Audit Report

Chartered Management Institute (CMI)

20 January 2022

Contents

1 Background

This was the fifteenth audit of the CMI since it was approved as an awarding body by SQA Accreditation on 28 September 2006.

CMI is a chartered professional body specialising in management and leadership. It was incorporated by Royal Charter in 2002 and has charitable status in the UK. Its charitable mission is to promote the art and science of management.

CMI's headquarters are in London with its main base of operations in Corby, NN17 1TT. Due to the on-going COVID-19 pandemic, the audit was conducted remotely.

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 remote audit of CMI, 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 CMI complies with SQA Accreditation's regulatory requirements namely:

♦ SQA *Accreditation's Regulatory Principles* (2021)
♦ 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 CMI'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

CMI: audit date: 20 January 2022

Audit Report approved by
Accreditation Co-ordination Group on: 2 March 2022

Audit Report to be signed by CMI: 13 April 2022

Action Plan to be emailed
to regulation@sqa.org.uk by CMI;   n/a

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

♦ The awarding body will be sent a signed copy of the Audit Report by email.

♦ The awarding body must sign the copy of the Audit 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 copy of the Action Plan and return by email 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 emailed to CMI 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, no Issues have been recorded and two Recommendations have been noted.

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	The Accreditation Auditors reviewed the documents uploaded onto the SQA Accreditation SharePoint site. It was apparent that many of the policies were not archived where these policies had been reviewed, updated and replaced the existing policies. It is recommended that all obsolete policies are archived with only current policies on SQA Accreditation SharePoint site.
2. Principle 5 & 9	It is recommended the awarding body review all policies and documents within their review cycle and update the references from SCQF qualifications to SQA accredited qualifications where appropriate.

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 CMI'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

There were no Issues recorded.

2.2 Recommendations

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

SQA Accreditation Auditors noted that there were several policies which had been reviewed and updated in line with the CMI Awarding Body Document Control Policy (May 17, v3), however previous versions remained on SQA Accreditation SharePoint site. It is recommended that all obsolete policies are archived with only current policies on SQA Accreditation SharePoint site. It is also recommended that along with continuing to update CMI website with revised policies, these revised policies are also uploaded on SQA Accreditation SharePoint site.

This is noted as **Recommendation One.**

Regulatory Principle 5. The awarding body and its providers must provide clear information on their procedures, products and services and ensure that they are accurate and appropriate to accredited qualifications.

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

SQA Accreditation Auditors evidenced that Awarding Body documentation and policies frequently refer to "SCQF qualifications". The correct terminology is "SQA accredited qualifications". SCQF is the Scottish Credit and Qualification Framework which sits independently and is not affiliated to SQA Accreditation. It is therefore recommended that the Awarding Body review all policies and documentation, within their review cycle, and update the references where appropriate.

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

3 Acceptance of Audit Findings