

# **CMI Awarding Body**

Quality Assurance Handbook - V4

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# CMI Awarding Body

## CMI Quality Assurance Handbook

This is version 4 of the [Chartered Management Institute \(CMI\)](#) Quality Assurance Handbook. It is each Centre's responsibility to ensure that all Staff involved in the provision of CMI qualifications and/or assessments familiarise themselves with this version of the document. This document is subject to revision and is maintained electronically. Electronic copies are version-controlled. Printed copies are not subject to this control.

### History

Date	Chapter Title	Amendments Made	Page No.
January 2023 / V2	<a href="#">Additional Qualification Risk Controls - Conflicts of Interest/Personal Interest</a>	Additional wording added	14
January 2023 / V2	<a href="#">A New Member of the Centre's Team</a>	Additional wording added	22
January 2023 / V2	<a href="#">Occupational Competence Requirements</a>	Additional wording added	27 - 30
January 2023 / V2	<a href="#">Centre Feedback to Learners on Assessments - Approved or Recognised Centres using the CMI Marking Service</a>	Additional wording added	36
January 2023 / V2	<a href="#">Use of Artificial Intelligence (AI) Software in Assessment</a>	New section added	38
January 2023 / V2	<a href="#">Confidentiality and Commercially Sensitive Evidence</a>	New section added	41
January 2023 / V2	<a href="#">Format of Assessment Submissions</a>	New subsection added	41
8 January 2023 / V2	<a href="#">Quality Assuring the Assessment Process</a>	Additional wording added	46
8 January 2023 / V2	<a href="#">Internal Quality Assurance Strategy</a>	Additional wording added	46

8 January 2023 / V2	<a href="#">IQA Risk Factors</a>	Additional wording added	47
8 January 2023 / V2	<a href="#">Learners/Units selected for CMI sampling but have not been IQA sampled by the Centre</a>	Additional wording added	59
2 January 2023 / V2	<a href="#">Command Verbs Definitions List</a>	Added Table	65
2 January 2023 / V2	All applicable areas	Replacement - IV to IQA	Various
2 January 2024 / V3	<a href="#">The Role of the Programme Director</a>	Additional wording added	21
January 2024 / V3	<a href="#">Dormancy</a>	Additional wording added	21 -22
May 2026 / V4	Full review and updates	Incorporated into the new CMI template Incorporated CMI Partner Connect Amended SQA Accreditation Qualifications Scotland	Various

## Intended Audience

- CMI Quality Managers
- CMI Markers and Moderators
- CMI Partner Relationship Managers
- CMI Partner Engagement Managers
- CMI Awarding Body Support Team
- CMI Centres

All of CMI's policies are published on the [CMI Policies Webpage](#).

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## Purpose

Where assessments are marked by Centres, CMI needs to ensure that standards are being applied accurately, consistently and fairly in accordance with the qualification requirements. At CMI, we undertake quality assurance monitoring activities, including external quality assurance and moderation, to ensure that assessment judgements are valid and reliable and that Learners are not advantaged or disadvantaged.

This document sets out the minimum common quality assurance requirements for our regulated qualifications and also where Centre-assessed judgements are made. This quality assurance handbook applies to both CMI Fully Approved Centres and CMI Registered Centres. Specific guidance will also be included in the relevant qualification syllabus and/ or assessment documentation.

## Scope

This document sets out CMI's expectations for the Centre's internal quality assurance processes, including the roles and responsibilities of the Centre's staff, to ensure that assessment standards are met and upheld. It also contains details on how CMI ensures quality through external quality assurance methods and moderation.

This document should be used in conjunction with the other documents and policies provided by CMI, as well as any other relevant qualification and assessment documentation.

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# Section 1 - Introduction

## 1.1 Introduction to the CMI Quality Assurance Handbook

This document provides guidance for CMI Centres delivering CMI qualifications and/or carrying out assessments. It covers the requirements and provides guidance and best practices in delivery, assessment and quality assurance for Centres.

## 1.2 CMI Strategic Objectives

CMI's [strategic objectives](#)<sup>1</sup> are to:

- Grow partnerships to increase the number of Chartered & Qualified Managers & Leaders
- Create the right integration of products, propositions and channels for our customers
- Build the CMI brand as 'Thought-Leaders' in management practice
- Be the professional home for management & leadership
- Develop a global mindset and presence

## 1.3 Delivering on our Vision and Mission

**CMI Vision** - Better led and managed organisations

**CMI Mission** - Increase the number and standard of professionally qualified managers

With a wealth of practical qualifications, events, and networking opportunities on offer, we help people boost their career prospects and connect them with other ambitious professionals across all industries and sectors. We have more than 170,000<sup>2</sup> people training to be better managers right now.

Backed by a unique Royal Charter in the UK, we are the only organisation to award [Chartered Manager status](#) and [Chartered Management Consultant](#) – the ultimate management accolade. Our thought leadership, research and online resources provide practical insight for both today's leaders and the next generation. This insight also means we can confidently represent our 230,000-plus membership community when speaking to policymakers. This is all in aid of one simple goal: to increase the number and standard of professionally qualified managers worldwide.

## 1.4 CMI's Role as an Awarding Body

CMI is a specialist Awarding Body offering a wide range of regulated qualifications in Management and Leadership, Coaching and Mentoring, and Professional Consulting. In the United Kingdom, the regulation and accreditation of

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<sup>1</sup> Correct as of May 2026

<sup>2</sup> Correct as of May 2026

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qualifications operate through a system of national regulators, each responsible for oversight within their respective jurisdiction.

## Regulators and Jurisdiction

Regulatory Jurisdiction means the defined legal and geographical scope within which a recognised regulatory authority exercises oversight of qualifications, examinations, and assessments, including the setting and enforcement of regulatory requirements applicable to awarding organisations. For the purposes of the regulatory agreement, Regulatory Jurisdiction includes the respective remits of the Office of Qualifications and Examinations Regulation (England), Qualifications Wales (Wales), Council for the Curriculum Examinations and Assessment (Northern Ireland), and Qualifications Scotland Accreditation (Scotland), each operating within its own legislative and policy framework.

CMI is regulated by four regulatory bodies in the UK:

**[Ofqual \(England\)](#)** - The Office of Qualifications and Examinations Regulation (Ofqual) regulates qualifications, examinations and assessments in England. Ofqual sets and enforces the General Conditions of Recognition, which establish the regulatory requirements that awarding organisations must meet in the design, delivery, assessment and awarding of regulated qualifications. Ofqual's remit therefore covers qualifications delivered to Learners in England, including those delivered by recognised awarding organisations through approved Centres both within England and, where applicable, internationally, where the qualification remains regulated by Ofqual.

**[Qualifications Wales \(Wales\)](#)** - Qualifications Wales performs the regulatory function for qualifications delivered within Wales. Its role includes approving and regulating qualifications offered to Learners in Wales and ensuring that awarding bodies meet the relevant regulatory conditions applicable within the Welsh qualifications system. While many qualifications regulated by Ofqual may also be offered in Wales, Qualifications Wales determines the qualifications that are approved for use within the Welsh education and training system and ensures that these meet national policy objectives. Qualifications Wales remit therefore covers qualifications delivered to Learners in Wales, including those delivered by recognised awarding organisations through approved Centres within Wales.

**[CCEA Regulation \(Northern Ireland\)](#)** - The Council for the Curriculum, Examinations and Assessment (CCEA Regulation) regulates qualifications, examinations and assessments in Northern Ireland. CCEA Regulation is responsible for ensuring that awarding organisations offering regulated qualifications in Northern Ireland comply with the relevant regulatory framework and standards. Its role includes maintaining confidence in the qualifications system through oversight of awarding organisations and their approved Centres operating within Northern Ireland.

**[Qualifications Scotland Accreditation \(Scotland\)](#)** - In Scotland, the accreditation and regulatory functions are carried out by Qualifications Scotland Accreditation through its accreditation body. Qualifications Scotland Accreditation is responsible for accrediting qualifications within the Scottish Credit and Qualifications Framework (SCQF) and for regulating awarding bodies that offer accredited qualifications in Scotland. The Scottish system operates within a distinct qualifications framework and regulatory structure which reflects Scotland's devolved education system.

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Where regulated qualifications are delivered outside the UK through approved Centres, CMI remains responsible for ensuring that all delivery and assessment meet the requirements of the relevant UK regulators. These requirements apply to CMI and the qualification regardless of where the Learner is based.

In addition, CMI qualifications are on several international countries' National Qualification Frameworks (NQF); further information on these frameworks can be sought directly from CMI.

- [Knowledge and Human Development Authority \(KHDA\) - United Arab Emirates](#) (Recognised as an International Certification Organisation (ICO))
- [Malaysian Qualifications Agency \(MQA\)](#) (Equivalency granted to a CMI qualification)
- [Bahrain National Qualifications Framework](#) (Aligned to the National Qualification Framework)
- [Oman National Qualifications Framework](#) (Aligned to the National Qualification Framework)

## Regulation Overview

CMI is regulated as an organisation across all key areas, including governance, safeguards on change of control, conflicts of interest, availability of adequate resources and arrangements, identification and management of risks, management of incidents, malpractice and maladministration. As part of this, Centres are required to provide CMI and the regulatory authorities with access to premises, people and records as required, and must fully cooperate with all monitoring activities, including (but not limited to) providing access to any premises used (including Satellite Centres).

CMI's regulation also extends to the design and development of its qualifications portfolio. CMI develops and awards a wide range of qualifications, delivered and assessed by approximately 800+ Centres. The delivery and assessment models differ based on Centre status.

**Higher Education Institutions (HEIs)** - A [Dual Accreditation Centre](#) refers to an arrangement whereby a university programme is formally aligned with, and approved to deliver, a qualification awarded by CMI. Through this model, a single programme of study delivered by the HEI enables Learners to achieve both the institution's academic award (for example, a degree or postgraduate qualification) and a professionally recognised CMI qualification.

**Approved Centres** - An [Approved CMI Centre](#) is an organisation that has been formally authorised by CMI to deliver, assess, and support Learners undertaking CMI qualifications.

**Registered Centres** - A [Registered CMI Centre](#) is an organisation that has been formally authorised by CMI to deliver and support Learners undertaking CMI qualifications. Assessment and quality assurance are undertaken by CMI.

**Recognised Centres** - A [Recognised CMI Centre](#) is an organisation whose learning or development programme has been formally reviewed and recognised by CMI as aligning with the [CMI's Professional Standard framework](#).

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CMI's overall quality assurance model monitors and maintains standards across all these delivery and assessment activities.

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## Section 2 - CMI Quality Standards and Assurance

### 2.1 Quality Assurance Activities

#### Centre Approval Types

All of the CMI quality assurance policies and procedures can be found on the CMI website at [Policies - CMI](#).

There are different types of CMI Centre approval, which determine the qualifications a Centre is entitled to offer:

- **Approved and Registered Centre.** Fully approved and Registered Centres are the only types of Centres entitled to offer regulated CMI qualifications.
- **Recognised Centre.** This status indicates that a Centre's programmes are endorsed by CMI. The Centre is **not able** to offer regulated CMI qualifications. They would be required to undergo further quality assurance to gain **Approved** or **Registered** status.

#### Purpose of Quality Assurance

The primary goal of CMI's quality assurance is to safeguard the credibility of its qualifications and prevent any risk that could compromise its award.

To achieve this, CMI maintains a process of continual and systematic quality assurance for all Approved and Registered Centres. This process ensures compliance with quality and regulatory requirements through:

- **Systematic Measurement and Comparison:** Evaluating Centre Performance against established CMI standards.
- **Monitoring and Feedback:** Regularly monitoring Centre internal processes and utilising feedback to proactively manage and mitigate potential risks to the qualifications' integrity.

#### Quality Assurance Activities

CMI's quality assurance across Centres is maintained through the following activities:

- Centre approval application reviews
- Centre Quality Assurance Activities (announced and unannounced)
- CMI desktop audits
- Review of Centre documentation on CMI Partner Connect
- Centre Staff approval (covering Delivery, Assessment, Quality Assurance roles)
- Additional qualification/product approval
- CMI moderation
- CMI marking

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- Financial controls
  - Standardisation of Centre assessment and quality assurance teams

There are full-time Quality Managers/Auditors responsible for the quality assurance of CMI Centres.

## 2.2 Centre Approval

The CMI's formal quality assurance process for its qualifications is initiated when an organisation seeks to become an Approved or Registered CMI Centre.

## 2.3 Pre-approval Enquiry and Support

The first step in the process for any prospective CMI Centre is to discuss which CMI approval status would best fit the organisation. This usually involves a CMI Relationship Manager and, where required, a CMI Quality Manager. They will discuss with the prospective Centre the Centre requirements and CMI products. At any stage of the approval process, CMI has the right to halt the application. Prospective CMI Centres will be given a reason why the application can no longer be progressed. There is no right of appeal at any stage of the Centre application process.

As part of this pre-approval enquiry, financial credit checks and, for UK-based organisations, a Companies House check will be undertaken.

**International organisations** require a pre-contract due diligence before the Centre application can proceed. This involves a thorough review of their financial status, travel risk, reputation risk, media coverage and the ability to deliver CMI products. Where required, this may be presented to the CMI International Development Group (IDG) for approval before proceeding with the Centre application process.

## 2.4 Centre Approval Application Process

Prospective CMI Centres that progress to the Centre approval application stage will be required to complete the Centre approval process on the online [CMI Partner Connect](#) system. They will be required to provide evidence and demonstrate the following by completing a narrative answer to the questions and submitting the required documentation:

- Centre details
- Qualifications required to be added to the Centre's portfolio
- Governance & Management
- Centre Staff, staffing resources and monitoring
- Learner/Apprentice support
- Delivery Arrangements
- Assessment & Quality Assurance Arrangements
- Centre Policies and Procedures
- International organisations must also present an In-country Trading/Business Licence.

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As part of the CMI Centre approval and due diligence process, the Quality Manager may also undertake the following checks:

- Check the organisation's website
- Undertake a general search on the internet regarding the organisation
- Review any information from reports published by the [Office for Students](#) or [Ofsted](#)
- Review any information provided by the regulator or other awarding organisations under regulatory condition A8.7

At this stage of the Centre application process, the CMI Approvals Team will engage with the Centre and ensure the Approved and Registered Centre Regulatory Agreement is signed before processing the application to the next stage of review.

### **Centres Offering a Distance Learning Approach**

In addition to the standard requirements, Centres that deliver, assess, and internally quality assure CMI qualifications through a distance learning model must demonstrate the following as part of their application:

Centres must clearly evidence how they will :

- Describe how the online or remote models of delivery, assessment and quality assurance will operate
- Explain any rules and regulations that the Learner are required to consent to
- Outline any terms and conditions that their Learners are required to consent to
- Detail the fee structure and refund processes
- Identify who Learners can complain to if they wish to raise a complaint

Centres must also specify :

- Any minimum hardware or software requirements necessary for online learning and assessment submission
- Acceptable electronic file formats for submitting assessment evidence
- Any additional information that Learners or users of the relevant technologies should be aware of

For online assessment submission (Approved CMI Centres only), the following must be clearly outlined:

- The process for submitting an assessment
- The timeframes for assessment submission
- How and when Learners will receive their results

## 2.5 Approved and Registered Centre Regulatory Agreement

This agreement formally outlines the responsibilities of the Partner (the Approved/Registered Centre) and ensures adherence to the General/Standard Conditions of Recognition & Regulatory Principles as issued by Ofqual, Qualifications Wales, CCEA Regulation and Qualifications Scotland Accreditation. By signing the Agreement, the Approved/Registered Centre confirms its understanding of the terms and conditions and agrees to adhere to the requirements.

### Duration and Review

This enforceable Agreement:

- Commences on the date of the Declaration of Approval
- Continues for a period of **three years**, independent of any separate commercial agreement between the two parties.
- Is subject to termination conditions detailed within the Agreement.
- Any extension beyond the initial term is contingent upon a review of the Centre's quality assurance activities, Moderation and/or marking performance conducted by CMI
- Overall risk and compliance status.

## 2.6 Termination of Approved and Registered Centre Regulatory Agreement

The Approved and Registered Centre Regulatory Agreement may be terminated before its expiry date by either CMI or the Centre, provided written notice of at least six months' notice is given.

Notwithstanding the notice period, CMI reserves the right to suspend or terminate the Agreement with **immediate effect** in any of the following circumstances:

- A breach of the Agreement by the Approved or Registered Centre that is not remedied within 30 days of receiving written notice from CMI specifying the breach and demanding a remedy.
- The occurrence of serious malpractice, maladministration or fraudulent activity by or on behalf of the Approved Centre
- The approved Centre ceases to operate or trade, enters into liquidation or becomes unable to pay its debts as they fall due.

Upon termination or expiry of the Centre Agreement for any reason, CMI and the Centre are required to cooperate fully to minimise any adverse effects on Learners. The Centre **must** comply with CMI's instructions to ensure an orderly transfer of Learners to another Approved CMI Centre.

## 2.7 Quality Managers Centre Application Review

During this stage, the allocated Quality Manager thoroughly reviews the prospective Centre's application, including all submitted policies, processes, staff details and supporting documentation. The Quality Manager assesses the application against all of the application criteria.

The Quality Manager may request additional information, evidence or clarification against any of the areas of the Centre approval criteria, before progressing for final approval. The Quality Manager may set low-risk actions that the Centre must complete within 3 months of the Centre approval date.

As part of this approval process, Quality Managers may review any associated educational standard reports for the Centre, for example. [Office for Students](#) or [Ofsted](#) (if applicable) covering the last 3 years.

If the Quality Manager is satisfied that the potential Centre meets CMI's quality requirements, they will formally sign off to confirm compliance with CMI standards. A member of the Approvals Team will engage with the Centre to support the Centre's application for its qualification and Staff approvals. These requests will need to be reviewed and approved by the designated Quality Manager.

## 2.8 Final Centre Application Approval

The Head of Quality and/or the Head of Awarding Organisation is responsible for undertaking the final Centre application approval. Before making a final decision to approve or reject the application, they will review all comments and actions set by the Quality Manager or Senior Quality Manager. There are 3 primary categories of application outcomes:

### Approval Granted

- Full Approved Centre approval and qualification approval granted (unconditional)
- Registered Centre approval and qualification approval granted (unconditional)

### Conditional Approval / Withholding of Approval (subject to action plan)

- Full Approved Centre approval and qualification approval granted with an action plan
- Registered Centre approval and qualification approval granted with an action plan
- Full Approved Centre approval and qualification approval are withheld, subject to an action plan.
- Registered Centre approval and qualification approval withheld, subject to an action plan

### Application Rejected

- Centre approval and qualification approval are rejected.

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If final approval is granted, then the Centre will be allocated to the relevant Quality Manager to assign the Centre Approval Risk Status.

## 2.9 Assigning Centre Approval Risk Status

The designated Quality Manager will develop a quality assurance activity plan for each new CMI-approved and registered Centre. This plan will outline the quality assurance activities to be undertaken and will be determined by the Centre's current risk status. Newly approved Centres will be required to undergo a quality assurance activity within the first 6 - 8 months of approval.

A risk calculator is used as a guidance tool to help identify the level of risk a Centre may present in relation to compliance with its Regulatory Agreement with CMI. A separate risk assessment process is used when considering qualification approvals.

As part of both pre-approval and post-approval external quality assurance activities, Centres are subject to ongoing monitoring. The Quality Manager will conduct a risk assessment and assign a Centre Risk Status based on the outcomes of these assessments.

Responsibility for identifying and managing risks associated with the delivery of regulated qualifications is shared between Centres and CMI. Both parties have a common interest in ensuring the successful delivery of qualifications and protecting the interests of Learners.

CMI works collaboratively with its Centres to identify and manage each Centre's exposure to risk. This includes considering the likelihood of specific events occurring and the potential impact if they do occur. The aim is to manage this exposure through preventative actions that maintain risk at an acceptable level, proportionately and cost-effectively. Centre risks are primarily identified through CMI's ongoing quality assurance activities with Centres.

## 2.10 Overall Centre Risk Rating

While CMI assesses risk against numerous key operational areas, it is vital to establish an overall Centre Risk Rating to:

- Ensure Centres receive the appropriate level of support and assistance from CMI
- Help inform the frequency and focus of future quality assurance activities
- Assist Centre Staff in their internal risk management and resource allocation discussions
- Protect the interests of Learners.
- Protect the integrity of CMI qualifications and the reputation of the Centres and CMI.
- Satisfy the focus of the regulators in providing robust evidence to demonstrate CMIs' approach to supporting and quality assuring Centres is streamlined, supportive, appropriately targeted and proportional.

Each Centre is assigned a risk rating on a Low, Medium or High scale, which is determined through a combination of historical data, recent quality assurance outcomes, and intelligence from CMI monitoring activities. The overall risk

rating is based on the Risk Assessment table below. The resulting risk profile directly informs the frequency, scope and type of CMI quality assurance engagement.

The Quality Manager will ensure that each Centre's risks are updated on CMI Partner Connect to ensure that all risk information is centralised, traceable, and updated in real time. The Centre risk rating underpins CMI's commitment to maintaining high standards of quality, integrity, and Learner confidence. It enables a proactive and proportionate approach to quality assurance and ensures that CMI and its Centres work collaboratively to uphold regulatory compliance, drive continuous improvement and deliver positive outcomes for all Learners. The Centre will not be able to view their Risk Status on CMI Partner Connect, but will be able to view their Compliance Ratings.

### Application of Sanctions

Where an immediate risk to the integrity of CMI qualifications or the interests of Learners is identified, the Quality Manager may recommend that a sanction be applied to the Centre.

- Sanctions range from a **Level 1** to **Level 4** in increasing severity and will always be proportionate to the risk identified.
- A **Level 2 sanction** (registration stop) may also be applied due to financial risks, for example, non-payment of fees, or unresolved aged debt.
- The level of sanction applied will determine the potential impact on a Centre's registration or certification rights.

### Risk Assessment Basis

These risk indicators are based upon the following factors and generate a score, which is then used to decide the level of risk status:

Factor	Pre Centre Approval / Post Centre Approval	Purpose of Centre Approval Risk Status
Assessment Arrangements	Pre Centre Approval & Post Centre Approval	To assess the robustness and validity of assessment design, delivery, marking, and standardisation processes, including adherence to CMI assessment requirements and maintenance of accurate assessment records.
Centre Management and Systems Governance	Pre Centre Approval & Post Centre Approval	Evaluates the effectiveness of Centre leadership, management controls, record-keeping systems, and governance structures that ensure compliance with CMI and regulatory expectations.
Centre Staff and Staffing Resources	Pre Centre Approval & Post Centre Approval	Reviews the qualifications, occupational competence, capacity, and stability of staff involved in delivery, assessment, and

		internal quality assurance, as well as their access to professional development.
<b>Finance</b>	Pre Centre Approval & Post Centre Approval	Considers the financial stability and integrity of the Centre, including adherence to contractual and payment obligations to CMI, and any financial factors that may pose a risk to Learner continuity or service delivery.
<b>Governance Arrangements</b>	Pre Centre Approval & Post Centre Approval	Reviews how effectively the Centre demonstrates accountability, decision-making transparency, and strategic oversight of quality, ethics, and compliance.
<b>Internal Quality Assurance Arrangements</b>	Pre Centre Approval & Post Centre Approval	Evaluates the effectiveness of IQA systems, including sampling plans, IQA strategy, standardisation activity, internal audit findings, and the timely implementation of improvement actions.
<b>Learner Experience</b>	Post Centre Approval	Examines Learner registration and induction processes, accessibility of support, feedback mechanisms, complaint trends, and overall Learner satisfaction and achievement outcomes.
<b>Learner / Apprentice Numbers</b>	Post Centre Approval	Reviews the scale and growth of Learner numbers, monitoring the impact of volume on quality assurance capacity, sampling frequency, and staff workload.
<b>Product Offer</b>	Pre Centre Approval & Post Centre Approval	Considers the range and level of CMI qualifications and products delivered by the Centre, the complexity of provision, and any expansion into new programmes or markets.
<b>Reputational</b>	Pre Centre Approval & Post Centre Approval	Assesses any potential impact the Centre may have on CMI's brand and standing, including instances of maladministration, malpractice, adverse media coverage, or regulatory non-compliance.

## 2.11 Assigning Qualification Approval Risk Status

Centres can apply to add to the portfolio of qualifications they deliver at any time following Centre approval. As part of the qualification approval package, the Quality Manager will review the Centre's qualification application. This could be via an approval activity or a desk-based activity.

Centres are advised that they must not begin advertising, delivering or assessing qualifications until approval has been confirmed by CMI.

CMI's approach to the monitoring of a Centre qualification remit is driven by this overall risk rating. The Centre's qualification risk status can be updated at any time.

There are several possible qualification application outcomes:

- Qualification approval granted and Qualification Risk Status applied
- Qualification approval granted, subject to an action plan and Qualification Risk Status applied
- Qualification approval withheld, subject to an action plan and Qualification Risk Status applied
- Qualification approval denied, and Qualification Risk Status applied

CMI may decline Qualification Approval requests if Centres fail to meet qualification approval requirements. Although this decision cannot be appealed, CMI encourages Centres to reapply when they believe they meet requirements.

## 2.12 Evaluating Risks

### Risk rating of qualifications

Each qualification is assigned a separate risk status, which determines the required level of moderation sampling. Quality Managers will set the overall qualification risk level using professional judgement informed by evidence from monitoring, data, and previous quality assurance activities. All risk ratings, evidence sources and rationale are recorded in CMI Partner Connect, with ratings reviewed annually or when a significant change occurs.

The status of the qualification approval (including factors such as the number of years approved, quality levels, sanctions, and improvement actions will determine the size of sampling required for moderation. For the first moderation submission of any unit, CMI requires 100% of all Learners' assessments, regardless of how long a Centre has been approved./ The risk rating can be reviewed once CMI is satisfied that the Centre demonstrates competence in delivery, assessment and Internal Quality Assurance.

The level of qualification risk status is decided by a score generated from specific risk indicators:

Factor	Purpose of Qualification Approval status
Qualification Complexity	To assess the structure and design of the qualification, including the number of units, diversity of assessment methods, and clarity of assessment criteria. More complex qualifications, or those involving professional discussion, portfolio evidence, or holistic assessment, may carry a higher risk due to the potential for inconsistent interpretation or application of standards.
Volume of Learners	To assess the number of active and completed Learners per qualification. Higher Learner volumes may increase operational and quality assurance risks, particularly where Assessor or IQA capacity is limited or newly developed.

	Conversely, lower or stable volumes may indicate manageable workloads and consistent internal oversight.
<b>Centre Delivery Experience</b>	To assess the Centre's familiarity with the qualification, including the duration of delivery, historical success, and staff knowledge of qualification requirements. Centres newly approved to deliver a qualification, or those with limited prior experience, are typically rated higher risk until performance stability is demonstrated.
<b>Assessor and IQA Competence</b>	To assess the qualifications, occupational currency, and capacity of staff involved in assessment and internal quality assurance. Centres with experienced, qualified, and CPD-active staff present a lower risk than those with new, unqualified, or unsupported teams.
<b>Achievement and Success Rates</b>	To assess the proportion of Learners achieving the qualification within expected timeframes and the comparison of achievement rates with other Centres. Significant deviations from expected outcomes may indicate underlying issues with delivery quality, assessment practice, or Learner support.
<b>Historical Quality Assurance Outcomes</b>	To assess previous quality assurance findings, including actions, compliance issues, or good practices identified. Centres demonstrating consistent compliance and improvement are considered lower risk, whereas those with repeated actions, sanctions, or quality concerns are considered higher risk.
<b>Delivery Mode and Assessment Location</b>	To assess the nature and consistency of delivery (for example, classroom-based, blended, or remote), and the security of assessment environments. Fully controlled delivery models generally present low risk, while remote or multi-site delivery introduces greater variability and therefore a higher degree of potential risk.

### 2.13 Additional Qualification Risk Controls - Conflicts of Interest/Personal Interest

There may be occurrences where Centre Staff are involved in the assessment and internal quality assurance of CMI qualifications, but are also owners/part-owners/directors or have a financial interest within the Centre. This may be perceived as the individual having a personal interest in the result of the assessment. This is where a particular individual's interests might impair their ability to make the objective, unbiased decisions that are necessary to ensure that CMI can deliver and award its qualifications in line with the conditions set out by our regulators.

As an awarding organisation, CMI must take all reasonable steps to avoid any part of the assessment being undertaken by any person who may have a personal interest in the result of the assessment; however, understand this may be unavoidable at smaller CMI Centres. Where, having taken all such reasonable steps, an assessment by such a person cannot be avoided, CMI must make arrangements for the assessment to be subject to a higher level of scrutiny. This will take the form of an increased level of sampling of the Centres' assessment and quality assurance judgements during moderation.

Where Owners/Part Owners/Directors are involved in the assessment and/or internal quality assurance and the organisation has less than five (5) employees involved in the process, then CMI will apply a minimum of a 'Medium

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Risk' moderation sampling approach on all qualifications in line with our moderation strategy indicated at section [6.8 Sampling Size](#).

Centre may be directed to use the CMI Marking Service where there is an actual Conflict of Interest or Personal Interest in the assessment or internal quality assurance decision which cannot reasonably be mitigated. Resources to assess and IQA will be reviewed regularly by CMI when staffing levels across any Centre change, especially when Centre staff members are deleted.

From April 2023, Owners/Part-owners/Directors of CMI Centres will not be contracted to work as part of the CMI's internal marking, moderation or mapping teams if 'peer bias' cannot be mitigated. Peer bias relates to bias associated with working alongside other contractors who may be making assessment, moderation or appeal decisions for the Centre they own.

## 2.14 Qualification Approvals

Centres must apply through CMI Partner Connect for approval to deliver any additional qualifications beyond those they are currently approved for. This process also requires Centres to either apply for approval or update the details of the staff responsible for delivery, assessment, and Internal Quality Assurance.

Where a Centre has applied for approval for a qualification at the Diploma level, automatic approval can also be granted for the Award or Certificate level.

For qualifications that are replaced or updated, Centres are required to apply for approval for the new syllabus. Unless the changes are minor, the Quality Manager may use their discretion to grant automatic approval.

Ultimately, the Quality Manager makes the final decision to approve or reject a qualification application, which may include setting required actions for the Centre.

## 2.15 Equivalent Units

Equivalent units are CMI QCF/RQF units, which, when compared, are judged by CMI to have content and Learning Outcomes/Assessment Criteria equal to or greater than other CMI units. Equivalent units may look different to one other but in short, CMI has decided they are sufficiently comparable.

In terms of claims for CMI units, CMI will consider 'Equivalent units' on an individual Learner basis, upon application from a Centre.

The most likely scenario to occur is where a Learner requests to top-up an old qualification with units from a new syllabus. In this instance, units from the old qualification will be considered against the new qualification.

The Equivalent Unit Policy can be found at [Policies - CMI](#).

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## 2.16 An Example of CMI Centre Journey

After the initial Centre approval, the Centre may deliver, assess, and internally quality assure (depending on the level of approval). Additional aspects of the Centre journey may include:

- CMI QA Centre activity /audit
- Additional Staff approval
- Additional qualification approval

If, during the journey to becoming a CMI Centre or following approval, the Quality Manager/Auditor comes across an aspect of the Centre's activities that is not in line with CMI standards, they will work with the Centre to ensure the activity is brought in line with CMI standards. This process will always be conducted in a supportive manner and in line with the CMI Sanctions Policy.

## 2.17 Centre Quality Assurance Activities

All Approved and Registered Centres that deliver CMI qualifications, whether they have current Learners or not, will be subject to quality assurance activities, which will be conducted by a CMI Quality Manager.

These Quality Assurance Activities will be undertaken either face-to-face or virtually using appropriate technology. The frequency of these activities will be determined by a risk assessment of the Centre's Learner numbers, moderation/marking history and other factors.

For International quality assurance monitoring, these may take place virtually, but an on-site activity is required to be undertaken at least once every three years. General Centre quality assurance activity will be carried out in accordance with the wider policy, for example, in line with the Centre's risk rating.

## 2.18 Delays/Postponement/Failure to Attend Quality Assurance Monitoring Activities

There may be an agreed delay/postponement to the quality assurance monitoring activity due to any of the following reasons:

- Unable to access the required information for the activity, for example, due to an IT failure
- Unable to travel due to local and/or national restrictions, for example, pandemic, travel restriction
- Staff sickness/ Staff capacity
- Any legitimate issue

Where a Centre and/or CMI requests to delay/postpone a Centre quality assurance monitoring activity, this will be upon an agreement from both parties, with a new date for the activity agreed upon as soon as practically possible.

Where a Centre fails to attend a virtual quality assurance monitoring activity, the Quality Manager will contact the Centre to discuss the matter, with a new date for the activity agreed upon as soon as practically possible. If the Centre fails to attend a **second** quality assurance monitoring activity, a Level 2 sanction will be immediately applied until a quality assurance monitoring activity has taken place, or at the Quality Manager's discretion, depending on the reason for the failure to attend.

Where a Centre has requested to delay/postpone a quality assurance monitoring activity on **three** consecutive requests/times, then the Quality Manager will immediately place a level 2 sanction on the Centre until a quality assurance monitoring activity has taken place.

## 2.19 Centre Quality Assurance Activity Schedule

- **Newly-approved UK-based CMI Centres** - All newly-approved UK-based CMI Centres will normally have a virtual<sup>3</sup> quality assurance activity within 6-8 months of approval (Even if there are no registered Learners).
- **Newly-approved International-based CMI Centres** - All newly-approved international-based CMI Centres will normally have a virtual quality assurance activity within 6-8 months of approval (Even if there are no registered Learners). All international-based CMI Centres will also have a face-to-face quality assurance activity within 36 months of approval (Even if there are no registered Learners).
- **All CMI Centres** - All CMI Centres will have a quality assurance monitoring activity based on the risk rating applied to the Centre. These activities will either be a face-to-face physical visit to the Centre or undertaken virtually with the Centre.
- **Additional Centre Quality Assurance Activities** - There may be a requirement for an additional CMI Centre quality assurance activity outside the normal Centre Quality Assurance Activity Schedule; this may incur additional fee charges to the Centre. The frequency and requirement will be determined by CMI before the activity is undertaken. The following factors will be considered:
  - Issues with the Centre's internal quality assurance procedures
  - Malpractice and/or Maladministration Issues
  - Additional support to CMI Centres
- **International-based CMI Centres** - International Centre visits are scheduled according to region, Centre risk, FCO guidance on travel and safety and efficient expenditure. Quality Managers will visit APAC and MENA Centres in line with the Centre Quality Assurance Activity Schedule above in any given year. Travel to the Americas has not yet been required due to risk having been managed through the registered Centre route and a small number of Centres. Should this change, Centre visits in this region may be added.
- **Dormant Centre** - See [Section 2.26](#)

Each Centre will be contacted to agree on a date and time for the proposed Centre activity/audit. When contacted, the Centre will be asked to provide relevant information and to check that their approval documentation is up to date.

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<sup>3</sup> Centre Quality Managers have the option to change to face to face if required.

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On the day of the activity, the Quality Manager/Auditor will meet/speak with the Programme Director and/or any relevant members of the Centre quality management team and/or members of the delivery and assessment team. They may also request to meet with CMI Learners or review feedback from Learners.

The activity will focus on the following key areas:

- Approved Centre details
- Outstanding actions/action plans
- Overall Compliance
- Assessment
- Learners
- Management and Governance
- Quality Assurance
- Staffing
- Comments, actions required and risks (sanctions)

Ahead of the activity, the Centre must ensure that Learner numbers are accurate and that staffing and user records are properly maintained, with any staff or users no longer involved in CMI delivery and/or assessment removed.

## 2.20 Centre Quality Assurance Compliance/Activity Report (QAAR)

Centres are assessed under six **core compliance areas**, each contributing to the overall rating:

- **Overall Compliance** – provides a holistic summary of the Centre’s level of compliance across all operational and regulatory areas, drawing upon evidence from monitoring, quality assurance activities, and previous quality assurance outcomes.
- **Assessment** – evaluates whether assessment decisions are valid, reliable, fair, and consistent; whether Centres adhere to approved assessment briefs and criteria; and whether records of assessment and feedback are complete, accurate, and traceable.
- **Learners** – considers Learner registration, induction, support, progression, and achievement processes, ensuring that Learners are treated fairly, receive accurate information, and have access to appropriate support and appeals mechanisms.
- **Management and Governance** – assesses the Centre’s leadership, decision-making structures, communication systems, and responsiveness to CMI guidance and regulatory updates, ensuring effective management oversight of all CMI provision.
- **Quality Assurance** – examines the rigour and effectiveness of the Centre’s internal quality assurance arrangements, including sampling strategies, standardisation activity, action tracking, and continuous improvement planning.
- **Staffing** – reviews the competence, qualifications, and stability of delivery and quality assurance staff, ensuring they are appropriately skilled, occupationally current, and supported through ongoing professional development.

The **Centre Compliance Rating** is updated after the Quality Manager's quality assurance activity and recorded and managed through **CMI Partner Connect**, allowing for real-time visibility of compliance status, action plans, and improvement progress.

On completion of a Quality Manager's activity, the Programme Director or representative will be provided with a verbal summary of findings. However, the Quality Manager will take time to reflect on findings and may request additional evidence following the quality assurance activity before evaluating all evidence and finalising actions and recommendations.

A **Centre Quality Assurance Activity Report (CQAAR)** will be produced by the Quality Manager once the quality assurance monitoring activity is complete, and this will include:

- Key findings against each of the sections, with a compliance rating against each section -
  - Fully Compliant
  - Minor (Partial) Non-Compliance
  - Major Non-Compliance
- Quality Assurance Activity Report Summary
- Areas of good practice
- Recommendations/Improvement Points for the Centre (if relevant)
- Any applied actions
- Any applied sanctions
- Proposed date of next Quality Assurance Activity.

On receipt of this Quality Assurance Activity Report, the Programme Director will check the report for accuracy and will be provided with an opportunity to respond and provide feedback on the activity within ten days of receipt of the report. If CMI receives no response within ten days of receipt of the report, it will be assumed that the Programme Director is in agreement with all content and will complete all actions within the set timescale.

## 2.21 Centre Actions

Quality Managers will set actions to ensure Centres comply with CMI standards, requirements and regulatory agreements. These actions will be recorded in the QAAR form, which is sent to the Centre Programme Director following the quality assurance activity. Deadline dates are agreed upon during the Centre Quality Assurance Activity, and the Quality Manager will monitor the completion of any actions set and may arrange a follow-up activity for additional support and/or monitoring. Centres can access and respond to their set action(s) directly through Partner Connect.

## 2.22 Centre Sanctions

CMI is committed to working with Centres through risk assessment and action plans to prevent situations that would warrant imposing a sanction. The Quality Manager will provide support and identify required actions to ensure compliance with CMI standards, requirements and regulatory agreements.

When a Centre fails to maintain required standards or adhere to the Regulatory Agreement and/or associated policies, CMI reserves the right to impose a sanction. Actions are recorded in CMI Partner Connect, and failure to close an action point within the agreed timeframe (maximum of 3 months) may result in further actions or a higher-level sanction.

Non-compliance issues that have been previously rectified but recur at a later date will be considered when applying a higher sanction or increasing the Centre's risk rating in line with the CMI Centre Assessment Standards Scrutiny (CASS) strategy.

### Immediate Sanctions.

Sanctions will be imposed in the following specific circumstances:

- **Suspected Malpractice or Maladministration:** CMI will impose a Level 3 sanction until a full investigation has been conducted.
- **Absence of Regulatory Agreement:** A Level 3 sanction will be applied, preventing the Centre from registering Learners or requesting certification.
- **Repeated Failures:** Where a Centre has been sanctioned multiple times at Level 2 or 3 within 12 months and is considered to be without the capacity to make the necessary improvements, CMI reserves the right to move immediately to a Level 4 sanction - withdrawal of Centre approval.

In addition to imposing sanctions, CMI may at any time require 100% moderation against a Centre, regardless of risk rating, to mitigate threats to the integrity of CMI qualifications.

Full details regarding sanctions can be found on the **CMI Sanctions Policy and Procedure**, which can be accessed at [Policies - CMI](#)

## 2.23 Sanction Levels

Risk Level	Sanction	Maximum Allowable Time Frame
Level 0	Improvement points suggested	Next CMI Quality Assurance Activity
Level 1	Action Plan - Action points to be completed by an agreed deadline	3 Months
Level 2	Suspension of Registration - Action points to be completed by an agreed deadline <b>Note:</b> Suspension of registration for the Centre - all qualifications <b>or</b> Suspension of registration on a qualification/selected qualifications	3 Months

Level 3	Suspension of Registration and Certification - Action points to be completed by an agreed deadline	3 Months
Level 4	Withdrawal of Centre Approval. The Regulator will be informed	Immediate

## 2.24 Centre Moving from Fully Approved to Registered

A Centre may transition from Fully Approved to Registered Centre status in two primary circumstances:

- **Centre Initiated:** This may occur when the Centre does not have the internal resources or operational processes required to undertake its own assessment and internal quality assurance (IQA).
- **CMI initiated:** CMI may move the Centre to a Registered Centre status as a measure to mitigate identified adverse effects or risks.

In both cases, the Centre will be provided with instructions by CMI on how to use CMI marking services and information regarding any associated fees.

Ongoing CMI Quality Assurance activities (visits/audits) will continue to be undertaken in line with the CMI Quality Manager's monitoring programme.

## 2.25 Centre Moving from Registered to Full Approval

A Registered Centre seeking to transition to Fully Approved Centre status must demonstrate that it has established robust internal assessment and quality assurance systems. This transition is subject to the following requirements:

- **Quality Assurance Activity:** The Centre must undergo a CMI Quality Assurance activity conducted by its Quality Manager. Any resulting actions must be fully addressed and formally closed.
- **Readiness and Training:** The Centre is required to demonstrate a full understanding of the assessment, IQA and CMI moderation processes before submitting any work for moderation. The CMI Awarding Body Team will provide any training requirements on the CMI moderation system.
- **Moderation:** The Centre will initially be subject to 100% moderation sampling to ensure that the Centre's assessment and IQA decisions meet the qualification requirements. The sampling rate will be reduced once CMI is satisfied with the consistency and reliability of these decisions.
- **Ongoing monitoring:** Continuous Quality Assurance activities will be carried out in accordance with the CMI Quality Manager's scheduled plan.

## 2.26 Dormant Centre

A Centre will be designated as Dormant under the following circumstances:

- The Centre has not registered any Learners within 18 months of gaining Centre approval.

- The Centre has previously made Learner registrations and completions, but has had no Learner registrations on CMI qualifications for a continuous period of 12 months.
- The Centre has submitted a request to be placed into Dormancy.

In all the above cases, a [Level 3 sanction](#) will be placed under the discretion of the CMI Quality Manager, and the Centre will be transferred to the CMI Awarding Body Quality Auditor. The Centre will continue to pay its annual CMI Centre Fee.

Please refer to the CMI Approved Centre Dormancy, Centre Closure or Loss of Approval Policy, which can be accessed at [Policies - CMI](#).

## 2.27 Centre Withdrawal and Closure

If a CMI Centre should close down or approval ceases, the Centre is responsible for ensuring the safe transfer of any current Learners to an existing CMI Centre in accordance with the CMI Centre Regulatory Agreement.

CMI and the CMI Centre will contact other CMI Centres within the same geographical area to identify the scope for Learner transfers. CMI and the CMI Centre will then communicate in writing to the affected Learners, providing instructions on which Centres they can approach to continue their learning. Learners will be requested to confirm their intentions, for example, where they intend to resume their studies or whether they wish to withdraw from the qualification.

### CMI Intervention and Learner Support

If the Centre confirms an unwillingness or inability to support the Learners, the following actions will be taken:

- The Awarding Body Support Team will notify the relevant Quality Manager of the current situation and will copy the Quality Manager into all correspondence.
- The Awarding Body Support Team will contact all Learners to confirm the Centre's closure.
- The Awarding Body Support Team will communicate the options to the Learners. This could include transfer to other CMI centres, withdrawal, partial certification and marking/moderation of completed work.

Where the Centre has been placed on a [Level 4 sanction](#), CMI will remove its approval status and begin an **enforced** withdrawal process in line with the Centre closure process.

Where the Centre withdrawal is due to occurrences of malpractice or maladministration, or any connected occurrence, it will, as part of its regulatory obligations, inform other Awarding Organisations of this. As part of its regulatory obligations, CMI will inform the relevant Regulator(s) of the Centre's withdrawal.

All outstanding invoices will be collected by CMI before the Centre is closed. Marking fees (if applicable) will be charged up to the final date specified in the notice letter. The CMI Centre cannot be closed until all remaining

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Learners have been transferred or withdrawn by the original CMI Centre. Please refer to the CMI Approved Centre Dormancy, Centre Closure or Loss of Approval Policy and Procedure, which can be accessed at [Policies - CMI](#).

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## Section 3 - Roles and Responsibilities of the Centre

### 3.1 The Role of the Centre

The Centre's primary role is to ensure the successful and compliant delivery of CMI qualifications. This responsibility includes delivery (for all CMI Centres) and, for Fully Approved Centres, the responsibility for assessment and Internal Quality Assurance (IQA).

The Centre is also responsible for:

- **Compliance:** Adhering to all requirements set out in the Centre's Regulatory Agreement and CMI policies and procedures.
- **Marketing and Promotion:** Ensuring all marketing materials and public communications regarding CMI qualifications and services are accurate, transparent, and do not mislead or misrepresent CMI qualifications and services.
- **Quality Assurance and Consistency:** Implementing processes for reviewing and monitoring the quality and consistency of delivery, assessment (where relevant) and internal quality assurance practices and decisions. All review records must be maintained and provided to the Quality Manager upon request.
- **Staffing and Resources:** Ensuring sufficient qualified Staff and resources for the administration, management, delivery, assessment and internal quality assurance of CMI qualifications.
- **Staff Approval and Update:** Immediately notifying CMI of any staffing changes. All staff involved in delivery, assessment, or IQA must apply for Staff Approval via CMI Partner Connect before commencing their role on a CMI programme.
- **Information Provision:** Providing CMI with all required information promptly to facilitate regulatory compliance and effective quality assurance.

### 3.2 The Role of the Programme Director

The Programme Director is the Centre's nominated individual and serves as the primary point of contact for all CMI quality assurance purposes. This individual must be in a senior position with decision-making responsibility for CMI course delivery. While experience in management and leadership is preferred, no specific qualifications are mandatory for the role. The Programme Director may be the Centre's Internal Quality Assurer or another person who holds responsibility for the administration or quality assurance functions.

CMI Centres must ensure that there is a named Programme Director at all times, and this individual must be listed as the Senior Manager on the CMI Partner Connect user list. Failure to maintain a named Programme Director will result in CMI applying a Level 1 sanction.

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Centres **must** notify CMI when they require to change their Programme Director. The Centre must email their CMI Quality Manager and [approvals@managers.org.uk](mailto:approvals@managers.org.uk) to inform them of the change. The email must include their name, position within the Centre, and their email address.

Centres should ideally only have **one** Senior Manager user type allocated on CMI Partner Connect per Centre. In some cases, it is acceptable to have two allocated Senior Managers, but the CMI Quality Manager should be informed.

The Programme Director has the responsibility for CMI for the following areas:

- **Quality and Compliance oversight:** Overseeing the delivery, assessment and internal quality assurance (IQA) of CMI qualifications, ensuring all activities are in accordance with the Centre's Regulatory Agreement and meet CMI requirements
- **Administration and Learner Management:** Ensuring Learner registrations are completed within six weeks of the programme start date. This includes collecting fees, checking and distributing certificates promptly and managing unit completion status to determine if "exit awards" can be claimed (at the Centre's discretion).
- **Assessment Claims:** Ensuring that all claims for marking/moderation for completed units/qualifications are processed promptly and in line with the Learners' qualification expiry dates.
- **Information Sharing:** Ensuring all Centre staff receive relevant CMI communications and are aware of CMI requirements and regulations.
- **Learner Reporting:** Managing Learner requests for RPL, appeals, complaints, and requests for additional assessment requirements. They must also inform CMI of any changes to Learner details, withdrawals, or qualification changes.
- **Staff and Governance Reporting:** Informing CMI promptly of any staff changes, institutional changes (for example, mergers, takeovers, bankruptcy), changes to Centre details or circumstances (for example, change of ownership, contact details, financial difficulties) and any Satellite Centre, Multi Centre, or third-party arrangements as soon as they arise.
- **Record Keeping:** Maintaining accurate records at all times and ensuring that these are retained by the Centre for three years.
- **Incident Reporting:** Immediately reporting any case of suspected malpractice or maladministration to CMI.

### 3.3 The Approval of a Centre Team Member

CMI's Quality Managers are responsible for approving all new and additional members of Staff involved with the delivery, assessment and internal quality assurance (IQA) of CMI qualifications **prior** to them commencing their duties. This review is holistic, considering the individual's qualifications, academic competence, and occupational competence, as well as the contribution the new member will make to the overall team profile and expertise.

Centres are advised to first consult with the **Section 3.5 Occupational Competence Requirements** if they are unsure of the competencies required to deliver/assess and/or quality assure.

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Please note: Centre administration staff will be added to the system as a **Centre User** and will not be required to complete a staff application form for approval. Centres will be required to manage their Centre Users and will be required to keep this updated by actively adding, editing or deleting users where applicable.

### Staff Approval Process via CMI Partner Connect

Centres must use the following procedure to seek approval for staff involved in delivery, assessment or IQA:

- Navigate to “**Our Staff**” on CMI Partner Connect or complete the **Staff Approval Application Form** from CMI Partner Connect on the home page.
- Upload the relevant details into the **Add Staff Member section**, including the staff member’s CV.
- The application must clearly state the CMI qualification(s) that the staff member is involved in and their specific role(s) for each of the qualification(s) (for example, delivery, assessment, IQA).
- For staff working towards certification (for example, as an Assessor or IQA), a clear action plan for achieving the required qualification/competence must be provided.

Once submitted, the Quality Manager will review the application and will either sign it off or return it to the Centre requesting more information.

Quality Managers will **not** be involved in the Centre’s recruitment and selection process.

CMI is required to collect, record, monitor and provide information regarding Centre Staff qualifications and occupational competence to the regulatory bodies. It is therefore important that the Centre Staff records held by CMI are correct and up to date. Centres are able to view their Centre Staff information by selecting the Staff Summary Report in the reports section of the CMI Partner Connect.

Please note that Staff approval applications are required for Centre Staff at Satellite Centres too.

### Withdrawal of staff approval

The Quality Manager can withdraw the approval of a member of the Centre team at any time if the individual is found to have fallen below the accepted standard.

### Exclusions from CMI Partner Connect approval

Staff involved **only in apprenticeship delivery** (for example, as workplace coaches or portfolio advisors) who do not deliver, assess, or IQA any part of a CMI qualification or unit **do not** need to apply for staff approval through CMI Partner Connect.

### 3.4 Staff Approval and Requirements

Centres must adhere to the following mandatory requirements concerning all staff involved in the administration, delivery, assessment, and IQA of CMI qualifications.

- **Sufficient Resources:** Maintain and ensure sufficient qualified staff and resources are available for the administration, management, delivery, assessment and IQA of CMI qualifications at all times.
- **Prior Approval:** Ensure all Staff involved in delivery/assessment/IQA receive formal approval from the Quality Manager **before** commencing their duties on a CMI programme. **Updates and Records:** Immediately notify CMI of any staffing changes and ensure accurate, current records are maintained for all approved Centre Team members.

### 3.5 Occupational Competence Requirements

Deliverers/Lecturers/Tutors/Assessors/Internal Quality Assurers must demonstrate that they:

- **Subject Area Expertise (Occupational Competence):** Possess current, credible expertise in the subject-specific area relevant to the level(s)/units they are delivering, assessing or quality assuring.
- **Pedagogical and Assessment Practice Expertise:** Have current and credible expertise relevant to delivery, assessment or internal quality assurance.
- **Qualification and Unit Knowledge:** Have a thorough understanding of the CMI qualification units at the level(s) they are delivering, assessing or quality assuring.
- **Continuing Professional Development (CPD):** Actively maintain their professional knowledge and remain up to date with developments in subject area practice, delivery and or assessment, and can demonstrate examples of current CPD activity.
- If an individual cannot initially demonstrate the required competence, the Centre must provide sufficient evidence detailing how the proposed staff member will be trained and supported to meet the requirements, for example, arranging a second marking of assessment decisions for a new Assessor.

### 3.6 Evidence of Occupational Competence

To demonstrate that Centre Deliverers/Lecturers/Tutors/Assessors/Internal Quality Assurers meet the Occupational Competence Requirements outlined in [Section 3.5](#), the Centre must ensure the team collectively possesses the necessary combination of current competencies in learning, assessment, and internal quality assurance (IQA) methodologies underpinned by relevant subject matter expertise.

CMI utilises a set of detailed evidence indicators to verify staff competence. These role-specific criteria, which govern the approval of new staff members, are set out in the tables in sections [3.14 - Deliverer / Lecturer / Tutor Occupational Competence Requirements](#), [3.15 - Assessor / Assessment Observers Occupational Competence Requirements](#) and [3.16 Internal Quality Assurer Occupational Competence Requirements](#).

### 3.7 Qualifications Scotland Accreditation Assessor and Quality Assurer Competence (From July 2021) Scottish Qualifications only

CMI has a small number of qualifications which are regulated by Qualifications Scotland Accreditation. This section aims to provide clarification and guidance relating to the qualification requirements for the assessment and quality assurance of competence-based qualifications, including Scottish Vocational Qualifications (SVQs). This may also be used for assessing other types of qualifications that are supported by assessment strategies.

Assessors and Quality Assurers who currently hold D or A and V Units are still considered to be qualified Assessors and Internal/External Quality Assurers and are not required to undertake the Learning and Development (L&D) qualifications and units. However, they must be working to the same National Occupational Standards (NOS) and undertaking appropriate continuous professional development. Any new Assessors and Quality Assurers who do not currently hold any of these predecessor qualifications should undertake the current Learning and Development (L&D) qualifications.

The relationship between the current L&D Units and previous Assessor and Quality Assurer qualifications can be found below. Please note this is not an exhaustive list, and assessment and quality assurance of the relevant qualifications must always be in line with the L&D NOS and in accordance with the specific assessment strategies dependent on the requirements of the sector.

#### Assessors

Title	Acceptable alternatives
L&D 9D - Assess workplace competence using direct methods	<ul style="list-style-type: none"> <li>● A2 - Assess Candidates performance through observation</li> <li>● D32 - Assess Candidates performance</li> <li>● TQFE - Teacher Qualification (Further Education)</li> <li>● Other qualifications that are based on L&amp;D NOS, such as TAQA (Training, Assessment and Quality Assurance)</li> </ul>
L&D 9DI - Assess workplace competence using direct and indirect methods	<ul style="list-style-type: none"> <li>● A1 - Assess Candidates using a range of methods</li> <li>● D33 - Assess Candidates using differing sources of evidence</li> <li>● TQFE - Teacher Qualification (Further Education)</li> <li>● Other qualifications that are based on L&amp;D NOS, such as TAQA (Training, Assessment and Quality Assurance)</li> </ul>

#### Internal Quality Assurer

Title	Acceptable alternatives
L&D 11 - Internally monitor and maintain the quality of workplace assessment	<ul style="list-style-type: none"> <li>● V1 - Conduct internal quality assurance of the assessment process</li> <li>● D34 - Internally verify the assessment process</li> <li>● Other qualifications that are based on L&amp;D NOS, such as TAQA (Training, Assessment and Quality Assurance)</li> </ul>

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**Please note:** It is recognised that some CMI Centres use different terms for Verifiers, such as Internal Quality Assurers. These and other job titles for the same role are acknowledged.

### 3.8 Approved Centre - Staff Approvals - A New Member of Centre Staff

Centres must ensure that Staff involved in the assessment and internal quality assurance are competent to perform their roles, and must provide appropriate training and development opportunities to ensure that these Staff meet the required standards set out in the qualification and/or assessment documentation. CMI Centres should use a Centre-specific email address for staff (for example, [jobloggs@trainingprovider.co.uk](mailto:jobloggs@trainingprovider.co.uk)), as non-Centre-specific emails are a data privacy risk in the event of the staff member leaving the Centre.

It is advised that, as part of the recruitment due diligence process, various checks are undertaken to establish the Staff member's fitness to practise\*. This may include DBS checks, qualification quality assurance, etc., and for Welsh and Scottish CMI Centres, the following: \*Note: it does not mean being fit to teach in terms of health/medical fitness.

**WALES ONLY** - Under the Education (Wales) Act 2014, the Education Workforce Council is required to maintain a Register of Education Practitioners (the Register) in Wales. In accordance with the Education Workforce Council (Main Functions) (Wales) Regulations 2015, as amended, registration is a statutory requirement for:

- Registered Further Education (FE) Teachers
- Work-based learning practitioners

In accordance with these regulations, Employers have a legal obligation to ensure that their employees are registered with the Education Workforce Council before commencing work. This applies to employees working on a full-time, part-time (including hourly) or supply basis.

The Register of Education Practitioners can be found at: <https://www.myewc.wales/en/>

**SCOTLAND ONLY** - In accordance with The Public Services Reform (General Teaching Council for Scotland) Order 2011, The General Teaching Council for Scotland maintains a Register of Fit to Teach in Scotland. Being fit to teach means meeting the standards of professional competence and conduct that GTCS expects. The GTCS Standards for Registration and Code of Professionalism and Conduct set out these expectations, but can be summed up by saying that it means having the right knowledge and skills (and applying them) and doing the right thing as a professional teacher.

Registration is a statutory requirement for:

- General Teachers
- College Lecturers

Information can be found on [The General Teaching Council for Scotland](#), with details here on [Fitness to Teach](#).

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CMI expects its Centres' Staff to know and comply with requirements for recording assessment decisions and maintaining assessment records, and must be familiar with all relevant policy and guidance documentation as part of the Centre and Staff approval process.

Assessing an application for a new Centre member of Staff not only involves the Quality Manager considering the individual's qualifications, academic and occupational competence, but also the contribution the new team member will make to the overall team profile and expertise.

### 3.9 Centre Staff Withdrawal

Centres are required to promptly notify CMI of any withdrawals from the Centre team to ensure the accuracy of information provided to the regulatory bodies. This administrative action is performed by the Centre via CMI Partner Connect by navigating to Approvals/Our Staff and selecting the deletion button for the member of Staff who has left/is leaving.

The Quality Managers can withdraw the approval of a member of the Centre team at any time if they are found to have fallen below the accepted standards. ([Section 3.3 - The Approval of a Centre Team Member](#)).

### 3.10 Updating Centre Staff Details

CMI is required to collect, record, monitor and provide information regarding Centre staff qualifications and occupational competence to regulatory bodies. Therefore, Centres **must** ensure that the staff records held by CMI are accurate and up to date at all times.

To ensure that information supplied to the regulators is correct, the Quality Manager must be informed of any changes in Staff details. This is achieved via CMI Partner Connect using the following procedure:

- Navigate to CMI Partner Connect > Approvals Menus > Section 3 > Our Staff
- Click the 'edit' button for the relevant member of Staff to update their details.

### 3.11 The Role of the Deliverer/Lecturer/Tutor

The role of the Deliverer/Lecturer/Tutor is to train, engage and motivate CMI Learners through the effective delivery of CMI qualifications. Please refer to [3.14 - Deliverer / Lecturer / Tutor Occupational Competence Requirements](#) for full details of the competence requirements.

In circumstances where the Deliverer/Lecturer/Tutor is also required to perform the role of an Assessor, they must meet all the occupational competence requirements defined for the Assessor role. Should this be the case, the roles and requirements of the Assessor are also required to be met. Please refer to [3.15 - Assessor / Assessment Observers Occupational Competence Requirements](#).

### 3.12 The Role of the Assessor

The role of the Assessor is to decide on whether a Learner has provided **sufficient, valid** evidence to demonstrate they have met all the qualification requirements. This involves judging the Learner's evidence, knowledge and understanding against all learning outcomes and assessment criteria.

Assessors are responsible for the following key actions:

- Determining that the evidence provided by the Learner successfully demonstrates competence against the required standards
- Providing appropriate support and guidance to Learners concerning the sufficiency and quality of their evidence.
- Ensure Learners clearly demonstrate the required knowledge and understanding, and accurately cross-reference their evidence against the appropriate units, assessment criteria and any other elements in the evidence presented for assessment.

### 3.13 The Role of the Internal Quality Assurer (IQA)

The Internal Quality Assurer (IQA) is responsible for ensuring and demonstrating that all internal assessment decisions are **valid and consistent** through the monitoring and sampling of internal assessment decisions and the provision of appropriate feedback to Assessors.

- A Centre must have an approved Internal Quality Assurer. Without an approved Internal Quality Assurer, Centres cannot submit claims for certification, as this activity requires the submission of evidence that internal quality assurance has taken place.
- Internal Quality Assurers **must not** internally quality assure any evidence that they have themselves assessed.
- An Internal Quality Assurer is expected to hold a relevant IQA qualification or possess experience of the IQA process and be familiar with IQA good practices. Please refer to [Section 3.16 - Internal Quality Assurer Occupational Competence Requirements](#).

#### Internal Quality Assurance Strategy and Sampling

CMI requires the IQA to adopt suitable risk-based sampling strategies for Learner work and Assessor decisions. This strategy must cover:

- Formative (on-programme) sampling
- Summative (end-programme) sampling

The IQA is expected to prepare suitable plans and maintain appropriate records.

## Moderation Submission Requirements

When submitting requests to the CMI Moderation system, the Centre **must** ensure that IQA plans and records are submitted for each request, showing the cohort in which the Learner is being claimed.

- The Learner(s) being claimed must appear in an IQA sampling plan; however, CMI does not expect that every moderation request will have been sampled, as the sampling plan may not include the Learners submitted in a specific request.
- It is not the intention that Centres should delay the submission of requests while the work of the entire cohort is completed, for example, Learners who submit to deadlines should not be penalised for not knowing the external moderation decision due to the late submissions of other Learners.

Please refer to [Section 6.2 - Moderation Guidance and Submission Deadlines](#).

### 3.14 Deliverer / Lecturer / Tutor Occupational Competence Requirements

The table below details the required occupational competence and corresponding evidence indicators for Deliverers, Lecturers, and Tutors. The Centre's CMI Quality Manager retains the ability to take a pragmatic and holistic view of the proposed staff member's suitability, considering their skills, experience and qualifications against these requirements and any additional information supplied by the Centre.

Staff involved **only in apprenticeship delivery**, for example, as workplace coaches or portfolio advisors who do not deliver, assess, or IQA any part of a CMI qualification or unit, **do not** need to be submitted to the CMI Partner Connect for approval.

Deliverer / Lecturer / Tutor occupational competence requirements	Evidence indicators
Relevant and sufficient occupational experience appropriate to the level and breadth of subject areas of the qualification units for which the Centre is approved. NB – Staff delivering a unit are expected to be competent in the content of the unit.	<ul style="list-style-type: none"> <li>• Minimum of three years' occupational competence and experience appropriate to the level and breadth of subject areas of the qualification units for which the Centre has been approved</li> </ul>
A thorough knowledge and understanding of the subject areas appropriate to the level, breadth and content of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• A relevant and sufficient qualification appropriate to the subject areas of the qualification units for which the Centre is approved, that must be equal to or higher than the approved qualification.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Substantial experience, knowledge and understanding of the subject areas of the qualification units at the level for which the Centre is approved.</li> </ul>

Continuing Professional Development	<ul style="list-style-type: none"> <li>Evidence of participation over the past three years in Continuing Professional Development (CPD) appropriate to the level and subject area of the qualification units</li> <li>Desirable but not essential to have membership of a professional institute or association appropriate to the level and subject area of the qualification.</li> </ul>
Knowledge, understanding and application of a range of teaching and learning methodologies relevant to the level and subject area of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>Hold a valid and recognised Deliverer/Lecturer/Tutor qualification</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Show evidence of current (within the last three years) experience of delivering training appropriate and relevant to the level and subject area of the qualification units.</li> </ul>
Knowledge of CMI learning and assessment processes.	<ul style="list-style-type: none"> <li>Previous experience of delivery of CMI qualification(s) appropriate to the level and subject area of the qualification, <b>or</b></li> <li>Knowledge of the RQF (or QCF) level descriptors appropriate to the level of the qualification, or HE standards within Universities.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Completion of an induction programme to gain knowledge of CMI qualification(s) appropriate to the level and subject area of the qualification</li> </ul>
<b>For MoD Centres</b>	
MOD / Civilian Instructors on military courses to meet the role requirements as stated on military job descriptions, with associated pre-requisite courses and site-specific induction completed as per local standing orders/SOPs.	<ul style="list-style-type: none"> <li>JPA Assignment Order from MCM DIV Glasgow.</li> <li>DTTT, DTS, DIME, DIT</li> <li>Defence Workplace Trainer ( DWT) - Replaces DIT</li> <li>Defence Train the Trainer ( V2 ) - Replaces DTTT</li> <li>Defence Trainer Supervisor - Replaces DIME</li> </ul>
<b>For Police Centres</b>	
Police trainers to meet role requirements as stated in the 'Trainer Standard'	<ul style="list-style-type: none"> <li>College of Policing Police Sector Standard for the Training of Trainers 'Trainer Standard'</li> </ul>

### 3.15 Assessor / Assessment Observers Occupational Competence Requirements

The table below details the required occupational competence and corresponding evidence indicators for Assessors and Assessment Observers. The Centre's CMI Quality Manager retains the ability to take a pragmatic and holistic view of the proposed staff member's suitability, considering their skills, experience, qualifications, and any additional information supplied by the Centre.

Assessor / Assessment Observers Occupational Competence Requirements	Evidence indicators
Relevant and sufficient occupational experience appropriate to the level and breadth of subject areas of the qualification units for which the Centre has approved	<ul style="list-style-type: none"> <li>• A minimum of three years of experience, appropriate to the level and breadth of subject areas of the qualification units for which the Centre has been approved.</li> </ul>
Thorough knowledge and understanding of the subject areas appropriate to the level, breadth and content of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• A relevant and sufficient qualification appropriate to the subject areas of the qualification units for which the Centre is approved, that must be equal to or higher than the approved qualification.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Three years of experience in the subject areas of the qualification units at the level for which the Centre is approved.</li> </ul>
Continuing Professional Development	<ul style="list-style-type: none"> <li>• Evidence of participation over the past three years in Continuing Professional Development (CPD) appropriate to the level and subject area of the qualification units</li> <li>• Desirable but not essential to have membership of a professional institute or association appropriate to the level and subject area of the qualification.</li> </ul>
Knowledge, understanding and application of a range of teaching, learning and assessment methodologies relevant to the level and subject area of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• Have a relevant qualification in teaching and/or assessment</li> <li>• <b>(Note - If assessing CMI work-based/practice-based competencies units/assessments, must hold an assessment qualification that contains evidence of assessing competence in the work environment)</b></li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Demonstrate clear and sufficient evidence of a minimum of three years' experience in teaching and/or assessment relevant to the level and subject area of the qualification.</li> <li>• <b>(Note - If assessing CMI work-based/practice-based competencies units/assessments, must demonstrate clear and sufficient evidence/competencies of work-based/practice-based assessment)</b></li> </ul>

CMI Coaching / Mentoring Qualification - Observation of the Assessment	The observation will be conducted by an experienced mentor, coach or tutor (for example, a member of one of the following EMCC UK, ICF UK, AC bodies or holding a minimum of five years of experience in teaching that must include coaching, and holding an assessment qualification)
Knowledge of CMI learning and assessment processes.	<ul style="list-style-type: none"> <li>• Previous experience in assessing CMI qualification(s) appropriate to the level and subject area of the qualification</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>• Knowledge of the RQF (or QCF) level descriptors appropriate to the level of the qualification.</li> </ul>
<b>For MoD Centres</b>	
MOD / Civilian Assessors on military courses to meet the role requirements as stated on military job descriptions, with associated pre-requisite courses and site-specific induction completed as per local standing orders/SOPs.	<ul style="list-style-type: none"> <li>• JPA Assignment Order from MCM DIV Glasgow.</li> <li>• DTTT, DTS, DIME, DIT</li> <li>• Defence Workplace Trainer ( DWT) - Replaces DIT</li> <li>• Defence Train the Trainer ( V2 ) - Replaces DTTT</li> <li>• Defence Trainer Supervisor - Replaces DIME</li> </ul>
<b>For Police Centres</b>	
Police Assessors to meet role requirements as stated in the 'Assessor Standard'	<ul style="list-style-type: none"> <li>• College of Policing Police Sector Standard for the Training of Assessors - 'Assessor Standard'</li> </ul>

### 3.16 Internal Quality Assurer Occupational Competence Requirements

The table below details the required occupational competence and corresponding evidence indicators for Internal Quality Assurers (IQA). The Centre's CMI Quality Manager retains the ability to take a pragmatic and holistic view of the proposed staff member's suitability, considering the member's skills, experience, and qualifications, and any additional information supplied by the Centre.

Internal Quality Assurer (IQA) occupational competence requirements	Evidence indicators
Relevant and sufficient occupational experience appropriate to the level and breadth of subject areas of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• Minimum of three years of experience appropriate to the level and breadth of subject areas of the qualification units for which the Centre has been approved.</li> </ul>
Thorough knowledge and understanding of the subject areas appropriate to the level, breadth and content of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• A relevant and sufficient qualification appropriate to the subject areas of the qualification units for which the Centre is approved, that must be equal to or higher than the approved qualification <b>OR</b></li> <li>• Substantial experience, knowledge and understanding of the subject areas of the qualification units at the level for which the Centre is approved.</li> </ul>
Continuing Professional Development	<ul style="list-style-type: none"> <li>• Evidence of participation over the past three years in Continuing Professional Development (CPD) appropriate to the level and subject area of the qualification units</li> <li>• Desirable but not essential to have membership of a professional institute or association appropriate to the level and subject area of the qualification.</li> </ul>
Knowledge, understanding and application of a range of teaching, learning, assessment and internal quality assurance methodologies relevant to the level and subject area of the qualification units for which the Centre is approved.	<ul style="list-style-type: none"> <li>• Have a relevant qualification in teaching and learning and/or internal quality assurance.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Minimum of three years of experience in quality assuring regulated qualifications or Higher Education programmes</li> </ul>
Knowledge of CMI learning and assessment and internal quality assurance processes.	<ul style="list-style-type: none"> <li>• Previous experience in the delivery of CMI qualification(s) appropriate to the level and subject area of the qualification, <b>or</b></li> <li>• Knowledge of the RQF (or QCF) level descriptors appropriate to the level of the qualification or HE standards within Universities.</li> </ul>
<b>For MoD Centres</b>	

<p>MOD / Civilian Internal Quality Assurers on military courses to meet the role requirements as stated on the military job description, with associated pre-requisite courses and site-specific induction completed as per local standing orders/SOPs.</p>	<ul style="list-style-type: none"> <li>● JPA Assignment Order from MCM DIV Glasgow.</li> <li>● DTTT, DTS, DIME, DIT</li> <li>● Defence Workplace Trainer ( DWT) - Replaces DIT</li> <li>● Defence Train the Trainer ( V2 ) - Replaces DTTT</li> <li>● Defence Trainer Supervisor - Replaces DIME</li> <li>● Hold the above qualifications and the internal quality assurance qualification.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>● Minimum of three years of experience in quality assuring regulated qualifications or Higher Education programmes</li> </ul>
<p><b>For Police Centres</b></p>	
<p>Police Internal Quality Assurers to meet role requirements as stated in the 'Internal Quality Assurer Standard'</p>	<ul style="list-style-type: none"> <li>● College of Policing Police Sector Standard for the Training of Internal Quality Assurers -'Internal Quality Assurer Standard'</li> </ul>

### 3.17 Management of Third Parties and Subcontractors Centre Staff

CMI recognises that Centres will not necessarily have the capability to employ full-time dedicated Staff for all the above roles. In these Centres, it is acceptable for Staff to be appointed on a part-time/fractional/freelance/ contractor basis. However, CMI will apply the same rigorous approach to Staff approvals for any such Staff that the Centre appoints. It is good practice to marry the Centre's criteria for employment for these roles with those of CMI.

Centres will need to ensure that there are effective systems for the management of all third-party and subcontracted services and any Satellite Centre, ensuring that all policies and requirements referred to in the CMI regulatory agreement also apply to these third parties and subcontractors.

The Centre will need to ensure it has effective communication systems in place with third parties and sub-contractors to keep them up to date with the requirements of the CMI and the Regulatory Authorities.

The Centre must notify CMI when an existing third-party and subcontractor relationship comes to an end; when there are any proposed renewals of the contracts, when there are any actual/anticipated disputes, or when there is any change of control of the third party. CMI reserves the right to terminate third-party approval if the Partner does not properly supervise the operation of any contract between the Approved Centre and any third party.

As part of the quality assurance process, CMI reserves the right to visit and/or review a subcontracted/satellite Centre.

Should a Centre subcontract delivery/assessment/quality assurance to a separate organisation, this will need to be approved in advance by CMI. The Centre will need to complete the 'Third Party Relationship and Satellite Site Registration Form'. Then CMI will need to approve the Staff being used. This also applies to HEI; the satellite enquiry can be found within the forms pages on the CMI Partner Connect system.

### 3.18 Ongoing Centre Staff Monitoring and Continuous Professional Development (CPD)

CMI is required by its regulators to ensure that all staff involved in the delivery, assessment and internal quality assurance of its qualifications maintain the required levels of occupational competence and currency. Centres are therefore responsible for the ongoing monitoring and management of all Centre staff involved in CMI provision.

This monitoring must ensure:

- Staff adhere to CMI standards, policies, and the Centre's Regulatory Agreement.
- Assessors and IQAs consistently apply assessment decisions that are valid, fair and reliable.
- Staff actively maintain their professional knowledge and occupational competence.

Quality Managers will review Staff assessment performance as part of their quality assurance activities, but also ongoing through analysing any trends in moderation reports and assessment referrals.

#### Continuing Professional Development (CPD) Requirements

CMI requires all Centre staff involved in the delivery, assessment and IQA of CMI qualifications to **actively maintain their professional knowledge** and remain current with developments in subject area practice, delivery, and/or assessment. This is a mandatory requirement to ensure staff maintain occupational currency.

Deliverers/Lecturers/Tutors/Assessors and Internal Quality Assurers at CMI Centres delivering CMI qualifications must provide evidence of their continuing professional development to the Quality Manager/Auditor upon request. The evidence must:

- Be properly recorded.
- Cover both personal and professional development.
- Show a clear and specific development plan, which does not include generalisations, but documents outcomes.

**Exemptions** - CMI Centres that are themselves awarding bodies, for example, universities, will not be required to produce evidence of individual staff CPD, but general approaches to CPD may be discussed at Centre visits.

### 3.19 Centre Staff Conflict of Interest

The Centre is responsible for identifying and managing conflicts of interest in the delivery and assessment of CMI qualifications. The Centre must take all reasonable steps to ensure that no actual or perceived conflicts of interest exist that could compromise the integrity of the qualification (s). This includes conflicts where:

- The Centre, or any activity undertaken on its behalf, has interests that could be contrary to its obligations regarding the delivery and award of CMI qualifications.

- A staff member connected to the delivery or award of qualifications has personal or external interests that could impair their objective judgement regarding CMI qualifications.

**Transparency** and **mitigation** are the two key principles for managing conflicts of interest. Transparency relates to encouraging Staff to disclose conflicts of interest, thereby allowing management of such scenarios. Mitigation is about having a clear policy on how conflicts are managed.

Approved Centres are expected to have their own conflict of interest policy and upload this to the Document Library on CMI Partner Connect. Any actual or perceived conflicts of interest that could affect the awarding of a CMI qualification should be logged immediately with CMI by completing and submitting a **Conflicts of Interest Reporting Form** on CMI Partner Connect.

For further guidance on conflicts of interest, see the **CMI Conflicts of Interest policy** at [Policies - CMI](#).

### 3.20 Centre Staff Records

All Centre Staff records must be readily accessible for review by the CMI Quality Manager upon request during Quality Assurance activities and must be retained by the Centre for a minimum period of three years\* from the date the staff member ceases to be involved in the CMI provision.

The records to be maintained for each approved staff member include, but are not limited to:

- Tutor/Assessor/IQA vocational competence and continuing professional development (CPD) records
- CVs showing how staff satisfy assessment strategy requirements
- Originals or CMI Quality Manager-endorsed copies of relevant certificates

\*Where a member of Centre Staff requests that their personal information is erased in accordance with General Data Protection Regulations, and this is within the 3-year requirement, then the Centre should inform their Quality Manager of this request for audit purposes.

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## Section 4 - Assessment of CMI Qualifications

### 4.1 External Assessment/Marking

CMI offers the opportunity for all Centres to have their Learners' assessments externally assessed. CMI has external assessment briefs for all units from levels 2 - 7 of the Management and Leadership qualifications, levels 3, 5 & 7 of the Coaching and Mentoring qualifications, and for all Institute of Consulting (IC) qualifications.

This service provides Centres with a simplistic, professional and cost-effective way to get their CMI Learners' work assessed and certificated within six weeks. Please note that during busy times, the lead time for marking may be longer than 6 weeks. Centres should also factor in the likelihood of referrals and be mindful that multiple submissions may be needed. Details on external marking fees can be found in the CMI Fees Guide: [Information & Resources for Partners and Centres](#).

Access to the CMI External Assessment/Marking is managed by requesting this on the System Access drop-down menu on CMI Partner Connect when setting up a new user or amending an existing user.

### 4.2 Assessment Planning and Reviewing

When a Learner is registered on a CMI qualification (regardless of it being an Award, Certificate or Diploma), the Centre needs to ensure efficient planning for delivery, assessment and internal quality assurance.

In designing the programme, the Centre must consider the appropriate level and size of qualification to be delivered and assessed, and the last registration and certification dates for the qualification. CMI Centres need to ensure that there are sufficient resources available. This could include everything from having teaching staff with appropriate knowledge and qualifications to textbooks. Delivery can be via lectures or workshops, face-to-face or online, on its own site or within company premises, depending on the needs of the Learners.

The Centre must take care and ensure that it reviews and then delivers the most current syllabus for the chosen qualification. These are available on the CMI website in the qualification resource library section - [Management and Leadership Qualifications | Start today - CMI](#)

Centres must then choose the most appropriate units to deliver, taking into account Learner and Client needs, teaching resources (staff specialisms) and other resources available for delivery. Particular note must be taken of the rules of combination or any barred units in any qualification to ensure that the delivery ensures that the combination of units is valid.

It is important to ensure that an Internal Quality Assurer's role includes verifying that the correct units are being claimed by checking them against the rules of combination in the relevant syllabus.

Centres should follow the delivery requirements as published in the relevant syllabus.

### 4.3 Guided Learning Hours (GLH)

Guided Learning Hours (GLH) traditionally referred to education or training provided under the immediate guidance or supervision of a Lecturer, Supervisor, Tutor, Skills Coach or Employer.

Due to the increasing integration of technology and the demand for flexible learning, including asynchronous and synchronous delivery methods across different time zones, CMI has broadened the definition of GLH. For CMI qualifications, the calculation of Guided Learning Hours now accepts both immediate and non-immediate guidance or supervision as acceptable practice, recognising the evolving forms of education and training facilitated by technology to improve the learning environment and practical application of knowledge.

Immediate guidance or supervision	Non-immediate guidance or supervision
Synchronous - (simultaneous physical presence of Learner and tutor or remote presence by means of electronic communications)	Asynchronous ( pre-recorded sessions or directed learning with expected engagement hours, with Learners perhaps in different time zones)
Classes/lectures	Pre-recorded classes/lectures/podcasts
Online supervision and participation in Blogs, Chats, and VLOGs	Post-event contributions and feedback to blogs, chats, and vlogs
Webinars by Tutors	Recorded webinars with recorded questions and an opportunity to ask questions after the event
Directed e-learning, for example, Management Direct/ MOOCs	Directed e-learning, for example, Management Direct/ MOOCs, following tutor instruction.
One-to-one feedback sessions	Video feedback specific to a specific activity undertaken by the Learner.
Online timed activities with the Tutor are available throughout	Online timed activities with the Tutor available before and/or after the event

### 4.4 CMI Assessment Briefs

For most qualifications and units, the Centre will have access to a CMI-written Assessment Brief. These can be accessed along with the External Marking Sheet and Evidence Booklets by logging on to the MyCMI system - <https://www.managers.org.uk/mycmi/qualification-support/qualification-assessments/> and searching for the relevant qualification.

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The assessment scenario may be amended by the Centre to suit the needs of the Learners or cohorts. However, the tasks and assessment criteria **must not** be changed. CMI-approved centres can adapt the published CMI Assessment Brief; however, this does require following **CMI's Centre Devised Assessment Policy** and gaining approval from CMI. (See section 4.5). Registered centres **must** use CMI Assessment Briefs.

## 4.5 Centre-Devised Assessment (CMI Approved Centres Only)

Fully approved CMI Centres can devise their own Assessment Briefs and associated Evidence Booklets, and External Marking Sheets. This is subject to CMI approval **before** the centre can use them. There are 3 scenarios where centres may apply to use a centre devised assessment:

- The assessment method remains the same; however, the centre wishes to adapt the published CMI Assessment Brief.
- The Centre wishes to devise its own assessment method.
- There are no CMI Assessment Briefs available (for example, CMI Level 8 Strategic Direction and Leadership).

All 3 scenarios are only available to **CMI-approved Centres** and will require the Centre to complete a Centre Devised Assessment Application through CMI Partner Connect for CMI approval. This request **must be approved** by CMI prior to the centre running any assessments using the proposed assessment method or the alternative Assessment Brief. The request to use a Centre-devised assessment will be processed by CMI's Assessment Checking Service, which will work with the centre to approve or provide feedback where any additional information is required.

This ensures that the assessment is fit for purpose and will produce evidence in a format that can be moderated by CMI. If assessment briefs are altered without approval, Learner work may be returned to the Centre at moderation.

There is currently no fee for Centres to request Centre-devised assessments through our assessment checking service. This will be subject to review, and where any fees are introduced, Centres will be notified.

**The Centre Devised Assessment Policy and Procedure** will provide details of the full process and guidance, and can be accessed at [Policies - CMI](#)

## 4.6 Assessment Guidance and Evidencing Outcomes

The CMI Assessment Guidance Policy, which can be accessed at [Policies - CMI](#), provides Centres with guidance on word count, appendices, referencing, plagiarism and collusion, bibliography, referral/resubmission and structuring written assessments.

In addition to the specific assessment criteria in each unit, the Learner's work must be:

- Accurate, current and authentic
- Relevant in depth and breadth

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and must also show the Learner's:

- Clear grasp of concepts
- Ability to link theory to practise
- Ability to communicate clearly in the relevant discipline at the expected level for the qualification

## Grading Criteria

Where assessment decisions are made by a Centre, it must be explicitly recorded whether the outcome is **Pass** or **Refer**. This decision must be clearly evidenced within the assessment documentation, as CMI Moderators will expect to see a definitive judgement recorded for each assessment submission.

CMI moderation activity does not re-mark or re-grade Learner work. Rather, it confirms that the Centre's assessment decision is valid and that the Learner has met the required assessment criteria and/or learning outcome for achievement.

Within CMI qualifications, the only permissible grading for individual assessment criteria/learning outcomes and for the overall unit outcome is **Pass** or **Refer**. No merit, distinction, or alternative grading classifications apply.

## 4.7 Learner Authenticity

The Centre is responsible for ensuring the authenticity of all submitted Learner work. This is a crucial step in avoiding plagiarism and collusion and ensuring the Learner receives recognition only for their own work. CMI Centres **must** have a maladministration/malpractice policy in place to inform Learners of Centre expectations.

Please also refer to the CMI Plagiarism and Collusion Statement, which can be accessed at [Policies - CMI](#).

### Authenticity Declaration

CMI requires that each Learner sign and date a written declaration to confirm that the work submitted is their own and that all researched work is correctly referenced. CMI has produced a Statement of Authenticity that should be used by Centres. This is available at [Policies - CMI](#).

This declaration procedure must be completed for each piece of work submitted by a Learner. Acceptable formats for the declaration include a scanned electronic signature or a "tick box" within a fully automated uploading system. The statement can be added to assessment briefs or given as a separate document. If CMI evidence booklets are used, the statement

Where CMI evidence booklets are used, the statement of authenticity may be integral to the booklet, and in this case, a separate statement or completion of the CMI Learner Authenticity Statement is not required.

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In addition to a signed Statement of Authenticity for each Learner and each unit, at Centre visits, the Centre may be asked to demonstrate how it checks that the work submitted is that of the Learner submitting it. This may be carried out through one or a combination of the following methods: professional discussions, tutorials, formative assessment, feedback and Assessor questioning relating to the work submitted. These additional checks must be recorded, and the records must be maintained in accordance with CMI policies and procedures.

If the Centre is delivering CMI qualifications via distance learning, please ensure the CMI's Distance Learning Policy is read and understood and that the Centre meets the additional authenticity requirements.

### **The use of a viva to confirm the authenticity of Learners work - Exception Only**

A viva can be used by Centres when they wish to clarify that the work submitted has been produced by the Learner, thus establishing authenticity. It allows the Centre assessment Staff to explore any issues or areas that require clarification. Centres may have a strong sense of the outcome from the Learner's submission, but the viva allows the Learner to defend their work, as well as to validate the authenticity of the submission.

The viva must be recorded in either digital or paper format (see the guidance in [Section 4.15](#) and be presented as evidence at moderation. It must be noted in the notes section of the moderation claim that 'a *viva has taken place to validate the authenticity of the Learner and evidence will be provided on submission*'.

## **4.8 Best Practices for Reducing Learner Collusion and Plagiarism**

Plagiarism and collusion are very serious offences, and any Learner found to be copying another Learner's work or quoting work from another source without recognising and disclosing that source will be penalised.

### **Definitions**

'**Plagiarism**' means presenting work, excerpts, ideas or passages of another author without appropriate referencing or attribution.

'**Collusion**' occurs when two or more Learners submit work which is so alike in ideas, content, wording and/or structure that the similarity goes beyond what might have been mere coincidence. It must be made clear to all Learners and Staff that whilst the discussion of ideas, working in groups (as directed by the CMI Approved Centre), and other forms of verbal discussion are acceptable, the sharing of a Learner's written response to an assessment is NOT acceptable. To do so, even with the best intentions, leaves the Learner open to their work being used without their knowledge and could lead to allegations of collusion. Learners and Staff MUST be advised that the best practice is not to share, in any format, written thoughts, ideas or assessments which are being used for CMI qualifications.

### **Use of Artificial Intelligence (AI) Software in Assessment**

CMI considers the use of Artificial Intelligence (AI) software by a Learner to generate completed assessments or generate partially completed assessments, which are then finished off by the Learner to be a form of collusion in that

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the software itself proxies for another person whose output is being used instead of the assignment being completed by the Learner themselves.

Both are considered by CMI to be serious matters, which will be dealt with in accordance with its published Malpractice and Maladministration Policy and Procedure.

When it comes to reducing plagiarism and collusion, the best approach is that the Centre educates both the Learner and the Staff on the nature of plagiarism and collusion, methods of detection, and the impact and disincentivises them from engaging in it.

It is important to help Learners and Staff understand:

- What collusion and plagiarism are, and their different spectrums.
- Understanding the boundaries of collusion and plagiarism can prevent them from inadvertently crossing the line.
- Develop the Learner's research skills and develop their confidence in their own abilities, reducing the temptation to undertake collusion and plagiarism.
- The methods of detection for collusion and plagiarism, for example, include software, second marking, and moderation.
- The impact and further consequences of their study as a result of collusion and/or plagiarism.

Methods to reduce plagiarism and collusion

- Provide practical guidance on plagiarism and collusion, for example, Policy, Handouts, and Presentation.
- Provide study support to Learners.
- Provide development feedback to try to reduce the Learner's urge to collude or plagiarise.
- Use collusion/plagiarism-resistant assessments, briefs/tasks.<sup>4</sup>
- Use appropriate methods to detect collusion and/or plagiarism, for example, software, second marking, and moderation.
- Use appropriate methods to address incidents of collusion and plagiarism when they are detected.
- Actively discourage the use of Artificial Intelligence (AI) software to complete assessments.

## **4.9 Centre Feedback to Learners on Assessments - Approved or Registered Centres using the CMI Marking Service**

It is recognised that many Centres using the CMI Marking Service provide some level of formative feedback to Learners in advance of the assessment being submitted for summative assessment by CMI.

Centres should follow the guidance for formative assessment feedback in [Section 4.10](#) and also note other assessment guidance.

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<sup>4</sup> Only Approved CMI Centre - All Centre devised assessment briefs must go through CMI assessment checking service through CMI Partner Connect.plagiarism-resistant

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In cases where the formative feedback identifies the need for Learner amendments, this is **NOT** required to be done in different colour fonts when submitted to the CMI Marking Service. The Centre may ask the Learner to provide additional information in different colours to aid the formative feedback process, but when work is submitted as a first submission, this **MUST** be in the same colour font (black) throughout. Should the CMI Marker refer any work, the resubmissions should follow the guidance in Section 4.12.

#### **4.10 Centre Feedback to Learners on Assessments by Approved Centres**

Constructive and developmental feedback by the Centre assessment Staff is key in ensuring that Learners meet the assessment criteria requirements of the CMI qualification.

Feedback must be used in both a formative and summative assessment approach.

**Note:** Approved Centres must always ensure that the Assessor and the internal quality assurer are not the same person, and there are clearly defined roles and responsibilities between assessment and quality assurance.

##### **Formative Assessment Feedback**

The goal of formative assessment is to monitor Learner progression and to provide ongoing feedback that can be used by Learners to improve their assessment before the final submission of their CMI assessment. More specifically, formative assessments:

- Help Learners identify their strengths and weaknesses in their assessments
- Help Centres recognise where Learners are struggling and address problems immediately

It is suggested that formative feedback does not indicate whether specific criteria have been passed or referred - this is the role of summative assessment.

##### **Summative Assessment Feedback**

The goal of summative assessment is to evaluate the assessment at the end of a unit/qualification by comparing it against the assessment criteria.

##### **Assessment Ready**

CMI recommends that both formative and summative assessment feedback be given to the Learner throughout their learning journey. The moderation methodology used by CMI for Approved Centres requires that the Learner work submitted for moderation has already gone through the internal assessment and quality assurance processes (internal quality assurance) and meets the required assessment criteria standard.

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In other words, the **ONLY** work which should be submitted for CMI moderation is that which has been judged by the Assessor and IQA (where sampled) as having met and passed all assessment criteria. The CMI moderation process checks that the assessment and internal quality assurance judgements have been made correctly in line with the assessment criteria of the units/qualifications.

Assessors/Markers must clearly print/write their names on all marking/assessment feedback sheets. This information is critical in ensuring that CMI can identify that only approved Centre Staff have undertaken the assessment marking process.

**Whether the Learner's work is being summatively assessed through the CMI marking service or by the Centre's Assessors, a maximum of 3 summative submissions is permitted.**

**Feedback MUST be given against the Assessment Criteria (AC) and not the task.**

### Feedback Tips

- All feedback should be about the Learner's work and not the Learner.
- If it is not asked for in the CMI Syllabus, do not give feedback about it.
- Has the command verb been met?
- Use the 3-step feedback process:
  - Indicate Pass/Refer
  - Explain why (for example, '*This AC has been referred because...You have not evaluated...*') and include developmental feedback
  - If referred, then explain what the Learner needs to do. Feedback should tell the Learner what to do (actions), **not** how they should do it.
- When giving feedback, do not just regurgitate the AC, but do ensure that the correct command verb is used. CMI command verb word definitions can be used to explain what the Learner needs to do.
- Follow the AC when marking. The 'Good Practice' from the syllabus is guidance only. The work must meet the assessment criteria – not the task. If the AC indicates an answer that is plural, then this means at least two. Where a range is indicated, this means at least two. Where the task asks for different numbers, the AC is to be adhered to, not the task.
- The amount of feedback should typically be 1 - 2 sentences per AC. Remember to use the command verb definitions to help to phrase your feedback.
- If the evidence does not appear to be present, ensure you check to see if it has been included elsewhere (some of the briefs do not include criteria sequentially).
- Do not use feedback that is personal opinion or emotional, for example, '*I think*', or '*I feel*'. Keep feedback factual, objective and supportive.
- Ensure that all areas of the mark sheet are completed in full, including the result against each AC and the overall unit grade at the top of the page.
- Feedback should be supportive and encouraging. Avoid using words such as "basic" or "limited". These can feel very negative to Learners.

- Where you feel the pass is borderline – state this in the feedback, not in the result column. Only “pass” or “refer” is to be used.
- Referencing. Where the Learner uses someone else’s work, they must acknowledge the source. The Learner does not have to use Harvard referencing.
- The Learner does not have to use a bibliography. If there is no bibliography, it is not a refer.
- Structure and format – if you do not like the format, it is not a refer. You should make a recommendation in the feedback comments.

#### 4.11 Assessment Referrals by CMI and Centres

Please ensure that internal planning at the Centre allows for the possibility of referrals (for example, where work is sent back for correction and needs to be resubmitted)

- There is a colour-coded system of feedback which is used by CMI markers. The same system is encouraged for use in all Centres that undertake their own marking to adopt:
  - **First** submission: Learner submission is in **BLACK** – CMI feedback is in **BLACK**.
  - **Second** submission is in **BLUE** – CMI feedback is in **BLUE**.
  - **Third** submission is in **RED** – CMI feedback is in **RED**.
- Learners are required to submit entire assessments, **not just the bits they have altered**. Partial submissions will be returned if submitted to CMI for remarking.
- Please ensure work is submitted within the CMI word count guidelines. Check the word count before you mark the work. Work that is over the word count should be returned for editing to the Learner.
- Where the use of English is so unclear as to have prevented you from passing a Learner’s work, please insert this phrase:
  - *“The marker has been unable to award a pass without making assumptions to determine the meaning or intent of the answer. Please edit your work to ensure your answers are clear, and we recommend that the assignment be proofread to ensure clarity of meaning. Please refer to your tutor for support.”*
- If you identify any quality issues or suspect malpractice of any kind, contact your PD and QM to discuss.

#### 4.12 Guidance for Assessment

This section establishes the technical and presentation requirements for Learner assessment submissions to ensure they are suitable for marking and moderation. Centres and Learners must adhere to CMI’s standards regarding.

- **File Format:** Submissions must be in acceptable formats, such as Microsoft Word (.docx), Google Docs (.docs), OpenDocument Text (.odt), or Rich Text format (.rtf). Submissions in other formats, such as PDF, are only permitted in exceptional cases following consultation with the CMI Quality Manager.
- **Word Count:** Learners must comply with the total word count specified on the assessment brief, with a margin of +/- 10%, information regarding reasonable adjustments for assessment, which may include an increased word count, is detailed in the CMI Reasonable Adjustments and Special Consideration Procedure, which can be accessed at Policies - CMI.

- **Evidence Presentation:** Information essential for meeting learning outcomes and assessment criteria must be contained within the main body of the assessment. Appendices and attachments will not be marked or moderated by CMI.
- **Formatting and Content:** Guidance covers the use of tables, graphs and diagrams, which are not included in the word count, and advises that Learners should ensure all answers are in their own words, balancing theory and contextualisation with their own roles and experiences.

For further detailed assessment details, refer to the CMI Assessment Guidance Policy, which can be accessed at [Policies - CMI](#)

### 4.13 Confidentiality and Commercially Sensitive Evidence

Learners must be fully able to incorporate real world evidence into their assessments to effectively demonstrate their competence. When this evidence contains confidential or commercially sensitive information, the Centre is responsible for ensuring that appropriate safeguards are in place. This includes guiding Learners to redact, anonymise, or secure explicit written permission before submitting any sensitive data.

Dealing with commercial confidentiality or security issues of presenting work-based evidence should lie with the Learner and Centre in the first instance; however, CMI has a responsibility to maintain the confidentiality of sensitive information that is presented for marking or moderation purposes, and all CMI Staff involved in the quality assurance process have been trained in GDPR compliance.

Refer to the CMI Qualification Assessment Policy and Guidelines Policy, which can be accessed at [Policies - CMI](#)

### 4.14 E-portfolios or Moderation outside CMI's Moderation System

For the moderation of e-portfolios, the evidence must be signposted by the Assessor in the assessment record. CMI Moderators will return moderation to the Centre for correct signposting before re-submission, where this is not found. When requesting moderation of an e-portfolio, please provide an evidence locator (signposting) document (with links) clearly stating where the following information can be found:

- Learner work/assignment with Learner authenticity statement (sample to be defined by CMI)
- Centre/Learner authenticity statement
- CMI marksheet completed with feedback against each assessment criteria
- Internal quality assurance form for each Learner that has been internally quality assured
- Internal quality assurance sampling plan for the cohort being uploaded

If this information is not signposted clearly, the Centre will be asked to resort to uploading this information to the CMI Moderation Service.

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## 4.15 Audio and Video Evidence

Provision of audio or video evidence should be agreed upon via prior arrangement with the CMI Quality Manager, Marker or Moderator; this includes where this is part of a formal reasonable adjustment / special consideration request. Evidence submitted as audio or video evidence will be considered to be a Centre-devised assessment and will be required to be approved by CMI using the Centre devised application form on CMI Partner Connect. If the Centre is marking, flexible assessment moderation fees may apply. If CMI is marking, flexible assessment marking fees may apply. Please refer to the Partner Fees Guide, which can be accessed at [Qualifications Support](#).

As audio and video files are typically large, it is imperative that Centres clearly signpost all evidence within these submissions to facilitate efficient locating for marking and moderation.

### Requirements:

- Files **must** be time-stamped
- An evidence locator document **must** be provided with the submission.

If the evidence is not clearly signposted, the file will be returned to the Centre. The Centre will then be required to provide a document that more closely locates the evidence for marking or moderation purposes.

**Best Practice:** It is considered good practice to indicate the exact time location within the file where specific CMI assessment criteria (AC) are met.

## 4.16 Centre Record Keeping

Effective assessment record-keeping is an essential requirement for all CMI Centres. The Centre is accountable for maintaining records for audit purposes, and these requirements form part of the Regulatory Agreement between the Centre and CMI. Centres must keep records in accordance with Data Protection requirements for a minimum of three years and make them available for the purposes of resolving any issues arising from external quality assurance or appeals. This includes keeping Learner and assessment records from the date that the Learner has been certificated (or for lapsed or withdrawn Learner(s), the date they should have completed). These actions are required for regulatory compliance purposes and, as such, records must be made available to the Regulatory Authorities upon request.

CMI expects that Centres will retain copies of the assessments and assessment paperwork, in addition to any mapping to the assessment guidelines or learning outcomes, to show that all qualification requirements have been met by Learners and that the assessments themselves are valid, reliable, fair and appropriate.

## 4.17 Retaining Learners' Work

CMI requires Centres to retain Learners' generated work, for each qualification, until CMI has certificated the Learner. CMI advises Centres that the Learners' work/portfolio should be retained intact for six months after certification, in case it is required for auditing purposes. However, the Learner's work/portfolio remains the property of the Learner.

## 4.18 Learner Records

Learner records that the Centre must retain for a minimum of **five years**, or in line with GDPR requirements, include:

- Enrolment records to include:
  - Learner name
  - Date of birth
  - ULN (if established)
  - Contact address
  - Allocated Assessor(s) name
  - Allocated IQA(s) name
  - Date of registration
  - CMI Learner enrolment (P) number
  - Any particular assessment requirements
  - Enrolled in the CMI qualification title and level
  - Progress records, including unit accreditation and qualification completion dates
  - Records of certificates claimed, including unit/credit certificates
  - Details of who claimed the certificate and when

## 4.19 Centre Assessment Records

Assessment records that the Centre must retain for a minimum of three years include:

- CMI assignment brief used by the Learners
- Learners' records that include:
  - Evidence of who assessed what unit, assessment criteria and when (date)
  - Evidence of the assessment decision with feedback
- The location of any supporting evidence (for example, portfolios)
- Centre IQA sampling/feedback records

Assessors and Learners must provide a written declaration or use an electronic 'Click to Declare' that the Learner's evidence is authentic, and that the assessment took place under the conditions or context set out in the qualification and/or assessment documentation. Failure to do this constitutes grounds for the sanction or withdrawal of approval for the qualification/assessment in question.

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## 4.20 Centre Quality Assurance Records

Quality assurance records that the Centre must retain for a minimum of three years include

- IQA records/feedback indicating who quality assured what, when and feedback
- IQA sampling strategy
- IQA sampling plan to include details of the sample selected and its rationale
- Records of IQA standardisation meetings
- Delivery and Assessor support meetings

## 4.21 Evidence of Quality Management of Assessment Records

As part of the quality assurance checks undertaken by the CMI Quality Managers, there is a requirement for Centres to confirm and demonstrate that they have in place the correct management of assessment records. The Quality Manager will sample learning tracking records where possible during a face-to-face quality assurance activity. Where a virtual activity is undertaken, the Quality Manager will request access to the Learner tracking systems virtually. This may involve the sampling of the Centre's MIS system or other suitable systems. Alternatively, if the Centre does not use electronic portfolios, then the CMI Quality Manager may request that the Centre upload the assessment evidence to the Moderation system for further sampling.

## 4.22 CMI Systems (Moderation Portal, Marking System, CMI Partner Connect)

Where Learner and Centre assessment evidence is uploaded to the CMI moderation portal for external moderation, or to the CMI marking system, CMI will be able to access this information as required. This information is stored on a secure cloud-based system with appropriate security and backup.

Where Centres use electronic assessment records and/or e-portfolios, these must be kept in accordance with regulatory requirements, and where assessment records are archived in the 'cloud', then access for 3 years must be assured.

## 4.23 Notification of Loss of Assessment Records

CMI expects all Centres to retain assessment records in a secure location that prevents fire, theft, and loss, damage or other circumstances.

All Centres are required to inform CMI if any assessment records are put at risk. This includes any natural disaster, fire, theft, loss, damage or other circumstance which places the existing accommodation or secure storage of assessment records at risk.

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## Section 5 - Assessment of CMI Qualifications

### 5.1 Quality Assurance Coordination

The aim is for Learners to achieve true competence. This enables them to demonstrate skills, knowledge and understanding and show an ability to transfer these to a variety of situations. The defined learning outcomes and assessment criteria within the CMI units are used in the assessment of Learners at work and the structure of the qualifications. This then enables the Learner to build units of competence to gain a full qualification.

### 5.2 Quality Assurance Structure

There are specific roles within the quality assurance process between CMI and its Centres. Please see the chart below -

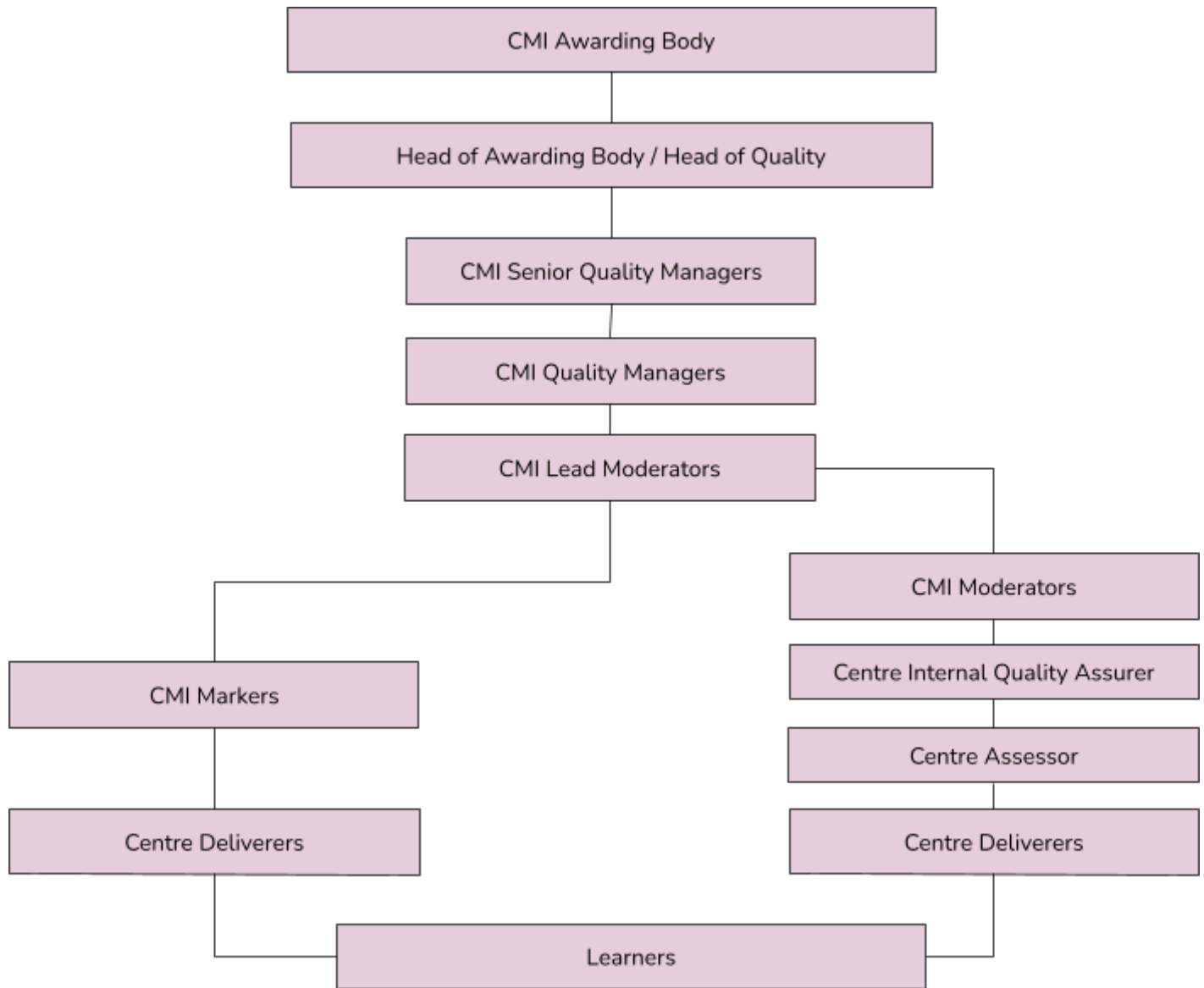


Figure 1 - Quality Assurance Process

### 5.3 Internal Quality Assurance

The Internal Quality Assurer is responsible for ensuring that the internal assessment processes at the Centre are fit for purpose, guaranteeing all assessment decisions are valid and consistent through risk-based monitoring and sampling of Learner work and Assessor performance. This critical role also involves guiding and supporting Assessors, conducting standardisation meetings, maintaining compliant records, and effectively managing internal communications. The Internal Quality Assurer must **not** quality assure any evidence that they have personally assessed, and their approval is a prerequisite for the Centre to submit claims for certification.

## 5.4 Internal Quality Assurance of Centre-Devised Assessment Briefs

CMI provides assessment briefs for the majority of CMI qualifications. When fully approved, Centres adopt a CMI assessment brief or create a Centre-devised brief; these **must** be formally submitted to and approved by CMI before being issued to Learners or used for any assessment. The principal purpose of an assessment brief is to give clear instructions to the Learner as to what is expected and how the brief matches the learning outcomes and assessment criteria. CMI Centre assessment briefs should be written by someone familiar with the occupational areas being assessed, agreed with CMI's assessment specialist and approved by the Centre's Quality Manager.

CMI Centre-devised assessment briefs must be internally quality assured before they are issued, as this will ensure:

- The tasks and evidence produced by the Learner match the learning outcomes and assessment criteria
- Learners' roles and tasks are vocationally relevant and appropriate to the level of the qualification
- Equal opportunities are incorporated
- CMI Centre assessment briefs are clear and use accessible language

## 5.5 Quality Assuring the Assessment Process

The primary goal of quality assurance is to standardise assessment decisions and processes across all CMI Centres, ensuring that Assessors apply consistent judgements.

To achieve this, all CMI Centres must establish clear procedures for quality assurance activities, including:

- Implementing and following a procedure for sampling the work of Assessors and Learners
- Standardising Assessors' judgements and the quality of their documentation.
- Identifying problem areas and inconsistencies, and dealing with them promptly.
- Ensuring compliance with CMI requirements and the appropriate assessment strategy, which includes submitting Learner work for moderation.

Centres must provide robust and objective feedback to Assessors. The Internal Quality Assurer is responsible for ensuring that this written feedback is recorded. This can be done on a Centre-specific IQA feedback form, or Centres can use the CMI Centre IQA Feedback form, which can be accessed at [Partner Support and Guidance](#). Precise, focused comments on the assessment undertaken are essential to supporting the Assessor's development and evidencing the rigour of the quality assurance activity, meaning IQAs must avoid generalised statements. The IQA is also required to check the unit(s) identified in the sampling plan.

## 5.6 Internal Quality Assurance Rationale

A robust and effective IQA system must be founded on a clear rationale that articulates the purpose of IQA within the Centre. This rationale serves to meet CMI's requirements as an Awarding Body, safeguard the credibility of CMI qualifications and maintain the Centre's reputation. Establishing this rationale ensures all IQA practices and

assessment activities are fundamentally **robust, safe, valid, fair** and **reliable**, thus setting the essential foundation for the subsequent IQA strategy.

## 5.7 Internal Quality Assurance Strategy

The IQA strategy is a working document and the starting point for all of the IQA activities to be undertaken at the Centre. It should be based on the rationale and built around the risk factors identified at the Centre (This will be an ongoing process that is regularly reviewed). A risk-based sampling strategy should be used alongside other methods of sampling rather than being a separate type of sampling. Having an IQA strategy in place will help to ensure the Centre has effective plans in place that clearly identify what will be monitored and that the systems to be used for monitoring are fit for purpose.

There are several different sampling methodologies that can be used by the Internal Quality Assurer when undertaking their approach to internal quality assurance.

- **Horizontal sampling** - Sampling something from several or all units or learning outcomes from one Learner.
- **Vertical sampling** - Sampling one unit or learning outcome across Assessors or assessment locations.
- **Diagonal sampling** - Sampling across units and Learners/Assessors to get a broader picture of the overall quality of the assessment judgements being made across a cohort or qualification.
- **Thematic sampling** - Sampling based on a particular assessment activity.
- **Risk sampling** - Sampling based on actual or perceived risks to the assessment process.

A typical IQA strategy will include the following:

- Which assessment methods will be used? This will often go beyond just written assessments and include the assessment of;
  - work-based evidence,
  - The assessment of other product evidence, for example, project proposals, briefing papers, reports, personal/professional development plans, reflective logs, portfolios, etc.
  - the assessment of presentations, blogs, metaverse activities, and participation in simulation activities,
  - professional discussions
  - observations
  - witness testimonies
- The strategy will also consider whether these methods are **robust, safe, valid, fair** and **reliable** and how the methods will be monitored in the IQA processes. Will monitoring take the form of sampling assessed Learner's work and the associated assessment documentation, or is there a requirement to observe Assessors during assessment practice? It is useful to include the type of assessment that will be sampled in the sampling plan, for example, an observation or professional discussion may require the IQA to observe the assessment judgements.

- Who are the Assessors and IQAs, their experience, their workload, and which qualifications they will be involved with? More experienced Assessors can be monitored less frequently than new Assessors. A percentage of sampling is usually agreed upon, which might be 15%, 50% or 80 - 100% depending on the experience of the Assessor and other risk factors. It is good practice to use a RAG rating for Assessors as follows:
  - Assessor Rated **Green** – up to 15%
  - Assessor Rated **Amber** – up to 50%
  - Assessor Rated **Red** – 85% - 100%
- Do Assessors need to make adaptations to assessment methods for Learners with special requirements, and if so, what will these be? (Remember, you will need to gain permission from your CMI Quality Manager to change the assessment methods.)
- An outline of the documentation Assessors and IQAs will use, where records of decisions will be kept, ensuring adherence with CMI requirements and GDPR.
- How often will team meetings, standardisation activities and training sessions take place, and who is expected to attend?
- All other risk factors that will have an influence on the monitoring of assessment practice.

## 5.8 IQA Risk Factors

Below are some examples of risks; this is not an exhaustive list.

- **Assessor-related risks** - a lack of confidence or experience in making assessment decisions, under or over-assessing by Assessors, Assessors not keeping CPD up to date, using leading questions in professional discussions or observations, incorrect assessment methods used, poor feedback to Learners, speed and pace of assessments, incorrect or misunderstood assessment criteria, time pressures and targets, the use of unreliable evidence for example, witness testimonies.
- **Learner-related risks** - Learners' lack of confidence or resistance to being assessed, Learners' needs not being taken into consideration, plagiarism or collusion, incorrect or misunderstood assessment criteria, time pressures and targets.
- **Centre-related risks** - Moderation report recommendations not being acted upon, lack of or poor standardisation activities at the centre, leading to differences in assessment practice, unsuitable environment for assessment, changes to qualifications, standards, documents, procedures and policies - centre needs to ensure all of these are communicated across the IQA and assessment team, high staff turnover leading to frequent changes of Assessor and inconsistency in practice, problem units or ACs identified in IQA process.

As the person responsible for the quality of assessment, Internal Quality Assurers need to actively manage the performance of their team. This means monitoring what they do as individuals and giving them feedback where necessary. There are two reasons for this:

- 
- Monitoring performance is a way to ensure the assessment decision is applied consistently and is a fundamental part of the quality assurance process.
  - Giving feedback on performance is part of developing and supporting a team. Appraising performance on a regular basis and giving positive and negative feedback will enable the Internal Quality Assurer/IQA and Assessors to pinpoint areas for improvement. As a result, the Internal Quality Assurer/IQA will be able to formulate and agree on development plans with Assessors.

Once the risks have been identified, robust IQA sampling plans and tracking sheets can be put in place.

Below is an example of a Sampling Plan; however, Centres are encouraged to develop their own sampling plan bespoke to their Centres.

**EXAMPLE - IQA Sampling Plan and Tracking Sheet**

**Centre:** XYZ Training Ltd

**Qualification:** CMI Level 5  
Certificate in Management and  
Leadership (5C30)

**Assessor:**  
Peter Smith  
**RAG Status:** Green

**IQA:**  
Robert Jones

**Sampling period:**  
Jan-Dec 2024

**Learner &  
Location**

**Unit - 501**

**Unit - 502**

**Unit - 525**

**Unit - 526**

**P012345**  
**R White**  
X Company

**Planned:** Feb 2023  
**Actual:** 20/02/2023  
Observation

Not Sampled

**Planned:** June 2023  
**Actual:** 03/06/2023  
Assignment

Not Sampled

**P023456**  
**P Green**  
X Company

Not Sampled

**Planned:** May 2023  
**Actual:** 21/05/2023  
Product  
(work-based)  
evidence

Not Sampled

**Planned:** June 2023  
**Actual:** TBC  
Assignment

**P034569**  
**J Pink**  
Y Company

Not Sampled

**Planned:** November  
2023  
**Actual:** TBC  
Assignment

**Planned:** June 2023  
**Actual:** TBC  
Product  
(work-based)  
evidence

Not Sampled

**P056789**  
**S Orange**  
Y Company

**Planned:** Jan 2023  
**Actual:** 28/01/2023  
Assignment

Not Sampled

Not Sampled

**Planned:** August 2023  
**Actual:** TBC  
Observation

## 5.9 Centre Assessment and Quality Assurance Process Summary

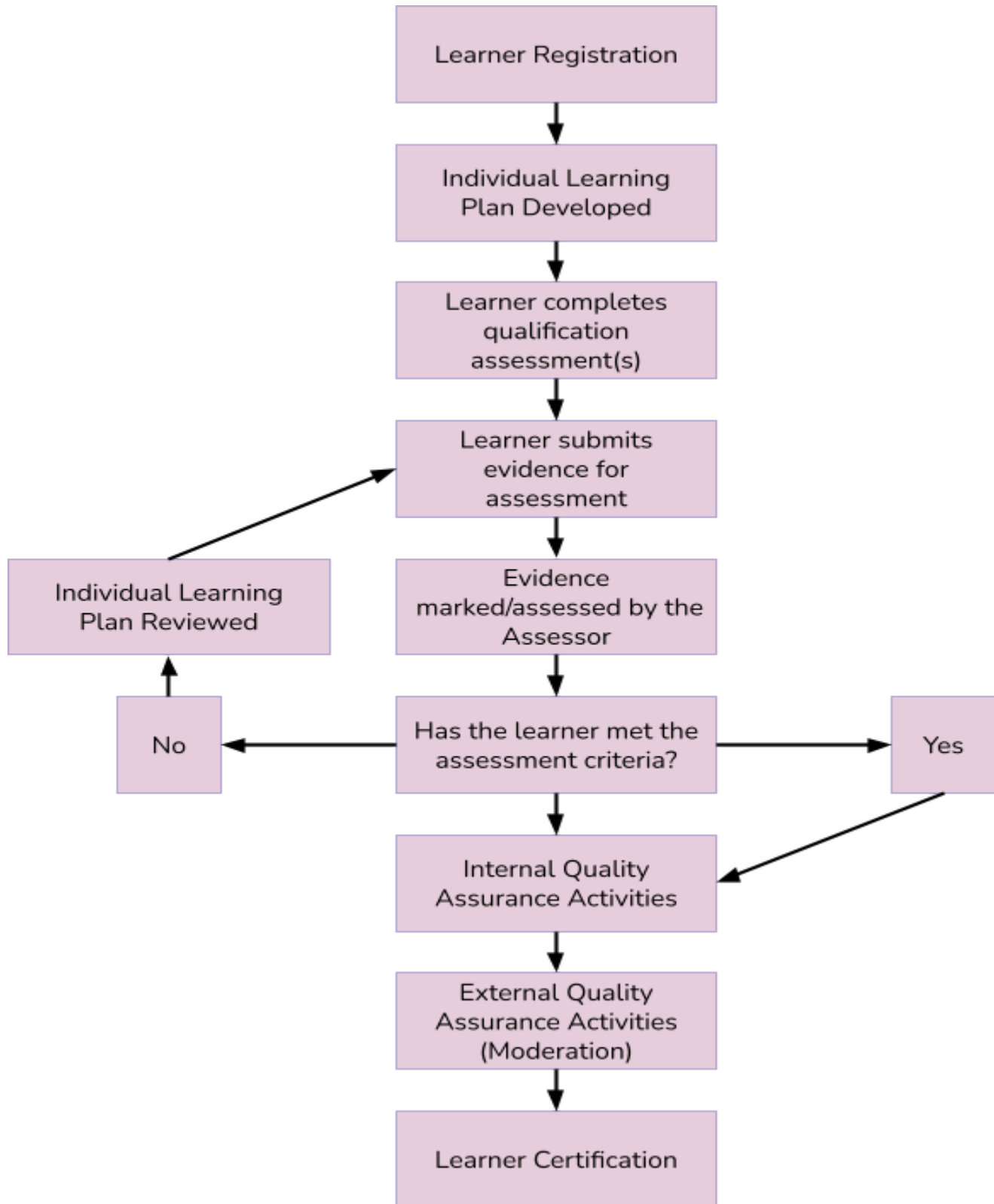


Figure 2 - Assessment and Quality Assurance Process

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## 5.10 Internal Quality Assurer Responsibilities

The Internal Quality Assurer works with the Assessor to maintain the quality and integrity of the Centre's assessment processes. The IQA's key responsibilities include:

- Guiding, supporting and actively monitoring and assessing the development of Assessors.
- Conducting both formative and summative quality assurance and leading standardisation meetings.
- 
- Answering queries and supporting Assessors on all matters relating to the assessment and quality assurance process, including special consideration and simulations.
- Meeting CMI requirements and ensuring that CMI Centre policies and procedures are adhered to, and are monitored and evaluated regularly.
- Storing and recording completed assessments for the quality assurance process.

## 5.11 Internal Quality Assurer Management of Assessor Performance

The Internal Quality Assurer (IQA), as the individual responsible for the quality of assessment, must actively manage the performance of their Assessor team by monitoring their work and providing necessary feedback. This management function serves two critical purposes:

- **Consistency and Quality Assurance:** To ensure that all assessment decisions are applied consistently, which is a fundamental part of the quality assurance process.
- **Team Development:** To develop and support the team by regularly appraising performance, providing positive and negative feedback. Enabling Assessors to pinpoint areas for improvement and allowing the IQA to formulate and agree on development plans.

## 5.12 Effective Internal Quality Assurer Feedback

Internal Quality Assurer feedback provided to Assessors must follow the same principles as Assessors giving feedback to the Learners, ensuring it is constructive, objective, and focused on development.

Key principles for IQA feedback include:

- **Two-Way Partnership:** Establish feedback as a collaborative, two-way process by encouraging Assessors to ask questions and provide feedback to the IQA, fostering a shared goal of improving the overall quality of assessment. **Positive Reinforcement:** Always include positive feedback to identify any areas of good practice, giving appropriate credit for strong performance.
- **Development Focus:** Encourage Assessors to take the lead in identifying areas for development by having them discuss:
  - Their perceived strengths and weaknesses in assessment.
  - Any areas where they experience difficulties.
  - Aspects of their performance that they feel were particularly successful.

- **Objectivity and Observation:** Use any observations of performance as the basis for giving feedback, adhering strictly to the facts of what was observed, especially when delivering negative feedback.
- **Record Keeping:** Maintain accurate records of all contacts and feedback provided to Assessors.

### 5.13 Identifying Inconsistencies

Internal Quality Assurers (IQAs) are required to systematically review assessment judgements by considering the following critical questions to identify potential inconsistencies and ensure quality:

- Was the assessment planned in detail with the Learner to maximise their chances of success?
- Has the Assessor made the judgement based on enough evidence to meet the assessment criteria?
- Has the Assessor made the best use of the assessment methods available?
- Has the Assessor used the right assessment methods?
- Does the way in which the evidence has been presented make it easy to find and understand?
- Can I be sure that the evidence has been produced by the Learner and only by them?
- Is this a safe judgement on the Assessor's part?

The IQA must also confirm that the Assessor has applied the core assessment principles of 'VACSR':

- **Valid** - Covers all relevant content and sets out to confirm Learners' understanding.
- **Authentic** - verifies it is the Learner's own work and checks cognitive understanding is sufficient.
- **Current** - Is the content relevant or up to date
- **Sufficient** - assessment must be fit for the Learner, learning and level
- **Reliable** - the assessment is replicable and consistent

A "yes" answer should be the aim for all questions. A "no" answer will immediately alert the IQA to possible areas of inconsistency and the need for corrective action.

## 5.14 Managing Communication in the Centre

The Internal Quality Assurer (IQA) is responsible for ensuring effective communication flows throughout the quality assurance and assessment process, encompassing Assessors, Centre management and CMI.

Managing communication is about...	This means...
<p><b>Management Support and Reporting</b> Gaining the support of senior management and keeping them informed of Centre practices and procedures.</p>	<ul style="list-style-type: none"> <li>Formally reporting on any changes or modifications to roles and responsibilities.</li> </ul>
<p><b>Policy Understanding</b> Ensuring Assessors and the management team understand all CMI and Centre policies and procedures, and their implications.</p>	<ul style="list-style-type: none"> <li>Setting out a formal policy for internal quality assurance, including reporting arrangements and your sampling strategy.</li> </ul>
<p><b>Assessor Engagement and Transparency</b> Keep in regular contact with Assessors and ensure they are fully informed about their duties regarding fair assessment practices and grievance procedures.</p>	<ul style="list-style-type: none"> <li>Having a robust Assessor induction process.</li> <li>Making time for reviews with Assessors.</li> <li>Evaluating Assessor satisfaction.</li> <li>Devising an effective sampling strategy.</li> </ul>
<p><b>Uphold CMI Compliance</b> Maintaining effective communication with CMI.</p>	<ul style="list-style-type: none"> <li>Notifying CMI's Quality Manager immediately of any changes to the Centre structure, staffing, and resources.</li> <li>Retaining records of all communication with CMI.</li> </ul>

## 5.15 Sampling and Documentation

When selecting the monitoring sample, the Internal Quality Assurer (IQA) must take into account safety, confidentiality, security and any additional organisational requirements that could be affected by their presence. Any potential issues must be discussed with Assessors before arranging to monitor them.

The review must include the quality and accuracy of assessment plans (including review and feedback) and Assessor records. The IQA should also observe each Assessor's assessment practice and interpersonal skills, identifying areas where guidance or further development may be required.

The IQA must identify and record any problematic areas (for example, within the qualification) that may present challenges for other assessors. These should be documented and incorporated into the Assessor's individual development plan.

## 5.16 Internal Standardisation

CMI considers it good practice for Centres to conduct regular standardisation exercises with Tutors/Assessors and Internal Quality Assurer (IQA) Staff to ensure that all work at the Centre has been assessed to the same standard.

- **Responsibility:** The IQA is responsible for internal standardisation and takes responsibility during the session for ensuring a single approach and standard is achieved. If a disagreement arises, the IQA will have the final say. In large Centres, a Lead Internal Quality Assurer is suggested.
- **Procedure:** For standardisation, Assessors must select common pieces of work, mark them, and discuss and reconcile any differences between interpretation and marks awarded during an internal standardisation session, in which all Assessors must participate.
- **Training:** The IQA must ensure that training includes the use of reference and archive materials, such as work from previous moderation, as appropriate.

### Regular Team Meetings

Regular team meetings are essential to support internal standardisation and quality management. A standard agenda template should be produced to ensure:

- Standardisation is reviewed for each CMI programme.
- New Staff are informed/trained on relevant CMI processes.
- Regular updates from CMI are shared with teams.
- Attendance at any relevant CMI events, such as webinars, etc., is encouraged.
- Assessment and IQA schedules are discussed to ensure the programme adheres to the planned schedule.
- Any quality reviews, such as QM activity reports or moderation reports, are shared with the team.
- The annual QA cycle includes feedback from Learners and the programme reviews identify any areas for improvement. This process should then be used to inform future planning and delivery of programmes and must be recorded.
- Meetings have recorded minutes, which can be viewed by a Quality Manager/Auditor during a quality assurance activity.
- Minutes show any actions needed, who is responsible, and clear deadlines, which are reviewed at the next meeting.

# Section 6 - External Quality Assurance Methods of CMI Qualifications

## 6.1 CMI Moderation

CMI is committed to the provision of a duty of care to its Learners and to ensuring that moderation undertaken by CMI effectively determines whether or not:

- The assessment remains fit for purpose.
- The criteria against which Learners’ performance is differentiated are being applied accurately and consistently by Assessors in different CMI Centres, regardless of the identity of the Assessor, Learners, or CMI Centre.

Regulations require CMI to conduct a moderation exercise to maintain the integrity of the CMI qualifications.

Furthermore, regulations guarantee that CMI can make any necessary changes to a CMI Centre’s marking of evidence generated by a Learner in an assessment. CMI makes such a change whenever it is considered necessary to ensure the assessment remains fit for purpose and that criteria are applied accurately and consistently.

Moderation is another means by which CMI quality assures Centre assessment decisions. Each Quality Manager supervises and is supported by a team of Moderators, Markers and Lead Moderators. Each Moderator (or Marker where required) will be allocated to a Centre to ensure consistency of approach.

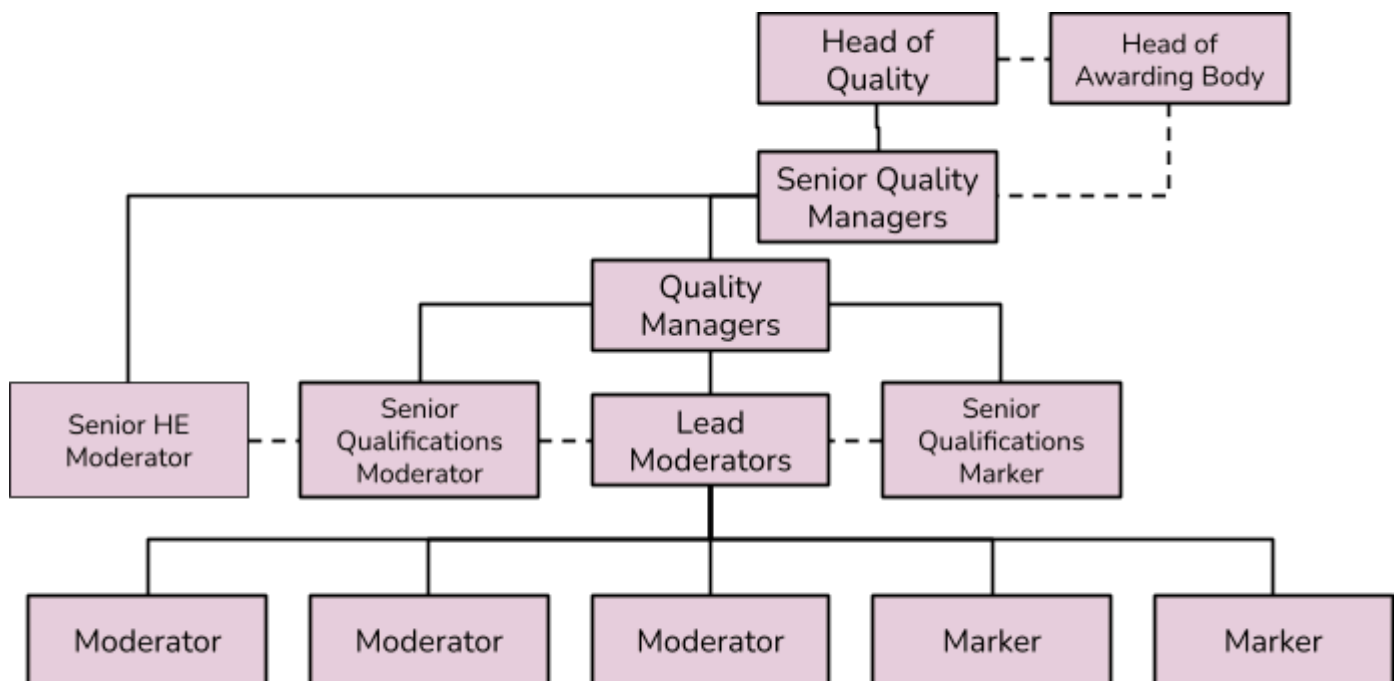


Figure 3 CMI Quality Assurance Organisation Chart

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## 6.2 Moderation Guidance and Submission Guidelines

Centres are required to submit Learner assessments for moderation via the CMI Moderation system, which is accessed within MyCMI, CMI's online system.

Where a Centre has developed Centre-devised assessment methods (please refer to [Section 4.5](#)) and the assessment is by portfolio, presentation, role play, or integrated work activities, this will require alternative arrangements. In this instance, please contact your Quality Manager.

### Virtual Access for Moderation

Moderation may also occur through CMI Moderators accessing a Centre's virtual learning environment or other secure file-sharing systems. In this instance, the Centre must:

- Arrange IT access well in advance of the moderation requirement.
- Provide an evidence locator document.
- Provide administrative support in case problems are encountered.

### Exceptional Hard Copy Submission

Under exceptional circumstances, assessments can be posted to CMI for moderation. However, the Centre must ensure only copies are sent, and not the original, and these should always be sent by recorded delivery.

### Moderation Submission Timeline

CMI Centres should submit the Learner's work to CMI for marking or moderation within a reasonable and practical timescale of that work being submitted by the Learner to the Centre (and, where relevant, assessed and internally quality assured);

Failure to submit Learner work within the timescales below may constitute maladministration. Please refer to the CMI Malpractice and Maladministration Policy and Procedure, which can be accessed on the [CMI Policies Webpage](#).

### Timescales

- For **Approved EPP Centres using the CMI Moderation Service**, moderation claims for a unit **must** normally be made within 1-3 months after the Centre has completed the unit assessment and internal quality assurance (IQA) processes.

As a matter of best practice, Centres should aim to complete both assessment and IQA within 2 - 3 months of Learner submission. Delays beyond this point may adversely affect the reliability and validity of assessment decisions and may disadvantage the Learner.

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Any deviation from this is at the discretion of the designated CMI Quality Manager. If the deviation is not agreed in advance, proportionate actions and/or sanctions may be applied to the Centre.

- **For Registered and Approved EPP Centres using CMI External Marking Service**, this **must** normally be within 1-3 months of receiving the Learner's completed assessment.

Any deviation from this is at the discretion of the designated CMI Quality Manager and may result in actions/sanctions being taken against the Centre.

- **For HE Dual-Accredited Centres using the CMI Moderation Service**, CMI moderation will normally take place within 1–3 months following completion of the Centre's examination board.

Recognising that assessment timelines are governed by Higher Education regulations and examination board schedules, Centres are expected to complete assessment and IQA in accordance with their institutional assessment regulations and approved examination board schedules.

Any deviation from this expectation is at the discretion of the designated CMI Quality Manager. If the deviation is not agreed in advance, proportionate actions and/or sanctions may be applied to the Centre.

In addition, all Learner work must be submitted for marking or moderation with CMI at least 2 months before the qualification certification end date. These dates can be found within each of the Qualification Syllabus or within the CMI Qualification List.

### **6.3 Centre Assessment Standards Scrutiny (CASS)**

In February 2020, Ofqual introduced new Conditions that required awarding bodies to put in place Centre Assessment Standards Scrutiny (CASS) arrangements for all assessments where that awarding body allows assessment decisions to be made by Centres.

CASS refers to the arrangements CMI has in place with its Centres to check assessment decisions for Centre-marked assessments. It covers the type of checks that happen before results are issued, which are often referred to as Moderation, and those that happen on an ongoing basis and could happen before or after results are issued. It draws together other processes that support this, such as the way CMI decides which Centres can mark assessments on its behalf, how it monitors these, how it decides whether to scale its controls up or down and what action it might take if it discovers an issue with Centre marking.

There are many different types of qualifications and assessments delivered by CMI across a variety of Centres. CMI has implemented the most appropriate strategy for the qualifications it delivers using a risk-based approach.

The Regulators expect CMI to consider a range of factors and to develop a strategy to manage the different risks that apply, to secure the standards of assessments that are marked by Centres.

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## 6.4 CASS Approach: Development and Rationale

For the majority of qualifications that include Centre-marked assessments, CMI considered and decided on an approach that fits the organisation and qualifications based on a range of factors. This incorporated a range of controls and involved both pre and post-results checks on Centre marking, as well as different forms of Centre monitoring, such as remote or face-to-face quality assurance activities and checks.

When planning the CMI CASS approach, a range of factors were considered. These included:

- whether the qualification is sessional or roll-on/roll-off
- The typical amount of time a Learner will take to complete the qualification
- The type of Learners who usually take the qualification
- the assessment model
- the number of components in the qualification and the number of these that are marked by a Centre
- the type of evidence generated by a Learner in assessments for the qualification
- the number of Learners taking the qualification

This enabled CMI to develop the CASS to help decide:

- the frequency and type of monitoring which CMI conducts
- the timing of the monitoring activities
- the number of components within a qualification that are sampled
- The period over which all components for a qualification are sampled
- the number of Learners sampled
- whether sampling activities take place before and/or after results are received by some or all Learners
- whether the activities will inform further changes to processes, require a reassessment of Learners who have not received results or revoke certificates that have already been issued.

## 6.5 Moderation Fulfilment and Sampling Strategy

In line with CASS, Moderators will look at a representative sample of Learner work in order to assess the accuracy and consistency of the assessment decisions made by the Centre. To select a representative sample, the strategy will take into account different factors, which may impact the quality of the assessment. These factors are used to define a sampling strategy. The sampling strategy determines the size of the sample and enables value judgements to be made.

The basis of any quality sampling strategy will be based on several factors, such as previous sampling (this should then indicate the size of the sample), Staff, Learner numbers, sanctions applied, referral rates, compliance and risk factors. If the Moderator finds the Centre's internal assessment and quality assurance process is not effective and/or performed with absolute integrity (for example, submitting Learners whose work does not justify a pass), then the Moderator will increase the sample size.

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Moderators will check the selected sample in several approaches:

- By checking the Centre-marked assessment for a selected Learner to ensure that the assessment is appropriate, consistent and complete.
- By checking specific assessment criteria/learning outcomes across several Learners and across several units to ensure that assessment is consistent for all Learners on any given qualification.

The level of sampling will depend on relevant risk factors associated with that Centre, built around predetermined sampling requirements. However, the level is flexible enough to allow changes and overrides in the sample to meet specific needs. This includes the ability for the Moderator, Lead Moderator, Quality Manager and the Awarding Body Team to increase/decrease the sample sizes as required. Any change in the sample size must be approved by the Quality Manager in the first instance.

This model will be based on a sampling strategy that focuses on the number of unit completions of certain qualifications that a Centre submits. Once this sample has been chosen (either manually or by the system), CMI will then request that the Centre upload the relevant work of the chosen sample and any associated assessment and internal quality assurance documents so a moderation sample can be taken. This means that CMI chooses the sample and informs the Centre, rather than the Centre providing CMI with its own chosen sample. The model allows CMI to choose the sample where a robust representative sampling strategy can be applied, which takes into consideration the following:

- **Learners** - A selection of Learners (**not** based on gender, age or ethnicity)
- **Units** - cross-sample of units from the qualification (where there is a large number of Learner submissions, the system should cover all the units within the qualifications, so a full representation of units has been sampled)
- **Learning outcomes and assessment criteria** - as appropriate to the context in which the CMI qualification is delivered/assessed
- **Centre Assessors** - assessment decisions made by a range of Centre Assessors, with different experience and qualifications, workload, and occupational experience
- **Centre Internal Quality Assurer** - units sampled by the Centre's IQA(s)
- **Marker-to-Learner ratio** - (for example, if one Marker marked the majority of the units within a qualification, this should be reflected in the Learners in the sample)
- **Conflicts of Interest** - any Learners where there is an associated Conflict of Interest/Personal Interest should be included
- **Range of assessment methods** used by the Centre - assessments, Questioning, Recognition of Prior Learning (RPL), Professional Discussion
- **Satellite Centre** (Important for international CMI Centres\*)
- **Grades** - Selection of grades awarded when dual accreditation occurs (HE Partners)

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\*Where a Centre has multiple international satellite Centre provisions, the moderation system will consider that there will be a requirement to include a sample from each of the satellite Centres as part of the sampling requirement. However, this sample can focus on one satellite per sample or a sample from across satellite Centres.

For HE moderation, the sampling strategy may include:

- Learners with compensated results
- Learners with RPL
- Learners who have been deferred or referred, to enable these Learners to be factored into the sampling size and captured in the moderation report. Therefore, once those Learners have been awarded all the modules mapped at an exam board, and the Centre has confirmed the result with the CMI moderator, claims can be raised in the CMI moderation system without the need for sampling.

The Quality Manager has the authority at any time to increase and/or decrease the moderation sample size/percentage required to be submitted by the Centre. An increase in moderation may be due to one or more of the following factors:

- The standard of assessment decisions within the CMI Centre does not meet CMI requirements.
- The CMI Centre is submitting Learners' assessments for a newly approved qualification for the first time.
- A new Assessor or Internal Quality Assurer within a CMI Centre.
- Conflict of Interest or Personal Interest.
- Part of a CMI audit, including malpractice or maladministration investigations.
- Part of a Centre activity by a Quality Manager or Moderator.
- Quality issues in teaching, learning and assessment.
- Non-completion of actions against ongoing approval.

A decrease in moderation may be due to one or more of the following factors:

- The standard of assessment decisions within the CMI Centre consistently meets CMI requirements for the programme.
- The volume of Learners submitted for moderation is very high, in which case a reduced sampling plan may apply for logistical reasons.
- An international sampling plan applies across multiple satellites in which the main Centre is directly responsible for multiple satellites.

CMI's moderation sampling strategy, in line with the regulator's CASS requirements, ensures that moderation will take place continuously until a sufficient sampling amount has been reached within that quarter for any particular Centre. After a sufficient set amount of moderation has taken place, known as 'Moderation Fulfilment', then the sampling will cease for that Centre until the next quarter (referred to as a 'helicopter' approach). Quarter periods are set to fall in line with the regulator's reporting periods; however, CMI can increase sampling based on risk.

- Qtr 1 - 1 April - 30 June
- Qtr 2 - 1 July - 30 September
- Qtr 3 - 1 October - 31 December
- Qtr 4 - 1 January - 31 March

The system will review at the start of each quarter the Centre's current registration volume for each of the qualifications on the Centre's approved qualification remit. Depending on the risk rating of the particular qualification (Set by the Quality Manager), it will assign a sampling size of Learner assessments that it will require the Centre to submit for moderation during that period. After a sufficient set amount of moderation has taken place and Moderation Fulfilment has been achieved, then the sampling will cease for that Centre until the next quarter; however, the Centre can still claim for Learners. Where the moderation process identifies issues with the Learner(s) assessments, Centre's assessment or internal quality assurance process, then the Quality Manager may increase the amount even if the determined sample amount has been reached within any given period.

## 6.6 Stages of Moderation

The system is broken down into several key stages.

- **Centre - Claim Creation** - The Centre creates a claim, System creates a sample selection based on a qualification risk algorithm associated with the qualification\*.
- **Moderator - Review Sample Selection** - Notification to the Moderator, review sample chosen, agree or override sample selection
- **Centre - Document Upload or if agreed, provides access to e-portfolio, Moodle, etc** - Notification to the Centre requesting the sample evidence is uploaded to the system
- **Moderator** - Notification to the Moderator that the Centre has uploaded evidence or provided a URL
- **Moderator - Pre-Moderation Check** - The moderator logs on to the system and reviews that they can open the documents and to check that no documents are missing (No moderation at this stage)
- **Moderator** - If missing documents, the Moderator return to the Centre with a note
- **Centre - Missing Document Upload** - Centre upload missing documents
- **Moderator - Pre-Moderation Check** - Notification to Moderator that missing documents are ready
- **Moderator - Moderation** - Undertakes moderation, completes the moderation report, makes the moderation decision, sets actions if required
- **Centre** - Moderation Report available if the moderator agrees with the Centre assessment and internal quality assurance decision.
- **Lead Moderator & Quality Manager** - Reviews any return to Centre decisions.

- **Lead Moderator** - Agrees or overturns Moderators' decisions, with the potential to select an additional sample.
- **Centre** - Completes any return to Centre moderation actions.

## 6.7 Process Flowchart

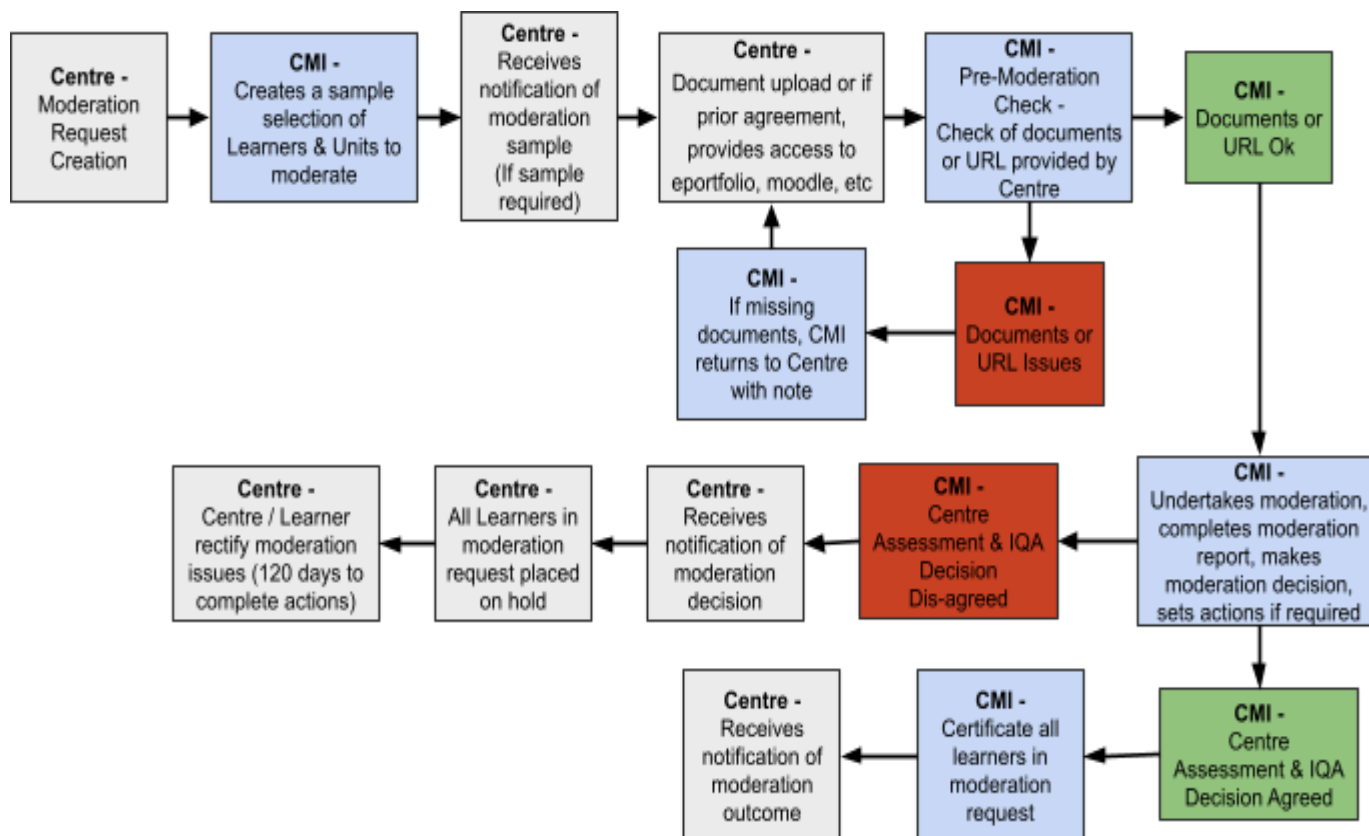


Figure 4 Moderation Process Flowchart

## 6.8 CMI Moderation Sampling Size

The moderation sampling strategy is standardised across all CMI qualifications regardless of type or subject, with the specific required sampling amount dynamically adjusted based on the qualification's assigned risk level.

### Learners/Units selected by CMI for Sampling

CMI may select, as part of the moderation process, Learners and units that have not gone through the Centre's own internal quality assurance process. Where a Learner/unit has been selected by CMI that has not gone through the Centre's own IQA process, then there is no requirement to provide IQA feedback sheets for that particular Learner/unit/assessment activity. However, evidence of an IQA sampling plan would be required to indicate what Learners and units, assessment activities are planned to be sampled or not be sampled, in line with the Centre IQA sampling strategy.

Where a Learner/unit/assessment activity has been sampled by the Centre's IQA, then the appropriate IQA feedback sheet and sampling plan would be required to be submitted as part of the moderation process, to validate the IQA decision of the assessment activity.

**Low-Risk qualification sampling** - Sampling amount for all levels of qualifications regardless of qualification type, subject, etc, per quarter.

Total Unit Volume Claimed for the Quarter	Total Units required to be sampled during the Quarter			
	Award	Certificate	Diploma	Extended Diploma
<b>1 - 100 Units</b>	1 different unit x 3 Learners	2 different units x 3 Learners	3 different units x 3 Learners	4 different units x 3 Learners
<b>101 - 249 Units</b>	1 different unit x 4 Learners	2 different units x 4 Learners	3 different units x 4 Learners	4 different units x 4 Learners
<b>+ 250 Units</b>	1 different unit x 5 Learners	2 different units x 5 Learners	3 different units x 5 Learners	4 different units x 5 Learners

**Medium-Risk qualification sampling** - Sampling amount for all levels of qualifications, regardless of qualification type, subject, etc, per quarter.

Total Unit Volume Claimed for the Quarter	Total Units required to be sampled during the Quarter			
	Award	Certificate	Diploma	Extended Diploma
<b>1 - 100 Units</b>	1 different unit x 6 Learners	2 different units x 6 Learners	3 different units x 6 Learners	4 different units x 6 Learners
<b>101 - 249 Units</b>	1 different unit x 8 Learners	2 different units x 8 Learners	3 different units x 8 Learners	4 different units x 8 Learners
<b>+ 250 Units</b>	1 different unit x 10 Learners	2 different units x 10 Learners	3 different units x 10 Learners	4 different units x 10 Learners

**High-Risk qualification sampling** - Sampling amount for all levels of qualifications, regardless of qualification type, subject, etc, per quarter.

Total Unit Volume Claimed for the Quarter	Total Units required to be sampled during the Quarter			
	Award	Certificate	Diploma	Extended Diploma
1 - 100 Units	All units from all Learners			
101 - 249 Units				
+ 250 Units				

## 6.9 CMI Moderators Feedback

### Approved Centres

CMI Moderators provide feedback to the Centre regarding Assessor decisions, IQA processes and outcomes, assignment briefs and Learner work. The Moderator will only sign off Learner results for certification if all assessment decisions meet CMI standards. The Quality Manager has sight of all Centre documentation and Moderator feedback.

Some CMI Centres may optionally choose to send in one unit per qualification for the CMI External Assessment team to mark as a quality stamp of approval. The Centre can then use this as a basis to standardise its internal marking on this unit.

### 6.10 External Assessment for Registered Centres

For a Registered CMI Centre, the full responsibility for the assessment and quality assurance of Learner work is undertaken by CMI. This process is used when a Centre does not have the internal infrastructure for an Assessor and/or Internal Quality Assurer (IQA). Fully approved Centres can also opt to have their Learner work marked externally by CMI. Please refer to the CMI Fees for marking charges, which are published in the [Qualification Support](#) section on [My CMI](#).

The external assessment process for assessments submitted to CMI operates as follows:

- **Marking:** Learner assessments are externally assessed by CMI Associates in marking roles.
- **Moderation:** The marked assessments are subsequently moderated by the Lead Moderators.

## 6.11 Returned Moderation Submissions

When a Learner's submission for moderation is unsuccessful, either due to the assessment criteria not being met or a submission being incomplete (for example, missing required documents or evidence, the Moderator will make a referral, which is returned to the Centre with accompanying feedback.

The Centre must follow a clear process for handling referred submissions:

- **Review and Support:** The Centre must review the Moderator's feedback and provide support to the Learner in making all necessary changes to the submission.
- **Internal Quality Assurance:** The revised Learner submission must go through the Centre's internal assessment and quality assurance process before it is prepared for resubmission.
- **Document Upload:** The Centre must upload the second Learner submission along with any Centre documents identified as missing or incomplete (for example, assessment brief, IQA report).
- **System Resubmission:** All documents and information must be uploaded to the correct place within the returned request in the moderation system. The moderation system guidance (which can be accessed on the [System Guides](#) section on [My CMI](#)) states where documents should be uploaded.

Once all relevant documents and information are added, the Centre must resubmit the request using the same procedure as the original upload. Upon submission, the request will be automatically sent to the Moderator for review.

## 6.12 Moderation Resubmission Procedure

Where Centres are submitting assessments for different units, they **must** be clearly labelled in the file naming convention as a resubmission.

- The files should be uploaded containing the following:
  - o All Learners' assessments (if they are all the same qualification and unit)
  - o The referred mark sheet
  - o Learner Statement of Authenticity (for each Learner)

Each Learner's file **must** be titled 'Resubmission' and include the Learner's name, Learner's 'P' number and the unit code of the assignment.

All edited work by the Learner **must** be in a different colour to the original text to clearly show what has changed from the original submission. The first submission should be in BLACK, the second submission in BLUE and the third (final) submission in RED.

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# Monitoring and Review

This handbook will be reviewed in line with CMI's Document Control Policy.

## Appendix 1 - Glossary

<b>Accreditation</b>	The process through which the Qualifications Regulators confirm that a qualification conforms to the requirements of the RQF regulatory arrangements (NB – previously QCF).
<b>Appeal</b>	The process through which an Awarding Organisation may be challenged on the outcome of an enquiry about results or, where appropriate, other procedural decisions affecting a Centre or an individual Learner.
<b>Assessor</b>	A person who undertakes marking or the review of marking. This involves using a particular set of criteria to make judgements as to the level of attainment a Learner has demonstrated in an assessment.
<b>Assessment</b>	The process through which evidence of Learners' attainments is evaluated against agreed criteria to provide the evidence for a qualification.
<b>Assessment criteria</b>	Descriptions of the requirements a Learner is expected to meet to demonstrate that a learning outcome has been achieved.
<b>Assessment standard</b>	The standard that a Learner is expected to reach to achieve credit for a unit is expressed through a combination of the learning outcomes and assessment criteria of that unit.
<b>Authentication</b>	A process under which evidence generated by a Learner in an assessment is confirmed as having been generated by the Learner (or identified and confirmed as being that Learner's contribution to group work) and as being generated under required conditions.
<b>Award</b>	A qualification with a credit value between 1 and 12.
<b>Awarding Body</b>	Awarding Body means an organisation recognised by a national regulatory body, for example, Ofqual, Qualifications Wales, CCEA Regulation & Qualifications Scotland Accreditation in respect of the General/Standard Conditions of Recognition/Regulatory Principles and award or authentication of a specified qualification, or description of qualification.
<b>CASS</b>	Centre Assessment Standards Scrutiny means the activities by which the Awarding Body (in this case CMI) quality assures the practice by which it delegates assessment judgements to Approved Centres.
<b>CCEA Regulation</b>	The Northern Ireland qualifications agency
<b>CPD</b>	Continuing Professional Development.
<b>CV</b>	Curriculum Vitae.
<b>CMI Centre</b>	An organisation to undertake the delivery and assessment of Learners on behalf of CMI. Centres are typically educational institutions, training providers, or employers.
<b>Characteristic</b>	Age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual orientation in England and age, disability, marital status, racial group, religious belief, sex, sexual orientation, political opinion

<b>Comparability of Assessment</b>	The extent to which assessment outcomes are equivalent between Centres, units and qualifications, and over time.
<b>Conditions of Recognition</b>	All conditions to which an Awarding Organisation's recognition is subject (including other conditions imposed under section 132(3)(d) of the Act).
<b>Credit</b>	An award made to a Learner in recognition of the achievement of the designated learning outcomes of a unit.
<b>Credit transfer</b>	The process of using a credit or credits awarded in the context of one qualification towards the achievement requirements of another qualification.
<b>Credit value</b>	The number of credits that may be awarded to a Learner for the achievement of the learning outcomes of a unit.
<b>Certificate</b>	A record of attainment of credit or a qualification issued by an awarding organisation. A qualification with a credit value between 13 and 36.
<b>Diploma</b>	A qualification with a credit value of 37 or above.
<b>Data Protection Law</b>	Data Protection Legislation means the UK Data Protection Act 2018 and the General Data Protection Regulation (Regulation (EU) 2016/679) as enacted into English law ('the GDPR') as revised and superseded from time to time; and the terms 'data subject', 'personal data', 'data controller' and 'data processor' when used in this Agreement shall have the meanings given in the Data Protection Legislation.
<b>Equalities Law</b>	The Equality Act 2010. Any Act that was a statutory predecessor to that Act, or any legislation in a jurisdiction other than England which has an equivalent purpose and effect.
<b>Exemption</b>	The facility for a Learner to claim exemption from some of the achievement requirements of an RQF qualification, using evidence of certificated, non-RQF achievement deemed to be of equivalent value.
<b>External Assessment</b>	A service CMI offers to mark Learner assessments.
<b>FE</b>	Further Education.
<b>Guided learning hours</b>	Guided Learning Hours (GLH) have traditionally meant the number of hours of education or training under the immediate guidance or supervision of a Lecturer, Supervisor, Tutor, Skills Coach or Employer. With the increasing use of IT to improve the learning environment, facilitate the practical application of knowledge and make learning flexible to Learners outside of normal working hours and across different time zones, what constitutes 'immediate supervision' and indeed the value of immediacy is now in question. Participating in education and training now embraces many new and innovative forms, which include synchronous and asynchronous methods. For this reason, CMI now considers immediate and non-immediate guidance or supervision as an acceptable practice in calculating GLH for CMI qualifications.
<b>HE</b>	Higher Education.
<b>Partner Connect</b>	CMI online system for CMI Centres to register Learners, to sign off results for Learners, and Centre Approval.

<b>IC</b>	Institute of Consulting.
<b>IIP</b>	Investors in People.
<b>IQA</b>	Internal Quality Assurer.
<b>Learner</b>	Individuals registered for a CMI qualification.
<b>Level</b>	An indication of the relative demand, complexity and/or depth of achievement, and/or the autonomy of the Learner in demonstrating that achievement.
<b>Malpractice</b>	The deliberate or willful contravention or ignoring of the regulatory requirements of the QCF by an organisation recognised to operate within the framework.
<b>Mandatory units</b>	Units in a set of rules of combination that must be achieved for the qualification to be awarded.
<b>Moderation</b>	The process through which the marking of assessments by CMI Centres is monitored to make sure it meets required standards and through which adjustments to results are made, where required, to ensure that results are based on the required standard. This includes quality assurance.
<b>Multi Centre</b>	A Centre that has a location that is separate from the registered Centre (same name and same organisation), where existing Centre Staff deliver and assess Learners.
<b>NVQ</b>	National Vocational Qualification.
<b>National Occupational Standards (NOS)</b>	Describe what a person needs to do, know and understand in a job to carry out the role consistently and competently.
<b>Optional unit</b>	A unit is named in a set of rules of combination that a Learner may choose to complete to achieve the required number of units/credits for the award of the qualification.
<b>Pathway</b>	A route to the achievement of a qualification that requires a combination of credits to be achieved from particular units and is identified by an endorsement to a qualification title.
<b>Qualification</b>	An award made to a Learner for the achievement of the specified combination of credits, or credits and exemptions, required for that award.
<b>Qualification level</b>	An indication of the relative demand, complexity and/or depth of achievement, and/or the autonomy of the Learner, represented by a qualification.
<b>Qualification purpose</b>	A means of identifying qualifications with a set of shared characteristics.
<b>Qualification title</b>	A short description of the level, size and content of the qualification.
<b>Reasonable Adjustments</b>	Reasonable Adjustment is an adjustment of the delivery and/or assessment of a CMI qualification to alleviate or remove the effects of a substantial disadvantage for a Learner.
<b>Recognition of Prior Learning (RPL)</b>	A method of assessment that considers whether a Learner can demonstrate that they can meet the assessment requirements for a unit through knowledge, understanding or skills they already possess and do not need to develop through a course of learning.
<b>Register</b>	The register is published and maintained by Ofqual in accordance with section 148 of the Act.

<b>Rule of Combination</b>	A rule specifying the combination of units which may be taken to form a particular qualification, any units which must be taken and any related requirements.
<b>Regulatory Body</b>	Accredits Awarding Bodies and ensures the quality of the overall qualifications system with Awarding Bodies.
<b>Regulatory Principles</b>  <b>RQF</b>	SQA Accreditation's Regulatory Principles are intended for use by existing organisations to ensure ongoing compliance, new organisations seeking approval as an awarding body, awarding bodies seeking accreditation of qualifications and providers delivering SQA-accredited qualifications. Regulatory Qualification Framework
<b>Satellite Centre</b>	A Centre is remote from the Main Centre that involves a third party. NB – Multisite Centres international are classed as Satellite Centres.
<b>SCQF</b>	Scottish Credit and Qualifications Framework.
<b>SQA Accreditation</b>	Scottish Qualifications Authority.
<b>SSB</b>	Standard Setting Body - an organisation (usually a national training organisation) recognised by a regulatory authority as a responsible Body which has written the national standards of competence for an employment sector and is keeping them under review.
<b>SVQ</b>	Scottish Vocational Qualification.
<b>Special Consideration</b>	Special consideration is a temporary experience that prevents the Learner from taking an assessment or prevents them from being able to demonstrate their level of attainment in an assessment.
<b>TUT</b>	Total Unit Time (TUT) is defined as the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected to be required, in order for a Learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a unit.
<b>TQT</b>	Total Qualification Time - As defined under General Condition J1.8, Total Qualification Time is the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected to be required for a Learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification.  Total Qualification Time is comprised of the following two elements: (a) the number of hours which an awarding organisation has assigned to a qualification for Guided Learning, and (b) an estimate of the number of hours a Learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by – but, unlike Guided Learning, not under the Immediate Guidance or Supervision of – a Lecturer, Supervisor, Tutor or other appropriate providers of education or training.
<b>Unit</b>	The smallest part of a qualification that can be separately certificated.
<b>VQ</b>	Vocational Qualification.

## Appendix 2 - Command Verbs Definitions List

This table aims to give a definition of the command verbs used in the CMI qualifications, to guide both Learners and Centres. Some words can be used at different levels of our qualifications, but as you move up the levels, the depth and breadth of answers/responses required increase.

Command Verb	Definition
<b>Analyse</b>	Break the subject or complex situation(s) into separate parts and examine each part in detail; identify the main issues and show how the main ideas are related to practice and why they are important. References to current research or theory may support the analysis.
<b>Appraise</b>	Assess and estimate the worth, value, quality, and performance. Consider carefully to form an opinion.
<b>Articulate</b>	Express or clearly state your understanding of the topic.
<b>Assess</b>	Provide a reasoned judgement or rationale of the standard, quality, value or importance of something, informed by relevant facts/rationale.
<b>Comment</b>	Identify and write about the main issues, express an opinion, giving a reaction to what has been read/observed.
<b>Compare</b>	Review the subject(s) in detail – looking at similarities and differences.
<b>Complete</b>	Ensure something is finished with all of its parts.
<b>Conceptualise</b>	Create a diagram, model, chart or graphic with annotations, providing a holistic overview of the process.
<b>Conduct</b>	Organise and perform a particular activity
<b>Construct</b>	To create or build something original
<b>Consider</b>	Take (something) into account (for example, different ideas, perspectives, theories, evidence) when making a judgement
<b>Create</b>	Originate or solve a problem.
<b>Critically Appraise</b>	As with appraising, a systematic process is used to identify the strengths and weaknesses of information in order to assess the usefulness and validity.
<b>Critically Assess</b>	As with assess, but emphasising judgments made about arguments by others, and about what is being assessed from a different perspective. Making a reasoned argument based on judgments. Criticality requires the consideration of the validity of sources used.  Critical assessment not only considers the evidence above but also the strength of the evidence based on the validity of the method of evidence compilation.
<b>Critically Analyse</b>	As with analyse, but questioning and testing the strength of a person and/or others' analyses from different perspectives. Using the process of analysis to make an objective and reasoned

	<p>argument. Criticality requires the consideration of the validity of sources used.</p> <p>Critical analysis not only considers the evidence above but also the strength of the evidence based on the validity of the method of evidence compilation.</p>
<b>Critically Discuss</b>	<p>As with discuss, but evaluating the pros and cons of the subject at hand critically. Discussing all the aspects and dimensions of the topic at hand. Discussing the effects and impacts of the topic.</p> <p>Critical discussion not only considers the evidence above but also the strength of the evidence based on the validity of the method of evidence compilation.</p>
<b>Critically Evaluate</b>	<p>As with evaluate, but considering the strengths and weaknesses, arguments for and against and/or similarities and differences. The writer should then judge the evidence from different perspectives and make a valid conclusion or reasoned judgement. Apply current research or theories to support the evaluation when applicable.</p> <p>Critical evaluation not only considers the evidence above but also the strength of the evidence based on the validity of the method of evidence compilation.</p>
<b>Critically Examine</b>	<p>As with examine, but provides the opportunity to conduct a thorough examination involving carefully analysing and evaluating a subject/topic to understand its underlying assumptions, logic, and implications to clearly establish a need. It combines both analytical and creative thinking, allowing a deeper understanding, informed judgement and exploration of a process or alternatives. Critical examination aims to promote deeper understanding and informed judgement.</p> <p>Critical examination not only considers the evidence above but also the strength of the evidence based on the validity of the method of evidence compilation.</p>
<b>Critically Reflect</b>	<p>As with reflect, but identifying, questioning, and assessing deeply-held beliefs and assumptions about a topic, the way in which we perceive events and issues, beliefs, feelings, and actions.</p>
<b>Critically</b>	<p>Typically used to qualify verbs such as evaluate, assess, appraise, analyse and reflect. Give in-depth insight, opinion, debate, and verdict based on a wide variety of sources, theories, and research, which may agree and contradict an argument.</p>
<b>Critique</b>	<p>A detailed analysis and assessment of something, especially a literary, philosophical, or political theory.</p>
<b>Define</b>	<p>Show or state clearly and accurately.</p>
<b>Describe</b>	<p>Provide an extended range of detailed factual information about the topic or item logically.</p>
<b>Deliver</b>	<p>Ensure something is conveyed or done with stakeholders/clients.</p>
<b>Demonstrate</b>	<p>Complete a task or activity, showing an understanding of facts, procedures and ideas of a topic and competence through action or activity.</p>
<b>Determine</b>	<p>Settle/conclude an argument/question as a result of an investigation or by referring to an authority.</p>
<b>Develop</b>	<p>Elaborate, expand or progress an idea from a starting point, building upon given information.</p>

<b>Devise</b>	Invent a system, solution or procedure from new/existing principles/ideas
<b>Differentiate</b>	Recognise or ascertain a difference to identify what makes something different.
<b>Discuss</b>	Give a detailed account including a range of views or opinions, which include contrasting perspectives.
<b>Distinguish</b>	Draw or make a distinction between
<b>Draw</b>	Present a conclusion or decision about what is likely to happen based on facts.
<b>Establish</b>	Discover, prove or show something to be true or valid by determining the facts.
<b>Evaluate</b>	Consider the strengths and weaknesses, arguments for and against and/or similarities and differences. The writer should then judge the evidence from different perspectives and make a valid conclusion or reasoned judgement. Apply current research or theories to support the evaluation when applicable.
<b>Examine</b>	Inspect (something) thoroughly in order to determine its nature or condition.
<b>Explain</b>	Make something clear to someone by describing or revealing relevant information in more detail.
<b>Explore</b>	Go through the topic/issue thoroughly, looking at all areas that affect the topic/issue.
<b>Formulate</b>	To devise or develop an idea or concept in a concise and systematic way.
<b>Identify</b>	Ascertain the origin, nature or definitive characteristics of something.
<b>Interpet</b>	To clarify/explain the meaning of something
<b>Investigate</b>	Carry out a systematic or formal inquiry to discover and examine the facts of (problem, options, incident, allegation, etc.) so as to establish the truth.
<b>Justify</b>	Provide a rationale for actions and/or decisions. Your rationale should be underpinned by research, academic theory, data analysis or experience.
<b>Outline</b>	Provide a general description/broad account/summary of something showing essential features/outline the case briefly but not the detail.
<b>Plan</b>	Make a plan, for example, a change plan or a project plan, before starting activities to achieve an aim.
<b>Prepare</b>	To make or develop something ready which will happen in the future
<b>Present</b>	To make clear to an audience of stakeholders the outcomes of a Learner's studies/findings. (May take the form of a presentation)
<b>Produce</b>	To make, create or form something. Put together, assemble. leads to an outcome/result.
<b>Profile</b>	An outline giving a description of a role or organisation
<b>Recommend</b>	Put forward proposals, an alternative or suggestion(s) supported by a clear rationale appropriate to the situation/context.

<b>Reflect</b>	Consciously contemplate, appraise or give balanced consideration to an action or issue.
<b>Relate</b>	A clear connection between two or more concepts, theories, principles, processes or pieces of information.
<b>Report</b>	To prepare a detailed account or statement about an event or topic in a specified format
<b>Research</b>	A detailed study or investigation of a subject in order to establish facts and reach new conclusions.
<b>Review</b>	To examine, survey, or reconsider a subject, theory or item.
<b>Specify</b>	Identify or state a fact or requirement clearly and precisely in detail.
<b>Summarise</b>	Sum up or give a brief account of relevant information in your own words.
<b>Use</b>	The action of using something for a particular purpose.

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