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PROGRAMME

Session 1 Introduction

Dr Martha Turner, Consultant Clinical Psychologist & Neuropsychologist, Cognivate

Session 2 **Keynote: Reflections on a career in neuropsychological rehabilitation**

This presentation starts with a description of how I became interested in clinical psychology. After training at the Institute of Psychiatry in London, I came to neuropsychological rehabilitation from the field of learning disability where I was taught that if our patients could not learn, we were expected to find a way to help them overcome their problems. It was up to the psychologists, therapists and teachers to find a way, as no patient is untestable or untreatable. At that time, it was not the responsibility of the neuropsychologist to find a way around problems their patients might have. I was uncomfortable with this attitude, which has certainly changed now. I go on to reflect on my many years in brain injury rehabilitation, founding both the journal, Neuropsychological Rehabilitation, and The Oliver Zangwill Centre. I stress the importance of dealing with the real life problems faced by patients and their families and consider how some countries with few or no rehabilitation services cope with the same difficulties.

Professor Barbara A Wilson, Clinical Neuropsychologist, The Oliver Zangwill Centre, Ely and St George's Hospital, London

Session 3 **"Interdisciplinary Working - The whole is greater than the sum of its parts": A plenary session on the theme of interdisciplinary working**

- **Principles of interdisciplinary team (IDT) working** - Dr Shai Betteridge, Consultant Clinical Neuropsychologist, St George's University Hospital NHS FT
- **Case Study 1 – IDT working with FND** - Dr Mike Dilley, Consultant Neuropsychiatrist, Brain & Mind Ltd & Dr Shai Betteridge
- **Case Study 2 – IDT working with TBI** - Laura Slader, Neurological OT, Laura Slader Independent OT Services Ltd & Claire Salisbury, Neurological & Major Trauma Physiotherapist
- **Case Study 3 - IDT ABI group therapy programme** - Jessica Fish, Clinical Psychologist, St George's University Hospitals NHS FT & Institute of Health and Wellbeing, University of Glasgow & Jacqueline McIntosh, Specialist Speech & Language Therapist
- **Case Study 4 – IDT working with paediatric ABI** - Laura Slader & Dr Shai Betteridge
- **Q & A session** - Mark Edwards, Professor of Neurology St George's University of London & Atkinson Morley Regional Neurosciences Unit, Director Brain & Mind Ltd, Dr Mike Dilley, Dr Shai Betteridge, Laura Slader, Jacqueline Macintosh & Claire Salisbury



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Session 4 Interdisciplinary 'outreach' neurorehabilitation: Why and how it works

Nearly thirty years ago the Department of Health commissioned twelve projects across the UK to inform or trial post-acute rehabilitation for people with TBI. The RNRU Outreach Team at Homerton Hospital was funded to develop and evaluate a model service delivering interdisciplinary rehabilitation in the community. A randomised controlled

trial demonstrated its efficacy and showed that gains were maintained at follow-up. An ongoing prospective evaluation has documented similar improvements in independence, social participation, and overall quality of life for clients with ABI of varied aetiologies. The talk describes key features of the interdisciplinary model, and how Cognivate is extending this into the independent sector.

Jane Powell, CEO & Neuropsychologist, Cognivate & Dr Richard Greenwood, Consultant Neurologist, National Hospital for Neurology & Neurosurgery

Session 5 Vocational rehabilitation after brain injury

Vocational rehabilitation (VR) interventions to assist people with brain injury to return to and remain in work or alternative occupation employment are a key component of community neurorehabilitation. The range of models of VR after brain injury and the process of vocational rehabilitation provided by the Community Head Injury Service will

be outlined, focusing on "Working Out" (brain injury vocational rehabilitation programme), illustrated by a brief case example. Both inter-disciplinary and cross agency working is intrinsic to the development and provision of VR after brain injury.

Dr Andy Tyerman, Consultant Clinical Neuropsychologist, Community Head Injury Service, Buckinghamshire Healthcare NHS Trust

Session 6 Holistic relationship work and fragmented selves in community rehabilitation

To work holistically with survivors of brain injury must necessarily include a focus on significant relationships through which survivors define themselves - those with family, partners and friends. However both post-injury relationship strain and common trends in service provision can serve to fragment these relationships, and the self-experience of those involved.

Dr Giles Yeates, Consultant Clinical Neuropsychologist, Rippling Minds

Session 7 The Oliver Zangwill Centre Intensive Neuropsychological Programme

This presentation will explore holistic neuropsychological rehabilitation and the factors impacting delivery of the approach, within the context of the intensive neuropsychological rehabilitation programme provided at the Oliver Zangwill Centre.

Leyla Prince Head of Service, Specialist Speech & Language Therapist/Family & Systemic Psychotherapist, The Oliver Zangwill Centre



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Who we are

Cognivate is a new service offering community-based interdisciplinary rehabilitation to adults with acquired brain injury. Our experienced neuropsychologists, occupational therapists, SLTs, and physiotherapists work together to help clients maximise their independence and quality of life. We have direct access to neurologists and neuropsychiatrists, and work closely with case managers to ensure a streamlined service.

How does cognivate work?

Our therapists work together to help our clients achieve real life goals which improve their quality of life —these include independence at home, participation in activities outside the home, and returning to employment.

We work with clients in the places and modes most appropriate to their particular needs - at home, at work, and online.

Our intensive rehabilitation programmes are complemented by a suite of online group activities and classes to which all our clients have access.



Principles of our service



Interdisciplinary

Our team work as a coordinated unit to co-design and co-deliver interventions



Focused on real life goals

Interventions are focussed on goals that are meaningful for the client and family



A holistic neuropsychological framework

Interventions are based on a rounded understanding of clients and their families



Gold standard evidence-based interventions

Our model has been refined over 20 years of research with over 400 clients



Integrated reporting and billing

We produce a single integrated report which focuses on treatment objectives



Areas we cover

We can travel to see clients in London and the South East from our geographical centre in Epsom.

Find out more



www.cognivaterehab.com



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