



Mac Research
and Consultancy Limited

SERVICE HANDBOOK · 2026 · HEALTH & SOCIAL CARE

Raising the Standard of Social Care Consultancy

Compliance, quality assurance, registration and operational leadership for care providers across Scotland and England.

COMPANY

**Mac Research &
Consultancy Ltd**

COVERAGE

**Scotland & England
(CI and CQC)**

SECTOR

**Health & Social Care
Regulated Services**

WEBSITE

**macresearchand
consultancy.co.uk**

Expertise · Integrity · Impact

Contents

THE FIRM

- 03** Who we are
- 04** What sets us apart
- 05** By the numbers
- 06** Our services at a glance

CORE SERVICES

- 07** Full Operational Oversight
- 08** Interim Registered Manager
- 09** Due Diligence & Feasibility
- 10** Quality Assurance Reviews
- 11** Mock Inspection & Readiness
- 12** Registration Support
- 13** Dementia Training

WORKING WITH US

- 14** Wider capabilities
- 15** Scotland and England
- 16** How engagements work
- 17** Challenges we solve
- 18** Meet the team
- 19** Client experience
- 20** Get in touch

Mac Research and Consultancy Limited

A specialist social care consultancy operating across Scotland and England, founded with the ambition of becoming the leading care consultancy in Scotland. We support care homes, nursing homes, care at home and housing support providers, supported living services and children's provision — from initial registration through to ongoing quality assurance and leadership development.

Care providers rarely struggle because they don't know what good care looks like. They struggle because proving it is a continuous, documented obligation that never quite stands still. Our consultants are based across Scotland and England, so the person reviewing your service has usually driven there rather than flown in for the day.



I believe everyone deserves care that truly sees them.

— **Arlene Bunton**, Founder & Director

MISSION

To close the gap between what a care service says it does and what actually happens — so values hold up under inspection, under pressure, and at three o'clock on a difficult afternoon.

VISION

A care sector where providers run successful, sustainable businesses, safe in the knowledge that the care they deliver is genuinely what is best for the person.

Dual-nation expertise

Care Inspectorate (Scotland) and
CQC (England)

End-to-end support

Registration through to ongoing
oversight

Genuinely tailored

No generic templates, ever

24hr response

On-call email support when it
matters

What Sets Mac Research Apart



20+ years of senior experience

Deep expertise in Scottish and English regulatory frameworks, built across real senior leadership roles — not read from a manual.



Research-led practice

Our Director is a doctoral researcher at the University of Stirling and a published author on inclusive dementia care. Content reflects where the evidence has actually moved to.



Genuinely tailored support

No generic templates. Every action plan is built around your specific service, model and staff.



Rapid response when it matters

24-hour on-call support. We act immediately when urgent issues arise — not three weeks later.



Dual-nation regulatory knowledge

Fluent in both Care Inspectorate and CQC expectations, and clear that one is not a translation of the other.



End-to-end capability

From pre-purchase due diligence to policy creation, interim management and digital integration — one trusted partner.



She stepped in and transformed that shell into a fully functioning, compliant and operational business ready for take-off.

Words can hardly express the impact she has had on our lives and our business. She raised our expectations and pushed us to raise our game.

Samina Iqbal, Director

247 Alba Care

Mac Research — By the Numbers

20+

Years of Senior

Leadership Experience

2

Nations Covered

Care Inspectorate & CQC

100%

Tailored Engagements

No Generic Templates

24hr

On-Call Response

Email Support

12+

Specialist Services

Under One Roof

6

Step Registration

Journey

Our Services at a Glance

Seven core consultancy services, supported by a wider capability set covering training, property, digital integration and documentation.

1

Full Operational Oversight

Continuous external oversight of governance, compliance and quality — not a one-off audit.

2

Interim Registered Manager

Experienced managers who step in and hold the service steady while you appoint.

3

Due Diligence & Feasibility

Registration feasibility, use of space, category of care and viability — before you buy.

4

Quality Assurance Reviews

Independent assessment of the systems and governance that underpin quality over time.

5

Mock Inspection & Readiness

An honest mirror held up against the same frameworks an inspector uses.

6

Registration Support

End-to-end CI and CQC registration, from first idea to final submission.

7

Dementia Training

Research-led, intersectional and mapped to your national workforce framework.

8

Bespoke & Blended

Most engagements combine several of the above. We scope to the problem, not the product.

Full Operational Oversight

Independent operational, governance and compliance support – continuous, not occasional.

Full Operational Oversight is a structured consultancy service providing independent operational, governance and compliance support to care providers. It is not a one-off audit; it is continuous external oversight that helps you maintain standards and stay ready for regulatory scrutiny throughout the year.

Support can be delivered as a single focused review, short-term stabilisation, or retained oversight that keeps governance and quality on track year-round.

WHO IT'S FOR

- Care homes and nursing homes
- Domiciliary care and housing support
- Supported living services
- Newly registered services
- Providers facing leadership change

WHAT'S INCLUDED

- 1 Governance reviews**
Governance arrangements, leadership structures and accountability, assessed the way a regulator would.
- 2 Leadership support and mentoring**
Practical advice for Registered Managers, senior leaders and operational teams.
- 3 Compliance monitoring**
Performance reviewed against Care Inspectorate and CQC expectations, with gaps flagged early.
- 4 Quality assurance and performance**
Audit, indicator tracking and evidence that improvement is real rather than merely recorded.
- 5 Policy review, action planning and risk**
Documentation kept current and compliant, improvement plans prioritised, and risks caught before they escalate.

Benefits: greater visibility, improved compliance, stronger governance, better inspection readiness, reduced risk and sustainable improvement.

Interim Registered Manager

When a service loses its manager, the clock starts immediately.

When a service loses its manager, the clock starts on regulatory compliance, on staff confidence, and on the quality of care people receive. We provide experienced interim managers who step into that gap and hold the service steady while a permanent appointment is made.

Placements are typically three to six months, full-time on site, with part-time and hybrid models available where the need is oversight rather than day-to-day cover.

WHO IT'S FOR

- Sudden resignation, suspension or absence
- Improvement Notice, Warning Notice or Section 31
- Grades of 1–2, or a poor CQC rating
- Post-acquisition stabilisation, TUPE or a new opening
- A capable deputy who needs mentoring into the role

WHAT'S INCLUDED

- 1 Ownership of the improvement plan**
Where a notice or action plan exists, the interim manager owns delivery and evidences progress in a format the regulator accepts.
- 2 Weekly and monthly reporting**
Weekly reporting on compliance, risk, staffing and occupancy, plus a monthly governance summary for the board.
- 3 Honest regulatory positioning**
Interim placement and formal registration are not the same thing. We plan the regulatory route at the outset, not mid-placement.
- 4 Structured handover and exit report**
The incoming permanent manager inherits a documented position rather than a verbal briefing.
- 5 The whole consultancy behind them**
Audit suites, policy frameworks, governance review and mock inspection – more than one person's capacity.

Due Diligence & Registration Feasibility

Buying a building is a commercial decision. Registering it is a regulatory one.

Providers regularly complete on a property only to discover that the layout will not support the category of care they intended, that the regulator will cap the numbers well below the projection the deal was modelled on, or that the local market cannot fill the beds at the fee level the business plan assumed.

Our due diligence appraisal answers those questions before the money moves — and where the answer is no, we say so.

PROCESS AND TURNAROUND

- Desk review of title, plans and existing consents
- Site visit with photographic and measured record
- Market and viability analysis; financial modelling
- Draft report, discussion of findings, then final issue
- Typically one to two weeks from site access

WHAT'S INCLUDED

- 1 Registration feasibility**
Whether the property can be registered at all, on what terms and at what capacity — plus the planning, HMO and fire consents that sink registrations.
- 2 Use of space**
A room-by-room Schedule of Accommodation, IPC-compliant flow, accessibility and the staffing implications of the layout.
- 3 Category of care**
A written recommendation on what the building should be registered as — which is not always what the vendor or agent has assumed.
- 4 Demand, need and viability**
Dependency data, competing supply, commissioning intentions, achievable fee rates, labour market and a break-even model.
- 5 The written recommendation**
One report, RAG summary at the front, and a proceed / proceed-with-conditions / do-not-proceed conclusion with the reasoning stated plainly.

This is operational, regulatory and commercial due diligence — not a regulated financial service, a valuation, or a substitute for your surveyor or solicitor. Registration decisions rest with the regulator.

Quality Assurance Reviews

Stronger governance. Sharper oversight. Measurable improvement.

A Quality Assurance Review is a structured, independent assessment of how effectively a service monitors, measures and improves the quality of care it delivers — from board and leadership oversight through to frontline delivery.

Without effective quality assurance, concerns often go undetected until they escalate, frequently surfacing during an inspection rather than before it. Our reviews help providers shift from reactive problem-solving to proactive, intelligence-led improvement.

WHY QA SYSTEMS FAIL

- Audits that record rather than improve
- A focus on activity rather than impact
- Weak governance flow; unmonitored action plans
- Disconnected systems that never speak to each other
- Over-reliance on individuals rather than process

WHAT'S INCLUDED

- 1 Governance and leadership**
Oversight, accountability, decision-making — and how effectively quality information reaches those responsible for it.
- 2 Quality monitoring systems**
Internal audits, service reviews, performance monitoring and the activity that turns data into change.
- 3 Service performance**
Quality indicators, improvement tracking, outcome measurement and overall effectiveness.
- 4 Policies, procedures and risk**
Policy implementation and operational consistency; risk identification, mitigation, incident monitoring and escalation.
- 5 Feedback, engagement and assurance**
Whether complaints and feedback genuinely drive learning — and how that aligns with Care Inspectorate and CQC expectations.

Many providers benefit from an annual independent review alongside their own internal QA activity. Pairs naturally with Mock Inspection — the two work powerfully together.

Mock Inspection & Readiness Assessment

Know exactly where your service stands — before the inspectors do.

An inspection rarely fails because a provider didn't care. It fails because no one held up an honest mirror in time. By the moment a grading lands or a rating is published, the window to act has already closed.

This is not a tick-box exercise or a desktop policy check. Our consultants replicate the inspection experience — document review, observation of care in practice, and structured conversations with your leadership team and frontline staff.

WHAT WE REVIEW

- Governance, leadership and accountability
- Staffing, safer recruitment and supervision
- Care planning, risk assessment and records
- Quality assurance, audits and action plans
- Medication management and safeguarding

WHAT'S INCLUDED

1

A compliance overview

Your strengths and the areas needing attention, stated plainly.

2

Risk identification

Concerns flagged before they become inspection findings.

3

A prioritised action plan

With named owners and realistic timescales.

4

Governance recommendations and a readiness rating

Recommendations to strengthen leadership and oversight, with an honest picture of where you would likely sit.

5

A leadership debrief

We talk the findings through rather than just handing them over. A follow-up review can confirm improvements have taken hold.

Scotland: assessed against the Health and Social Care Standards and the relevant Quality Framework. England: mapped to the CQC Single Assessment Framework, quality statements and five key questions. Carries no regulatory weight — which is precisely what makes it safe to be honest.

Registration Support (Care Inspectorate & CQC)

Launch your care service with confidence – and get it right first time.

Rather than waiting for the regulator to identify weaknesses – often weeks or months into the process – we assess your proposed service against the very standards you will be measured against, before submission. Think of it as an expert dress rehearsal, so that when the regulator reviews your application there are no surprises.

1

Discovery and planning

Understanding your proposed service, registration requirements, location and operating model.

2

Compliance review

Documentation, governance, policies, procedures and supporting evidence against regulatory expectations.

3

Gap analysis

The areas requiring improvement, with clear, prioritised and practical recommendations.

4

Application support

Registration documentation, evidence preparation and the specific requirements of CI or CQC.

5

Registered Manager preparation

Interview preparation, leadership discussion, governance expectations and confident regulatory engagement.

6

Final readiness review

A last review before submission, so your application is as strong and complete as it can be.

We assess before you apply: governance and leadership · policies and procedures · staffing and workforce planning · safeguarding · quality assurance systems · risk management · care planning and service delivery · operational readiness

Dementia Training

Built on current doctoral research and two decades of running services — not a course bought off a shelf.

WHICH PERSON?

Most dementia training tells your staff that care should be person-centred. Ours begins with a harder question: which person?

Two people with the same diagnosis, on the same corridor, can have entirely different experiences of dementia. Gender, ethnicity, faith, sexuality, class, disability and life history all shape how dementia is recognised, disclosed and diagnosed — and what support a person is offered or refused along the way.

DELIVERY

- Promoting Excellence at Informed, Skilled and Enhanced levels
- Rights-based and person-centred throughout
- Delivered on site, adaptable to your rota and skill mix
- Also: adult protection, induction and leadership programmes

1 Research-led, not recycled

Written by a doctoral researcher at the University of Stirling working on intersectionality and person-centred dementia care. When the evidence or the regulatory position moves, the training moves with it.

2 Written by people who have run services

Every module must answer one test before it enters the programme: what changes on Monday's shift? If a session can't be reduced to something a care worker will do differently, it doesn't earn its place.

3 Inclusion runs through it, not beside it

The intersectional lens is threaded through communication, distress and responsive behaviour, life story work and end-of-life care — rather than parked in a separate module staff sit through once.

4 Mapped to your regulator's framework

Every session is mapped to the national workforce framework for your jurisdiction, so completed training can be evidenced directly against what an inspector expects to see.

Wider Capabilities

The supporting services providers most often add to an engagement — usually because a compliance problem turns out to have a practical cause.



Policy & procedure suites

Full policy libraries for Scotland and England, service-type specific, written to the relevant legislation and standards rather than adapted from a generic pack.



HR, leadership & recruitment

Policy review, evidence-based recruitment, leadership development programmes and one-to-one coaching for managers under pressure.



Pre-registration site assessment

Evaluation of proposed premises against NIPCM infection prevention and control standards before any application is submitted.



Property management & refurbishment

Refurbishments, interior upgrades, statutory certification (gas, electrical, fire, legionella) and reactive maintenance.



Digital integration

Smart sensor, wearable and connected care platform integration for proactive, real-time wellbeing monitoring.



Self-evaluation tools & audit suites

Branded audit tools, self-evaluation templates and trend analysis workbooks, so your own assurance cycle produces evidence an inspector will accept.



Turnaround & improvement support

A focused recovery programme for services under regulatory concern — from enforcement action back to confident compliance.



One-day snapshot assessment

Intensive on-site review of documentation, environment, staff and resident engagement where time is short.

Scotland and England

The two systems are not translations of one another. A policy suite written for one will not survive inspection under the other — so we build and maintain them separately.

SCOTLAND

Care Inspectorate

Framework

Health and Social Care Standards, and the relevant Quality Framework

Judgement

Key questions including “How good is our care and support?”, answered on a six-point grading scale

Workforce

SSSC registration, with managers holding or working toward the required qualification for the service type

Enforcement

Improvement Notices, conditions and formal requirements

Manager change

Must be notified to the Care Inspectorate

ENGLAND

Care Quality Commission

Framework

The Single Assessment Framework and its quality statements

Judgement

Five key questions — safe, effective, caring, responsive, well-led — and a rating from Inadequate to Outstanding

Workforce

Fit-and-proper-person requirements; registered manager applications made in the individual's own name

Enforcement

Warning Notices, conditions and Section 31 action

Governance

Regulation 17 sits at the heart of a well-led judgement

Where a provider operates on both sides of the border, we keep the two documentation sets genuinely separate rather than maintaining one and relabelling it.

How Engagements Work

Most engagements begin with an informal, no-obligation conversation about your service. From there we carry out an initial review and agree a prioritised action plan with you.

ONE-OFF

A focused review

A single, in-depth assessment with clear recommendations. Best where you need an honest answer to a specific question.

WEEKS TO MONTHS

Short-term stabilisation

Time-limited, intensive support to steady a service under pressure — often alongside an interim manager placement.

ONGOING

Retained oversight

Ongoing, regular support that keeps governance and quality on track year-round, so readiness is continuous.

THE TYPICAL PATH

1

Scoping call

No obligation, no jargon

2

Initial review

Documents, site, and conversations

3

Written report

Findings, risks and an honest position

4

Action plan

Prioritised, owned and time-bound

5

Delivery support

We help implement, not just recommend

6

Follow-up review

Confirming improvements have held

Common Challenges We Help Solve

Providers turn to us when a situation calls for expertise they don't have on the payroll — or for an independent view they can trust.



Leadership vacancies or management transitions



Compliance concerns or regulatory action plans



Weaknesses in governance and accountability



Inconsistent or under-developed quality assurance



Service performance and outcome issues



Staffing and workforce pressures



Inspection preparation requirements



Rapid organisational growth



Service improvement programmes



Recovering from a poor grade or rating



Applications that have stalled or been rejected



Post-acquisition mobilisation and TUPE transition

Recovering from a disappointing outcome, an improvement notice or enforcement action is some of our most valuable work.

Meet the Team



Arlene Bunton

Founder & Director

MSc PG Dip BA (Hons)

Senior leader and researcher with 20+ years across Scotland and England. Doctoral researcher at the University of Stirling.



Paul Bunton

Co-Director

Co-founder supporting strategic direction and operational management across the business.



Agnieszka Slominska

Consultancy Specialist

Extensive experience in social care leadership, quality assurance and regulatory compliance.

Supported by a wider associate network of improvement leads, interim managers and specialist consultants placed with clients across Scotland and England.

From an Empty Shell to an Operating Business



Arlene stepped in and transformed that shell into a fully functioning, compliant and operational business ready for take-off.

My sister and I went into care because we felt it was a calling. What we had, however, was little more than a registered business and an empty shell.

From fundamental policies, insurance and regulations, to recruitment, operational structure and ultimately securing contracts across the private and public sectors, Arlene guided us through every stage with precision and unwavering standards.

She raised our expectations, sharpened our focus, and pushed us to raise our game.

Samina Iqbal, Director — 247 Alba Care



Registration secured

Policies, insurance and regulatory framework put in place from a standing start.



Operating structure built

Recruitment, staffing model and operational systems designed and embedded.



Contracts won

Business secured across both private and public sector commissioning.



Standards that held

Expectations raised and sustained beyond the end of the engagement.

GET IN TOUCH

Let's Work Together

Whether you're launching a new service, preparing for inspection, recovering from a difficult outcome, or looking for ongoing expert support — we'd love to hear from you.



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Mac Research
and Consultancy Limited

Book a Free Consultation

Not sure where to start? Book a no-obligation call and we'll help you understand exactly what your service needs — and how we can help you get there.

BOOK YOUR CONSULTATION →

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