Provider Monitoring Report

Chartered Management Institute (CMI)

24 November 2022 to 13 December 2022

Contents

1   Background

Two providers were remotely monitored between 24 November 2022 and 13 December 2022.

1.1   Scope

SQA Accreditation carries out quality assurance activity in line with its *Quality Assurance of Approved Awarding Bodies Policy.* This involves monitoring a sample of the awarding body's approved providers or assessment sites. Provider monitoring visits will be conducted in a consistent manner within and between providers.

The aim of monitoring is to:

♦ ensure the awarding body's compliance with SQA Accreditation's regulatory requirements
♦ confirm that quality assurance arrangements are being conducted by the awarding body in accordance with its prescribed arrangements
♦ ensure that quality assurance arrangements are being conducted in a consistent manner, within and between providers
♦ ensure that providers are receiving the appropriate guidance, support and documentation from the awarding body in order to facilitate a high standard of qualification delivery
♦ inform future audit and monitoring activity for the awarding body

All Principles may be included within the scope of the provider monitoring activity.

Awarding body documentation considered for review includes all documents banked on the awarding body's SharePoint Place at the time of provider monitoring and information supplied by providers to support provider monitoring activity. Restricted or commercially sensitive information gathered during SQA Accreditation's quality assurance activities is treated in the strictest confidence.

SQA Accreditation provider monitoring reports are written by exception focusing only on those areas where corrective action is required or recommended.

1.2   Provider Monitoring Report Timescales

CMI provider monitoring dates: 24 November 2022 to 13
                                                  December 2022

Provider Monitoring Report approved by
Accreditation Co-ordination Group on: 10 May 2023

Provider Monitoring Report to be signed by CMI: 22 June 2023

Action Plan to be emailed
to regulation@sqa.org.uk by CMI   22 June 2023

The process will apply in relation to the timescales specified above:

♦   The awarding body will be sent a copy of the Provider Monitoring Report by email.

♦   The awarding body must sign the copy of the Provider Monitoring Report and return by
    email to SQA Accreditation in accordance with the timescale specified above.

♦   The awarding body will also be emailed a copy of the Action Plan.

♦   The awarding body must complete and return the Action Plan in accordance with the
    timescale specified above and email this in Microsoft Word format to
    regulation@sqa.org.uk.

♦   SQA Accreditation will confirm when the Action Plan is appropriate to address the Issues
    and present it to Accreditation Co-ordination Group (ACG) for approval.

♦   Following approval by ACG, the awarding body will be sent a signed copy of the
    approved Action Plan by email.

♦   The awarding body must sign the Action Plan and return by email to SQA Accreditation.

The findings of this Provider Monitoring Report and the associated Action Plan will be
published on SQA Accreditation's website following signed agreement.

SQA Accreditation will continually monitor progress towards completion of the proposed
actions identified in the Action Plan and update the awarding body's Quality Enhancement
Rating as appropriate.

1.3 Summary of Provider Monitoring Issues and Recommendations

An Issue has been recorded where evidence shows that the awarding body is not compliant with SQA Accreditation's regulatory requirements. The awarding body must address the Issues and specify corrective and preventative measures to address them through its Action Plan.

The Action Plan is emailed to CMI as a separate document to the Provider Monitoring Report and must be submitted to SQA Accreditation in accordance with the timescale specified in 1.2.

As a result of the provider monitoring activity, two Issues have been recorded and one Recommendation has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 8	The Providers did not provide the Accreditation Auditor with all of the documents that were requested.	Low
2. Principle 15	One of the Providers was unable to access the report function on the Awarding Body's 'Hub'.	Low

A Recommendation has been noted where SQA Accreditation considers there is potential for enhancement. The awarding body is advised to address any Recommendations in order to reinforce ongoing continuous improvement. However, measures to correct or prevent these are not mandatory and therefore do not form part of the Action Plan.

Recommendation	Detail of Recommendation noted
1. Principle 9	One of the Providers believes that the Awarding Body should hold candidate data rather than making Providers responsible for this.

1.4   Risk Rating of Issues

SQA Accreditation assigns a rating to each Issue recorded depending on the impact on or risk to the awarding body's operations, its SQA accredited qualifications and/or the learner.

Issues recorded during provider monitoring will count towards AFS's Quality Enhancement Rating which will, in turn, contribute towards future quality assurance activity. Further detail on how the Quality Enhancement Rating is calculated can be found on the SQA Accreditation website.

2 Good Practice, Issues and Recommendations

The following sections detail:

♦ good practice noted by providers
♦ Issues recorded and Recommendations noted against SQA Accreditation's regulatory requirements

2.1 Good Practice

The following areas of good practice were noted by providers:

Provider 1 highlighted: That the provider Hub has been improved.

Provider 2 highlighted: CMI qualifications are flexible and provide the opportunity for candidates to progress through different levels. Allowing the candidates to make their own choices is also beneficial.

2.2 Issues

Regulatory Principle 8. The awarding body must ensure that SQA Accreditation is granted access to all information relating to accredited qualifications.

Provider 1 was unable to provide some certificates relating to the competence of staff members when requested by the Accreditation Auditor. Certificates were available for newer staff members but not long-standing ones.

When requested, Provider 2 stated that they would be able to send various documents on to the Accreditation Auditor after the remote monitoring activity. These documents, including evidence of continuous professional development and internal verifier sampling, were never received by the Accreditation Auditor.

The *Centre Partnership Agreement* — ref AB/ARG/0001/March16/V13 states 'The Approved Centre hereby agrees that it will: take all reasonable steps to comply with requests from the Awarding Organisation for information data or documents required by the Awarding Organisation or by the Regulatory Authorities, as soon as practicable.'

This has been recorded as **Issue 1**.

Regulatory Principle 15. The awarding body must have effective, reliable and secure systems for the registration and certification of learners.

Provider 2 stated that it had had problems accessing a report function on the Awarding Body's systems ('The Hub') that allows the Provider to see candidates and their status regarding the timeframes for completion of qualifications. This has been unavailable to the Provider for around three months. This makes it difficult for the Provider to track a candidate's progress through the qualification.

The *CMI Approved and Registered Centre Handbook March 2021* Version V18 states that 'The HUB is there for our Education Partners to offer the practical resources you'll need to deliver your training' and 'In the HUB you will find: [the ability to] view reporting of learners'.

The Awarding Body must ensure that its Providers have access to the practical resources they need to deliver accredited qualifications effectively.

This has been recorded as **Issue 2**.

2.3   Recommendations

Regulatory Principle 9. The awarding body and its providers must maintain accurate documents, records and data.

Provider one was concerned that the Awarding body no longer holds candidate data and send certificates to the provider which then has to send them out to candidates. Provider one also believes that this makes organising replacement certificates difficult and that it should be the awarding body's responsibility to hold and manage candidate data.

The Awarding Body may wish to consider holding and managing candidate data in order that certificates can be sent directly from the awarding body to candidates.

This has been noted as **Recommendation 1.**

3   Acceptance of Provider Monitoring Findings