

## Antonine all stars Support Service

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Unannounced

**Completed on:**  
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**Service provided by:**  
Antonine Court Ltd

**Service provider number:**  
SP2005007682

**Service no:**  
CS2023000362

## About the service

Antonine all stars offers support to children and young people with physical disability, learning disability and /or complex needs. This service is located to the West of Glasgow and provided from premises shared with the organisation's adult day care service. These services run separately at different times. Antonine all stars runs in the evenings and at weekends. Support to the children and young people can be provided from the premises and in the community.

## About the inspection

This was an unannounced inspection which took place on 28 and 29 May 2025. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since the service was registered.

In making our evaluations of the service we:

- spoke with people using the service, and their families;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

This was the service's first inspection since registering with the Care Inspectorate.

## Key messages

Young people benefitted from warm, respectful nurturing relationships

The service needed to develop a greater understanding of the individual profiles of people using the service so support could be tailored to their individual needs.

Leaders were passionate and committed but needed to strengthen their oversight of the service.

Young people were supported by a good number of committed and compassionate staff.

The developing team need opportunities to come together to promote consistent support and care.

Personal plans need to be more individualised and support people to fulfil their potential.

## 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?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate
How well is our care and support planned?	3 - Adequate

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

## How well do we support people's wellbeing?

4 - Good

We evaluated the key question as good where a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that supported people consistently have experiences and outcomes which are as positive as possible

People who were accessing Antonine all stars were supported with compassion, nurture and respect and building meaningful relationships was fundamental to the practice of the team. Young people chose how they spent their time day to day, and staff set up the service with people's preferences in mind.

Young people's confidence increased because of their support and families told us of the positive benefits their children experienced because they attended the service. People had fun and developed new skills as the team were proactive in creating opportunities to connect with their peers, explore new and exciting play opportunities and participate in activities in their local community.

At times the busy environment at Antonine all stars proved overwhelming for some supported people. Where staff knew young people well, they recognised this and used quieter spaces within the building to offer a soothing experience, but we identified a need to gain a better understanding of how every young person's health conditions affected them to ensure all staff knew how best to anticipate and respond to people's distress at the earliest opportunity.

**(See area for improvement 1).**

Young people using the service were safely supported and the team had a developing knowledge of their role in identifying and reporting concerns. Leadership changes had recently been implemented in recognition that young people's support needs, and individual risk factors required a more consistent response across the weekday and weekend service and we reiterated that this should continue.

## Areas for improvement

1. To support young people's development, the service should develop a more in depth understanding of how health conditions impact on each individual using the service.

This should include but is not exclusive to assessing young people's sensory and communication needs as part of the referral and arrival process.

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

'My care and support meets my needs and is right for me'. ( HSCS 1.19).

## How good is our leadership?

3 - Adequate

We evaluated the key question as adequate. While the strengths had a positive impact, key areas need to improve.

Current leaders in Antonine all stars were committed to ensuring all young people had a positive experience of support and had implemented some systems to evaluate their experiences. Since the service was registered there had been a few changes in leadership roles and the service had slowly expanded to provide support to young people at weekends. When we visited, roles and responsibilities for oversight of the whole service lacked clarity, and improvement was needed to ensure that young people's support was delivered and evaluated in line with best practice. **(See area for improvement 1).**

Families and professionals external to the service were regularly invited to feedback on their experiences and they were confident that their views were listened to and valued. Staff were confident that current leaders would act on feedback and address any concerns they raised. This was of particular importance as before the inspection, the arrangements in place to report and record incidents had been ineffective in ensuring there was opportunity to review and learn from young people's experiences when support didn't happen as planned.

**(See area for improvement 2).**

The current leadership team demonstrated a commitment to improvement and were clear that key areas described in this report needed to change to reflect their vision for the service and the positive aspirations they have for their young people.

## Areas for improvement

1. To support young people's health, wellbeing and development, the provider should ensure that people's experiences shape the future development of the service.

This should include but is not exclusive to ,clearly defining roles and responsibilities for the governance of the whole service, and ensuring the service is evaluated using the relevant best practice guidance.

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

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

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

## How good is our staff team?

### 3 - Adequate

We evaluated the key question as adequate. While the strengths had a positive impact, key areas need to improve.

Young people were supported by enough adults to safely meet their needs. This ensured that staff had time to meaningfully engage young people in the activities of their choice. As a developing service, All-stars did not yet have a full team of its own and some staff from the adult day service were opting to do additional hours to work in the young people's service. Leaders had ensured these staff had received additional training to undertake this role and had access to key information that assisted them in knowing about individuals' needs and preferences. Staff who were employed directly to all stars since the service started, had attuned relationships with young people and their presence ensured the adults who knew the young people less well, had access to assistance and advice. There were some systems to match staff to young

people, but the service should pace the rate of new young people joining, whilst the developing team gain the skills and knowledge to meet the range of individual needs of all supported people. **(See area for improvement 1).**

Staff worked well together, and everyone demonstrated shared values of commitment and respect to the young people they supported. Some key roles were identified to ensure the smooth set up and running of each support session and staff had time together prior to young people arriving to plan for the day. Weekday and weekend staff rarely came together to share views and learning opportunities. This led to the potential risk of inconsistent approaches to support and limited the opportunity to learn from people who know the young people well. **(See area for improvement 2).**

Staff felt supported in their role, and everyone shared a strong sense of motivation to support young people to achieve their potential.

## Areas for improvement

1. To support people's development and promote positive outcomes, the provider should ensure a mechanism for assessing staffing arrangements, based on the needs of supported people, is in place.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'My needs are met by the right number of people'. (HSCS 3.15).

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14).

And to comply with section 7 of the Health and Care (Staffing)(Scotland) Act 2019.

2. To promote young people wellbeing, the service should ensure that the whole staff team have opportunities for to develop a shared understanding of the young people they support.

This should include but is not limited to, coming together for meetings and development opportunities where learning from incidents is shared and plans of support are reviewed together

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'I am supported and cared for by people I know so that I experience consistency and continuity.' (HSCS 4.16).

## How well is our care and support planned?

### 3 - Adequate

We evaluated the key question as adequate. While the strengths had a positive impact, key areas need to improve

Individual personal plans were in place for all people using the service and there were some good profiles that succinctly captured young people's preferences and guided adults in how best to support them

Whilst it was clear the service aspired to help young people fulfil their potential; this was not reflected in the basic documents designed to shape and inform their support. Plans needed to be more individualised and document a greater level of detail of how young people communicated, particularly when expressing their needs. Goals needed to be more enabling and more effectively reflect young people's potential.

Families and external professionals were involved in reviewing each child's experience of support, but plans remained static and opportunities were missed to provide a more considered and planned approach to young people developing essential life skills.

**(See area for improvement 1).**

The individual risks that young people faced were generally well understood by the team who supported them. Leaders created opportunities for young people to take positive risks and explore their environment and during the inspection we encouraged them to ensure all staff had the confidence to let people explore and express themselves in ways that supported people's development and natural curiosity.

### Areas for improvement

1. To promote positive outcomes for people using the service, the provider should ensure that personal plans, reflect people's needs, preferences and potential. This should include but is not limited to, clearly assessing needs as part of the referral process, detailing communication styles and preferences and setting and reviewing individual goals with young people and their family.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices'. ( HSCS 1.15).

### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.2 People get the most out of life	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate



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