



Audit Report

Chartered Institute of Housing

23 November 2017

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1 Background

This was the third audit of the Chartered Institute of Housing (CIH) since it was approved as an awarding body by SQA Accreditation in November 2011. CIH is an independent voice for housing and the home of professional standards. It is a registered charity and not-for-profit organisation. CIH headquarters are in Coventry.

1.1 Scope

SQA Accreditation carries out quality assurance activity in line with its *Quality Assurance of Approved Awarding Bodies Policy*. This states the type and frequency of our quality assurance activities, describes our reporting procedures and indicates how the awarding body's Quality Enhancement Rating is calculated.

As this was a full audit of CIH, all regulatory requirements were included within the scope of the audit. Our quality assurance activities are conducted on a sampling basis and, consequently, not all aspects of the awarding body's systems, procedures and performance have been considered in this report to the same depth.

SQA Accreditation audit reports are written by exception focusing only on those areas where corrective action is required or recommended. Consequently, this approach to audit reporting does not detail areas where compliance or good practice was found.

The audit was designed to ensure CIH complies with SQA Accreditation's regulatory requirements namely:

- ◆ *SQA Accreditation's Regulatory Principles* (2014)
- ◆ all *Regulatory Principles Directives*
- ◆ the awarding body's Accreditation Licence

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

1.2 Audit Report and Action Plan Timescales

CIH: audit date: 23 November 2017

Audit Report approved by
Accreditation Co-ordination Group on: 13 December 2017

Audit Report to be signed by CIH: 5 February 2018

Action Plan to be e-mailed
to regulation@sqa.org.uk by CIH: 5 February 2018

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

- ◆ The awarding body will be sent two signed copies of the Audit Report by post.
- ◆ The awarding body must sign both copies of the Audit Report and return one by post to SQA Accreditation in accordance with the timescale specified above.
- ◆ The awarding body will also be e-mailed a copy of the Audit Report (for information only) and an electronic copy of the Action Plan.
- ◆ The awarding body must complete and return the Action Plan in accordance with the timescale specified above and e-mail 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 two signed copies of the approved Action Plan by post.
- ◆ The awarding body must sign both copies of the Action Plan and return one by post to SQA Accreditation.

The findings of this Audit 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 Audit 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 e-mailed to CIH as a separate document to the Audit Report, and must be submitted to SQA Accreditation in accordance with the timescale specified in 1.2.

As a result of the audit and post-audit activities, three Issues have been recorded and three Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 11	The Accreditation Auditors consider the awarding body process for providers administering reasonable adjustments to be an inconsistent approach and therefore, providers can apply vastly differing reasonable adjustments.	Low
2. Principle 14	In the awarding body maladministration and malpractice policy, there is no mention of maladministration, except for the definition, instead detailing misconduct. This change of terminology has the potential to cause confusion.	Low
3. Principle 15 and RPDIR 3	The sample learner certificate that was provided did not state the credit rating body nor the SCQF credit points, which is required by the Regulatory Principles Directive.	Low

A Recommendation has been noted where SQA Accreditation considers there is potential for improvement. The awarding body is advised to address any Recommendations noted as good practice. 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 1	It is recommended that the awarding body produce a clear organogram detailing governance and reporting structures for future audit activity.
2. Principle 3	It is recommended that in future operational plans, the awarding body reflects its growth ambitions.
3. Principle 12	It is recommended that the complaints policy be updated to reflect the escalation routes for consistency, and to remove the erroneous statement regarding the final decision.

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 the audit will count towards CIH'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 Detail of Audit Issues and Recommendations

The following sections detail Issues recorded and Recommendations noted against SQA Accreditation's regulatory requirements.

2.1 Issues

Regulatory Principle 11. The awarding body shall ensure that its qualifications and their assessment are inclusive and accessible to learners.

The Accreditation Auditors reviewed the awarding body's policy on *Special considerations and reasonable adjustments, V1116*. The policy allows for providers to independently determine and apply reasonable adjustments as they consider appropriate, without the need to contact either the awarding body or the awarding body's assigned external quality assurer. The Accreditation Auditors consider this to be an inconsistent approach, and it means that providers can apply, and may have been applying, vastly differing reasonable adjustments. This could have the potential to disadvantage learners, on the basis that one learner in centre 'A' could be given, for example extra time during an assessment, which would be an unfair advantage over a learner at centre 'B' who has not been given the same extra time.

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

Regulatory Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

The awarding body *Malpractice and maladministration policy, V1216P-MM* defines both malpractice and maladministration. Malpractice is effectively covered in the policy. However, where the Accreditation Auditors would expect maladministration to be detailed, there is no mention of this — it details misconduct instead. This does not reflect the correct wording and has the potential to cause confusion.

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

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

And

Regulatory Principle Directive RPDIR - 3 Logos and certificate requirements for SQA accredited qualifications

The Accreditation Auditors reviewed the awarding body's certification process, including a sample learner certificate for SQA accredited qualifications. The certificate provided did not state the credit rating body nor the SCQF credit points, which is required by the Regulatory Directives.

This has been recorded as **Issue 3**.

2.2 Recommendations

Regulatory Principle 1. The awarding body shall have clearly defined and effective governance arrangements.

The Accreditation Auditors discussed the reporting and governance structure of the awarding body and although the awarding body representatives described these clearly and in detail during audit discussions, the Accreditation Auditors consider it a recommendation that the awarding body produce a clear organogram detailing these governance and reporting structures for future audit activity.

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

Regulatory Principle 3. The awarding body shall have clearly defined business planning processes which show evidence of management commitment, decision making and ongoing review.

The awarding body's operational plan was reviewed. There was a clear commitment to maintaining regulatory compliance UK-wide, but no specific reference to Scotland or growth in the Scottish market. Discussions with awarding body representatives confirmed that growth will be part of their business planning moving into the next year. Therefore, it is recommended that in future operational plans, the awarding body reflect its growth ambitions.

This has been noted as **Recommendation 2**.

Regulatory Principle 12. The awarding body and its providers shall have open and transparent systems to manage complaints.

The Accreditation Auditors reviewed the awarding body policy on *Complaints, V105 P-C*. It was identified that the complaints policy did not fully reference the escalation routes for learners, stating that the Head of Professional Standards's decision is final. The Accreditation Auditors did recognise that the escalation routes are fully explained in the *Centre Handbook V0717 H-C*. Therefore, it is recommended that the complaints policy be updated to reflect the escalation routes for consistency and to remove the erroneous statement regarding the final decision.

This has been noted as **Recommendation 3**.

3 Acceptance of Audit Findings

For and on behalf of Chartered Institute of Housing:

For and on behalf of SQA Accreditation:

Print name

Print name

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Signature

Signature

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Designation

Designation

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Date

Date

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