





**Sarah Sawyer**

MA, OTR/L  
Spiral Foundation

# Safe Place

The views expressed in the following presentation are those of the presenter(s) and do not necessarily reflect those of STAR Institute.

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## SAFE PLACE:

### A Multi-disciplinary Sensory Integration-Based Trauma-Informed Intervention for Children

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**Acknowledgements and Gratitude**

- **Jane Koomar, PhD, OTR/L, FAOTA,**
  - Co-founders of SAFE PLACE
- **Daniel Hughes, PhD**
  - Co-founder of SAFE PLACE
- **Contributors to the SAFE PLACE Model**
  - Margaret (Peg) Ingolia, OTD, OTR/L
  - Marsha Raredon, MS, OTR/L
  - Deborah Rozelle, PsyD.

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## SAFE PLACE IS:

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- A ***theoretical model*** explicating the relationship between sensory processing, disrupted attachment and complex developmental trauma concerns in children.
- A ***specific 12-week collaborative, interdisciplinary, sensory integration-based trauma-informed intervention program*** among occupational therapists, mental health clinicians and caregivers for children with sensory processing disorder (SPD) and complex trauma and attachment concerns.

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## SAFE PLACE Model

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Provides a therapeutic framework for service providers and caregivers

---

Emphasizes development of body-based regulatory and adaptive functions with co-regulation and intersubjective experiences

---

Supports a deepening of attachment bonds and security

---

Facilitates the processing and healing of traumatic experiences

---

Occurs within the context of a sensory integration intervention process

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## “SAFE”

- Reflects the sensory component of the theory
- **Sensory Attunement-Focused Environment**
- Represents use of safe, supportive, developmentally appropriate, sensorimotor activities and environments
- Promote engagement through play and fun in children’s physical and emotional development



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## “PLACE”

- Reflects the attachment component of the theory
- ***Playfulness, Love, Acceptance, Curiosity and Empathy,***
- Qualities of mindful engagement utilized by collaborating therapists to facilitate secure attachment and healing within the child and family.



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## “SAFE” and “PLACE” as “safe place”

- Represents the trauma component of the theory
- Highlights the process of establishing and maintaining an environment and experience of safety and stability for the child
- Allows processing of traumatic experiences



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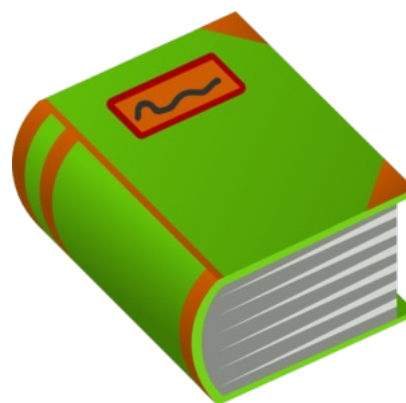
## Foundational Characteristics of the SAFE PLACE Model



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## SAFE PLACE Intervention Manual

- Describes core components of the theory and model
- Describes assessment process in detail
- Description of the program structure
- Describes staffing requirements and space
- Core components of the intervention along with descriptions of the clinical reasoning process and activities needed to implement the intervention
- Allows for replicable implementation



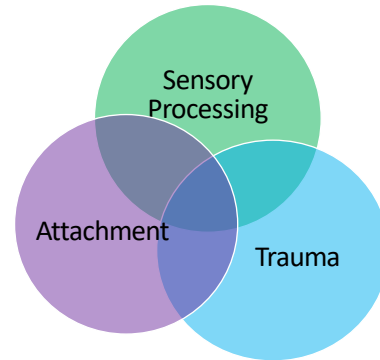
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## SAFE PLACE Program: Criteria for Participation

- Children 4 – 15 years of age
  - Sensory integration challenges
  - Trauma background resulting in current attachment concerns
  - Child is unable to make adequate progress in sensory integration intervention because of trauma/attachment- related challenges
- or
- Child is unable to make adequate progress with trauma processing, etc. because of sensory integration and/or praxis challenges



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Team Members

- Child
- Caregiver
- Occupational Therapist
- Mental Health Clinician

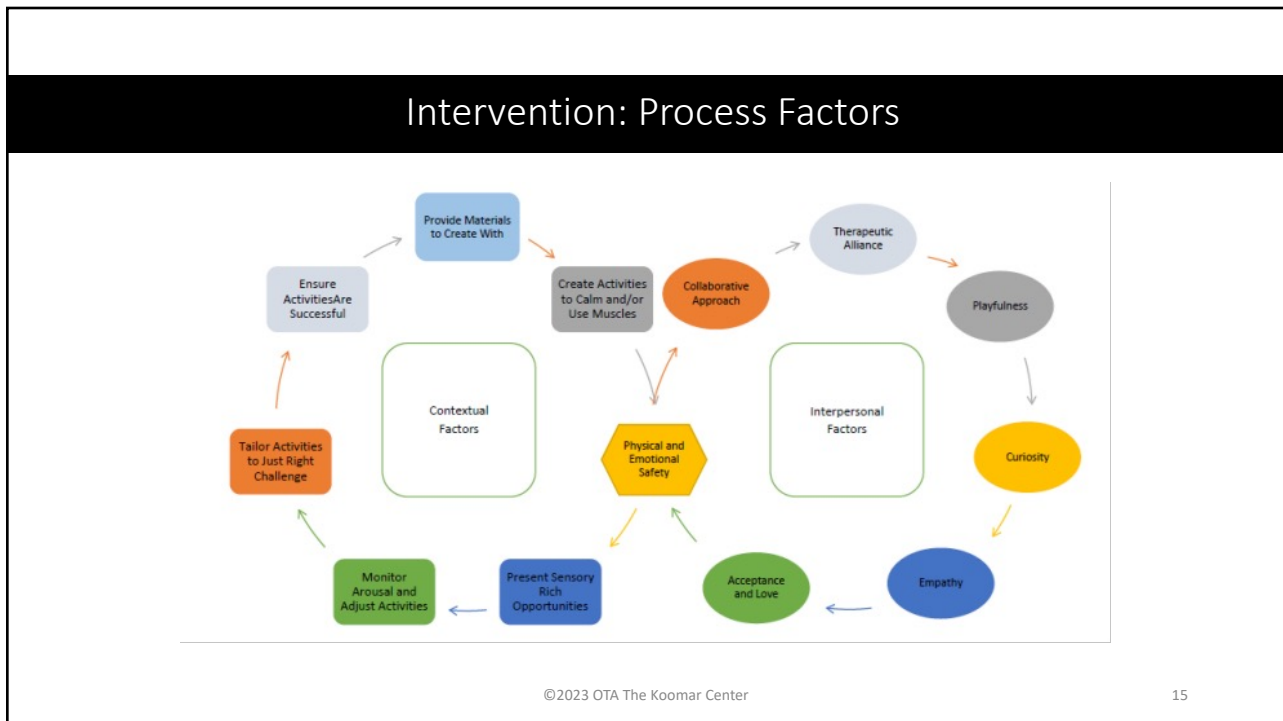
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## SAFE PLACE Program: Intervention Structure

- 12-week program consisting of:
  - Twice weekly child therapy with caregiver, occupational therapist, and mental health professional for 1-hour each session, conducted in a sensory integration clinic environment.
  - Once weekly caregiver education/consultation session for 1 hour with the occupational therapist and mental health professional.
  - Once weekly professional collaboration for 1 hour between the occupational therapist and mental health professional.

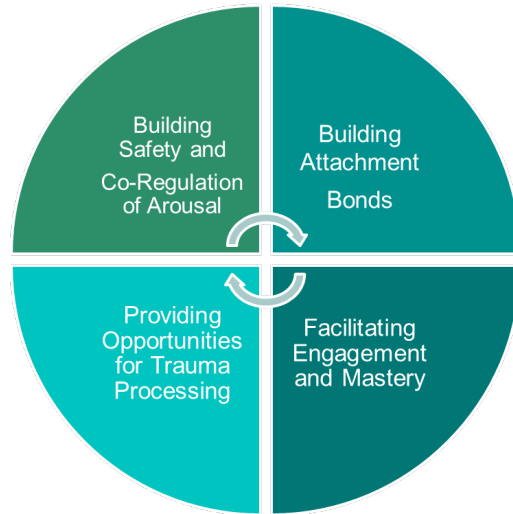
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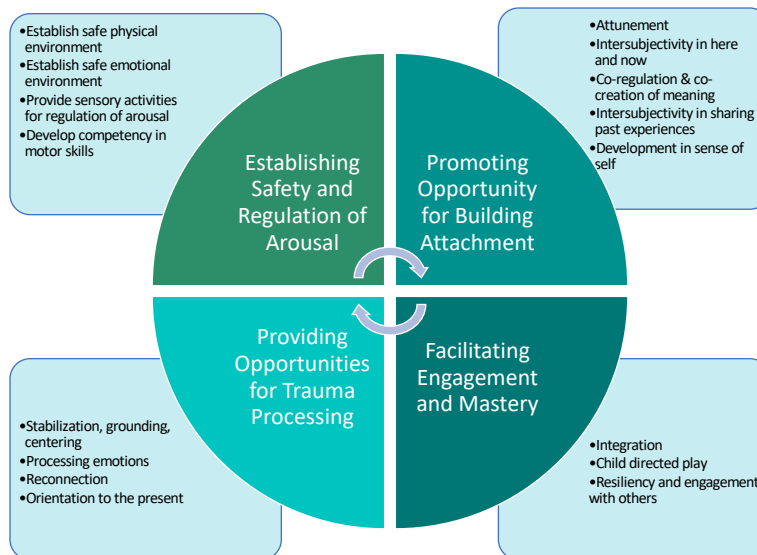
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## SAFE PLACE Program: Core Goals



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## Intervention: Phases



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## SAFE PLACE Research To Date

- Studies have been completed which examine:
  - Validation of the theoretical construct
    - Qualitative video review
    - Examination of intervention fidelity
  - Feasibility of implementation and preliminary outcomes of clinical implementation
    - Case study of clinical outcomes
    - Feasibility program review with one child

We have lots more work to do.....Join us....



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**2023 STAR**  
Sensory Symposium

**Tracy Stackhouse**


*MA, OTR  
Developmental FX (DFX)*

# STEPPSI & SpIRiT

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**DEVELOPMENTAL FX**




**therapy that fits**

Our mission is to prepare children with developmental differences for a bright future of engaged belonging by equipping them, their families, therapists, and teachers via innovative programs in Colorado and around the world.



**DFX**  
therapy that fits

- Multidisciplinary Clinic: Delivering
- Clinic in the Community: Infusing
- Learning Journeys: Disseminating
- Research, Innovation, & Advocacy: Creating



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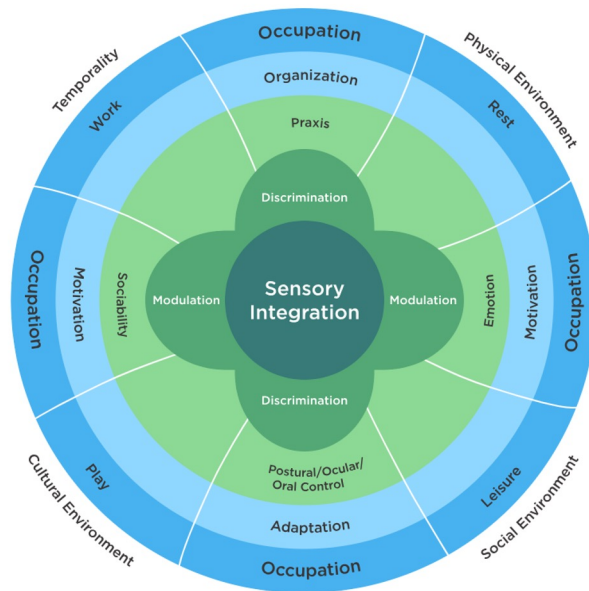
## The STEPPSI and SpIRiT are Clinical Reasoning Tools



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### Ayres Sensory Integration<sup>®</sup> (ASI<sup>®</sup>)

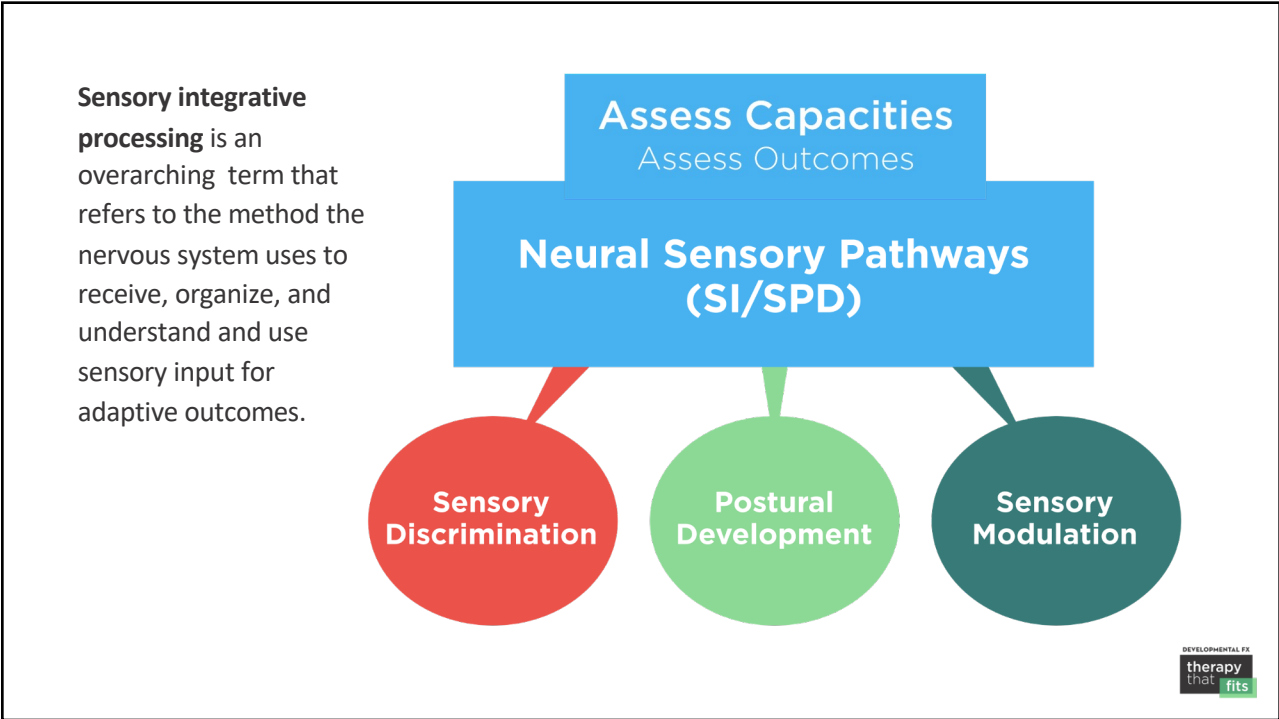
Is the foundational theory for the STEPPSI & SpIRiT; developmental neuroscience and interpersonal neurobiology are used to elaborate the models



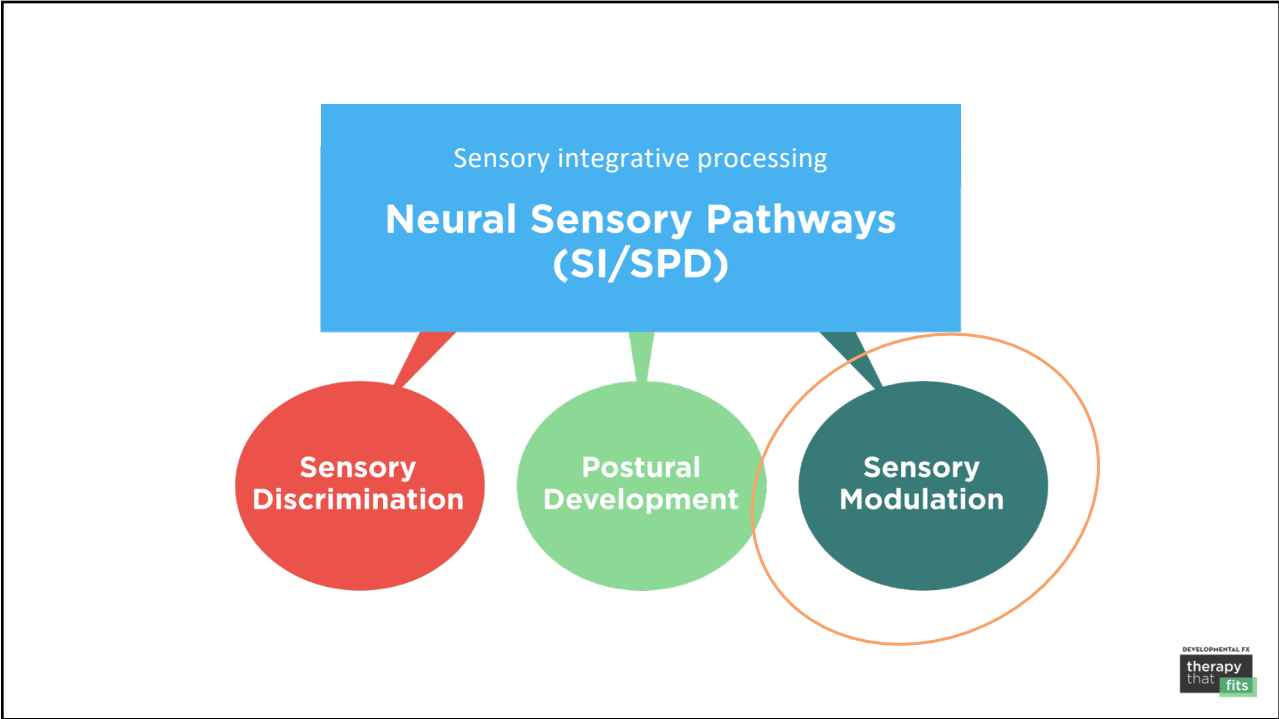
Ayres, 1972, 1979, 1981; Smith Roley, Schaaf, Blanche, (2001); Parham et al. 2011



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## A Tool for Effective Clinical Reasoning

### Authors:

Tracy Stackhouse, MA, OTR | Julia Wilbarger, Ph.D.,OTR | Sharen Trunnell, OTR  
 Developmental FX | [www.developmentalFx.org](http://www.developmentalFx.org)



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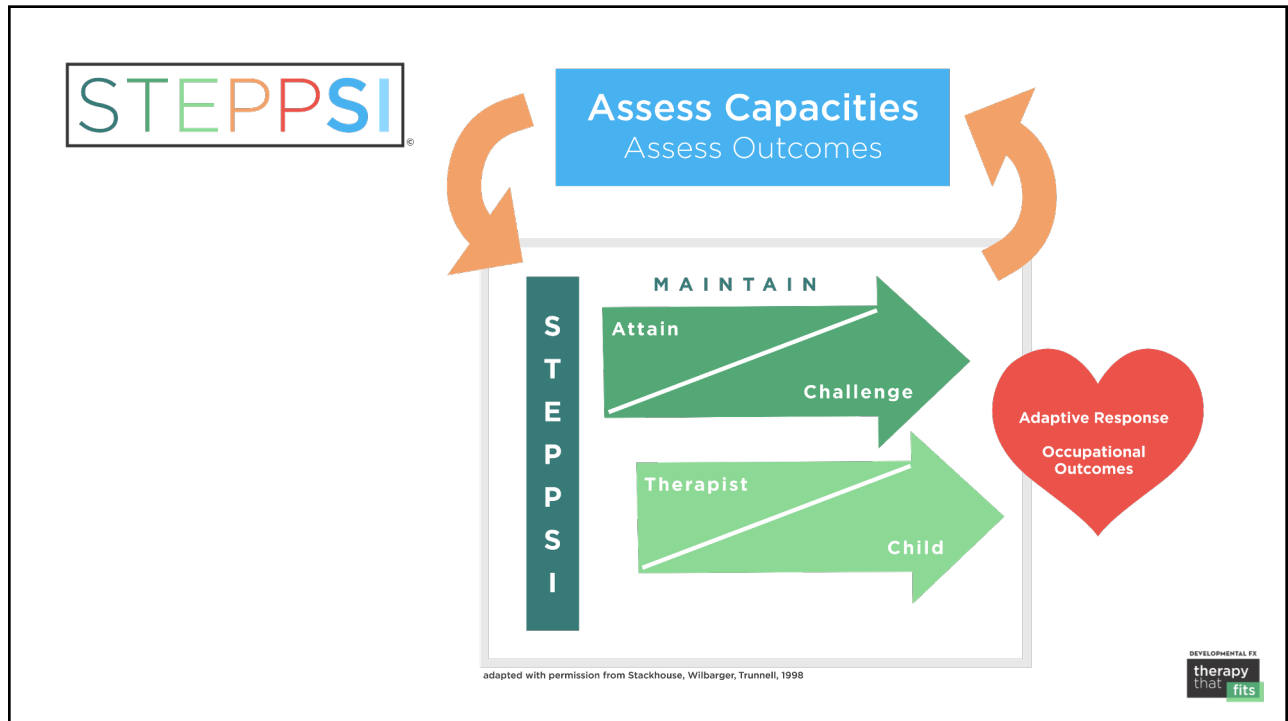


Components utilized by OT's  
 in (Ayres) SI Treatment – to  
 obtain adaptive responses  
 evinced through state  
 regulation and improved  
 sensory modulation

adapted with permission from Stackhouse,  
 Wilbarger, Trunnell, 1998



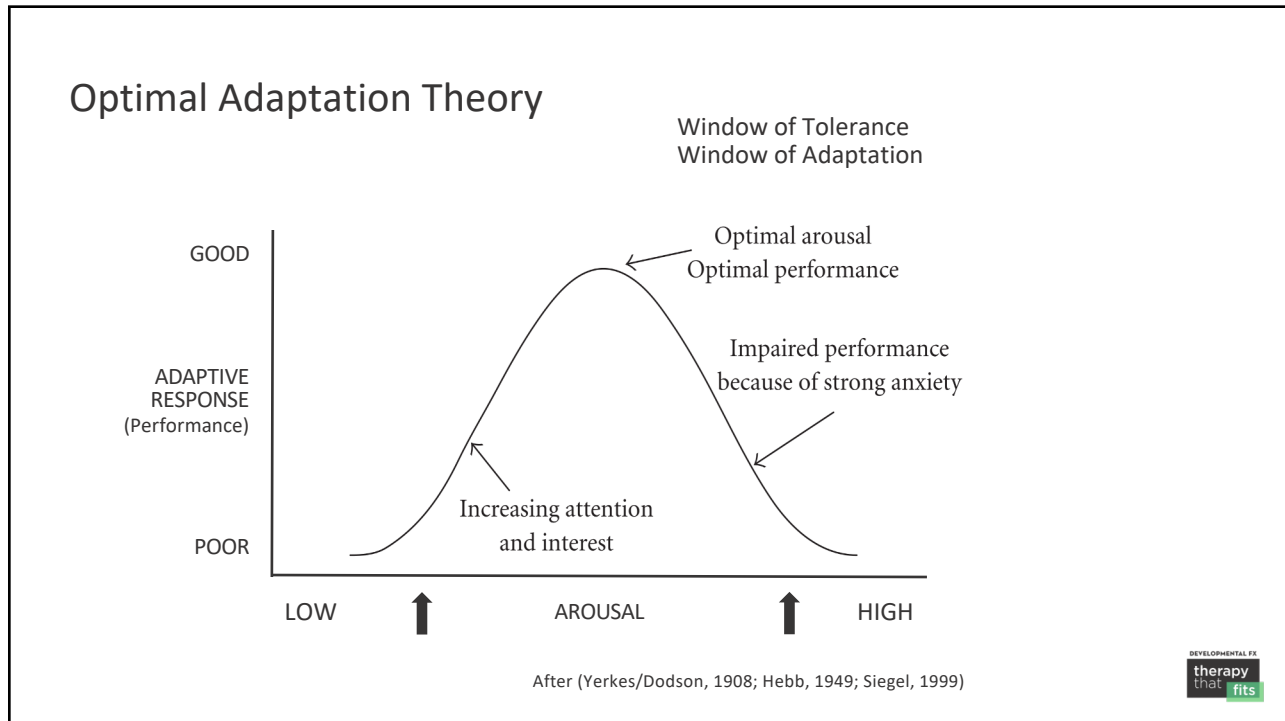
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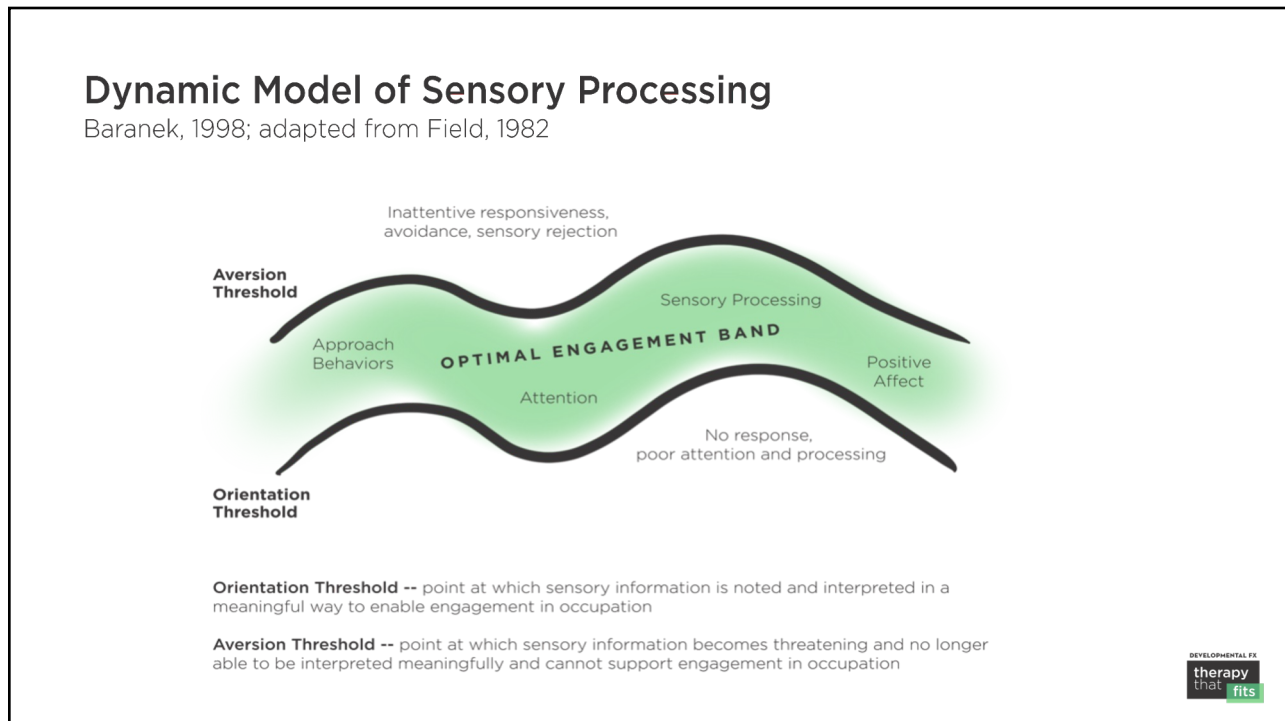
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This slide is titled 'SKETCH PAD for Sensory Modulation and Regulatory Capacities'. At the top left, there is a blue box with the text 'Assess Capacities' and 'Assess Outcomes'. To its right is the 'STEPPSI Model' logo. Below the title, there is a large grey rectangular area labeled 'ASSESS STATE' at the top. Inside this area is a simple coordinate system with a vertical y-axis and a horizontal x-axis. In the bottom right corner, there is a logo for 'DEVELOPMENTAL FX therapy that fits'.

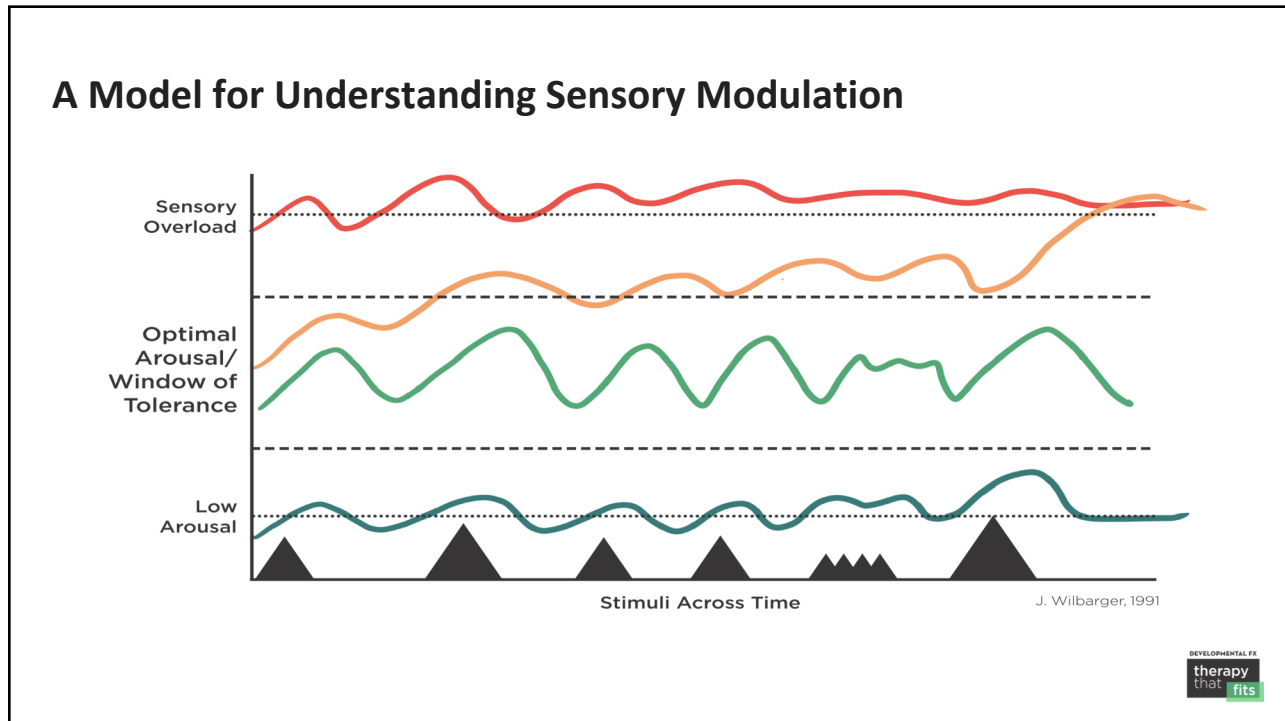
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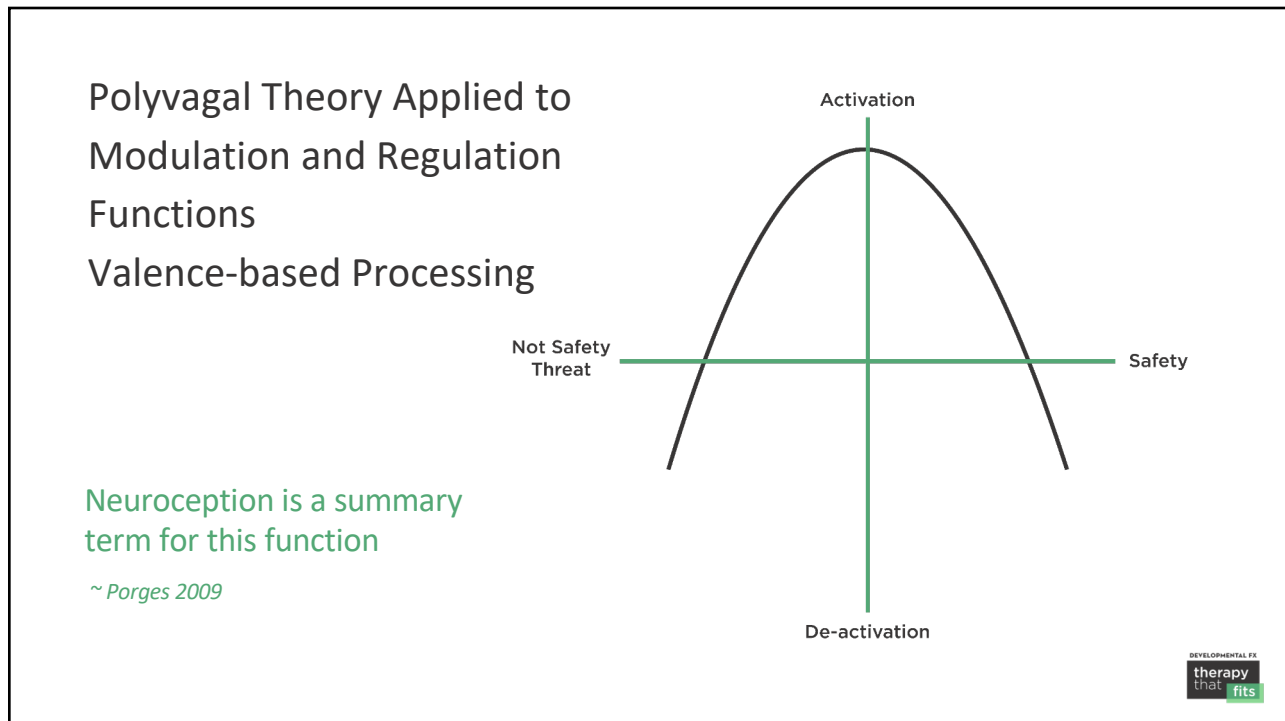
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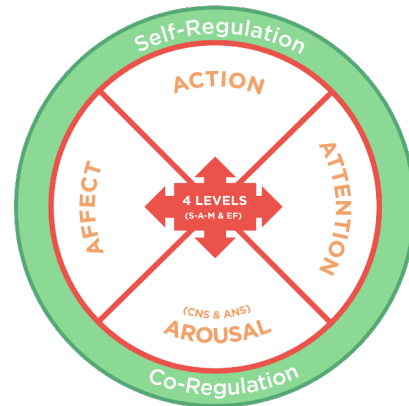


# Sensory Modulation 'for the purpose of...'

Regulation...of:  
 Response/Recovery  
*(degree, nature, intensity, valence of)*  
 so that, the deep central core brain functions can do their work:

- Attention
- Action
- Affect
- Arousal
- Autonomic

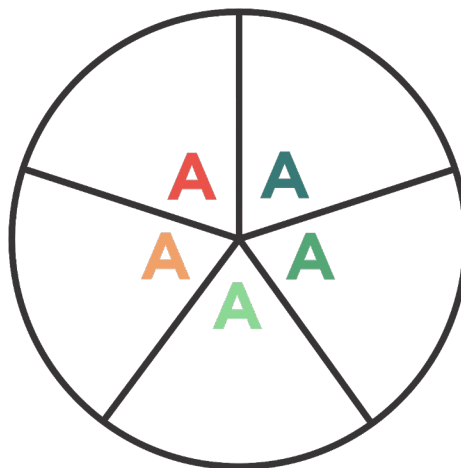
- via:
- Neuroception
  - Co-regulation
  - Self-regulation



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Pair "A" function with adaptive outcome:

- Attention
- Action
- Affect
- Arousal
- Autonomic



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**Assess Capacities**  
Assess Outcomes

**STEPPSI** Model

**SKETCH PAD**  
for Sensory Modulation and  
Regulatory Capacities

ASSESS STATE

DEVELOPMENTAL FX  
therapy  
that fits

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The  
**SpIRiT**  
of Pediatric Therapy  
Sensory processing/Integration Reasoning interactive Tool

Sensory integrative processing  
**Assess Capacities**  
Assess Outcomes

**Sensory Discrimination**


**Postural Development**

**Sensory Modulation**

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SENSORY



**Assess Capacities**  
Assess Outcomes

1

Sensory  
Modulation

2

Sensory  
Discrimination  
& Praxis

3

Posture & Basic  
Motor

4

Social and  
Emotional

5

Executive  
Functions


Domains that are interconnected to sensory integrative processing

DEVELOPMENTAL FX  
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that fits

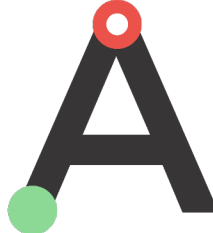
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The SplRiT is grounded in neuroscience...  
and, it elaborates **Sensation**:


SENSORY



AFFECT



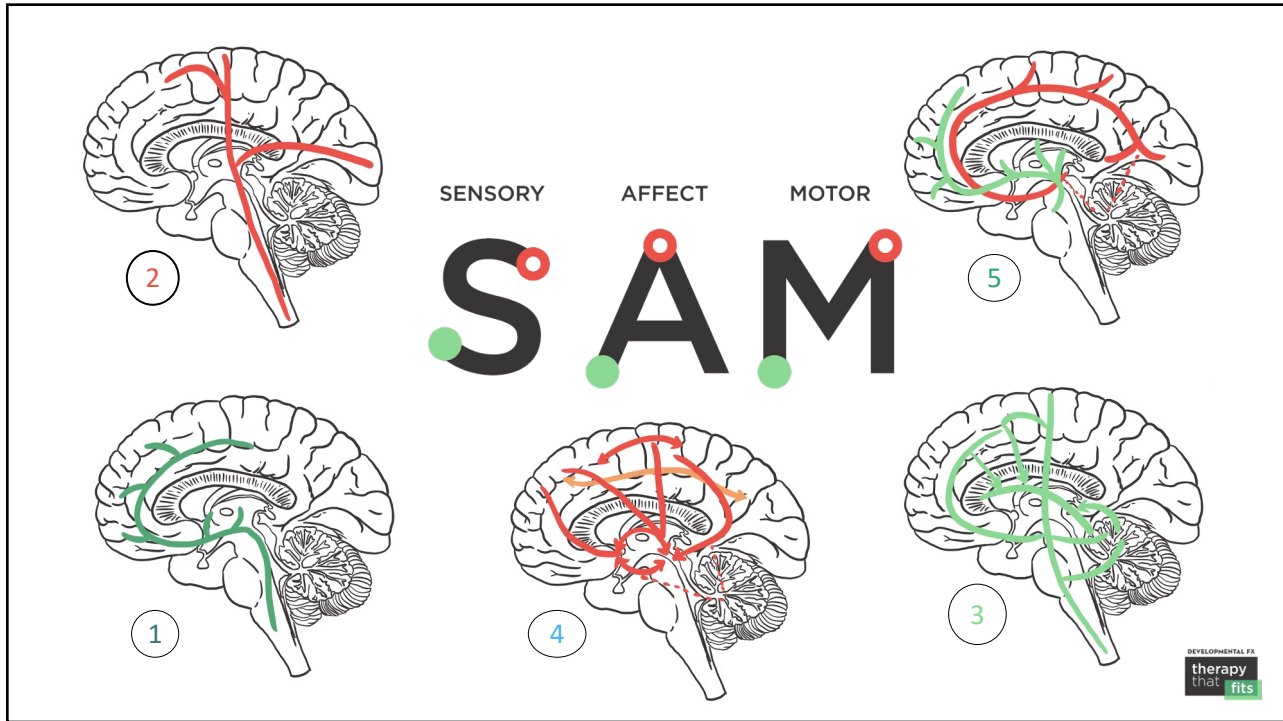
MOTOR



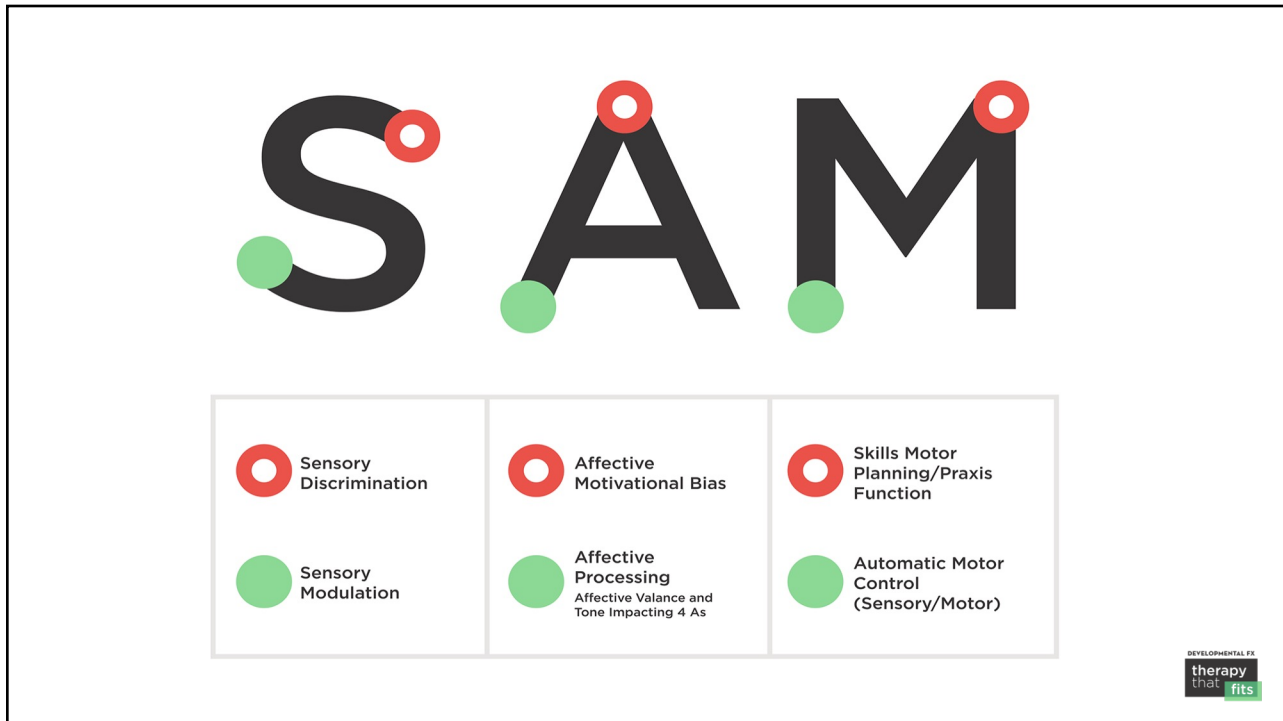
© Stackhouse, 2014; Adapted from the work of Greenspan and Wieder, 1998, 2006 & Ayres 1979, 1988

DEVELOPMENTAL FX  
therapy  
that fits

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# The SpIRiT has two primary elements

of Pediatric Therapy

## The SpIRiT

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Primary Concerns: \_\_\_\_\_ Parent Goals/Other Goals: \_\_\_\_\_ Domains to Consider for TX: \_\_\_\_\_

STEPSI TX PLAN	MODULATION	POSTURE	SENSORY DISCRIMINATION	SOCIAL/EMOTIONAL DEVELOPMENT	EXECUTIVE FUNCTIONING
Strengths & Concerns					
Pediatric CR Flow					
Sensory Motor					
Task					
Environment					
Predictability					
Playfulness					
Self-Regulation					
Interaction					
JRC/AR Notes					

**SAM**

- Sensory Discrimination
- Affective Motivational Bias
- Skills Motor Development/Praxis Functions
- Sensory Modulation
- Affective Modulation (Intrinsic state and the response to it)
- Automatic Motor Control (Sensory/Motor)

**EXECUTIVE FUNCTIONING & EFFORTFUL CONTROL CAPACITIES**

**SAM**

Executive Functioning	Effortful Control	Attentional Control	Working Memory	Inhibition	Flexibility
...	...	...	...	...	...

**POSTURAL/CORE MOVEMENT CAPACITIES**

**SAM**

Postural Control	Core Stability	Balance	Coordination	Agility	Endurance
...	...	...	...	...	...

DEVELOPMENTAL FX therapy that fits

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# The SpIRiT of Pediatric Therapy

Sensory processing, Motor, and Executive Functioning

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Primary Concerns: \_\_\_\_\_ Parent Goals/Other Goals: \_\_\_\_\_ Domains to Consider for TX: \_\_\_\_\_

Therapist: \_\_\_\_\_

**SENSORY DISCRIMINATION CAPACITIES**

**SAM**

VESTIBULAR	PROPRIOCEPTIVE	TACTILE	AUDITORY	VISUAL	INTEROCEPTIVE

**MODULATION CAPACITIES**

**SAM**

VESTIBULAR	PROPRIOCEPTIVE	TACTILE	AUDITORY	VISUAL	INTEROCEPTIVE

**SAM**

- Sensory Discrimination
- Affective Motivational Bias
- Skills Motor Development/Praxis Functions
- Sensory Modulation
- Affective Modulation (Intrinsic state and the response to it)
- Automatic Motor Control (Sensory/Motor)

**EXECUTIVE FUNCTIONING & EFFORTFUL CONTROL CAPACITIES**

**SAM**

Executive Functioning	Effortful Control	Attentional Control	Working Memory	Inhibition	Flexibility

**POSTURAL/CORE MOVEMENT CAPACITIES**

**SAM**

POSTURAL CONTROL	CORE STABILITY	BALANCE	COORDINATION	AGILITY	ENDURANCE

DEVELOPMENTAL FX therapy that fits

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**SENSORY DISCRIMINATION CAPACITIES**  
PERCEPTION, ACTION, PLANNING, EXECUTION

**SAM**

	VESTIBULAR	PROPRIOCEPTIVE	TACTILE	AUDITORY	VISUAL	INTEROCEPTIVE
<b>Sensory Discrimination/Perceptual Skills</b>	Identification: <input type="checkbox"/> Vestibular/Proprioceptive	Planning: <input type="checkbox"/> Vestibular/Proprioceptive	Execution: <input type="checkbox"/> Vestibular/Proprioceptive	Capacity: <input type="checkbox"/> Vestibular/Proprioceptive	Ayres' Factors: <input type="checkbox"/> Vestibular/Proprioceptive	
<b>Timing &amp; Response Level</b>	Timing: <input type="checkbox"/> Vestibular/Proprioceptive	Level: <input type="checkbox"/> Vestibular/Proprioceptive	Timing: <input type="checkbox"/> Vestibular/Proprioceptive	Level: <input type="checkbox"/> Vestibular/Proprioceptive	Timing: <input type="checkbox"/> Vestibular/Proprioceptive	Level: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Form</b>	Form: <input type="checkbox"/> Vestibular/Proprioceptive	Form: <input type="checkbox"/> Vestibular/Proprioceptive	Form: <input type="checkbox"/> Vestibular/Proprioceptive	Form: <input type="checkbox"/> Vestibular/Proprioceptive	Form: <input type="checkbox"/> Vestibular/Proprioceptive	Form: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Classification</b>	Classification: <input type="checkbox"/> Vestibular/Proprioceptive	Classification: <input type="checkbox"/> Vestibular/Proprioceptive	Classification: <input type="checkbox"/> Vestibular/Proprioceptive	Classification: <input type="checkbox"/> Vestibular/Proprioceptive	Classification: <input type="checkbox"/> Vestibular/Proprioceptive	Classification: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Spastic Organization</b>	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive	Spastic Organization: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Figure Ground Perception</b>	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive	Figure Ground Perception: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Attention-Motivation</b>	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive	Attention-Motivation: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Proprioceptive Control</b>	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive	Proprioceptive Control: <input type="checkbox"/> Vestibular/Proprioceptive
<b>Adaptability &amp; Modifiability</b>	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive	Adaptability & Modifiability: <input type="checkbox"/> Vestibular/Proprioceptive

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Primary Concerns: \_\_\_\_\_  
Secondary Concerns: \_\_\_\_\_

Parent Goals/Other Goals: \_\_\_\_\_

Domains to Consider for TX: \_\_\_\_\_

Therapist: \_\_\_\_\_

● Sensory Discrimination  
● Sensory Modifiability  
● Affective Motivational Bias  
● Affective Processing (Active/Passive and Non-Response to it)  
● Skills Motor Planning/Phasic Function  
● Automatic Motor Control (Kinesthetic/Phasic)

**EXECUTIVE FUNCTIONING & EFFORTFUL CONTROL CAPACITIES**

**SAM**

Socioemotional Foundations	EF Foundational Capacities	Complex EF Capacities	Effortful Control Foundational Capacities	Integrated and Effortful EF & EC Capacities
Response Inhibition: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Working Memory: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>
Emotional Regulation: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Working Memory: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>
Emotional Regulation: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Working Memory: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>	Attention Control: <input type="checkbox"/>

**MODULATION CAPACITIES**

**SAM**

Sensory Responsivity & Recovery in relation to:	Regulatory Domains	Triggers & Gateways
Intensity: <input type="checkbox"/>	Physiological: <input type="checkbox"/>	Physical: <input type="checkbox"/>
Duration: <input type="checkbox"/>	Sensory: <input type="checkbox"/>	Emotional: <input type="checkbox"/>
Location: <input type="checkbox"/>	Motor: <input type="checkbox"/>	Environmental: <input type="checkbox"/>
Modality: <input type="checkbox"/>	Cognitive: <input type="checkbox"/>	Social: <input type="checkbox"/>
	Behavioral: <input type="checkbox"/>	Regulatory Capacities: <input type="checkbox"/>
	Emotional: <input type="checkbox"/>	Autonomy: <input type="checkbox"/>
	Behavioral: <input type="checkbox"/>	Distraction: <input type="checkbox"/>
	Behavioral: <input type="checkbox"/>	Attention: <input type="checkbox"/>
	Behavioral: <input type="checkbox"/>	Self-Regulation: <input type="checkbox"/>

**SOCIAL/EMOTIONAL DEVELOPMENTAL CAPACITIES**

**SAM**

DIR/FEDCs	Social Cognition Core Competencies	Emotional Processing	Other Considerations
Reception: <input type="checkbox"/>	Self/Other Awareness: <input type="checkbox"/>	Emotion: <input type="checkbox"/>	Self: <input type="checkbox"/>
Expression: <input type="checkbox"/>	Joint Attention: <input type="checkbox"/>	Appraisal/Awareness/Interpretation/Action: <input type="checkbox"/>	Relationship Factors: <input type="checkbox"/>
Reciprocity: <input type="checkbox"/>	Social Referencing: <input type="checkbox"/>	Affective/Value Response: <input type="checkbox"/>	Resilience Factors: <input type="checkbox"/>
Problem Solving & Change of Intention: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Self-Regulation: <input type="checkbox"/>	Parent/Multi-Support Indicators: <input type="checkbox"/>
Hyperemotional/Spontaneous: <input type="checkbox"/>	Empathic Thinking/Behavior: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
Logical Thinking/Strategic: <input type="checkbox"/>	Theory of Mind: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
Compliance & Transient: <input type="checkbox"/>	Control: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
Only Area Training: <input type="checkbox"/>	Empathy & Social Perspective: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
Reflexive Thinking: <input type="checkbox"/>	Social Engagement System: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
Pro-Social Motivation: <input type="checkbox"/>	Self/Other Organization & Motivation: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>
	Pro-Social Motivation: <input type="checkbox"/>	Empathy: <input type="checkbox"/>	Thought/Action/Intention/Response: <input type="checkbox"/>

**POSTURAL/CORE MOVEMENT CAPACITIES**

**SAM**

Quality of Movement	Planes of Movement	Automatic Actions	Voluntary Actions
Quality: <input type="checkbox"/>	Sagittal Plane: <input type="checkbox"/>	Task/Action/Health: <input type="checkbox"/>	Task/Action/Health: <input type="checkbox"/>
Quantity: <input type="checkbox"/>	Coronal Plane: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>
Timing: <input type="checkbox"/>	Transverse Plane: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>
Location: <input type="checkbox"/>	Without/With Support: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>
Modality: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>	Motor Action/Postural Control: <input type="checkbox"/>

STEP2SI TX PLAN	MODULATION	POSTURE	SENSORY DISCRIMINATION	SOCIAL/EMOTIONAL DEVELOPMENT	EXECUTIVE FUNCTIONING
<b>Strengths &amp; Concerns</b> P = Facilitates & Enhances A = Absorbs/Protects R = Resists I = Inhibits					
<b>Pediatric CR Flow</b> P = Planning A = Action R = Response I = Inhibition					
<b>Sensory Motor</b>					
<b>Task</b>					
<b>Environment</b>					
<b>Predictability</b>					
<b>Playfulness</b>					
<b>Self-Regulation</b>					
<b>Interaction</b>					
<b>JRC/AR Notes</b>					

# Thank You

DEVELOPMENTAL FX



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[www.developmentalfx.org](http://www.developmentalfx.org)

Developmental FX | Denver, CO, USA

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## Objectives

Summarize the key concepts of clinical reasoning and fidelity models, emphasizing their pivotal role in supporting best practices within occupational therapy informed by sensory integrative processing.

Identify and articulate the foundational principles underlying the STEPPSI process, showcasing a deep grasp of its essential components and alignment with Ayres SI.

Summarize the core underpinnings encompassed within the SpIRiT process and the need for a model that connects sensory integrative processing to related neurodevelopmental capacities that support human occupational engagement.

List the 5 neurodevelopmental domains addressed within the SpIRiT

Provide precise definitions of the S-A-M elements within the SpIRiT process, showcasing a mastery of the terminology and its implications within the context of the clinical practice using sensory integrative processing approaches.



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