

Antonine House Care Home Service

16 Roman Road
Bearsden
Glasgow
G61 2SL

Telephone: 01419 316 080

Type of inspection:
Unannounced

Completed on:
11 July 2025

Service provided by:
Antonine Care Limited

Service provider number:
SP2010010916

Service no:
CS2012310887

About the service

Antonine House is located in a residential area of Bearsden, East Dunbartonshire. The service provider Antonine Care Limited is part of the wider Meallmore group.

Antonine House provides a care home service to a maximum of 81 older people, including one person under 65 within that number. At the time of the inspection, there were 71 people who were living at the service.

All bedrooms were single with en-suite toilet and shower facilities. The care home benefitted from a variety of sitting and dining areas. There was also a cinema room which residents could use if they wished to do so. An enclosed garden area and outdoor sitting area had also been developed. One of the service's aims is making a positive difference and trying to make every moment count.

About the inspection

This was an unannounced inspection, which took place on 8, 9 and 10 July 2025 between the hours of 10:15 and 22:00. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with ten people using the service and four of their family members
- spoke with 13 staff and management
- observed practice and daily life
- reviewed documents
- spoke with two visiting professionals
- reviewed survey results from 10 relatives, 12 staff and three visiting professionals

Key messages

People's health and wellbeing was supported to a very good standard. We suggested that the service give further consideration to involving people in future menu planning to aid their enjoyment of their meals.

The home had a very good standard of facilities and the setting was appreciated by people and their families. We recommended that increased frequency of some checks could further improve a couple of areas that were highlighted.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our setting?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

We spent time observing interactions that were warm and respectful. It was clear that staff knew people and their support needs well. People living at the home told us that they felt very well cared for and described staff as 'outstanding', 'very patient' and 'respectful'. Staff were visible and attentive to people's needs, providing appropriate support when required. People commented that they did not have to wait long if they needed staff support and that staff knew their individual preferences. Relatives agreed that they were very happy with the home and told us, 'really happy with the care' and 'doing all they can'. People and their relatives told us about many positive activities that were happening across the home and the cafe area was being well utilised socially. A couple of people did tell us that they hoped for increased physical activities and the management team took this on board.

We spoke to two visiting health professionals, who gave very positive feedback about the home, management and staff team. We could see that there were robust monitoring tools in place for nutrition, falls and general health. We sampled medication records and found that people were receiving what had been prescribed for them, and any 'as required' medication was being appropriately administered and reviewed. The service were able to demonstrate that they were responsive to events and shared any new learning with the staff team to further improve practice. Although the service were mostly proactive when any issues did arise we did ask them to further consider how to improve people's enjoyment of the food that was being served. Most residents that we spoke to felt the menu was repetitive and could be worked on.

(Please see Area for improvement 1)

The care plans that we sampled were detailed and routinely reviewed for any updates that were required. The daily recordings captured care that had been provided, monitored health and showed that people and their relatives were regularly consulted. We felt assured that people's health and wellbeing benefitted from their care and support.

Areas for improvement

1.

The service should give further consideration to increase people's participation in menu planning and enhance their enjoyment of the food on offer.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning' (HSCS 1.33)

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The setting was well maintained, with appropriate safety checks in place. Domestic staff were visible throughout the home and demonstrated respectful interactions with residents. We found the rooms to be clean, spacious, and personalised in line with individual preferences.

However, we noted that some mattresses required replacement, and a few shower chairs were not as thoroughly cleaned as expected. Management responded promptly to address these issues. We recommended that more frequent checks be implemented to help prevent similar occurrences in the future.

(Please see Area for Improvement 1)

Residents and relatives spoke positively about the pleasant surroundings, both in private rooms and communal areas. The home offered a variety of lounges, dining spaces, and seating areas, all furnished comfortably. During our visit, the enclosed gardens and balconies were well used, and we observed thoughtful design features to support residents' orientation throughout the home. All floors were accessible via lifts and outdoor spaces were accessible to all. Activities were happening across different areas of the home, indoor and out.

Dining areas were attractively presented, with neatly set tables and fresh flowers, contributing to a welcoming atmosphere. Care was taken to provide a similar experience for people who chose to eat in their own rooms. Communal spaces were inviting and actively used by residents and their visitors. Overall, people were experiencing high quality facilities.

Areas for improvement

1.

The service should amend their environmental audits to increase frequency of checks on mattresses and on thorough consistent cleaning of harder to see areas.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishing and equipment' (HSCS 5.24)

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service should ensure that they follow up on any areas identified in medication audits in a timely fashion.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11)

This area for improvement was made on 27 November 2023.

Action taken since then

The medication audits that we viewed identified some areas that had required action. These areas had been clearly recorded, actioned and then signed off as complete timeously.

This area for improvement has been met.

Previous area for improvement 2

The service should ensure that PPE (Personal Protective Equipment) is appropriately stored for staff to use. This should be a clean, dry area that is free from contamination and ensures staff can easily access supplies in an ordered fashion.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22)

This area for improvement was made on 27 November 2023.

Action taken since then

The home had found alternative storage for PPE which was clean, dry and free from contamination. Supplies were plentiful and staff were aware of where to access these. Staff we observed were accessing and using PPE appropriately.

This area for improvement has been met.

Previous area for improvement 3

The service should ensure that any documents or processes are clearly recorded, complete, dated and easy to track.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

This area for improvement was made on 27 November 2023.

Action taken since then

We sampled documents which were clearly recorded, dated and easy to track. Documents were well-structured, signed and included timeframes for completion. We were able to match documents to events that the service had notified us about.

This area for improvement has been met.

Previous area for improvement 4

The service should comply with the Care Inspectorate guidance 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'. The provider should notify the Care Inspectorate of all relevant incidents under the correct notification heading and within the required timeframe.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20)

This area for improvement was made on 27 November 2023.

Action taken since then

The service were making appropriate and timely notifications within the correct categories. Managers were also aware of the need to provide updates to notification events and had plans to further embed this into their practice.

This area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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