

Therapeutic Services Policy

More Than Ed | Independent School

Date: September 2026

Review Date: September 2027

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Read alongside the Statement of Provision and the Limits of the School's Offer and the Ending a Placement Policy and Statement.

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1. Introduction

At More Than Ed Independent School we recognise that children with Social, Emotional and Mental Health (SEMH) needs often experience barriers to learning due to underlying trauma, disrupted attachment, and complex developmental experiences. Our therapeutic services aim to support the whole child by providing a safe, responsive, and nurturing environment, underpinned by attachment-aware and trauma-informed practices.

We believe in a holistic, multi-disciplinary approach to therapy that builds resilience, emotional literacy, communication, and relational capacity. Our in-house therapy team comprises a Speech and Language Therapist (SaLT) and a Drama Psychotherapist, working collaboratively with teaching staff, families and external agencies.

Every student receives a speech and language assessment as part of the school's standard provision, with feedback to assist planning and communication. Drama psychotherapy is not part of that standard provision; it is provided where it is applicable to the student's needs. Neither is held in reserve, rationed, or made contingent on a student's presentation deteriorating. This is set out further at section 5.

2. Aims of Therapeutic Services

Our therapy team services aim to:

- Promote emotional regulation, resilience, and wellbeing.
- Address barriers to communication and language development.
- Support recovery from trauma and insecure attachment experiences.
- Assist with supporting trusting relationships with adults and peers.
- Develop self-awareness, confidence, and coping skills.
- Identify and support sensory needs in the learning environment.
- Enhance readiness for learning and engagement with the curriculum.

3. Core Principles

Our approach is informed by the following principles:

- **Attachment Awareness:** recognising the importance of secure, consistent relationships as the foundation for development, learning, and healing.
- **Trauma-Informed Practice:** understanding the impact of adverse experiences and providing safe, predictable, and empowering environments.
- **Relational Safety:** prioritising empathy and co-regulation in all interactions.
- **Child-Centred Planning:** interventions are tailored to the child's developmental stage, their language strengths and weaknesses, and individual needs.
- **Multi-Disciplinary Collaboration:** working closely with families and all staff and professionals involved in the overall care of the students.
- **Nothing Held in Reserve:** therapeutic support is embedded within the broader ethos of the school. Speech and language assessment is part of every student's standard

provision; drama psychotherapy is provided where it is applicable to the student's needs. Neither is held back for escalation.

4. Therapeutic Team Roles and Responsibilities

Speech and Language Therapist (SaLT)

The SaLT provides:

- Initial assessment looking at expressive and receptive language needs, working and auditory memory, language processing and social problem solving.
- Direct intervention, delivered 1:1 or in small groups, targeting areas of need such as memory techniques, following directions, vocabulary and semantic skills.
- Indirect intervention through curriculum planning, staff training, and modelling of communication-supportive strategies.
- Staff training and consultation to support communication-friendly teaching.
- Guidance for parents and carers to better understand and support their child's communication needs.
- Use of visual aids such as emotion thermometers, communication cards, and visual timetables.
- Full, detailed reports for families and external professionals.

SaLT involvement ensures that all communication, including therapeutic and academic input, is accessible and appropriate for each child's understanding.

Drama Psychotherapist

The Drama Psychotherapist uses a broad range of creative mediums including art, music, storytelling, movement, sensory play, and drama to:

- Support students to express thoughts and emotions that may be difficult to verbalise or fully understand.
- Provide a safe one-to-one space for students to explore current barriers to learning, difficult life experiences, and emotions.
- Develop strategies for managing anxiety, anger, and emotional overwhelm, drawing on creative and somatic approaches. Techniques may include breathing exercises, mindfulness, guided meditation, music, movement, or expressive art activities, alongside discussion and reflection to help students understand the connection between physical sensations and emotional states.
- Build cooperation, turn-taking, empathy and perspective-taking through interactive and expressive activities.
- Model a consistent, safe, and supportive form of healthy attachment through the therapeutic relationship.
- Address traumatic experiences gently, supporting students to build narrative coherence and process experiences safely.
- Enable students to explore new possibilities, reframe experiences, and develop a sense of personal empowerment.

Drama psychotherapy aligns with our trauma-informed ethos by offering non-verbal, regulated, and relationship-based methods to support healing and growth.

5. Access to Therapeutic Services

Speech and language assessment is part of every student's standard provision from the point of admission. Drama psychotherapy is not part of the standard provision every student receives; it is provided where it is applicable to a student's needs. No referral or request from the family is needed for either.

- Every student receives a speech and language assessment on admission, with feedback to staff to assist planning and communication, and direct speech and language intervention where the assessment shows it is needed.
- Drama psychotherapy is provided where it is applicable to a student's needs, as agreed by the school's team with the family. Where it is applicable it is provided without a waiting list, and it is not rationed or allocated by priority.
- Where a student is not able or willing to engage at a given point, the provision remains available to them and is offered again. It is not withdrawn, and the student does not have to re-qualify for it.
- Parents and carers are informed and involved in the planning of any therapeutic intervention.
- Written consent is obtained for all direct work with students.

Nothing in our therapeutic offer is held in reserve. There is no higher tier of therapeutic input that becomes available if a student's presentation deteriorates, because every student already receives everything the school offers that is applicable to them. Where a student needs more than this school provides, the honest answer is that different provision is required, and we will say so at review.

6. Delivery of Therapeutic Interventions

Therapy may be delivered through:

- 1:1 sessions
- Small group interventions
- Classroom-based support and modelling
- Environmental adaptation and staff training
- Family consultation or involvement
- Attendance at professional meetings where required
- Contributions towards support plans

All interventions are underpinned by relationship-building and emotional safety. Where appropriate, individual therapeutic plans are created and reviewed regularly.

7. Monitoring and Evaluation

The impact of therapeutic services is monitored through a combination of:

- Student voice and feedback
- Emotional regulation tracking tools

- Progress towards individual targets
- Staff feedback
- Attendance and behaviour data

The therapy team meets regularly with the Headteacher and SENCO to review provision and adapt practice. Reports are provided for every student for their annual review, and at any other point where they are requested for a meeting or where the therapist judges one would assist.

8. Safeguarding and Confidentiality

- All therapeutic interventions comply with the school's Safeguarding and Child Protection Policy.
- Confidentiality is maintained, with information shared on a need-to-know basis.
- Any safeguarding concern arising during therapy is reported immediately to the Designated Safeguarding Lead and recorded on CPOMS the same day.
- All therapists are DBS-checked and hold appropriate insurance. The speech and language therapist is registered with the Health and Care Professions Council. Where a therapist holds a protected title such as dramatherapist, that registration is held and checked; 'drama psychotherapist' is not itself a protected title, so the school checks the underlying qualification and registration.

9. Record Keeping

All therapists are responsible for maintaining accurate, secure, and professional records of their work with students. Records may include:

- assessment reports
- session notes
- observations and reflections
- progress reviews

These are kept in line with UK GDPR requirements and the school's Data Protection Policy. Session notes are written factually and focus on therapeutic process and observed behaviours rather than subjective interpretation.

Records are stored securely on password-protected systems, GDPR-compliant electronic software, or in locked cabinets accessible only to relevant members of the therapy team. Information is shared with staff, families, or external professionals only where it is appropriate, necessary, and in line with safeguarding and confidentiality procedures.