



# Advanced Trauma-Informed Care Implementation Training Course

13 – 17 September 2027  
Prague

## Advanced Trauma-Informed Care Implementation Training Course

**Ref:** 1544\_213997 **Date:** 13 – 17 September 2027 **Location:** Prague **Fees:** 6000 Euro

### Overview

The Advanced Trauma-Informed Care Implementation Training Course is a one-week course for healthcare professionals, mental health practitioners, social-care staff, clinical leaders, patient-experience teams, and service managers. Participants apply trauma-informed care implementation principles to safety, trust, choice, collaboration, empowerment, cultural responsiveness, communication, environments, workforce support, governance, and service improvement while maintaining boundaries from trauma therapy. Agile Leaders Training Center positions the course around a Trauma-Informed Care Implementation and Assurance File.

### Who Should Attend

- Healthcare professionals seeking safer and more responsive care interactions
- Mental health practitioners supporting trauma-informed service delivery
- Social-care staff coordinating care, support, and referral pathways
- Clinical leaders responsible for culture, environments, and workforce practice
- Patient-experience teams partnering with people who use services
- Service managers governing implementation and improvement

### Departments and Industries

The course supports services where trauma may affect access, trust, communication, and care experiences.

- Hospital and ambulatory clinical services
- Mental health and behavioral health services
- Social care and community support organizations
- Patient experience and safeguarding functions
- Quality improvement and clinical governance teams
- Workforce development and staff wellbeing functions

### Learning Objectives

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



- Apply trauma-informed principles across care and service systems
- Recognize possible trauma responses without diagnosing or forcing disclosure
- Assess environments, communication, and processes for retraumatization risk
- Use safety, trust, voice, choice, and collaboration in care interactions
- Define safe enquiry, referral, and professional boundaries
- Support reflective practice and workforce wellbeing
- Create an implementation and assurance file for service improvement

## **Course Agenda**

### **Day 1: Trauma-Informed Foundations and Boundaries**

- Four-Assumption Trauma-Informed Approach Map
- Six-Principle Care Practice Matrix
- Trauma Response Recognition Guide
- Trauma-Informed Care and Therapy Boundary Chart
- Service-System Impact and Recovery Pathway Map

### **Day 2: Safety, Trust, Voice, and Choice**

- Physical and Psychological Safety Review
- Trustworthiness and Transparency Checklist
- Voice, Choice, and Shared-Decision Guide
- Collaboration and Power-Difference Reflection
- Cultural Humility and Inclusion Review

### **Day 3: Communication, Environments, and Referral**

- Trauma-Sensitive Communication Planner
- Retraumatization-Risk Assessment
- Trauma-Responsive Environment Walkthrough
- Safe Enquiry and Privacy Boundary Guide
- Support and Referral Pathway Map

### **Day 4: Workforce, Governance, and Implementation**

- Workforce Reflection and Wellbeing Plan
- Lived-Experience Partnership Framework
- Trauma-Informed Policy and Governance Map
- Implementation Domain Readiness Assessment
- Trauma-Informed Monitoring Dashboard



## **Day 5: Trauma-Informed Care Practice**

- Suggested Exercise: Principle-to-Practice Mapping
- Suggested Exercise: Communication and Choice Review
- Suggested Exercise: Environment and Retraumatization Assessment
- Suggested Exercise: Workforce and Governance Readiness Review
- Capstone Exercise: Trauma-Informed Care Implementation and Assurance File

## **Practical Exercises**

The course uses suggested activities drawn from hospital outpatient care and community mental health services.

- Suggested activity: review a service interaction for safety, trust, voice, and choice.
- Suggested activity: identify environmental triggers and propose harm-reduction changes.
- Suggested activity: define safe enquiry boundaries and an appropriate support pathway.
- Suggested activity: assess implementation readiness and select monitoring signals.

## **FAQs**

### **Who is the trauma-informed care implementation course designed for?**

The course is designed for healthcare, mental health, social-care, experience, quality, and management professionals responsible for care interactions or service implementation.

### **How does trauma-informed care differ from trauma therapy?**

Trauma-informed care shapes environments, relationships, policies, and practices, while trauma therapy is a specialized clinical intervention delivered within appropriate professional scope.

### **Does trauma-informed care require people to disclose trauma?**

No. Trauma-informed practice does not assume trauma or force disclosure; it uses safe, respectful, choice-supporting interactions while maintaining privacy and referral boundaries.

### **How can services reduce retraumatization risk?**

Services can review power, language, environments, predictability, privacy, procedures, choice, staff responses, and feedback to identify and reduce avoidable harm.

### **How is trauma-informed care implementation monitored?**

Implementation is monitored through selected measures of safety, trust, participation, workforce practice, environment, policy integration, feedback, and improvement follow-through.



## Conclusion

Participants leave with a Trauma-Informed Care Implementation and Assurance File containing practice maps, environment reviews, communication guides, risk assessments, referral boundaries, workforce plans, governance, and measures. The file helps services connect principles with observable changes in care and organizational practice. It supports safer, more respectful experiences without turning every interaction into trauma assessment or therapy.