

Do The Cha Cha!

Application for Step 1 and Step 2



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IFECMHS, RFP II

Getting started...



I would like to know:

What are your Critical Questions that you need to know in order to proceed with your learning process through the day?

Lingering thoughts?

Things to be clarified?

Day 1 Answers

1-28-16



1. Shut down and glassy eyed- **Blue Zone 35%-88% +53%**
 2. Wide eyed with raised eyebrows- **Combo Zone 47%-80 +33%**
 3. Hyperactive flitting or screaming- **Red Zone 36%-89% +53%**
 4. Calm and present- **Green Zone 62%- 88% +26%**
5. Which is the most serious of the toxic stress patterns in terms of wear and tear on the body?
- **One**
 - **Two**
 - **Three**
 - **Four 65%- 91% +26%**

Day 1 Answers



6. Allostasis is defined as “stability” with “flexibility”. *Stability with flexibility* is how the neurorelational framework defines “health.” Which shifts of arousal states embody this concept? **56%-89% + 33%**

- **Shifting from Blue zone to red zone**
- **Cycling into deep sleep and settling into blue zone**
- **Shifting into red zone and bouncing back to green zone**
- **Cycling into deep sleep and green zone**

Day 1 Answers



7. Which of the following states of arousal capture the hallmarks of stress recovery or physiological resilience? **62%- 32% -30%**

- **Capacity for green zone and red zone**
- **Capacity for deep sleep cycling and for green zone**
- **Capacity for light and deep sleep cycling**
- **Capacity for blue zone and green zone**

Day 2 Answers

1-29-16



Match color zones with relational style:

- 8. Blue zone- **Head** 15%-71% +56%
- 9. Red zone- **Hand** 55%-61% +6%
- 10. Combo zone- **Heart** 58%-95% +37%

The NRF sees a parallel process between personality styles, parenting, and clinical skills. Please match these styles & theories with the corresponding interpersonal mode.

- 11. Negotiation and collaboration- **Head** 29%- 93% +64%
- 12. Following the lead- **Heart** 44%- 80% +36%
- 13. Taking the lead- **Hand** 64% - 95% +31%

Day 2 Answers



14. When assessing levels of engagement, which social emotional milestone is considered the heart of attachment?

- **Shared joy and falling in love 65%-98% +33%**
- **Back and forth circles of communication**
- **Getting calm and green together.**

15. Which of the six rating scales signifies the need for sensory-motor support and scaffolding to achieve the capacity? Please circle.

- **One**
- **Two**
- **Three**
- **Four 71%- 93% +22%**
- **Five**
- **Six**

Day 2 Answers



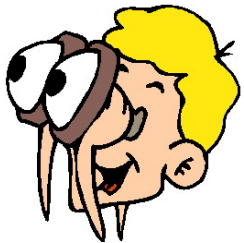
Which of these levels of engagement are bottom-up and which are top-down? Please write in the blank column to the right whether it is “bottom-up” or “top-down.”

Emotional cue reading and gestures	Bottom up
Getting green together	Bottom up
Circles of communication	Bottom up
Sharing emotional themes	Top down
Sharing joy	Bottom up
Problem-solving	Top down
Looking at faces and/or sharing sensory comfort	Bottom up

Chinese Proverb



I hear and I forget



I see and I remember



I do and I understand

Why Ourselves First?



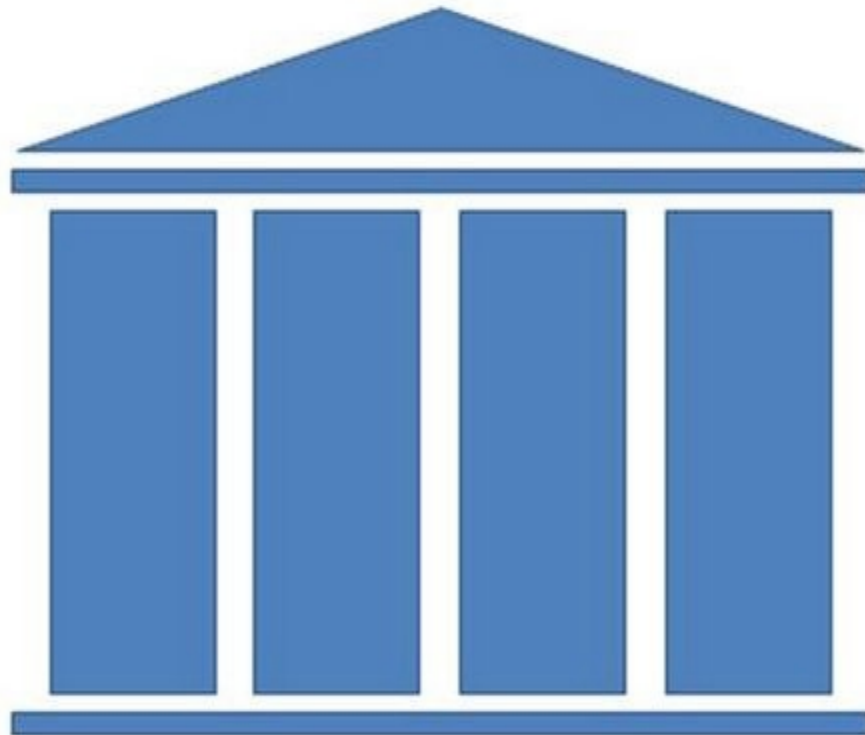
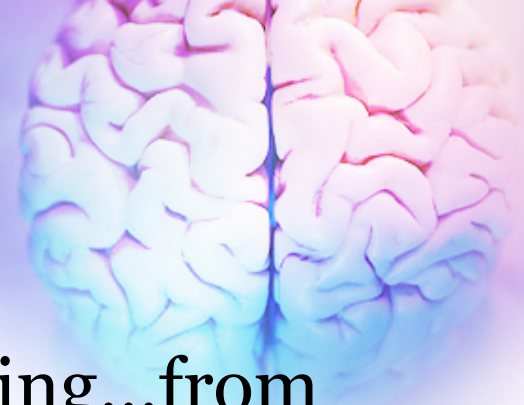
- We cannot help others if we are not ready to help others
- We learn to help others by taking care of ourselves
- Helps us prevent burn-out; helps us with vicarious trauma/compassion fatigue
- We can teach something to others if we procedurally know these steps & use them ourselves

Facilitate Recovery in Self



**Put Your
Oxygen
Mask on
First,
Then Help
Others**

Parallel Processes...

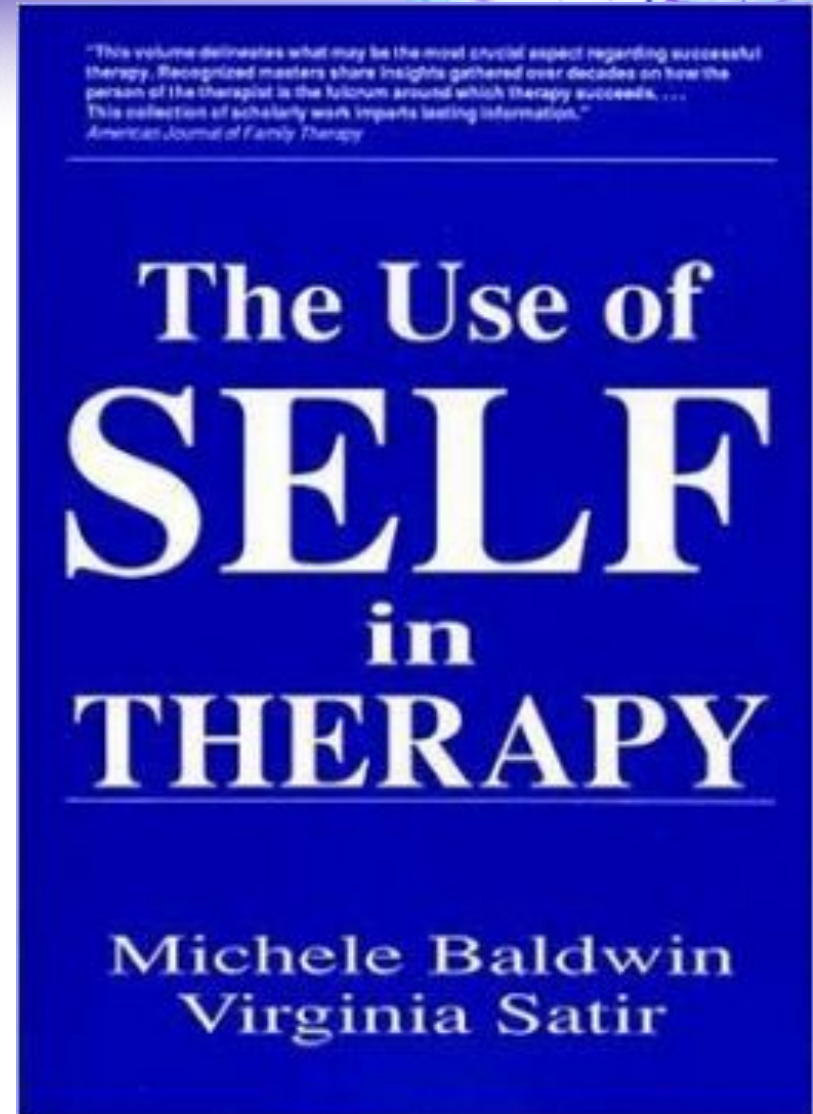
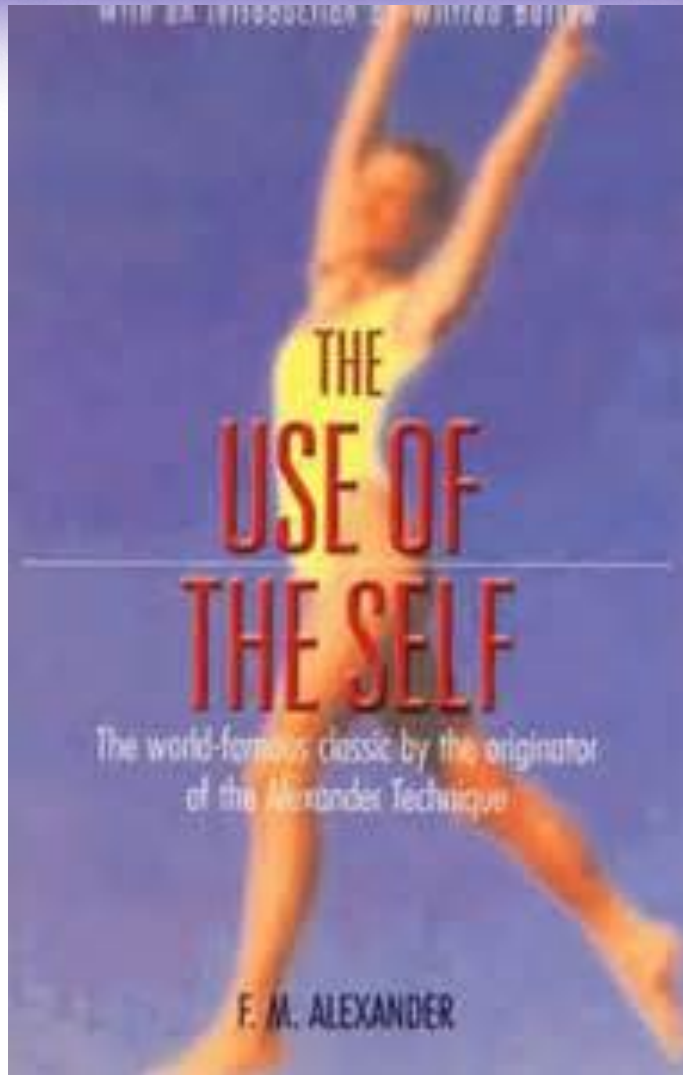


Integrating...from
micro to macro

- Personal
- Interpersonal
- Institutional
- Cultural

Simultaneously, similar
dynamics occurring
on multiple levels

Relationship-Based Practice...



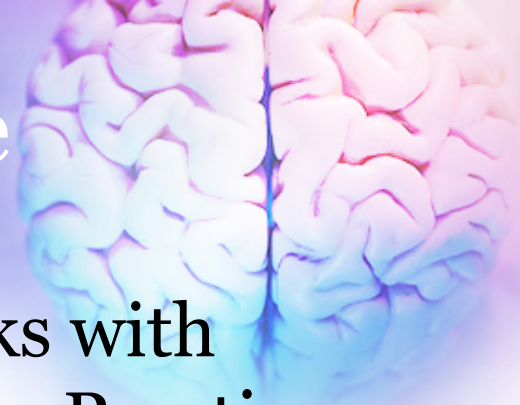
Reflective Practice....



- We need safe places to digest our stress responses to our families
- We need time to sort out....
 - Is this more about me?
 - Is this more about my family?
 - How are we both being triggered?
 - What does this mean?
 - Are we co-creating an “old” relational procedure?
 - How can we be a part of shifting to “new” relational procedures?



NRF Use of Reflective Practice



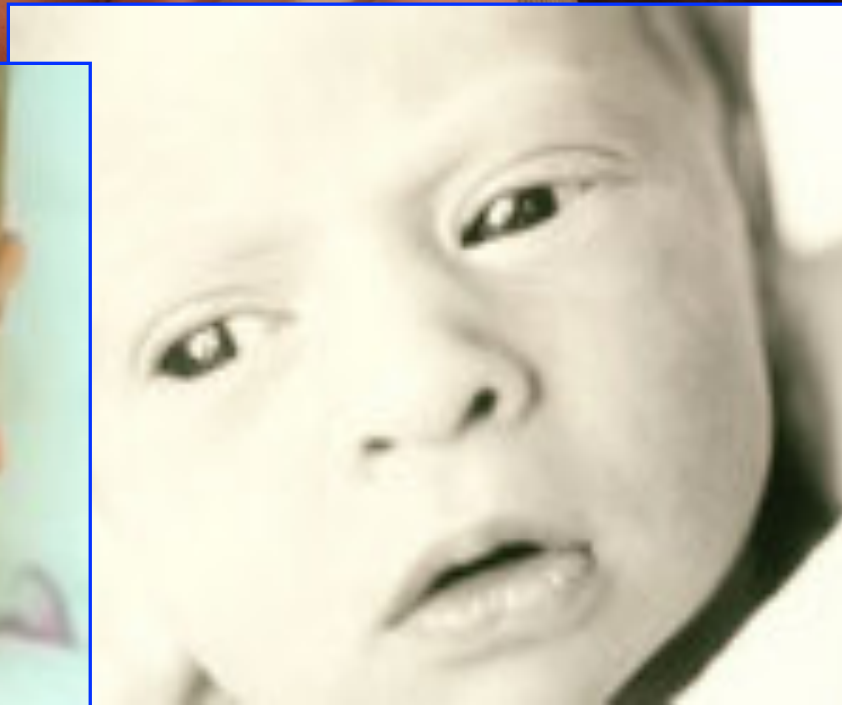
5 aspects of Reflective Practice in the Lit:

1. Parallel Process
2. Holding the baby/
parent(s) in mind
3. Use of self
4. Transference and
Countertransference
5. Rupture & Repair

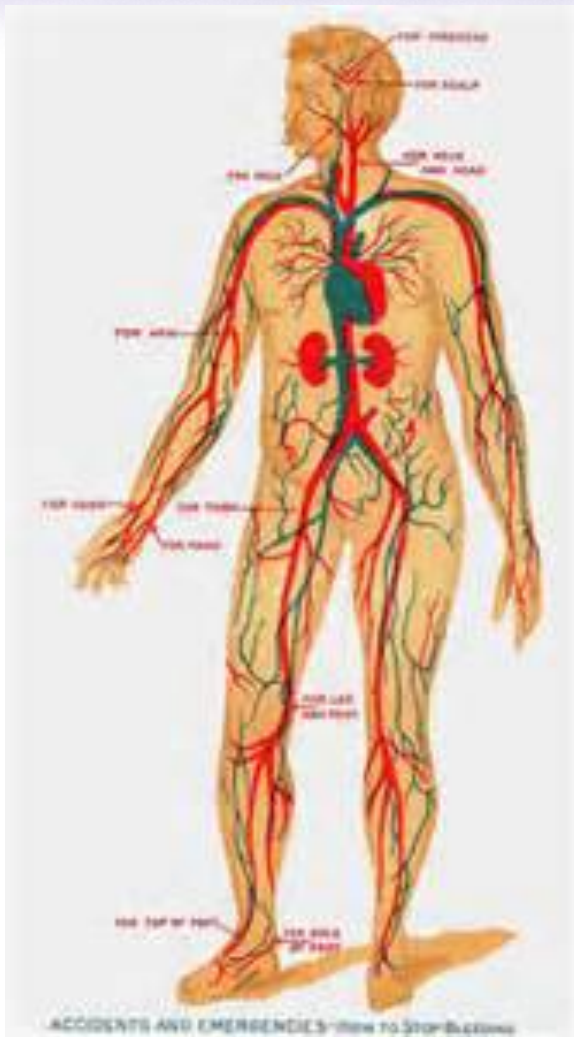
NRF links with Reflective Practice

1. All 3 steps
2. All 3 steps
3. Dual track of body
& HHH
4. Dual track of body
& HHH, relevance
system
5. Same as #4

Quick review



Dual Track – Body Responses & Relational Style



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Possible Regulation and Stress Response Correlates of Interpersonal Modes Across the Lifecycle

Arousal State and Interpersonal Mode	Just Right/ Alert Processing <i>Stability with Flexibility</i>	Too Fast/Flooded <i>High Demand</i>	Too Slow/Hypoaert <i>High Detach</i>	Too Vigilant/Hyperalert <i>High Compliance or Control</i>
EYE CONTACT	<ul style="list-style-type: none"> ■ Bright, shiny eyes looking directly at other / object — gleam! ■ Gaze aversions for modulation of intensity ■ Appears to actively process information 	<ul style="list-style-type: none"> ■ Eyes may be open / squinted / closed ■ May have direct, intense eye contact ■ May have avoidance of eye contact ■ Eye rolling upward ■ Scanning room very quickly, rapidly 	<ul style="list-style-type: none"> ■ Glazed eyes, looking through rather than at the other/object ■ Prolonged gaze aversion ■ Appears drowsy ■ Eyes turned down ■ Eyes do not scan the room, looking for objects of desire ■ When interested, prefers looking at objects rather than people 	<ul style="list-style-type: none"> ■ Eyes are wide open ■ Appears vigilant, in a state of panic or fear ■ Intensely focusing on something ■ Unable to break the gaze/fixation to the stimulus
FACIAL EXPRESSION	<ul style="list-style-type: none"> ■ Joy, particularly smiles ■ Neutral ■ Can express a full range of emotions ■ Modulation with all emotions 	<ul style="list-style-type: none"> ■ Wide, open mouth ■ Anger, disgust ■ Distress ■ Grimace ■ Frowning ■ Clenched jaw or teeth ■ Forced smile (only mouth is upturned, corners of eyes are not) 	<ul style="list-style-type: none"> ■ Flat ■ Turned down mouth, sad ■ Expressionless ■ No smiles or hints of smiles ■ Limited range of emotions 	<ul style="list-style-type: none"> ■ Raised eyebrows, especially with inside corners turned up ■ Trembling lips or mouth ■ Facial expressions of pain, grimace ■ Mouth wide open (startle)
TONE OF VOICE	<ul style="list-style-type: none"> ■ Melody and prosody ■ Modulation of tone ■ Fluctuations of tone ■ Laughing 	<ul style="list-style-type: none"> ■ High-pitched cry ■ Loud ■ Hostile ■ Gruff ■ Yelling or screaming ■ Sarcastic, sneering ■ Hysterical laughter 	<ul style="list-style-type: none"> ■ Flat ■ Lacks musical quality ■ Few or no vocalizations ■ Too quiet ■ Cold ■ Soft ■ Sad 	<ul style="list-style-type: none"> ■ High-pitched nasal, "sing-song" voice ■ Moaning or groaning to indicate pain ■ Elevated tone ■ Quavers or fluctuates rapidly ■ Whimpering
BODY POSTURE, MOVEMENT, AND GESTURES	<ul style="list-style-type: none"> ■ Relaxed with good muscle tone ■ Stability ■ Balance ■ Moves arms and legs into midline ■ Coordinated movements ■ Varies according to rhythmic ups and downs ■ Body molds into other's 	<ul style="list-style-type: none"> ■ Finger splays Arching ■ Increased muscle tension in posture and in face ■ Constant motion ■ Demands space by pushing, shoving, intruding on others ■ Biting, hitting, kicking, jumping ■ Poor balance; falls, trips a lot ■ Bumps into things ■ Forceful or threatening gestures (shaking finger, shaking fist) ■ Throwing ■ Kicking 	<ul style="list-style-type: none"> ■ Slumped ■ Low muscle tone ■ Decreased exploration ■ Lacks initiative in exploration ■ Will not protect his/her "space" ■ Avoids playground equipment ■ Lacks purposeful intent with movement ■ Wanders ■ Frozen or slow moving 	<ul style="list-style-type: none"> ■ Tense or rigid body postures ■ Cowering ■ Rapid, repetitive body movements (wringing hands, jiggling foot) ■ Trembling hands ■ Clinging ■ Flailing ■ Grabbing
RHYTHM AND RATE	<ul style="list-style-type: none"> ■ Fluctuating up and down ■ Midrange tempo 	<ul style="list-style-type: none"> ■ Fast ■ Impulsive 	<ul style="list-style-type: none"> ■ Slow ■ Delayed 	<ul style="list-style-type: none"> ■ Fast ■ Jerky



Who We Are At Our Worst!



HEART

HAND

HEAD



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Shut down

© Can Stock Photo - csp12195136

DEFERS

DEMANDS

DETACHES

Giving-in too much!

Expecting too much!

Ignoring too much!

Non-Verbal Cues Last a Lifetime



- 93% of communication is nonverbal
- Eye contact
- Facial expression
- Tone of voice
- Body posture, movement, & gestures
- Rhythm, rate, & intensity



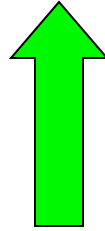
Review of Non-Verbal Cues



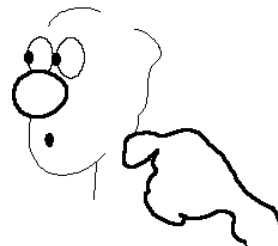
Our Nervous System



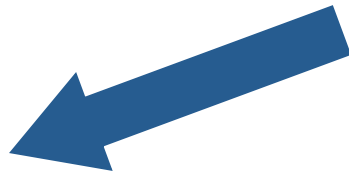
Driving
"Just Right"



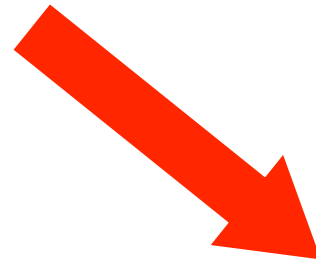
Both



Brake



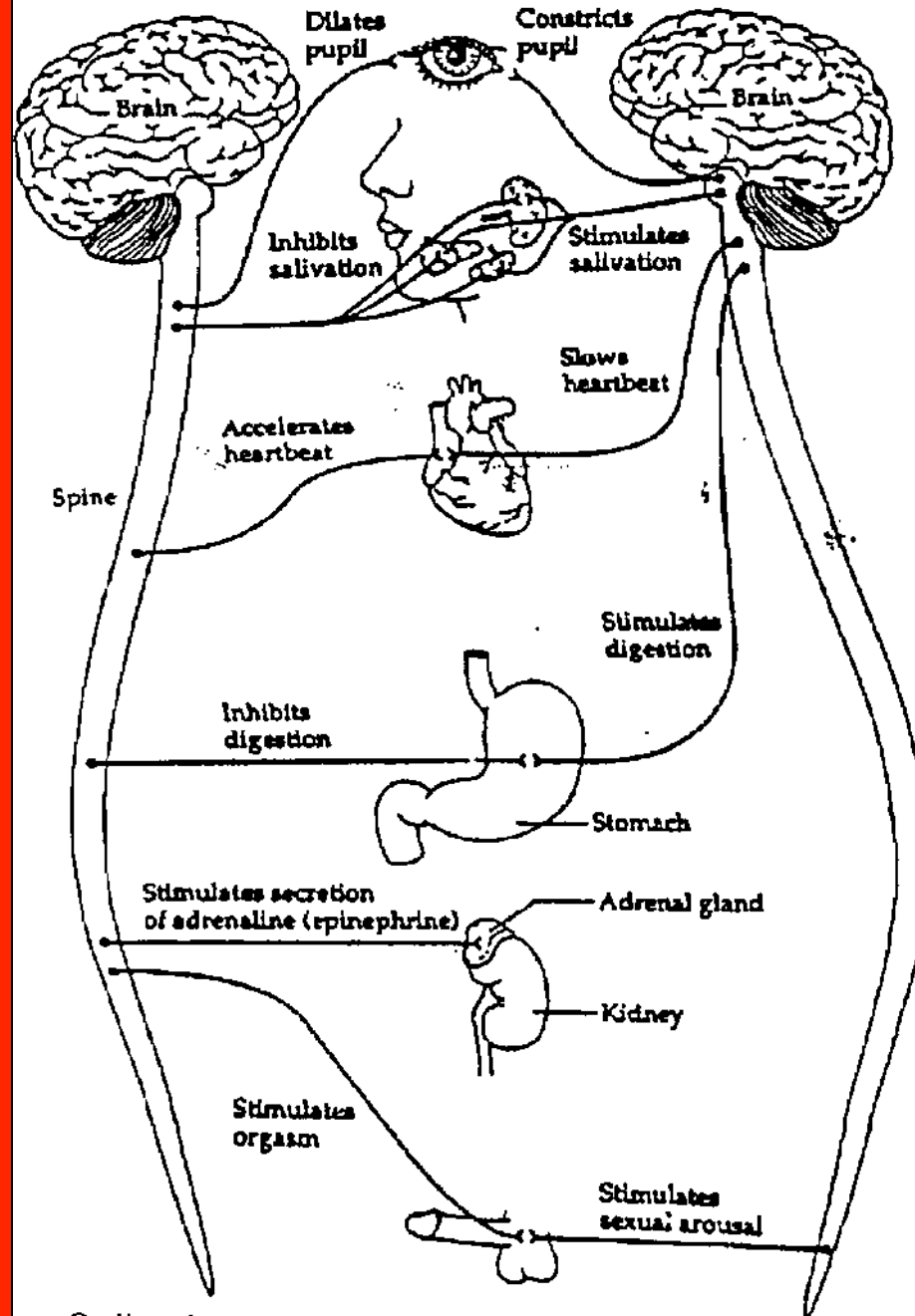
Gas



Adapted from Lillas, C.

Sympathetic nervous system

Parasympathetic nervous system



What's outside? What's inside? Match? Mismatch?



Face



Chest/breathe



Tone of voice/words



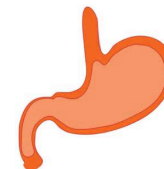
Heart



Body posture



Gut



Gestures



Feelings



Intensity



Thoughts



Felt sense of “being” inside



“The ego is first and foremost a bodily ego”...Sigmund Freud

“The organization of state (of arousal) governs the quality of one’s inner experience”...Louis Sander

Match versus Mismatch



Match

- Coordination of inside and outside
- I can get my needs met for closeness (co-regulation)
- I can get my needs met for exploration (self-regulation)

Mismatch

- Mismatch of inside and outside
- I miss-cue my needs for closeness
- I miss-cue my needs for exploration
- How much do I cover up?

Step One

- Interview

AND



k13261645 fotosearch.com ©

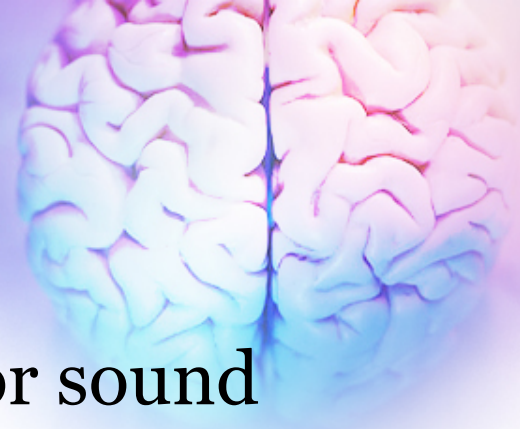
- Observe

Step One



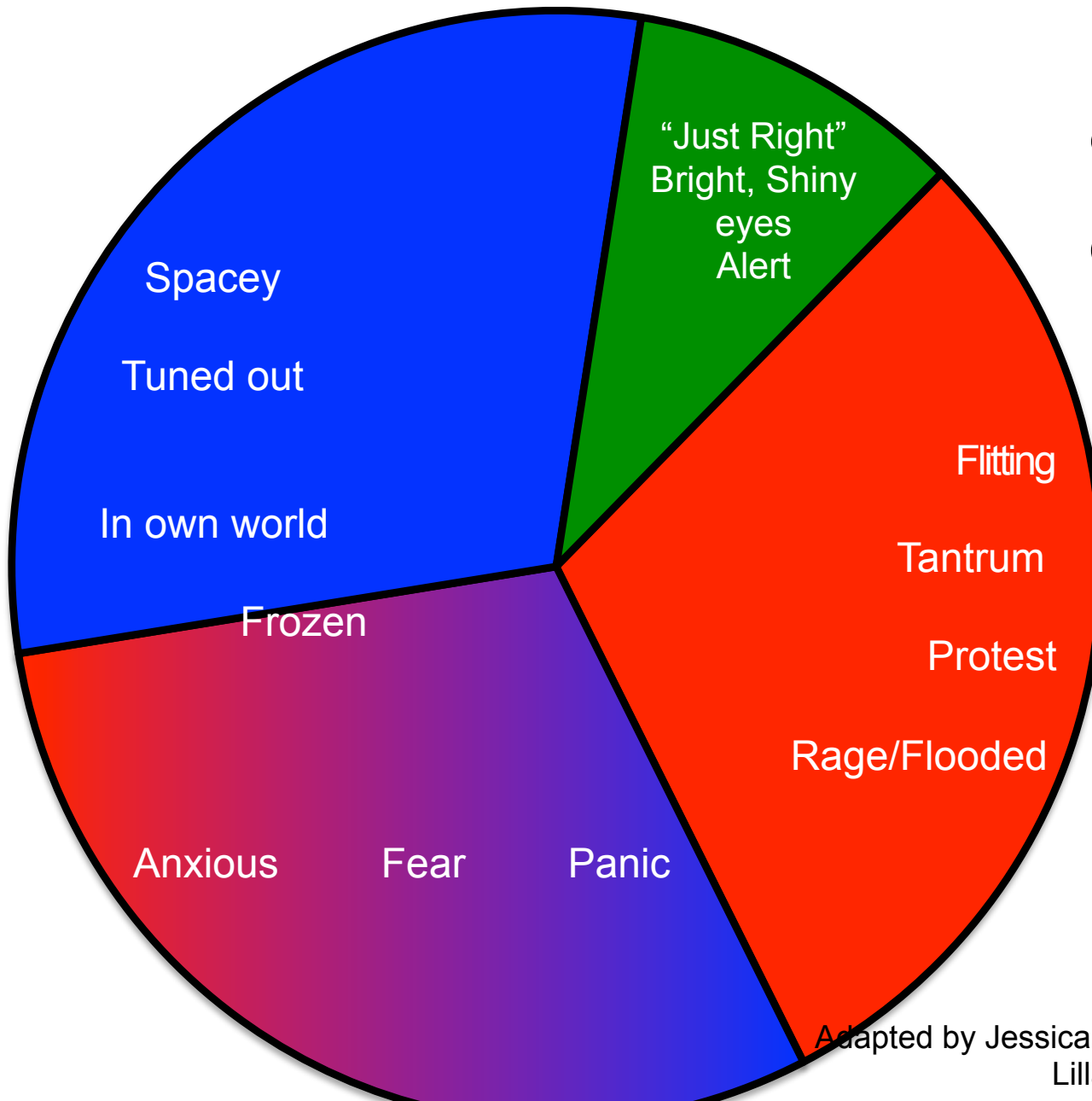
- Sleep
- As infant woke every 2 hours
- Snores
- At 2, waking 1x/night comes into parents bed and falls back to sleep
- Naps 1-2 hours with parents, not nanny
- At 2.5, finally seemed rested in the morning
- Mom- “terrible sleeper”, restless, falls asleep easily but wakes up
- Dad- frequent waking, reads, falls asleep easily

Early sessions....



- Detaches (blue) with light switch or sound machine, very little green.
- New or unknown activities trigger vigilant eyes with raised eyebrows (combo).
- Flitting around from crashing, Rody, music, car down ramp (red).

Step One - Initial



Green= 10-15%
Red=30%
Combo=30%
Blue=30%

Step One – 8 months into treatment



Green= 20-25%
Red=20%
Combo=30%
Blue=30%



What did you see?



- **Green** zone? When? What did you see?
- **Red** zone? When? What did you see?
- **Blue** zone? When? What did you see?
- **Combo** zone? When? What did you see?

How do we identify toxic stress?



Recognize stress responses that are
too frequent, too quick / intense, too long

4 Toxic Stress Patterns

- 1. Stress responses that occur too frequently and too quickly**
- 2. Inability to adapt to “normal” challenges and transitions**
- 3. Prolonged stress responses that take too long to recover (more than 10 to 20 mins)**
- 4. Inability to recover from stress response back to baseline health (healthy sleep cycle, healthy awake state)**

NRF Guiding Principles



- ***During assessment in Step #1, map out the Duration, Intensity, and Rhythm (DIR) of the stress zones during the awake cycle.*** This establishes your baseline so that you know if you are making any progress or not. Revisit your baseline parameters at least every three months.
- ***Always start at the earliest point in the breakdown.*** If sleep is disrupted, begin with addressing this aspect. If green zone is disrupted, begin with this goal as well. This principle applies to all three steps. Step #1 is the First Level of Engagement and the First Brain System, Regulation.

Parallel Process



- Important information about how this family impacts my stress levels (step #1)
- How does this child/parent impact my relational style?
 - Brings out my Heart/Hand/Head at my best
 - Can stimulate my Heart/Hand/Head at my worst

Parallel Process



- My tendency Combo zone
- Easy family to engage with largely Green
- Pulled toward combo if classroom is very chaotic or a feel overly watched
- Family brings out my warm, empathic heart
- Classroom dynamics and parents' anxiety pulls out my structured hand
- When client and parents are under stress I am prone to Combo if I don't utilize my toolkit

we
become
what
we
repeatedly
do.

««« sean covey »»»



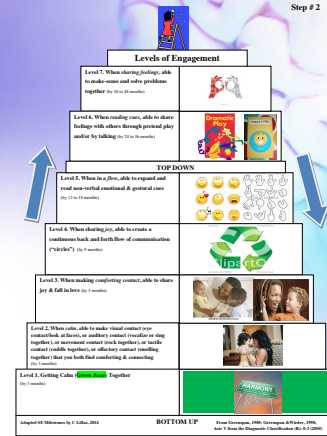
© powerofspeech

Step Two

–Orientation

–Observe

–Conversation





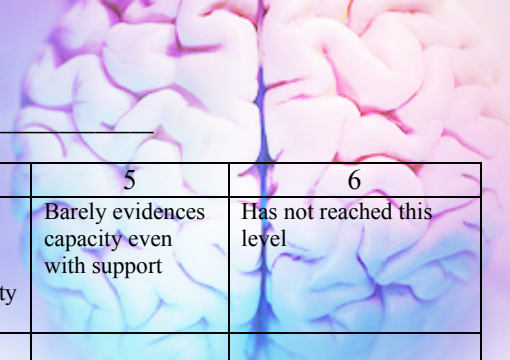
PARENT-CHILD RELATIONSHIP MILESTONES

Child: _____ Caregiver: _____ Examiner: _____ Date: _____ Diagnosis: _____

	1	2	3	4	5	6
Place an X in the box that matches the milestone and achievement levels	Age appropriate under all conditions, including stress, with a full range of emotions	Age appropriate but vulnerable to stress and/or constricted range of emotions	Has capacity but not at age appropriate level	Inconsistent/needs sensorimotor support and structure to function at this capacity	Barely evidences capacity even with support	Has not reached this level
Functional Capacities						
BOTTOM-UP						
Level 1. Getting Calm (Green Zone) Together (by 3 months)						
These functions are built upon the capacity to be calm together						
Level 2. When <i>calm</i>, able to make visual contact (eye contact/look at faces), or auditory contact (vocalize or sing together), or movement contact (rock together), or tactile contact (cuddle together), or olfactory contact (smelling together) that you both find comforting & connecting (by 3 months)						
Level 3. When making <i>comforting contact</i>, able to share joy & fall in love (by 5 months)						
Level 4. When sharing <i>joy</i>, able to create a continuous back and forth flow of communication (“circles”) (by 9 months)						
Level 5. When in a <i>flow</i>, able to expand and read non-verbal emotional & gestural cues (by 13 to 18 months)						
TOP-DOWN						
Level 6. When <i>reading cues</i>, able to share feelings with others through pretend play and/or by talking (by 24 to 36 months)						
Level 7. When <i>sharing feelings</i>, able to make-sense and solve problems together (by 36 to 48 months)						

PARENT-CHILD RELATIONSHIP MILESTONES

Child: _____ Caregiver: _____ Examiner: _____ Date: _____ Diagnosis: _____



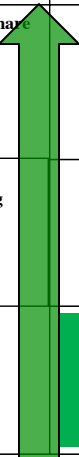
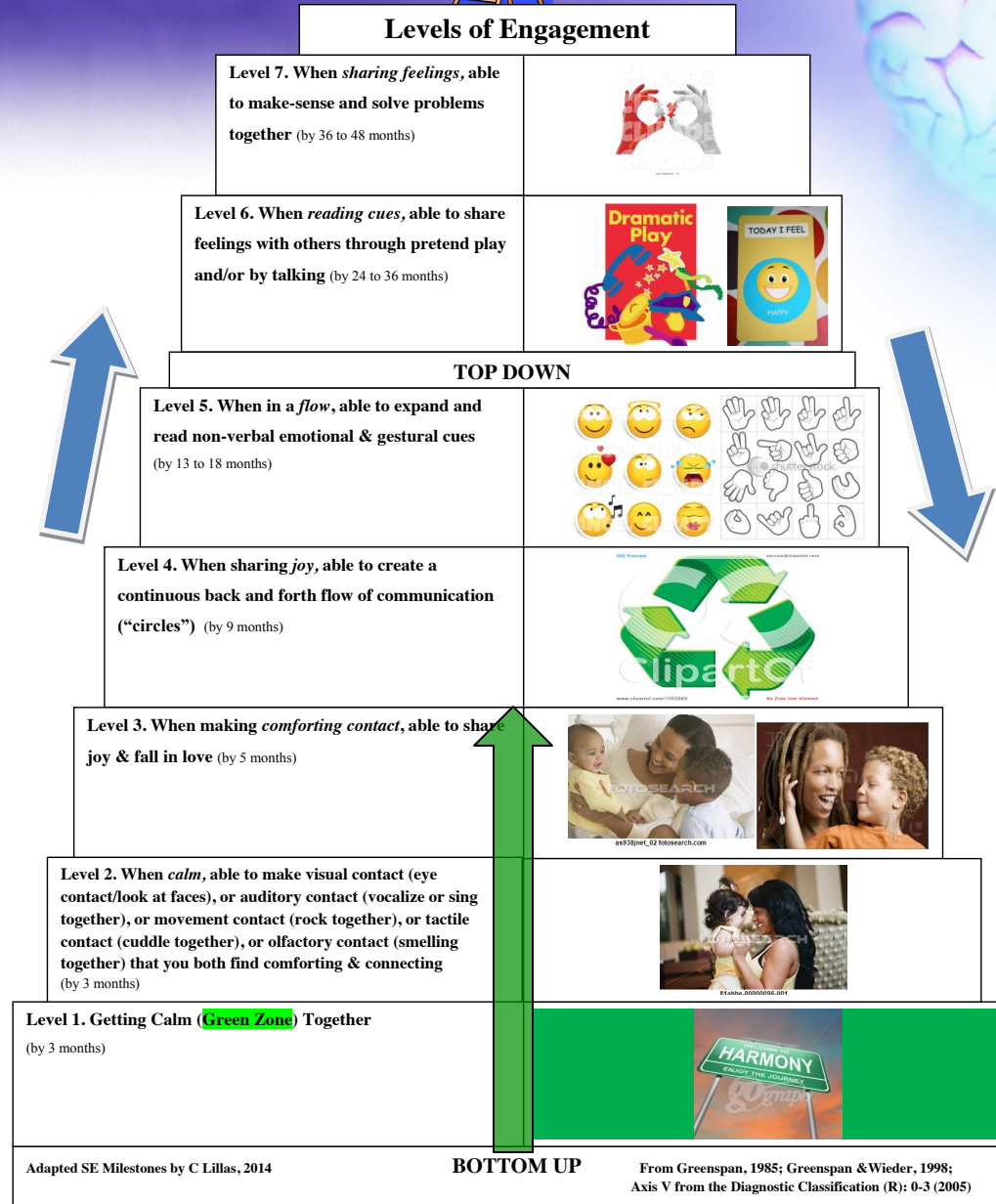
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Functional Capacities						
BOTTOM-UP						
Level 1. Getting Calm (Green Zone) Together (by 3 months)					X	
These functions are built upon the capacity to be calm together						
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Level 3. When making comforting contact, able to share joy & fall in love (by 5 months)						X
Level 4. When sharing joy, able to create a continuous back and forth flow of communication (“circles”) (by 9 months)						X
Level 5. When in a flow, able to expand and read non-verbal emotional & gestural cues (by 13 to 18 months)						X
TOP-DOWN						
Level 6. When reading cues, able to share feelings with others through pretend play and/or by talking (by 24 to 36 months)						X
Level 7. When sharing feelings, able to make-sense and solve problems together (by 36 to 48 months)						X

Step Two

Step # 2



Levels of Engagement



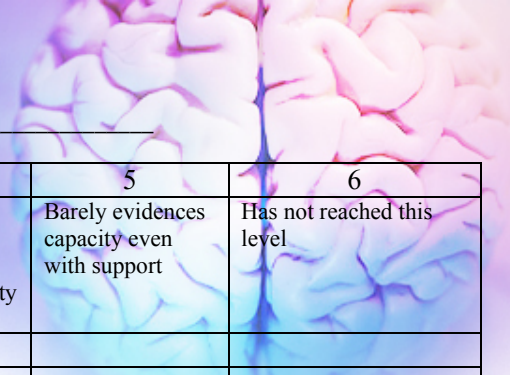
Step Two 8 months later...



- Started speech therapy, changed daycare to a better social-emotional “workout”
- Majority **Green** zone in sessions
- With some support engages with eyes, movement or song
- Delights in sensorimotor play together
- With structure, completes circles in play (handing a ball back and forth to take turns with ramp toy)
- Responds to gesture and some facial expressions

PARENT-CHILD RELATIONSHIP MILESTONES

Child: _____ Caregiver: _____ Examiner: _____ Date: _____ Diagnosis: _____



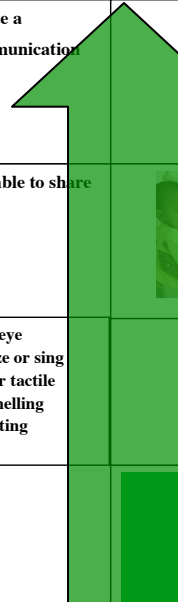
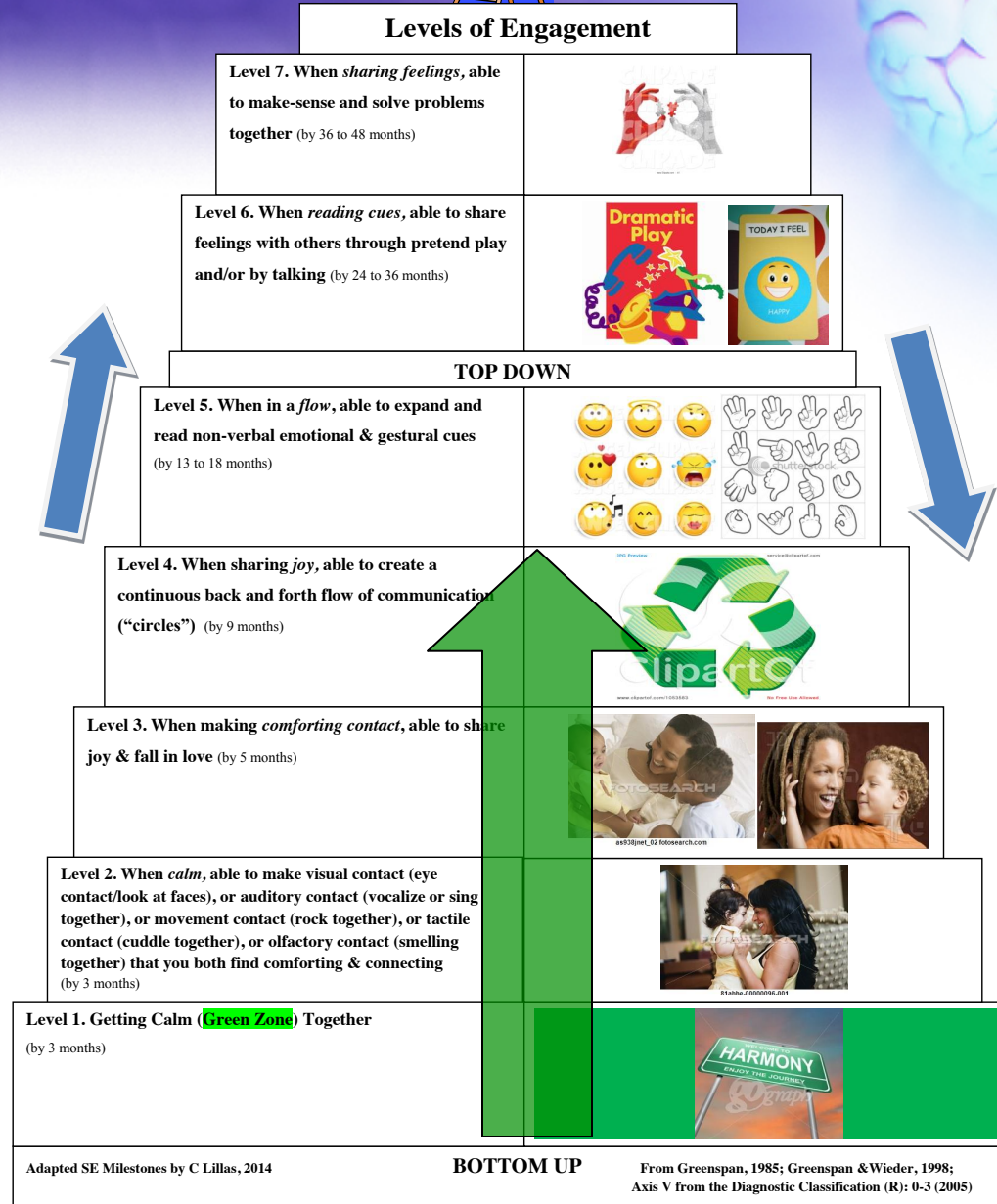
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Functional Capacities						
BOTTOM-UP						
Level 1. Getting Calm (Green Zone) Together (by 3 months)				X		
These functions are built upon the capacity to be calm together						
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Level 3. When making comforting contact, able to share joy & fall in love (by 5 months)				X		
Level 4. When sharing joy, able to create a continuous back and forth flow of communication (“circles”) (by 9 months)					X	
Level 5. When in a flow, able to expand and read non-verbal emotional & gestural cues (by 13 to 18 months)						X
TOP-DOWN						
Level 6. When reading cues, able to share feelings with others through pretend play and/or by talking (by 24 to 36 months)						X
Level 7. When sharing feelings, able to make-sense and solve problems together (by 36 to 48 months)						X

Step Two

Step # 2



Levels of Engagement



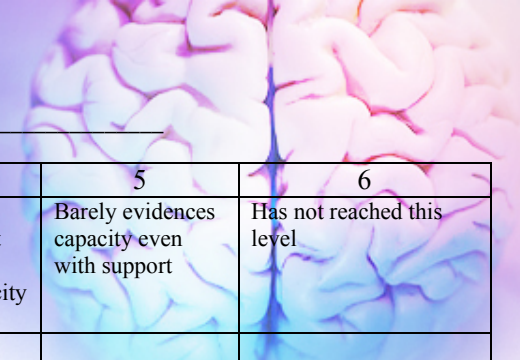
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Level 3. When making <i>comforting contact</i>, able to share joy & fall in love (by 5 months)			X			
Level 4. When sharing <i>joy</i>, able to create a continuous back and forth flow of communication (“circles”) (by 9 months)			X			
Level 5. When in a <i>flow</i>, able to expand and read non-verbal emotional & gestural cues (by 13 to 18 months)				X		
TOP-DOWN						
Level 6. When <i>reading cues</i>, able to share feelings with others through pretend play and/or by talking (by 24 to 36 months)						X
Level 7. When <i>sharing feelings</i>, able to make-sense and solve problems together (by 36 to 48 months)						X

PARENT-CHILD RELATIONSHIP MILESTONES

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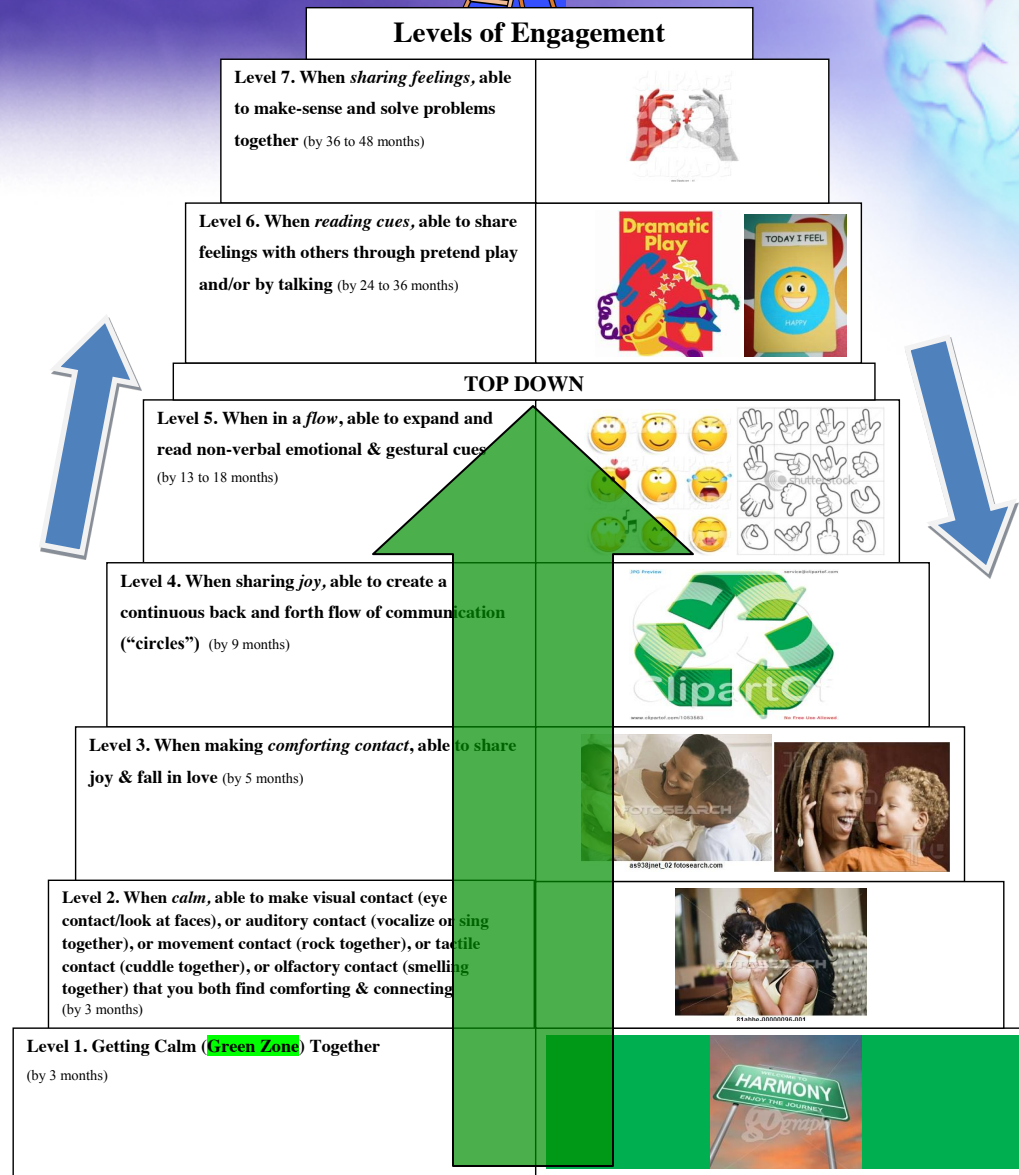
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Level 5. When in a flow, able to expand and read non-verbal emotional & gestural cues (by 13 to 18 months)				X		
TOP-DOWN						
Level 6. When reading cues, able to share feelings with others through pretend play and/or by talking (by 24 to 36 months)						X
Level 7. When sharing feelings, able to make-sense and solve problems together (by 36 to 48 months)					X	

Step Two

Step # 2



Levels of Engagement



Adapted SE Milestones by C Lillas, 2014

BOTTOM UP

From Greenspan, 1985; Greenspan & Wieder, 1998; Axis V from the Diagnostic Classification (R): 0-3 (2005)

NRF Guiding Principles



- ***When working “bottom-up” for zone (arousal) regulation begin with finding the child’s individual sensory preferences and triggers.***
- ***For treatment, consider the Duration, Intensity, and Rhythm (DIR) of the child’s sensory preferences that promotes sleep, the green zone, and stress recovery.***

Parallel Process



- Important information about how this family impacts my levels of engagement (step #2)
 - **During collateral sessions, up to level 7**
- **How far up the levels of engagement ladder can you get with the parent? The child?**
 - With clt, up to level 3 initially with heavy sensorimotor support. After a few months, more robust ratings for levels 1-4 and could get to 5.

LUNCH!



Using NRF questions for Cultural Awareness



- Essential for cultural awareness for cross cultural work (ALWAYS!!)

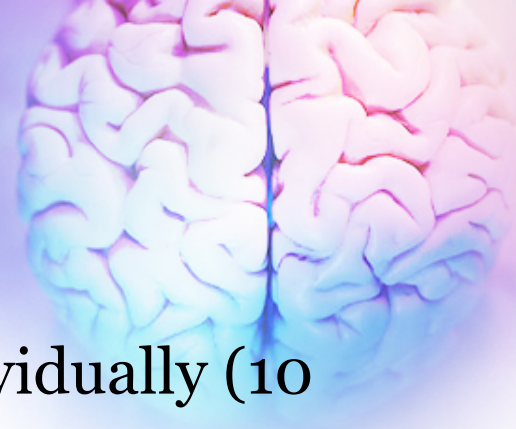


Competence?

The delicate dilemma of dinosaurs



Working with YOUR case



- Compare/complete NRF intake individually (10 mins)
- Share with your small group successes and challenges (10 mins)
- Complete Parallel Process worksheet individually (10 mins)
- Share with your small group successes, challenges and standouts (10 mins)
- Take notes on notebook about your case using this cultural integration questions (10 mins)
- Share with your small group successes, challenges and standouts (10 mins)

You know what they say about practice....



- ...Encodes learning on an experiential and procedural level!
- MORE practice! In a new triads, practice interviewing. Out of the cases you just mapped out, pick one case to practice with. The “holder” of the case should be the parent, someone else is the interviewer and the third person is the scribe. Please “try on” a different role than last practice session.

For Next time...



- Look over step three worksheets (all on your Step Three Cheat Sheet):
 - **History worksheet**
 - **Current capacities**
 - **Purple Circle**
 - **Triggers and Toolkits**



Thank you!
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