other disciplines (e.g., information technology and health informatics) should be explored and given priority funding to enable streamlined collection of data across multiple jurisdictions and centres.
 - f. Data collection and research around outcomes and the creation of evidence around practice and intervention models needs to be firmly embedded in the undergraduate curriculum.
 - g. A translational interdisciplinary approach to habilitation/rehabilitation should be the foundation stone or professionals working with people with CDs with issues such as the frequency of therapy, cessation of therapy, dose timing of therapy etc all made on the basis of scientific research.
2. There is an urgent need for *continuing professional development* for professionals involved in the management of people with CDs.
 - a. The notion of CPD and lifelong learning must become a core feature of the culture around CDs through, for example, mandated CPD by professional associations, national registration, etc.

3. The discussions around *workforce* (e.g., characteristics, shortages, attrition, role definition) and revised service delivery models are centering mainly on the professions of medicine and nursing yet allied health professionals working with people with CDs similarly find themselves in a position where the need for services is greater than the resources, infrastructure, and personnel available to meet it. It is inevitable that this gap will widen in the future as the factors contributing to a greater burden on general health care impact on people with CDs.
 - a. Debate around skills escalators models and role definition should occur at the national level (involving the professional associations, employers and educational institutions) to consider the revised Australian Qualifications Framework <http://www.aqf.edu.au/> and to discuss future workforce models in, for example, delegated care roles, midlevel practitioners or autonomous practitioner models. This debate might take the form of a national task force or working party charged with defining the scope of the problem, the need for change, the resources required to implement any change, and how best to strategically plan the solutions and implement them.
 - b. National and multi centre research also needs to be conducted as a preemptive strategy to address current and future workforce shortages, workforce attrition and service delivery gaps/shortages.
4. The *economic costs* associated with communication disorders have not been systematically investigated and published. Recently, a number of pivotal publications have appeared outlining the economic burden and costs associated with dementia¹ and Parkinson's disease². These reports have made a significant contribution to the development of policy and research priorities around dementia and PD.
 - a. As a matter of urgency, a report into the economic impact of communication disorders should be commissioned.
5. Linked to the economic modeling of disorders of communication, are the social, psychological and human costs. Little has been done to document these costs or take this message to policy makers and the broader community. *Effective advocacy* remains a major limitation.
 - a. A stronger relationship with consumer groups needs to be forged, particularly in the area of ambassadors and consumer advocates.
 - b. There is a need for greater representation from the workforce associated with CDs, to be members of policy committees that effect regulatory and/or governmental change.

¹ <http://www.alzheimers.org.au/content.cfm?topicid=348>

² <http://www.accesseconomics.com.au/publicationsreports/showreport.php?id=137>

- c. Heightened advocacy for professionals involved in the management of people with CDs through both self and professional association advocacy.
 - d. Formal strategies developed and implemented to expand the networks of professionals and communities who value the professions involved in CDs.
6. The impediments to achieving a workforce better positioned to meet the future needs of people with a CD and to develop evidence around optimal service delivery methods and models hinge, at least in part, on the use of *technology*. Speech pathologists are not well placed to innovate around information technology, nor the application of technology to enhance or value-add to services.
- a. A priority area of need should be identified around the development of multidisciplinary research projects and/or task groups to research/plan a future strategy to increase the appropriate use of technology in the management of people with CDs. This enhanced use of technology might be around increased service delivery (telehealth), around the use of technology to more easily and reliably chart outcomes/change, or around innovative intervention techniques.

NOT FOR PUBLICATION SECTION

1. The Workshop Program:

Tough Problems in Human Communication Disorders – 15 September

9.00 – 9.05	<i>Welcome Address</i> Professor Helen Chenery University of Queensland
9.05 – 9.50	<i>Keynote Address</i> Professor Leslie Gonzalez-Rothi University of Florida, VA Brain Rehabilitation Research Center <i>Rehabilitation Neuroscience: A research frontier warranting a clinical culture change</i>
9.50 – 10.15	Assoc Professor Lyndsey Nickels <i>Acquired language impairments: Tough problems for research and clinical practice</i>
10.15 – 10.40	Dr Wendy Pearce <i>Tough Problems in Paediatric Speech and Language Disorders</i>
MORNING TEA	
11.00 – 11.25	Dr Fiona Hinchliffe <i>Tough problems in management of speech pathology service delivery for human communication disorders: Private and public health</i>
11.25 – 11.50	Professor Cindy Gallois <i>Tough Problems in Aphasia Rehabilitation: A Personal Reflection</i>
11.50 – 12.15	Assoc Professor Deborah Theodoros <i>Tough Problems in the Management of Motor Speech Disorders: Future Directions</i>
12.15 – 12.40	Dr Susan Block <i>Tough problems in stuttering disorders</i>
LUNCH	
1.30 – 1.55	Ms Julia Cretchley <i>Exploring the Intergroup Dynamics of Disordered Communication using Leximancer text analytics technology</i>
1.55 – 2.20	Mr Adam Vogel <i>The Use of Voice Acoustic Measures to Monitor the Progression and Treatment of CNS Disorders</i>
2.20 – 2.40	Panel discussion
AFTERNOON TEA	

Workshop Program (Continued)	Tough Problems in Human Communication Disorders – 15 September
3.00 – 3.25	Professor Louise Hickson <i>Tough Problems in Rehabilitation of Adults with Hearing Impairment</i>
3.25 – 3.50	Dr Belinda Henry <i>Optimising Speech Perception in Cochlear Implant Recipients</i>
3.50 – 5.00	Panel Discussion and Summation Professor Leslie Gonzalez Rothi and Professor Helen Chenery
7.00 onwards	Workshop Dinner 'hundred acre bar, St Lucia Golf Links

2. Attendees

Graeme Barrington	University of Melbourne	gbarring@bigpond.net.au
Susan Block	La Trobe University	s.block@latrobe.edu.au
Elizabeth Cardell	University of Queensland	e.cardell@uq.edu.au
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Rachel Wenke	University of Queensland	r.wenke@uq.edu.au
Min Ney Wong	University of Queensland	m.wong@shrs.uq.edu.au

3. Budget.

Item		Amount	
Participant Travel Support			
	Barrington	500.00	
	Block	656.74	
	Delves	505.75	
	Nickels	544.67	
	Pearce	462.34	
	Scholten	454.55	
	Stirling	500.00	
	Vogel	496.44	
Total			4,120.49
Keynote Speaker	Gonzalez-Rothi	3,260.56	
Total			3,260.56
Project support	E Cardell	3,297.37	
Total			3,297.37
Workshop catering		957.09	
Workshop dinner		497.90	
Total			1,454.99
Other (booklet/ printing/ gift)		65.20	
Total			65.20
Grand Total			12,198.61

4. Abstracts.

2007 HCSNet HCD workshop abstracts

Tough problems in stuttering disorders

Dr Susan Block, Senior Lecturer, School of Human Communication Sciences, La Trobe University

Speech pathologists working with people who stutter face many barriers to effective and desirable service delivery. Service options such as the number of sessions available to clients, mandated by managers (often with no background in speech pathology) restrict the application of evidence-based best practice; lack of understanding of the implications or severity of stuttering may limit funding allocation; lack of flexibility in service delivery may restrict ongoing access to treatment etc. However, equally concerning and representing a very significant problem for the profession is the fact that adults who stutter, who are unable to access treatment, are increasingly turning to non-evidence-based treatments provided by people who stutter (who have had no theoretical background in stuttering or its treatment). These issues will be discussed.

Exploring the intergroup dynamics of disordered communication using Leximancer text analytics technology

Ms J. Cretchley and Dr A. Smith, School of Psychology, the University of Queensland

In the work described here, Leximancer text analytic software was used to search for evidence of communication disorder by comparing the conversational styles of participants. The program uses a complex systems approach to analyse unstructured and qualitative data. Word frequency and co-occurrence information are used to explore semantic and relational aspects of natural language texts. Leximancer provides valid and efficient relational content analyses of diverse text documents. Further, the technology can offer insights into the dynamics underlying real-life interactions.

The software was used to analyse 9 transcripts of 25-35 minute conversations between people with a DSM-III-R diagnosis of chronic schizophrenia (PwS) and their conversational partners (4 family carers and 5 case worker carers). Key themes and concepts confirmed that there are differences between the communication styles of PwS and carers. Within the PwS sample, two distinct communication profiles emerged. Members of the first tended towards minimal responses, therefore carers did much of the work in managing the conversations. Members of the second profile dominated the discourse, and carers were more reactive in their behaviour. There were also clear differences in the conversational strategies employed by family versus professional carers. The interactional complexities in these conversations were well-illuminated by the graphical representations offered by Leximancer.

Tough Problems in Aphasia Rehabilitation: A Personal Reflection

Cindy Gallois PhD FASSA, Deputy Executive Dean and Director of Research Faculty of Social and Behavioural Sciences Professor of Psychology

Recent literature suggests that intensive language rehabilitation over a fairly extended period (several months or longer) is more effective in producing language recovery in adult aphasia than less intensive or shorter periods of formal rehabilitation. Nevertheless, it is extremely common for patients to receive far less treatment than this, partly because of resource constraints in the health sector and partly because of motivational and social issues for patients and their families. This situation is made more complex by the wide range of individual differences in language loss and recovery in aphasia, and by the expectations for recovery of patients, carers, speech pathologists, and other health professionals. In this presentation, I reflect on resource and motivational issues in terms of the experience my partner and I had during his recovery of language after a stroke, over a period that ultimately spanned six years. Our own backgrounds gave us some insight into motivational and resource issues. In addition, our backgrounds permitted a much longer and more intensive rehabilitation process than is usual, which was crucial in his recovery.

Optimising Speech Perception in Cochlear Implant Recipients

Belinda A. Henry, School of Health and Rehabilitation Sciences, The University of Queensland

Cochlear implant technology has advanced significantly over time, and current devices enable high levels of speech recognition in quiet listening environments for many adults and children with severe to profound hearing impairment. However, despite these advances, wide variability in performance among individuals remains. In addition, speech recognition is highly susceptible to the effects of competing background noise, reducing the effectiveness of these devices in real-life environments. Programming parameters can be adjusted on an individual basis with the aim of optimising performance, however this is time-consuming in the clinical setting and particularly challenging in children. Identifying the perceptual factors related to speech recognition may lead to improved speech processor design and assist in parameter optimisation. A novel technique of directly measuring the ability of cochlear implant listeners to resolve spectral peaks in the acoustic signal which is predictive of speech recognition in both quiet and competing backgrounds will be discussed. This research has implications for improving the transmission of speech cues with cochlear implants, and has potential clinical applications in optimising and predicting speech recognition for individuals. Current directions and challenges in optimizing performance will be explored.

Tough Problems in Rehabilitation of Adults with Hearing Impairment

Louise Hickson PhD, Professor and Co-Director, Communication Disability Centre, School

of Health and Rehabilitation Sciences, The University of Queensland.

Hearing impairment is the most prevalent communication disorder in adults occurring in 10% of the general population over 18 years of age, and in 60% of people over the age of 60. Evidence about the improvements associated with the rehabilitation of adults with hearing impairment is strong, particularly for the efficacy of hearing aid fitting which is the most common form of rehabilitation. Hearing aids improve speech perception in a range of listening environments, reduce communication difficulties and improve quality of life. However, despite major advances in hearing aid technology in the last 15 years and excellent results in the laboratory environment, this approach is still unsuccessful for the vast majority of people with hearing impairment. Only approximately 20% of people seek rehabilitation for hearing impairment. Of those who do accept hearing aid fitting, between 10 and 30% discontinue use of the devices within a year. Funding support from the new HEARing Cooperative Research Centre will allow us to investigate barriers and facilitators to successful rehabilitation of adults with hearing impairment and an outline of the project plan will be presented.

Tough problems in management of speech pathology service delivery for human communication disorders: Private and public health

Fiona Hinchliffe PhD, Co-director Speech Pathology, Mater Health Services, South Brisbane

This paper will address the challenges of securing and sustaining speech pathology services in the health environment for adults and children with communication disorders. The Mater Health Services speech pathology department provides specialist care for people across the life-span within a corporation that encompasses a unique collocation of seven public and private hospitals. Allocation of speech pathology services for communication disorders competes with prioritised allocations for dysphagia management. Communication assessment and treatment, particularly for complex conditions, is costly in an environment where funding arrangements favour evidence of high activity and short length of stay. Business cases for increased staff and equipment funding compete with applications promoting risk reduction outcomes. Specialised services for communication disorders deemed not to be health related, such as fluency, remain unfunded in the public domain. Management strategies in relation to these issues will be explored.

Acquired language impairments: Tough problems for research and clinical practice

Lyndsey Nickels, Associate Professor & NHMRC Senior Research Fellow, Macquarie Centre for Cognitive Science (MACCS), Macquarie University, Sydney

I will address the problems that face those involved in the field of acquired language disorders and will particularly focus on the clinical/research interface. These problems focus

around the development and application of evidence-based practice. One major issue is raised by the fact that impairment-focused treatment often results in improvements to only the items that have been treated. Thus, there is the requirement to ensure that items are functionally relevant for the communicative needs of people with language impairment. However, current databases neither provide us with the relevant information, nor are easily accessible for clinicians. Similarly, there is a need to ensure that improvements at one level of impairment (e.g. comprehension and/or production of single words) result in real and meaningful change at other communicative levels (e.g. discourse, conversation). However, here the tools for measuring such change require refinement in order to provide tools that are reliable, consistent and can be employed quickly in the clinical setting. The second major issue to be discussed involves the clinical use of methods that enable the efficacy of treatment to be established. Such methods, while widely accepted in research circles, are used surprisingly little in the clinical arena.

Tough problems in paediatric speech and language disorders

Dr Wendy Pearce, Head of Speech Pathology Unit, School of Public Health, Tropical Medicine and Rehabilitation Sciences, James Cook University.

Speech pathologists working with children who have speech and language disorders face many tough problems as they strive to achieve effective outcomes for this group. The problems cut across a range of parameters including efficacy at the client interface, efficacy of service delivery systems, implementation of research, and education for the next and current generations of speech pathologists. The toughest problems we have centre around how ready we are to facilitate “mandated speech pathology services for all children with speech and/or language disorders” and “improved access to speech pathology services in rural and remote Australia” as requested by Speech Pathology Australia in its election policy for 2007. Paediatric speech pathologists also face tough problems in their readiness to embrace new therapy approaches and technological advances. A range of issues in relation to these themes will be raised to promote exploration of the tough problems for paediatric speech and language disorders.

Tough problems in the management of motor speech disorders: Future directions

Deborah Theodoros PhD, Associate Professor and Head, Division of Speech Pathology, The University of Queensland

Motor speech disorders such as dysarthria and apraxia of speech collectively represent approximately 50% of all neurogenic communication disorders. These speech disorders may range from mildly indistinct speech to a complete loss of speech intelligibility and an inability to communicate in everyday life. Based on current treatment protocols, progress towards everyday communication for many individuals is steady but slow, while for others,

rehabilitation may need to assist the individual to learn strategies to enable him/her to adapt to life with disordered speech. This paper will address the difficult clinical and research issues relating to the management of motor speech disorders such as the need for effective and efficient treatment techniques/programs, sensitive treatment outcome measures, and alternative service delivery models responsive to changing social and demographic factors. Current research in treatment efficacy for dysarthria and the development of telerehabilitation applications for the assessment and treatment of motor speech disorders remotely will be presented.

The Use of Voice Acoustic Measures to Monitor the Progression and Treatment of CNS Disorders

Adam Vogel, Clinical Scientist, CogState Ltd. Melbourne

A critical unmet need for clinical research is to improve early detection of central nervous system disorders by developing tools to assist with earlier diagnosis. Specific biomarkers such as voice acoustics may be useful at the onset of neurodegeneration, the onset of disease, and/or to mark disease progression. Two experimental designs will be discussed in the context of biomarker development. The first study examines the relationship between dopamine depletion, symptom severity rating scales and voice acoustic profiles in patients with Parkinsons Disease. The second study looks at new methods for collecting and analyzing voice acoustic data in the context of a clinical depression study. Implications and limitations of this burgeoning field are discussed.

5. Media Release.



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MEDIA RELEASE

Breaking down barriers to communication

14 September 2007

Researchers from around Australia will converge on The University of Queensland tomorrow to discuss current and enduring problems involved with the assessment, treatment and delivery of services for people with communication disorders.

Organised by the ARC Network in Human Communication Science (HCSNet), the event will connect leading researchers in language, speech and sonics with the aim of promoting and facilitating interdisciplinary collaboration.

From challenges in speech pathology, to obstacles to improving speech perception for individuals with cochlear implants, speakers from industry, management and research backgrounds will cover a diverse range of human communications issues.

As well as presenting and discussing their own work, participants will also hear a keynote address from Professor Leslie Gonzalez-Rothi from the University of Florida. Leslie is a Professor in Neurology, Clinical and Health Psychology and Communicative Processes and Disorders, and also the Program Director of the Brain Rehabilitation Research Centre of Excellence.

More information about the presentations is available on the HCSNet website at: www.hscnet.edu.au/hcsnetevents/2007/hcdworkshop/abstracts.

Media: For more information contact workshop convenor Professor Helen Chenery from the Department of Speech Pathology at UQ on 3365 5533 or at h.chenery@uq.edu.au. To interview speakers contact Rosemary Elliott on 0412 792 626 or at reliott@ics.mq.edu.au.

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6. Evaluation Responses.

What was the best thing about this workshop?

- Exchange of ideas and discussion about issues; great presentations
- Keynote address and learning about technologies; discussions were good; Cindy Gallois' address was particularly insightful
- Wide variety of information presented; good to re-evaluate the status of research in the area and future directions
- Opportunities for discussion
- Common issues; main speaker
- Keynote speaker
- The diversity of the areas covered
- Discussion
- Meeting colleagues from different areas; opportunity for discussion
- The keynote speaker
- Keynote speaker; the food was pretty good
- The plenary was fantastic
- Structure worked well with final discussions seeming to provide excellent opportunity to sum up the day
- Exchange of interesting and relevant challenges; updates in several research areas

What could have been done differently?

- Earlier, broader advertising
- I had not expected the forum to be so completely oriented to the needs and perceptions of tough problems for the speech pathology profession rather than the human communication science research domain more broadly. That does not take away from how interesting it was, however (Barrington)
- There was a very strong focus on speech pathology – other areas seemed to be under-represented
- It was a pity not to have discussion, question time after the first session's papers

Do you think you will pursue any of the research contacts/discussions you have had at this workshop? If yes, what will that involve? (e.g. follow-up meetings; possible joint/collaborative grant application; seminar; visit; other)

- Meetings; collaborative research
- Keeping up-to-date with progress of meeting outcomes; also investigate topics raised
- I would like to read and keep abreast of developments following final discussions
- Meetings
- Think of ways to embed discussion of these aspirations in education of speech pathologists
- Visits and follow-up meetings
- Seminar/Workshop
- Follow-up meetings, possible joint grant, visit
- Workshop

- At this stage, follow-up meetings
- Phone calls, emails etc.

What other activities would you like the Priority Area on Human Communication Disorders to organise?

- Forum with Speech Pathology Australia to influence strategic planning
- Not sure, but this was a very valuable experience, thanks
- Clinician-focused event – challenge change, make it confrontational
- Web-based survey for wider input to see what others in the profession see as priorities
- A follow-up meeting from today's meeting
- I would like to see further cross-disciplinary cooperation and discussion: psychology, linguistics, neurosciences, speech pathology, cognitive science. Our group would like to assist with this with a workshop in Melbourne next year.
- Web-based network/discussion list?
