



Therapeutic and Adaptive Provision (TAP) at St Cuthbert Mayne Catholic Junior School

1. Rationale

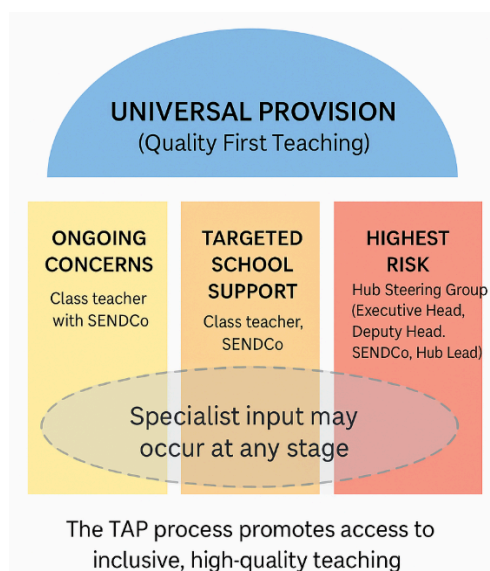
In response to rising complexity of need and limited external provision, St Cuthbert Mayne developed TAP (Therapeutic and Adaptive Provision) to ensure that all children, particularly those with SEND or SEMH challenges, can thrive within our mainstream setting. Rooted in Catholic Social Teaching and the belief in the dignity and potential of every child, TAP offers a structured, in-school graduated response to need.

2. A Graduated Response

TAP is designed around a tiered model of support:

- **Universal: Quality First Teaching (QFT)** – We strive to meet every child's needs through QFT and adaptive practice.
- **Targeted: School-based Support** – Including adapted teaching, mentoring, internal interventions, and regular APDR cycles.
- **TAP (Enhanced Tier)** – A structured, therapeutic response where needs go beyond what can be met through existing SEND or pastoral support. TAP may exist alongside specialist provision or external input and is used flexibly, including in sudden escalations due to trauma or crisis. It does not always precede or follow specialist services.
- **Specialist** – External or multi-agency support, including EP involvement where appropriate.

TAP is not a space but a model: a multi-layered structure supported by skilled staff, adaptive planning, and responsive decision-making.



The TAP model was developed from late 2022 and piloted in April 2023. By September 2023, it became part of our whole-school inclusion strategy. Core components include:

- Clear internal criteria and planning cycles (Reactive, Proactive, and Skill-Building stages)
- Structured APDR reviews led by SENDCo
- Coaching and support for teams around pupils through collaborative planning and mentoring
- Heat-map tracking of pupil outcomes (e.g. time in class, resilience, progress)
- Involvement of EP or other professionals *where appropriate*, especially for high-risk or complex profiles

TAP remains a responsive and evolving process rather than a static intervention.

4. Impact to Date

- **More responsive support:** Staff respond earlier and with greater clarity when children are struggling. This has helped reduce classroom removals and improve de-escalation.
- **Improved engagement:** Where pupils' needs are addressed through targeted or enhanced support within the TAP framework, we have seen increased engagement, confidence and progress—particularly where emotional needs are identified and supported early.
- **Capacity building:** Teachers and support staff are increasingly confident in supporting high-needs pupils and there is now generally less reliance on reactive approaches.
- **Informed decisions:** While fixed-term suspensions remain necessary in some cases, decisions are grounded in a clearer understanding of needs, context, and effective internal provision.

5. Lessons Learned

- TAP can complement rather than follow or precede specialist support. Entry may occur at any tier, including high-risk or trauma-related cases.
- Success relies on consistency, shared language, relationships, and team ownership.
- Thresholds must be flexible yet clear, to avoid under- or over-escalation.
- Re-integration after TAP support is as important as initial intervention.

6. Next Steps

- Finalise a staff-facing TAP guide and referral tool
- Map TAP to APDR more formally and ensure alignment
- Launch a parent communication plan and feedback loop
- Embed TAP in school systems: reviews, calendars, documentation
- Review and refine with input from staff and leadership team

Closing Reflection

TAP embodies our Catholic ethos of inclusion, compassion and excellence. While still developing, it has already strengthened our capacity to meet diverse needs in a more coordinated, sustainable way. The process is ongoing, but we believe it is a model of practice that could support other Catholic schools and Trusts facing similar challenges.