



Provider Monitoring Report

Chartered Management Institute (CMI)

10 July 2018

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1 Background

One provider was monitored on 10 July 2018.

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. Consequently, this approach to provider monitoring reporting will not detail areas where compliance or good practice was identified by SQA Accreditation.

1.2 Provider Monitoring Report Timescales

CMI provider monitoring date:	10 July 2018
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	01 August 2018
Provider Monitoring Report to be signed by CMI:	12 September 2018
Action Plan to be e-mailed to regulation@sqa.org.uk by CMI	12 September 2018

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

- ◆ The awarding body will be sent two signed copies of the Provider Monitoring Report by post.
- ◆ The awarding body must sign both copies of the Provider Monitoring 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 Provider Monitoring 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 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 e-mailed 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, three Issues have been recorded and one Recommendation has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 10	The Provider does not meet CMI's requirements for its staff in relation to CPD (Continuous Professional Development). The Provider could not provide the Accreditation Auditor with CPD records or a personal development plan for all of its staff.	Low
2. Principle 12	The provider's complaints procedure makes reference to another awarding body, and lacks a mechanism to record how complaints are closed.	Low
3. Principle 13	The provider could not provide the Accreditation Auditor with a copy of its appeals policy or provide evidence to show that candidates had been made aware of how, when, and to whom they can appeal.	Medium

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 5, 7, 10	The awarding body should consider how it can improve its communication with its providers to ensure that its requirements are clear.

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 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 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: The quality of support materials supplied by CMI is very good.

2.2 Issues

Regulatory Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications.

The provider does not meet CMI's requirements for its staff in relation to CPD (Continuous Professional Development). The provider could not provide the Accreditation Auditor with CPD records or a personal development plan for all of its staff. The CMI *Centre Partnership Agreement* states that the centre will 'provide staff with appropriate inductions and professional development (including a development plan) to ensure staff can maintain the relevant expertise and competence required by the Awarding Organisation'.

CMI must ensure that its providers' staff maintain the relevant expertise and competence, and can provide evidence of this.

This has been recorded as **Issue 1**

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

The provider's complaints procedure makes reference to another awarding body and lacks a mechanism to record how complaints are closed.

The Accreditation Auditor noted that the provider's complaints procedure contained in *Student Handbook for CMI Qualifications* makes reference to an awarding body that the provider is not approved by. While the policy goes on to reference CMI, the title of the handbook is specifically for CMI qualifications and should not make reference to any other awarding body.

The provider described an incident where a candidate had made a complaint to a tutor. The complaint was investigated and eventually resolved verbally over the phone and no written communication was sent to confirm the conclusion of the matter. As a result of this there was no record of the final communication to the candidate and the provider could not provide evidence to the Accreditation Auditor that the matter had been fully resolved.

CMI must ensure that its providers' complaints procedures are relevant and have an effective means of recording complaints and the outcomes.

This has been recorded as **Issue 2**

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

The provider could not provide the Accreditation Auditor with a copy of its appeals policy or procedure despite making reference to an appeals procedure in its complaints policy. The *CMI enquiry and Appeals Procedure* states 'All CMI Centres, as part of the approval process, will have in place their own appeals procedure'.

The provider's *Student Handbook for CMI Qualifications* also states that they will "adhere to the Awarding Organisation's appeals process and provide appropriate information and support to enable Learners to access the appeals process'. However, there is no copy of the awarding body appeals policy, or guidance on where to find it, in the handbook.

CMI must ensure its providers meet their requirements relating to appeals, and must also ensure that candidates are made fully aware of how, when, and to whom they can appeal.

This has been recorded as **Issue 3**

2.3 Recommendations

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.

Regulatory Principle 7. The awarding body shall have effective arrangements for communicating with its staff, stakeholders and SQA Accreditation.

Regulatory Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications.

Lack of communication from the awarding body has caused the provider some concern. The provider was prompted to accept/sign a new centre partnership agreement through the awarding body's 'centre hub', more than a year before the then current agreement was due to expire. The provider was unsure why this had been prompted so early, and was concerned that not accepting the new agreement would affect its ability to register and certificate candidates.

The Accreditation Auditor noted that when the provider uploads evidence to close out any action points from external quality assurance (EQA) visits, there is no follow-up communication to confirm whether or not the uploaded information is acceptable.

The provider also stated that they think it would be beneficial to receive feedback relating to the quality of work submitted. The provider feels 'out of the loop', and thinks that feedback would improve quality from a moderation point of view.

CMI should consider how it communicates with its providers in order to provide better support.

This has been noted as **Recommendation 1**

3 Acceptance of Provider Monitoring Findings

For and on behalf of CMI:

For and on behalf of SQA Accreditation:

Print name

Print name

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LAURA WALKERDINE

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Signature

Signature

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Designation

Designation

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SENIOR REGULATION MANAGER

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Date

Date

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1 AUGUST 2018

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