



# Reflective Practice Handout

*Regulation before clarity. Clarity before choice.*

Family law is practised in relationship with people in acute distress. You are not a neutral technical operator — your own regulated state is the instrument of practice. This handout is a private clinical tool for the few minutes **before** and **after** a demanding encounter. It is not a file document and not legal advice.

## THE FRAME

### Three domains, in sequence

i.

**CENTRE**  
REGULATION • STABILITY

Settle the nervous system first. A practitioner who cannot regulate will misread client affect and decide reactively.

- Window of tolerance
- S.H.I.F.T. Protocol™
- Breath & somatic anchoring
- Stressor externalisation

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ii.

**CLARIFY**  
COGNITION • METACOGNITION

Observe your own reasoning. Name the bias, the assumption, the values conflict before it operates below awareness.

- C<sup>3</sup> Loop™
- Cognitive bias audit
- Values-aligned decisions
- Ethical clarity under pressure

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iii.

**CHOOSE**  
AGENCY • AUTONOMY

Act from intention, not performance. Support genuine agency — yours, and your client's self-determination.

- Boundary architecture
- Professional identity
- SDT-informed goals
- Long-horizon values

## TWO TOOLS

### One for steady state, one for the acute moment

**The C<sup>3</sup> Loop™** UNDER 3 MINUTES • REPEATABLE

Your steady-state clarity tool. Use it between calls, before court, mid-negotiation, at the edge of overwhelm.

C

**Centre**

Feet on floor, one breath, notice where you are. Twenty seconds restores prefrontal access.

C<sup>2</sup>

**Clarify**

One question only: what is the one thing that matters most right now?  
Write it. Reduce the field.

C<sup>3</sup>

**Choose**

The smallest viable move toward that one thing in the next ten minutes.  
Not the task — the first step. Commit, and act.

*One loop per day is a start. One loop per activation state is the goal.*

**S.H.I.F.T. Protocol™** ACUTE • IN THE MOMENT

For when activation has overtaken thought — the client in crisis, the adversarial ambush, the distressing disclosure.

S

**Stop**

Break reactive momentum. Interrupt the pattern before it locks.

H

**Hold**

One breath. Ground the nervous system before cognitive engagement.

F

**Focus**

What is real? What is within my control right now? Strip the narrative to what is actionable.

T

**Take action**

One specific next step. Named and committed to — not the whole solution, one move.

*Is this mine, or theirs? Choose the next move deliberately.*

## Before, and after

## BEFORE THE MEETING

*Where am I, before I read where they are?*

- Breath, jaw, shoulders, gut — what is present, before any story?

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- What mood am I arriving with? Name it specifically.

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- What load is active that has nothing to do with this client — and can I park it?

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- Have I already decided the outcome? Where might confirmation bias, anchoring, or a rescue impulse be steering me?

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- Where is the tension between what my client wants and what is ethically defensible?

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- What is my best hypothesis about my client's window of tolerance today?

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- How will I support their autonomy — invite before advising, name real choices?

## AFTER THE MEETING

*Closing the loop is as important as opening it.*

- Where is my regulatory state now — activated, or settled and closed?

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- What am I leaving in this meeting and not carrying forward? Name it.

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- What worked that I want to do more of?

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- What would I do differently next time?

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- What is this matter asking of me that I need support with — supervision, consultation, self-care?

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- What one action did this generate, and by when?

*My anchor for this meeting, in one line: **I will ...*** \_\_\_\_\_

**For your CPDPR.** Structured reflection before and after high-affect matters supports your competence, client-relationship, and wellbeing records under the NZLS CPD framework. Use the prompts above as a reflective entry, and log any action or supervision need they surface.