

TRAUMATIC BRAIN INJURY: UNDERSTAND THE LONG-TERM EFFECTS AND ADAPT PROFESSIONAL PRACTICE

Training for professionals supporting individuals with brain injury in medical-social facilities and home care

Master the invisible sequelae of TBI to provide truly adapted support

Duration : 6 to 7 hours	Modules : 8 modules
Lessons : 32 lessons	Audience : Care assistants, nursing assistants, nurses, activity leaders, support workers
Format : 100% online, asynchronous	Provider : N° 11757351875
Certification : Qualiopi	Price : On request

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Course description

Traumatic brain injury affects tens of thousands of people each year, often young individuals whose cognitive, behavioral, and emotional sequelae remain invisible and misunderstood. Unlike neurodegenerative diseases, significant recovery is possible, but requires specific understanding and adapted support strategies. This training provides professionals with solid knowledge of TBI mechanisms, its particular sequelae, and concrete tools to adjust their daily practice. At the end of the training, each participant will be able to intervene with relevance, coherence, and appropriate professional distance with this specific population.

Module summary

MODULE 1	Understanding Traumatic Brain Injury	4 lessons
MODULE 2	Cognitive sequelae — the invisible heart of TBI	4 lessons
MODULE 3	Behavioral and emotional consequences	4 lessons
MODULE 4	Communication and Support Relationship	4 lessons
MODULE 5	Supporting autonomy and rehabilitation on a daily basis	4 lessons
MODULE 6	Specific complex situations related to TBI	4 lessons
MODULE 7	Coordination, team and families	4 lessons
MODULE 8	Practical cases and consolidation	4 lessons

Learning objectives

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- Understand the mechanisms of traumatic brain injury and distinguish between primary and secondary lesions
- Identify cognitive, behavioral and emotional sequelae specific to TBI and their neurological origin
- Adapt communication and support strategies to the cognitive profile of the person with TBI
- Manage challenging behaviors (disinhibition, aggression, apathy) with appropriate professional techniques
- Implement compensatory tools and ecological rehabilitation in daily support
- Work effectively in a multidisciplinary team and with devastated families
- Handle specific complex situations: epilepsy, risk behaviors, anosognosia
- Build an individualized support plan based on the neuropsychological profile

General information

Duration	6 to 7 hours - Self-paced online learning
Target audience	Professionals working in medical-social facilities or at home: care assistants, nursing assistants, nurses, activity leaders, support workers
Prerequisites	None
Price	On request - VAT not applicable (article 261-4-4° of the French General Tax Code)
Certification	Qualiopi - Training completion certificate
Training organization	DYNSEO - Activity registration number: 11757351875

Lesson 1 - Mechanisms and Types of Head Injuries

- Definition of TBI: acquired brain injury from direct or indirect impact
- Lesional mechanisms: direct impact, coup-contrecoup, diffuse axonal injuries
- Classification: mild (concussion), moderate, severe and their implications
- Most common causes: road accidents, falls, sports accidents, violence

Lesson 2 - What happens in the brain after a TBI

- Primary lesions: contusions, hematomas, diffuse axonal injuries
- Secondary lesions: cerebral edema, ischemia, intracranial hypertension
- Post-traumatic brain plasticity: possible, variable, prolonged recovery
- Why two similar TBIs can result in very different sequelae

Lesson 3 - The acute phase and rehabilitation — understanding the journey

- Acute phase: resuscitation, neurosurgery, intensive care and Glasgow scale
- Altered states of consciousness: vegetative, minimally conscious, post-traumatic confusion
- The rehabilitation center: objectives, duration, and what is worked on
- Information received by professionals in care facilities and gaps to fill

Lesson 4 - The specificity of the TBI population

- Predominantly young audience: identity, life project, sexuality issues
- Traumatic event as a brutal life break: a marked before/after
- Awareness of difficulties: anosognosia versus painful hyperawareness
- Devastated and exhausted families: understanding context to work better

Lesson 1 - Attention and processing speed disorders

- Selective, sustained, divided attention: all can be affected
- Cognitive slowing post-TBI: why everything takes longer
- Impact of fatigue on attention: rapid degradation throughout the day
- Adapting support: calm environment, short instructions, regular breaks

Lesson 2 - Post-TBI memory disorders

- Post-traumatic amnesia: definition, duration, prognostic value
- Episodic memory disorders: forgetting recent events, confabulation
- Prospective memory: forgetting what to do — major impact on autonomy
- Procedural memory often preserved: valuable support for rehabilitation

Lesson 3 - Executive function disorders

- Definition: planning, organization, initiation, flexibility, inhibition
- Frontal lesions common in TBI particularly affect these functions
- Concrete manifestations: not knowing where to start, repeating mistakes
- Adapting support: structuring, guiding, sequencing without infantilizing

Lesson 4 - Anosognosia and lack of awareness of difficulties

- Definition: not perceiving one's own deficits after TBI
- Major obstacle to rehabilitation and acceptance of assistance
- Difference between neurological anosognosia and psychological denial
- Professional approach: do not confront harshly, work with concrete evidence

Lesson 1 - Post-TBI disinhibition and impulsivity

- Frontal origin of disinhibition: neurological mechanisms
- Manifestations: inappropriate remarks, sexual behaviors, impulsive purchases, outbursts
- Not a choice or bad character: crucial importance of this understanding

- Strategies: anticipate triggers, reframe without punishing, protect without humiliating

Lesson 2 - Irritability, aggressiveness, and emotional outbursts

- Post-TBI irritability: low frustration tolerance, disproportionate reactions
- Crisis: triggers, precursor signals, de-escalation techniques
- Emotional lability: uncontrolled crying or laughter of neurological origin
- After crisis: resume relationship without resentment, adapt environment

Lesson 3 - Apathy and loss of motivation

- Post-TBI apathy: loss of initiative, interest, engagement — common and disabling
- Distinguishing neurological apathy, depression, and voluntary refusal
- Why insisting and blaming worsens apathy
- Gentle activation strategies: low-threshold activities, routines, appreciation

Lesson 4 - Post-TBI Depression and Anxiety

- Frequency: depression in 25 to 50% of cases after moderate to severe TBI
- Double origin: neurological and reactive to losses and awareness
- Post-traumatic anxiety: PTSD common after traumatic TBI
- Professional role: observe, report, support without diagnosing

MODULE 4

Communication and Support Relationship

4 lessons

Lesson 1 - Language and communication disorders post-TBI

- Post-TBI aphasia: less common than in stroke but possible
- Pragmatic disorders: difficulties adapting speech to social context
- Word-finding difficulties and tangential speech: going off on tangents
- Post-TBI dysarthria: slurred articulation, irregular speech rate

Lesson 2 - Adapting communication to the cognitive profile post-TBI

- Speak slowly, clearly, with short and direct sentences
- Avoid insinuations, irony, subtle humor: often misinterpreted
- One instruction at a time: never stack instructions
- Validate understanding without putting person at fault publicly

Lesson 3 - Managing inappropriate social behaviors

- Reframe disinhibited behavior with firmness and kindness simultaneously
- Rule of natural consequences: explain social impact without moralizing
- Protect other residents without excluding the person with TBI
- Work as a team for coherent response to difficult behaviors

Lesson 4 - The support relationship with a young person with TBI

- Adapt posture: neither parent nor friend — professional with an adult
- Respect pre-TBI identity: who was this person before the accident
- Post-TBI life project: employment, emotional life, independent living
- Professional frustration facing slow progress or repeated behaviors

MODULE 5

Supporting autonomy and rehabilitation on a daily basis

4 lessons

Lesson 1 - The principle of ecological rehabilitation

- Rehabilitation happens in life, not only in therapist's office
- Role of support professional in generalizing acquired skills
- Apply compensatory strategies taught by neuropsychologist in daily care
- Do not do for them: maintain adapted expectations to encourage recovery

Lesson 2 - Cognitive compensatory aids

- Agenda and memory notebook: essential compensation tools post-TBI
- Digital apps: reminders, lists, routines — choosing and implementing
- Visual checklists for complex tasks: dressing, meal prep, outings
- Digital cognitive stimulation (JOE) as complement to formal rehabilitation

Lesson 3 - Managing Post-TBI Cognitive Fatigue

- Post-TBI fatigue: omnipresent, underestimated, crucial for recovery
- Identify person's energy window and organize activities accordingly
- Fatigue signals: increased irritability, repeated mistakes, slowing down
- Break as therapeutic tool: integrated into schedule, not experienced as failure

Lesson 4 - Cognitive stimulation and adapted activities

- Calibrate difficulty to actual level: neither too easy nor too difficult
- Activities adapted to injury profile: attention, memory, executive functions
- Importance of meaningful activities: connection with pre-TBI identity
- Use digital tools for cognitive stimulation (JOE) in TBI context

MODULE 6

Specific complex situations related to TBI

4 lessons

Lesson 1 - The TBI in young people — specific issues

- School or professional break: supporting mourning of life project
- Affective life and sexuality after TBI: rarely addressed yet central
- Shattered identity: 'I am no longer the same person as before'
- Risks of addictive behaviors and risk-taking post-TBI: vigilance and prevention

Lesson 2 - The TBI and risk behaviors

- Disinhibition and impulsivity as risk factors for new accidents
- Anosognosia and resumption of driving: delicate but unavoidable subject
- Post-TBI addictive behaviors: alcohol, drugs, gambling — frequency and mechanisms
- Professional role: report without punishing, direct to specialized resources

Lesson 3 - Eating Disorders and Behavioral Disorders

- Post-TBI swallowing disorders: monitoring, adapted textures, reporting
- Weight gain secondary to hyperphagia and sedentary lifestyle
- Adapting food environment without creating conflict: practical strategies

Lesson 4 - Post-traumatic epilepsy seizures

- Frequency of epileptic seizures after moderate to severe TBI
- Recognizing seizures: types, clinical signs, duration
- Actions during seizure: ensure safety, do not restrain, time the seizure
- After seizure: postictal period, reporting, monitoring

MODULE 7

Coordination, team and families

4 lessons

Lesson 1 - The multidisciplinary team around the TBI person

- The MPR doctor (physical medicine and rehabilitation): pivot of coordination
- The neuropsychologist: cognitive assessment and rehabilitation — articulation
- Occupational therapist, physiotherapist, speech therapist: specific goals in TBI
- Social worker and pathway coordinator: essential in severe TBI

Lesson 2 - Transmit and alert effectively

- Priority observations to report: unusual behaviors, progress, regressions
- Write useful observation: precise, factual, without interpretation
- Alert signals to report immediately: seizure, severe aggression, fall
- Continuity of information during changes of caregiver or structure

Lesson 3 - Working with devastated families

- What families experience: shock, exhaustion, mourning for past, guilt
- Families who overinvest or fade away: two reactions to understand without judgment
- Explain behavioral sequelae to families who perceive them as whims
- Build coherent family-team alliance around life project

Lesson 4 - Specific ethical situations in TBI

- Consent to treatment in person with anosognosia: challenges and limits

- Legal protection: guardianship, curatorship — what professional needs to know
- Right to take risks for adults with brain injury: between protection and autonomy
- Reporting abuse in context of challenging behaviors

MODULE 8

Practical cases and consolidation

4 lessons

Lesson 1 - Protocols for the Most Common Situations

- Sudden verbal aggression crisis: step-by-step decision tree
- Epileptic seizure: management, reporting, post-ictal monitoring
- Refusal of care in anosognosic person: approach and alternatives
- Disinhibited behavior in group: intervention, protection, follow-up

Lesson 2 - Role-playing and simulations

- Simulation: supporting person with TBI who refuses compensatory agenda
- Simulation: managing irritability crisis triggered by hallway noise
- Simulation: explaining to family why loved one 'can do but does not want to'
- Group debriefing: what worked, what could have been done differently

Lesson 3 - Building an individualized support plan post-TBI

- Evaluate cognitive and behavioral profile based on neuropsychological assessment
- Identify appropriate compensatory aids for this profile
- Write clear and transferable instructions for the team
- Reassess regularly according to evolution of recovery

Lesson 4 - Final evaluation and resources

- Quiz to consolidate key learning from the training
- Each participant identifies most challenging TBI situations in their practice
- Development of personal action plan for next 30 days
- Additional resources: UNAFTC, CRFTC, HAS, recommended digital tools

Teaching methods

- 100% online self-paced training accessible 24/7 from any device
- Theoretical videos, practical case studies, interactive quizzes and downloadable tools
- Estimated duration: 6 to 7 hours — adaptable according to your pace and prior knowledge
- Final evaluation to validate acquired knowledge
- Training completion certificate issued at the end of the program
- Personalized support available: contact our training team for any questions