

St Vincent's School

CBI Building, St. Vincent's School, Yew Tree Lane, West Derby, Liverpool L12 9HN

Residential provision inspected under the social care common inspection framework

Information about this residential special school

St Vincent's School, for children with sensory impairments and other needs, is a registered charity governed by the board of trustees of the Catholic Blind Institute.

St Vincent's has specialist school status and offers a curriculum for children with all levels of visual impairment, as well as additional needs. The school is in a residential area, with the accommodation split into two separate areas on the same site.

There are 48 children on the school roll. The school caters for pupils between the ages of five and 19 years. It provides residential places and extended days for children on weekdays in term time. During this inspection, 9 children stayed in residential. Inspectors spoke to 8 of the children.

The head of care in post is suitably experienced and she is working towards the required qualification. She is currently on a planned absence from the school. An acting head of care is temporarily in place. She is supported by the senior leadership team from the school.

The inspectors only inspected the social care provision at this school.

Inspection dates: 10, 11 and 12 February 2026

Overall experiences and progress of children and young people, taking into account **good**

How well children and young people are helped and protected good

The effectiveness of leaders and managers requires improvement to be good

The residential special school provides effective services that meet the requirements for good.

Date of previous inspection: 13 January 2025

Overall judgement at last inspection: good

Inspection judgements

Overall experiences and progress of children and young people: good

Children enjoy their time in residential. They have fun, enjoy spending time with each other and make positive friendships. Feedback from parents and professionals is consistently positive. The staff team communicates well with parents and staff know children well. It is because of this that children are well cared for and kept safe. Children make progress because of their stays in residential. They have progressed with their independence, their communication skills and their confidence in day-to-day tasks.

Prior to children accessing residential, detailed information is gathered from parents about their child's routines, needs and risks. Families and professionals visit the provision. Children have taster days and overnight stays to help them to get to know other children and the staff team. Residential staff collaborate with school staff, by conducting daily handovers and by supporting children in both school and residential. This collaborative approach continues throughout children's journeys in residential.

There has been an increase in recreational activities and opportunities for children as part of the residential offer. Children participate in planning for their activities and sharing new ideas to be included in their activity plans. They access weekly army cadets, yoga, swimming and being part of the school radio station. They also have access to new glamping pods on site and attend summer camp.

Staff are responsive to children's medical needs and any changes to their health. A rehabilitation officer collaborates effectively with children, their parents and the residential staff team to support children with independence. A health care co-ordinator is also involved in children's day to day health needs. She recognises that alongside leaders and managers, improvements are required to children's health information plans to ensure that they contain accurate information. This was a point for improvement at the last inspection and so it is restated. That said, staff know how to respond to children's health needs and parents confirmed this.

The residential provision is well represented in the school council and through group house meetings. This enables children to share their views, wishes and feelings about their experiences and make suggestions to improve their stays. Feedback is also captured from children and their parents through annual surveys. They provide consistently positive feedback about their views of residential and the impact it has on their lives.

An independent visitor and independent person continue to visit children regularly in the residential provision. They have developed positive and trusting relationships with children and spend quality time with them during their visits. The independent visitors report comments on the quality of care, safeguarding practice and captures progress made by children. The chair of governors oversees and responds to the reports to ensure that she has oversight of the operation of the provision.

In addition, the chair of governors frequently visits residential and knows children well. She spends time with children, meets with staff and the head of care to agree strategic priorities to ensure that the best possible care is provided to children.

How well children and young people are helped and protected: good

Children are kept safe and secure during their stays in residential. They have staff that they can talk to about any concerns. Staff understand their safeguarding roles and responsibilities to keep children safe. They know how to promptly raise any child protection concerns, they understand the whistleblowing procedure and how to escalate their concerns if necessary.

Staff understand children's vulnerabilities and the action they should take to safeguard them. Children's risk assessments do not include all information provided by parents relating to children's risk behaviour or up to date information of any new risks that have emerged and how they should be managed. This shortfall has not impacted on the safety of children. Prompt action was taken during the inspection to update all risk assessments so that they were an accurate reflection of children's individual needs.

Children do not go missing from the residential provision. Physical restraint is not used with children. The staff team reinforces positive behaviour and support children to make good choices in relation to their behaviour. There is a full school approach to rewards and recognition, through a house points system. This works well, with children attending awards ceremonies at the end of term to celebrate their achievements.

There is not a bullying culture in residential. Children have positive relationships with each other. They are supported to be respectful and considerate with each other. There have been no complaints made by children, their families or professionals. However, children know how to make a complaint and report that they are confident that their concerns would be explored and treated seriously.

The effectiveness of leaders and managers: requires improvement to be good

Leaders and managers oversight of children's plans is ineffective. Children's records are not accurate and do not reflect their current needs. In addition, leaders and managers do not use their safeguarding recording systems effectively. For example, there was a lack of information recorded on the electronic online system where incidents have occurred and so it was unclear what actions leaders and managers have taken following incidents.

Leaders and managers were unclear during the inspection which documents were being used as children's placement plans. The documents used by the staff to support children do not evidence how children's day to day needs were being met by

staff and do not evidence the progress children make. This was a point for improvement at the last inspection and so it was restated.

Leaders and managers talk about children fondly. Their goal for children's stays in residential is focused on developing their social skills, independence skills, resilience and confidence. The head of care sits on the school's senior leadership meetings, where residential is a weekly agenda item. She recognises the provisions strengths and areas to develop to improve children's experiences.

Since the last inspection, some staff have left their role, but overall the team remains stable. Staff from school and who know children well, work shifts in residential and are now part of the staff rota. This has provided children with continuity of support and care. Staff work collectively together to meet children's needs. Communication is a strength of the team. Team meetings are held regularly and used to review children's needs and to identify additional support that children require.

All staff receive regular supervision. Staff well-being has been made a focus, with the introduction of wellness days. Appraisals are comprehensive. They include progress staff have made against their targets and new targets for the following year to develop the staff team skill set. Staff have the relevant training to support children. Broader risks for children are addressed through additional training for staff in areas such as prevent and county lines.

The residential continues to be a standing agenda item at all governors' meetings. The head of care provides a comprehensive report for governors, so that they are collectively kept up to date on the operation of the provision and given a clear overview of the findings from both the independent visitor and the chair of governors visits to residential.

What does the residential special school need to do to improve?

Compliance with the national minimum standards for residential special schools

The school does not meet the following national minimum standards for residential special schools:

- The school's leadership and management fulfil their responsibilities consistently and effectively so that the standards are met. Specifically, leaders and managers should demonstrate thorough oversight of children's plans to ensure that they are accurate and reflect children's current needs. In addition, leaders and managers should use their safeguarding recording systems effectively to ensure that it is clear about the action taken in response to safeguarding incidents. (Residential special schools: national minimum standards 2.4)
- Where necessary, a child has a clear plan covering their individual health and welfare needs. This contains relevant health and welfare information and records significant health and welfare needs and issues. The plan is child-centred, agreed by the child (where appropriate) and their parents/carers and includes: records of developmental checks; records of routine universal health checks (e.g. age appropriate immunisations, dental health, hearing and eyesight checks); health monitoring required by staff; intimate care or bodily functions requiring staff help; any sensory needs; and the involvement of a child's parents/carers or significant others in health and welfare issues. This plan could be informed by health information in an EHC plan or similar plan as appropriate. (Residential special schools: national minimum standards 12.12)

Recommendations

- School leaders should ensure that there is a written plan in place for each child resident in the school setting out how their day-to-day needs will be met, known as the placement plan. The plan is thorough and specific to the child and is agreed, as far as is practicable, with the child, the child's parents/carers and any placing authority for the child. Children have an opportunity to contribute to their plans. The placement plan identifies the needs of that child that the school should meet, assesses any risk and specifies how the school will care for the child and promote their welfare on a day-to-day basis.
- Each child's file includes the information in Appendix B (individual records). Specifically, leaders and managers should ensure that children's risk assessments include all information provided by parents relating to their risk behaviours, up to date information of emerging risks and strategies to mitigate risks.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people using the social care common inspection framework. This inspection was carried out under the Children Act 1989 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation and to consider how well it complies with the national minimum standards.

Residential special school details

Social care unique reference number: SC040724

Headteacher/teacher in charge: Mr David Swanston

Type of school: Residential Special School

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Inspectors

Cheryl Field, Social Care Inspector (Lead)

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