Post-Traumatic Stress Disorder (PTSD) Training Course

10 – 14 May 2027
Porto

AGILE LEADERS
Training Center

AGILE LEADERS
Training Center

Post-Traumatic Stress Disorder (PTSD) Training Course

Ref: 1528_212901 **Date:** 10 – 14 May 2027 **Location:** Porto **Fees:** 5700 Euro

Overview

Post-Traumatic Stress Disorder PTSD is a one-week advanced course for mental health service leaders, clinical support teams, healthcare managers, occupational health professionals, care coordinators, and trauma-informed teams, who leave with a PTSD Service Coordination Portfolio. The course connects trauma-informed care, PTSD screening governance, structured assessment pathways, safety planning, evidence-informed treatment routes, outcome monitoring, and service improvement. Agile Leaders Training Center presents PTSD service planning as coordinated care built around safety, choice, function, and review.

Who Should Attend

- Functions responsible for mental health service governance and pathway design
- Teams responsible for trauma-informed care and clinical support coordination
- Personnel responsible for occupational health and workforce trauma support
- Functions responsible for screening, referral, case management, and safeguarding
- Teams responsible for family support and culturally responsive care
- Quality functions responsible for outcome monitoring and service improvement

The course assumes participants coordinate health or support services and leaves out diagnostic authorization, psychotherapy qualification, prescribing, general stress management, resilience training, and psychological first aid instruction.

Departments and Industries

The course supports departments and organizations that design, coordinate, or improve services for people affected by trauma.

- Mental health, primary care, and hospital services
- Occupational health and employee assistance functions
- Social care, safeguarding, and case management organizations
- Emergency, humanitarian, and community support services
- Education, rehabilitation, and family support organizations
- Quality, clinical governance, and patient experience teams

Learning Objectives

By the end of this course, participants will be able to:

- Analyze PTSD recognition, function, context, and service access needs
- Build screening governance and structured assessment coordination pathways
- Apply trauma-informed safety, choice, and safeguarding methods
- Compare evidence-informed treatment and referral pathway options
- Use comorbidity, family, cultural, and occupational support plans
- Evaluate outcomes, coordination evidence, and service improvements

Course Agenda

Day 1: Recognition and Trauma-Informed Service Design

- PTSD Recognition and Functional Impact Map
- Trauma History and Service Access Context Profile
- Trauma-Informed Safety, Choice, and Collaboration Principles
- Stigma, Culture, and Help-Seeking Barrier Assessment
- PTSD Service Governance and Accountability Charter

Day 2: Screening, Assessment, and Risk Coordination

- PTSD Screening Governance and Consent Checklist
- Structured Assessment Coordination Pathway
- Risk, Safeguarding, and Crisis Escalation Matrix
- Comorbidity and Functional Needs Review Grid
- Referral Threshold and Urgency Decision Record

Day 3: Care Pathways and Support Planning

- Evidence-Informed Treatment Pathway Comparison
- Preference and Shared Decision-Making Record
- Family and Caregiver Support Planning Map
- Occupational Trauma and Return-to-Function Plan
- Culturally Responsive Care Adaptation Checklist

Day 4: Coordination, Measurement, and Improvement

- Multi-Agency Care Coordination and Handoff Protocol
- Symptom, Function, and Quality-of-Life Monitoring Dashboard
- Engagement, Access, and Continuity Review Tracker
- Clinical Governance and Supervision Evidence Matrix
- PTSD Service Improvement and Corrective Action Plan

AGILE LEADERS
Training Center

Day 5: PTSD Pathway Testing and Integration

- Suggested Exercise: Recognition and Access Case Analysis
- Suggested Exercise: Screening, Risk, and Referral Decision Review
- Suggested Exercise: Care Pathway and Support Plan Simulation
- Suggested Exercise: Outcome and Coordination Evidence Review
- Capstone Exercise: PTSD Service Coordination Portfolio

Practical Exercises

The course uses suggested activities based on fictional healthcare, occupational health, social care, emergency, and community service situations.

- Suggested activity: map recognition, functional impact, trauma context, culture, access barriers, and governance responsibilities.
- Suggested activity: coordinate screening, consent, assessment, risk, safeguarding, crisis escalation, and referral decisions.
- Suggested activity: compare care pathways and build family, occupational, cultural, and comorbidity support arrangements.
- Suggested activity: review monitoring, handoffs, supervision, access, continuity, and corrective actions in one service case.

FAQs

Who suits Post-Traumatic Stress Disorder training, and what does it assume?

Mental health service, healthcare management, occupational health, social care, case coordination, safeguarding, and quality functions suit the training; it assumes responsibility for service coordination and excludes authority to diagnose, prescribe, or deliver psychotherapy.

How does PTSD service planning differ from general stress management training?

PTSD service planning coordinates recognition, structured assessment, risk, evidence-informed care pathways, comorbidity, safeguarding, family support, monitoring, and improvement, while general stress management concentrates on broader coping and wellbeing practices.

What should a PTSD care pathway include?

A PTSD care pathway should connect recognition, consent, screening governance, assessment coordination, risk, safeguarding, referral, treatment choices, support needs, handoffs, monitoring, supervision, review, and service improvement.

AGILE LEADERS
Training Center

How should PTSD services monitor outcomes and safety?

PTSD services should monitor symptoms, function, quality of life, risk, safeguarding, engagement, access, continuity, treatment preferences, support needs, handoffs, and corrective actions through agreed review points and accountable governance.

Conclusion

Participants leave with a PTSD Service Coordination Portfolio containing recognition, access, governance, screening, assessment, risk, referral, pathway, support, handoff, monitoring, supervision, and improvement tools. The portfolio connects trauma-informed principles with accountable service decisions. It helps teams coordinate safer access, review outcomes, strengthen continuity, and assign improvements without extending professional scope.