Audit Report

Chartered Management Institute (CMI)

30 January 2019

Contents

1 Background

This was the 14th audit of the Chartered Management Institute (CMI) since it was approved as an awarding body by SQA Accreditation.

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.

CMI's headquarters are in London, and its main base of operations is in Corby.

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 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* (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 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: 30 January 2019

Audit Report approved by
Accreditation Co-ordination Group on: 13 March 2019

Audit Report to be signed by CMI: 26 April 2019

Action Plan to be e-mailed
to regulation@sqa.org.uk by CMI: 26 April 2019

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 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, five Issues have been recorded and three Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 3, 5	The awarding body could not provide sufficient evidence of giving consideration to SQA accredited qualifications in their business planning process or set objectives, either at a high level or departmental level. Additionally, it could not demonstrate how it actively promotes SQA accredited qualifications and SQA Accreditation generally.	Medium
2. Principle 4, 15, RPDIR 1	There was no fail-safe in the awarding body system, nor any procedure in place to prevent any of the SVQ qualifications from being certificated within 10 weeks, which forms part of the quality assurance mandate for SVQ qualifications.	Low
3. Principle 6	Prior to the audit, the Accreditation Auditors reviewed the documents deposited on SharePoint. Many of the documents were out of date.	Low
4. Principle 12, 13	The contact information within both the complaints and appeals policies erroneously refers to SQA as contact in the event of a complaint and/or appeal. This should say 'SQA Accreditation'. Furthermore, the complaints policy does not explain how and when candidates can complain to SQA Accreditation.	Low
5. Principle 14	Two awarding body policies: 'CMI Incident/Event Management Procedure – Ref: AB/PRO/0017/March17/V8' and 'CMI Malpractice and Maladministration Procedure – Ref: AB/PRO/0002/ Jul18/V09' are inconsistent as to when the awarding body should inform SQA Accreditation about malpractice and maladministration.	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 4, 6	It is recommended that the awarding body add in a mechanism to its incident and sanctions log, in order to be able to filter records to identify incidents or sanctions pertaining to those delivering SQA accredited qualifications.
2. Principle 4, 11	It is recommended that, if the awarding body does not wish to collect equality information, it should review the registration process and procedures and reassure itself that by not collecting this data it is complying with relevant equality legislation.
3. Principle 5	It is recommended that the information presented on the awarding body website be clearer and easier to navigate for those wishing to find information on SQA accredited qualifications.

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

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

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

The Accreditation Auditors could not find evidence, in any of the documentation made available to the auditors either before the audit on SharePoint, or at the audit, of a documented process for business planning. However, an awarding body representative explained, in detail, to the auditors, the process involved and the committees and personnel that signs off on the planning stages and business strategy, which the auditors accepted.

However, in every element of the planning stages and the objectives defined going forward, there appears to be no consideration given to SQA accredited qualifications at a high level or separately at a departmental level. Awarding body representatives did acknowledge that although no specific statement was made in their documentation, primarily due to wishing to keep their documentation generalised to fit with all regulators, their cycle of review for SQA accredited qualifications showed this commitment.

The Accreditation Auditors accept this rationale, but still do not consider this strong enough evidence to consider it compliant with SQA Accreditation's Regulatory Requirements. Furthermore, there was no clear evidence as to how the awarding body promotes SQA accredited qualifications or encourages understanding of SQA Accreditation.

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

Regulatory Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.

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

Regulatory Principle Directive (RPDIR) – 1: 10 Week Rule

The Accreditation auditors reviewed the procedures for certification and consulted with representatives for the areas responsible for inputting qualifications into their system and those that processed the request for certification. There was no fail-safe in the system, nor any procedure in place to prevent any of the SVQ qualifications from being certificated within 10 weeks, which forms part of the quality assurance mandate for SVQ qualifications. The Accreditation Auditors do recognise that there has not been any request for certification for SVQs that contravenes the rule, and that therefore the risk currently appears to be low.

However, it would be in the awarding body's best interest to adapt its processes or system to take account of this rule.

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

Regulatory Principle 6. The awarding body and its providers shall maintain accurate documents, records and data.

Prior to the audit, the Accreditation Auditors reviewed the documents deposited on SharePoint. Many of the documents were out of date. This was acknowledged by the awarding body representative, noting that all current documentation was available from the awarding body's website. However, certain key documents that we require access to, prior to an audit, were not available publicly on the website. For this reason, it is necessary to upload crucial awarding body documentation to SharePoint for review.

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

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

Regulatory Principle 13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.

The contact information within both the complaints and appeals policies erroneously refers to SQA as a contact in the event of a complaint and/or appeal. This should refer to SQA Accreditation. Furthermore, the complaints policy does not explain how and when candidates can complain to SQA Accreditation.

This has been recorded as **Issue 4**.

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

Two awarding body policies: 'CMI Incident/Event Management Procedure – Ref: AB/PRO/0017/March17/V8' and 'CMI Malpractice and Maladministration Procedure – Ref: AB/PRO/0002/ Jul18/V09' contain procedural inconsistencies as to when the awarding body should inform SQA Accreditation regarding malpractice and maladministration. The latter policy states that the regulators will be informed where malpractice/maladministration is suspected, whilst the former states that regulators will be notified once a determination has been established.

It is important that the awarding body recognises that all suspected cases of malpractice and maladministration should be reported to SQA Accreditation, where it concerns SQA accredited qualifications, prior to a final determination. Additionally, the contact details noted in the Incident/Event Management Procedure is incorrect, and should be noted as SQA Accreditation with the correct email contact listed.

This has been recorded as **Issue 5**.

2.2 Recommendations

Regulatory Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.

Regulatory Principle 6. The awarding body and its providers shall maintain accurate documents, records and data.

Incident management processes were reviewed by the audit team. When reviewing the log that records incidents and sanctions, the Accreditation Auditors were unable to identify whether any providers delivering SQA accredited qualifications had been involved in any incidents and/or any sanctions had been imposed, because the log could not be filtered to take SQA accredited qualifications into account. It is recommended that the awarding body add in a mechanism to filter records appropriately.

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

Regulatory Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.

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 procedures for the registration of learners. The registration form submitted to the awarding body by providers included fields to capture equality information. However, the awarding body has stated that it does not make this mandatory for providers to complete. Therefore, in the majority of cases equality information is not collected, as the awarding body does appear to use it in any way.

It is recommended that, if the awarding body does not wish to collect this information, it should review the registration process and procedures and reassure itself that by not collecting this data it is complying with relevant equality legislation.

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

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

The awarding body's website was reviewed by the audit team, prior to the audit. It was difficult for the auditors to locate information relating to SQA accredited qualifications and SQA Accreditation. Therefore, it would appear that learners may also have difficulty in finding pertinent information if undertaking SQA accredited qualifications. It is recommended that the information presented on the website be clearer and easier to navigate for those wishing to find information regarding SQA accredited qualifications

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

3 Acceptance of Audit Findings

For and on behalf of CMI: For and on behalf of SQA Accreditation:

Print name   **Print name**

....

Signature   **Signature**

....

Designation   **Designation**

....

Date   **Date**

....