

# **Audit Report**

## **Institute of Leadership and Management (ILM)**

20 October 2011



## Note

Restricted or commercially sensitive information gathered during SQA Accreditation monitoring activities is treated in the strictest confidence. However:

- ◆ The findings of this report will be presented to SQA's Accreditation Committee and made available to colleagues from the Department for Education and Skills (DfES), the Council for the Curriculum, Examinations and Assessment (CCEA) and the Office of Qualifications and Examinations Regulation (Ofqual), with a view to the contents informing future accreditation and re-accreditation submissions by the awarding body.
- ◆ The report will be published on SQA Accreditation's website.

Please note that SQA Accreditation monitoring activity is conducted on a sampling basis. As a consequence, not all aspects of an awarding body's performance in quality assurance, contract compliance, implementation, awarding of certificates, and fee arrangements have been considered in this report to the same depth.

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## Executive summary

### Purpose and scope of audit

This was the fifth audit of the Institute of Leadership and Management (ILM) since it was approved as an awarding body by SQA Accreditation. The audit was designed to review, evaluate and document ILM's strategies, policies and procedures and ensure compliance with SQA's Accreditation's *Awarding Body Criteria (2007)*.

This was a full audit of ILM and all criteria were included within the scope of the audit. The audit was carried out as a desktop exercise by analysing banked documents which ILM had mapped to the Key Goals within SQA Accreditation's *Awarding Body Criteria (2007)*. A telephone interview was also carried out with awarding body staff on 20 October after reviewing the information.

### Background

The Institute of Leadership and Management was approved by SQA Accreditation as an awarding body during 2002. ILM is a nationally recognised awarding body dealing with qualifications spanning the Management and Leadership sector.

### Audit outcome

As a result of the audit and post audit activities, one non-compliance has been recorded and two observations noted.

The one non-compliance and two observations form the Institute of Leadership and Management action plan: October 2011.

### Awarding body feedback

Still awaiting feedback - deadline Friday 4 Nov. This information was received on 2 November 2011.

## Statement of Excellence 3: Administration and Support

*'The awarding body's administrative and support arrangements have been designed to reduce bureaucracy, are responsive to stakeholders' needs and are cost effective. The awarding body continually reviews its qualification provision to ensure it has, and deploys, sufficient resources for the administration and support of its qualification provision.'*

### Key Goal 6: The awarding body has an effective communications strategy that supports its awarding body activities

#### Findings

ILM had banked documents with SQA Accreditation prior to the desk audit using Quickr Place. The Lead Auditor noted that there was some missing information from Key Goals which would mean ILM was non-compliant. The desktop audit approach does not allow as much scope for awarding body staff to obtain and present information immediately therefore the Lead Auditor agreed a timescale by which ILM could supply the evidence.

The Lead Auditor also noted that ILM should carry out some housekeeping of the documents stored on Quickr to ensure that they are referenced to the appropriate Key Goals. Missing and irrelevant documents should also be addressed.

**Observation 1 refers.**

#### Conclusion

The evidence available confirms that Institute of Leadership and Management continues to meet the requirements of the criteria under Key Goal 6. One observation has been noted.

#### Observation 1

The awarding body has missing banked documents and some which are incorrectly referenced.

### Key Goal 9: The awarding body has open and transparent procedures for complaints and appeals

#### Findings

The complaints and appeals guidance that ILM has does not specify SQA Accreditation as a point of contact for stakeholder and centres. **Non-compliance 1 refers.**

**Conclusion**

The evidence available confirms that Institute of Leadership and Management does not meet the requirements of the criteria under Key Goal 9. One non-compliance has been recorded.

**Non-compliance 1**

The awarding body's published complaints and appeals procedure does not specify the circumstances under which a centre or candidate can complain or appeal to SQA Accreditation.

**Key Goal 14: The awarding body has a record retention policy that takes into account any regulatory or statutory requirements****Findings**

ILM's *Centre Manual* states that centres must retain records of assessment and internal quality assurance for a rolling period of four years. Whilst it is appreciated that most centres will keep information in some detail, others might not unless guided by the awarding body, therefore, it would be appropriate for ILM to stipulate the requirements under Criteria 14.3. **Observation 2 refers.**

**Conclusion**

The evidence available confirms that Institute of Leadership and Management continues to meet the requirements of the criteria under Key Goal 14. One observation was noted.

**Observation 2**

The awarding body's guidance to centres on record retention should specify the requirements detailed under Key Goal 14.3.

## Conclusion

This was the fifth audit of Institute of Leadership and Management and the audit team was provided with full access to the awarding body staff and documentation.

The evidence made available was sufficient and of a good standard to satisfy the Lead Auditor that ILM is compliant with the exception of one area. Given that ILM has not had a physical visit for some time, the Lead Auditor recommends that their next audit activity is carried out at the awarding body premises.

## Appendices



## Appendix 1: Current year non-compliances, observations and action plan

### Non-compliances

A non-compliance will be recorded where the Lead Accreditation Auditor finds evidence that the awarding body fails to meet any of *Awarding Body Criteria (2007)* or any of the conditions attached to qualification accredited by SQA Accreditation at the time of accreditation. When recording any non-compliance, the Lead Accreditation Auditor will agree the action to be taken by the awarding body and a timetable for resolving the issue.

Non-compliance recorded	Agreed action and date	Key Goal/criterion	Risk rating
1. The awarding body's published complaints and appeals procedure does not specify the circumstances under which a centre or candidate can complain or appeal to SQA Accreditation.	ILM must amend their policy and guidance (particularly the <i>ILM Centre Manual</i> ) to specify the circumstances under which a centre or candidate can complain or appeal to SQA Accreditation by 31 December 2011. Extended to 31 March 2012. <b>Closed out 23 May 2012</b>	Key Goal 9.1.4	3

## Observations

An observation will be noted to ensure that any recommendations agreed during the audit are recorded for future reference. As observations are recorded for awarding body consideration only, it is not necessary to agree a timescale to resolve the observation in the awarding body action plan.

**Once agreed, the action plan is signed by representatives from both SQA Accreditation and the awarding body and will inform the agenda for the next annual audit meeting.**

Observations noted	Action recommended	Key Goal/criterion
The awarding body has missing banked documents and some which are incorrectly referenced.	ILM should ensure it has accurate and up to date information in Quickr and that some documents are re-allocated to the correct Key Goal.	Key Goal 6.5
The awarding body's guidance to centres on record retention should specify the requirements detailed under Key Goal 14.3.	ILM could be more specific about the type of assessment records it advises centres to hold.	Key Goal 14.3

## Appendix 2: Risk-rating of non-compliances

SQA Accreditation assigns a risk rating to each non-compliance recorded as a result of an awarding body audit or through our centre monitoring activity. The table below illustrates how the rating for a non-compliance is assigned, and identifies the possible impact of the non-compliance on qualifications and/or the learner.

The assignment of a risk rating allows an awarding body to target their resources to areas that have been identified as having a major impact. The risk rating also allows SQA Accreditation to target its resources to support awarding bodies in improving their performance.

Rating	Risk	Impact of non-compliance
1	Very Low	The non-compliance is likely to cause minimal concern and would not threaten the integrity of the qualification or impact adversely on the learner. Any overall effect is likely to be small scale and/or localised, rather than widespread. The issue identified is unlikely to recur once resolved and no long lasting damage would be anticipated.
2	Low	The non-compliance is of low impact but of sufficient importance to merit intervention, with a low threat to the systems or procedures associated with the qualification and/or impact on the learner. Disruption may not just be localised but more widespread and would possibly cause residual damage; however, this could be easily corrected without further consequence.
3	Medium	The non-compliance could potentially damage the credibility of the qualification and/or be detrimental to the learner. There may be some impact to the systems or procedures that support the qualification or the operational effectiveness of the awarding body.
4	High	The non-compliance could have a high impact on the integrity and reliability of the qualification or the effective operation of awarding body as a whole if corrective action is not quickly taken. There is a high probability that the qualification and/or learner will be negatively affected.
5	Very High	The non-compliance will have a serious impact on the integrity and reliability of the qualification or the effective operation of the awarding body if corrective action is not immediately taken. There is a very high probability that the qualification and/or learner will be negatively affected.

In assigning a risk rating, each non-compliance is considered on its own merit, taking account of the context in which it was identified.

## Appendix 3: Table of awards

### Accredited qualifications currently offered

Award title	Level	Code	Accreditation date	Re-accreditation date
SVQ 2 in Team Leading at SCQF Level 5	2	GC4Y	25/05/2011	31.05.2016
SVQ 3 in Management at SCQF Level 7	3	GC50	25/05/2011	31.05.2016
SVQ 4 in Management at SCQF Level 9	4	GC51	25/05/2011	31.05.2016
SVQ 5 in Management at SCQF Level 11	5	GC4X	25/05/2011	31.05.2016

## Appendix 4: Outstanding approval and accreditation conditions

A condition will be recorded at the time of approval of the awarding body or at the time of accreditation for an SQA accredited qualification. A condition is recorded when SQA's Accreditation Co-ordination Group finds evidence that the awarding body does not fully meet SQA's *Awarding Body Criteria (2007)*.

Condition	Agreed action and date	Key Goal/criterion
25 May 2011: Team Leading and Management  Provide published versions of the assessment guides by 31 August 2011.	31 August 2011.	

## Appendix 5: List of documents reviewed pre-audit and post-audit

Document title	Date of issue	Version number	Comments
ILM SVQ Centres	October 2011		
Organisational Overview			
Product Management Board meeting actions	August 2011		
Product Management Board meeting actions	October 2011		
QRG Meeting notes action points	August 2011		
QRG Meeting notes action points	September 2011		
Working Groups			
Sample Certificates			
ILM Product Development Process Guidance Document	September 2011		
Marketing Plan 2011-2012			
Marketing Plan 2010-2011			
ILM Organisational Charts			
CPD Meeting records			
ILM Marketing Mindmap			
Marketing Objectives 2010-2011			
Internal Audit Reports			
QRG Terms of Reference			
ILM Process Maps			
Events Calendar			
ILM centre forms for approval			
ILM Centre Manual			Contains the majority of ILM guidance and policies
ILM Qualifications on the SCQF			

Document title	Date of issue	Version number	Comments
Factsheet template			
Assessment Strategy			
Product Management forms and literature			
Process for EV recruitment			
EV Visit lists for Scotland			
List of centres with EV and annual review dates			

## Appendix 6: Signatures of agreement to action plan

For and on behalf of Institute of Leadership and Management

For and on behalf of SQA Accreditation

Signature

Signature

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Designation

Designation

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Date

Date

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