CPD REFLECTIVE PRACTICE WORKSHEET

Episode 07: Treatment and Sensory Modulation

Hosts: Tracy Stackhouse · Cory Dundon · Michelle Maunder

LISTENER NAME	DATE LISTENED
TOTAL LISTENING + REFLECTION TIME (MINS)	CPD HOURS CLAIMED

Episode Summary

After three episodes on modulation and state, we put it to work on a real case Cory has permission to share: a seven-year-old boy with autism, level two, whose profile is a genuine puzzle.

- He cannot bear having his hair cut or face wiped,
- He seeks out having his bare feet on sharp bark chips,
- He is so sensitive to dogs barking he barely wants to leave home,
- He seeks out intense heavy-metal music,
- He bounces hard and hits his own body to organise himself.

His dad's goals are simple and practical: sustain attention on a task, and cope at the shopping centre. His mixed state presentation and intensity seeking, alongside a need for inhibition, is exactly what makes him hard to read.

Much of this episode is about how you reason when clarity is elusive: holding a working hypothesis, recalibrating each session, and partnering with families as fellow detectives rather than downloading expertise to them. Cory and Michelle talk candidly about videotaping themselves, how confronting it is, and how it sharpens therapeutic use of self. The breakthrough: anchored over an exercise ball, head inverted, rocking to shared rhythm through a kazoo, the boy down-regulates through the baroreceptive reflex and, for the first time, sits up with spontaneous language directed straight at Cory. We unpack why rhythm plus intensity plus inversion was his just-right formula, why the move-away-and-return is part of the work rather than a failure, and how it opens into imitation and the DIR levels we will pick up next episode.

Resources & Mentions

- Ayres Sensory Integration (ASI), one of the core frameworks Cory draws on in this case.
- DIR Floortime, the social-emotional developmental model (regulation, engagement, reciprocity).
- The Spirit framework and the STEPPSI model (Stackhouse), for reasoning about modulation and state.
- On the baroreceptive reflex and head inversion as a physiological down-regulating switch, discussed during the breakthrough.
- Check out DFX's Learning Journeys to build your clinical reasoning skills: https://dfxlearningjourneys.thinkific.com/

Reflection Prompts

Take a few quiet minutes to consider each prompt and write freely. Add or remove a prompt block to suit the episode.

1 **This boy flinches at haircuts but seeks sharp bark, covers his ears at dogs but craves heavy metal. Where in your caseload does a child's profile refuse the simple under- and over-responsive continuum, and what theory helps you hold the complexity?**

2 **We describe reasoning as holding a working hypothesis and recalibrating each session, rather than following a recipe. Think of a child you find hard to read: how comfortable are you working from a hypothesis you keep revising?**

3 **Cory and Michelle talk about videotaping themselves and how confronting, but sharpening, it is for therapeutic use of self. What would you learn about your own practice from watching yourself on tape?**

4 **The breakthrough came from rhythm, intensity and head inversion together, the boy's just-right formula. For a child you are puzzling over, what combination might you test, and how would you know it landed?**

5 **We reframe inviting families to wonder alongside us, rather than downloading expertise, as building a team. Where could you shift from expert-to-parent toward parent-as-detective, and what functional information might that surface?**