

SSCN Healthcare Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
7 November 2025

Service provided by:
Support and Social Care Network Ltd

Service provider number:
SP2013012211

Service no:
CS2013322125

About the service

SSCN Healthcare are part of Support and Social Care Networks Ltd which is a privately owned company.

The service is registered to provide a service to older people and people with learning and/or physical disabilities living in their own homes and in the community.

The service operates in Edinburgh, Fife, Falkirk and Inverclyde. Care will be provided by 1 staff team as agreed in the notice granting registration dated 14 April 2014.

The registered manager coordinates the overall running of the service. The care manager and care co-ordinators hold some management responsibilities for the staff teams who provide direct support to people. The service is managed from an office in Edinburgh.

At the time of the inspection the service was being delivered to 219 people.

About the inspection

This was a short notice announced inspection which took place between 29 - 30 October and 3 November 2025. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we visited the provider's Edinburgh Office. We reviewed a wide range of documentation. 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 management and reviewed documentation provided by the service.

Key messages

There was improvement around medication administration. The service have developed this aspect of care delivery since the inspection of 5 June 2025.

Personal plans required further improvement in order to support safe care delivery outcomes and minimise risk for people who experienced care.

At the last inspection we made 2 requirements. One of the requirements, relating to medication administration was met, the other requirement regarding personal plans was not met.

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

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| How well is our care and support planned? | 3 - Adequate |
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Further details on the particular areas inspected are provided at the end of this report.

How well is our care and support planned?

3 - Adequate

We made an evaluation of adequate for this key question. Whilst some strengths could be identified, these were compromised by significant weaknesses and potential for poor outcomes.

At our previous inspection, 5 June 2025, we made a requirement associated with care delivery, skin care, risk evaluation and body maps. This type of documentation supports staff to provide effective care and support outcomes.

We noted some improvements around the provision of body maps, used to direct staff around the application of topical creams. However, we found that there were still deficits in personal planning guidance associated with risk assessment, maintaining skin integrity, repositioning and choking.

It is important that this is in place to ensure staff have the right information to support people safely. The absence of detailed guidance had potential to place people at unnecessary risk, which could result in harm.

In order to ensure safe and effective skin care outcomes for people, we repeated the requirement (see requirement 1, below).

Requirements

1. By 30 January 2026:

The service must ensure that all personal plans outline risk, health, welfare and safety needs in a coherent manner which documents how needs are met.

In order to do this the service must ensure that personal plans are:

- Accurate, sufficiently detailed and reflect the care planned or provided.
- Where relevant, personal plans must incorporate body maps and clearly indicate which topical creams are used to maintain skin integrity. The personal plan must provide staff with detailed guidance around the application of all prescribed topical medication.
- Personal plans must have detailed guidance around people's repositioning needs.
- Where there is risk of tissue breakdown, the service must ensure that staff know when they should escalate any concern.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: regulation 4 – requirement for records all service must keep-keeping. And SSI 2011/210 regulation 4(1)(a) – requirement for the health and welfare of service users. And regulation 5(1) – requirement for personal plans.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By September 30, 2025:

The provider must ensure people are supported safely with their medication to support their health and wellbeing.

To do this, the provider, must at a minimum ensure:

- Medication administration practice is safe and follows best practice.
- Medication Administration Records accurately detail all prescribed medication, dose and times of administration in line with the prescriber's instructions.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with Health and Social Care Standard 1.24: Any treatment or intervention that I experience is safe and effective.

This requirement was made on 5 June 2025.

Action taken on previous requirement

All staff had undertaken training relevant to medication administration during the course of this calendar year.

Management routinely undertook observations of staff practice. These observations included a focus on medication administration. This helped establish management oversight around the efficacy of care delivery.

We considered medication administration and accident and incident recordings which document any issue or concern arising from medication and related practice. We observed a decrease in events associated with medication administration.

We cross referenced administration records with daily progress notes which helped evidence care delivery and with audits undertaken by the management team. We found a small number of gaps in medication administration records (MAR sheets). These omissions were signature errors and were rare in comparison to the volume of medication administered.

Medication audits and actions arising from them helped support safe medication administration practice.

Met - outwith timescales

Requirement 2

The service must ensure that all personal plans outline risk, health, welfare and safety needs in a coherent manner which documents how needs are met.

In order to do this the service must ensure that personal plans are:

- Accurate, sufficiently detailed and reflect the care planned or provided.
- Where relevant, personal plans must incorporate body maps and clearly indicate which topical creams are used to maintain skin integrity. The personal plan must provide staff with detailed guidance around the application of all prescribed topical medication.
- Personal plans must have detailed guidance around people's repositioning needs. Where there is risk of tissue breakdown, the service must ensure that staff know when they should escalate any concern.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: regulation 4 – requirement for records all service must keep-keeping. And SSI 2011/210 regulation 4(1)(a) – requirement for the health and welfare of service users. And regulation 5(1) – requirement for personal plans.

This requirement was made on 5 June 2025.

Action taken on previous requirement

Please Key Question 5 of this report for a detailed summary.

Not met

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 they keep accurate records of each person employed, whether they are in paid employment or employed on a voluntary basis in the service. This should include details of their role and responsibilities, and where and when they worked in the service.

Adult care services: Guidance on records you must keep and notifications you must make-Care Inspectorate guidance-March 2025.

See also:- SSSC Codes of Practice for Employers - Code for Employers of Social Service Workers.

5.7 'Cooperate promptly with SSSC investigations and those of other authorities, including providing documents, attending hearings and responding to the findings and decisions.'

See also:- Health and Social Care Standards-My Support, My Life
4.23 'I use a service and organisation that are well led and managed.'

This area for improvement was made on 5 June 2025.

Action taken since then

There have been no further concerns associated with this area for improvement since it was made. In order to evaluate the progress around this area for improvement we will consider it at the next full inspection of the service.

Previous area for improvement 2

The service should ensure that all confidential records relevant to people experiencing care are safely stored and archived.

Health and Social Care Standards-My Support, My Life,

4.1 'My human rights are central to the organisations that support and care for me.'

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

4.23 'I use a service and organisation that are well led and managed.'

This area for improvement was made on 5 June 2025.

Action taken since then

There have been no further concerns associated with this area for improvement since it was made. In order to evaluate the progress around this area for improvement we will consider it at the next full inspection of the service.

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

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| 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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