



BRITISH ACCREDITATION COUNCIL INSPECTION REPORT

INTERIM INSPECTION (Short Course Provider)

PROVIDER: IASeminars Limited

ADDRESS: 1 Westferry Circus
Canary Wharf
London
E14 4HD

HEAD OF PROVIDER: Ms Deborah Fyfe

ACCREDITATION STATUS: Accredited

DATE OF INSPECTION: 24 June 2021

ACCREDITATION COMMITTEE DECISION AND DATE: Continued accreditation, 8 October 2021

PART A – INTRODUCTION

1. Background to the provider

IASeminars Limited (IAS/the Provider) was established in 2002 as a privately owned company registered in the United Kingdom (UK), with a management team primarily based in Scotland. It was set up to run short training courses relating to finance and accounting standards. The courses are delivered in the UK, the United States of America (USA) and other countries worldwide. BAC accredits only the provision offered in the UK.

The mission of IAS is to provide up-to-date, high-quality, customer-focused training to finance professionals who wish to learn or stay up to date with International Financial Reporting Standards (IFRS), International Public Sector Accounting Standards (IPSAS) and related topics, as required by their professional bodies.

The Provider has a registered office in London and its core team of six works remotely, with four members of staff in Scotland, one in the Netherlands and another in Hungary. A further three part-time members of staff work remotely in Scotland. Until 2020, the majority of IAS's training events took place in a central London hotel with a senior manager or faculty member present. However, since March 2020, all training provision has been offered online.

The Managing Director (MD) of IAS reports directly to the shareholders in South Africa and has additional liaison and support from a part-time Chief Financial Officer. In the UK, the MD is supported by the Chief Academic Officer and the Product Director. In addition, the MD chairs the Academic Board, comprising the Chief Academic Officer, Senior Instructor, Customer Services Manager and Project Manager. The Board meets on a monthly basis to review the Provider's operations, performance and strategy.

In December 2016, IAS was sold to a South African education group, Senya Education, which had been set up by a consortium consisting of Regarding Capital Management Proprietary (RECM) and Calibre Limited. It now has a parent company in South Africa, called IASeminars South Africa Pty Ltd, which is part of the RECM and Calibre Limited group.

2. Brief description of the current provision

The Provider runs training courses on IFRS. Over time, the courses on offer have expanded to include IPSAS, United States Generally Accepted Accounting Principles (US GAAP) and other related topics. IAS is also an official Partner in Learning of the Institute of Chartered Accountants in England and Wales (ICAEW) and offers the ICAEW Certificate in IFRS.

At the time of the inspection, there were three open virtual programmes running, designed primarily for private commercial corporations. There were 13 participants from a range of countries, including France, Ethiopia, the Netherlands, Saudi Arabia and Ghana. All were over the age of 18 and there was an equal split between male and female participants. To date, IAS has 30 participants registered for later programmes to be run in 2021.

The Provider's clients include government bodies, accountancy firms and large corporate organisations. Although IAS has a close relationship with its clients, almost all participants book themselves onto the courses independently, as most are senior officers within their organisations.

Currently, demand for in-house training is stronger than the demand for in-person provision, with client organisations commissioning training to educate their staff and strengthen remote teams. IAS provides course descriptors to clients, who then assign suitable employees to courses. There are no formal entry requirements.

3. Inspection process

The inspection was carried out remotely by one inspector over one day. The inspector met with the MD, Chief Customer Officer, Product Director, Finance and Events Manager, and Chief Academic Officer. Three training sessions were observed, and focus groups were held with three instructors and a group of participants. A range

of documentation was sampled and scrutinised by the inspector. The Provider's staff co-operated very well throughout the inspection and the organisation of the documentation was excellent.

4. Inspection history

Inspection type	Date
Full Accreditation	16–17 November 2011
Interim	20 May 2013
Re-accreditation	17–18 March 2016
Interim	19 February 2018
Re-accreditation	9–11 December 2019

PART B – JUDGEMENTS AND EVIDENCE

The following judgements and comments are based upon evidence seen by the inspector during the inspection and from documentation provided by the provider.

1. Significant changes since the last inspection

The Provider has not run any in-person courses since March 2020, and started running online courses in September of that year. Course topics have mostly remained the same, although the Provider has developed a course related to Environmental, Social and Governance (ESG) and how these apply to accountancy.

2. Response to action points in last report

3.4 The Provider must put in place a policy to ensure that there are regular scheduled observations of instructors as part of performance reviews.

The Provider has developed a policy and a schedule of observations. Instructors are now observed and receive feedback frequently, resulting in effective monitoring of courses.

3.5 Policies and procedures must be developed in order to ensure that all staff are supported in their Continuing Professional Development (CPD).

The Provider has put in place CPD sessions for instructors and administrators relating to online learning platforms. However, supporting policies and procedures have not yet been developed. The Provider plans to implement policies and procedures and have a full CPD programme in place for all staff.

4.3 The Provider must ensure that all key policies are published on its website and accessible to all stakeholders.

The Provider has updated its terms and conditions on the website to ensure that these reference key policies, and is currently reviewing key policies with a view to publishing these on the website.

7.2 The Provider must develop formal procedures for collecting feedback from all staff.

The Provider collects feedback from staff informally throughout the year in conversations between management and staff. In addition, staff have opportunities to feed back at meetings, including at the annual instructor meeting. The Provider has developed a framework for more frequent collection of staff feedback, but this has not yet been implemented.

7.4 The Provider must develop systems for acting on feedback and recording actions taken.

The Provider has produced a quality assurance policy on encouraging and reviewing customer and stakeholder feedback. The policy outlines how and when feedback is collected, the review process, how feedback is shared with staff and management teams, and how actions are recorded. It demonstrates a rigorous approach to feedback. Feedback and complaints registers have been established, and demonstrate that feedback is recorded, analysed, communicated and acted upon. A formal feedback monitoring group has been established and will meet twice a year, ensuring that feedback can be acted on at a senior level.

7.5 A system must be developed to record responses to feedback and to communicate such responses to participants.

The policy on encouraging and reviewing customer and stakeholder feedback clearly describes how feedback is recorded and responded to. The Provider has developed robust systems for the review and response to individuals, and also has a newsletter that can incorporate responses to stakeholder feedback.

7.6 Reports that include the results of performance reviews and data analysis must be produced annually.

Annual reports that collate reviews and data have not yet been produced. The Provider intends to introduce such reports in the near future.

10.2 The Provider must provide trainers with additional opportunities to develop their specific training techniques.

Since the last inspection, every instructor has been engaged in training with the Product Manager and has participated in instructor-sharing sessions, where best practice regarding training techniques has been shared. Trainers commented on the effectiveness of the sharing sessions and felt that they had been given excellent opportunities to develop techniques.

10.4 Instructors must employ strategies that ensure that they systematically check all participants' understanding.

The Provider has introduced a policy by which instructors check on participants' understanding at least three times each hour, through the use of polls and questioning. These interventions were evidenced during training session observations.

16.4 The Provider must devise systems and procedures to be able to issue participants with a contact number for out-of-hours emergencies.

This action point has not yet been addressed because courses, since the previous inspection, have been hosted online. The Provider intends to address this point when in-person teaching and learning recommence.

16.9 The Provider must collect participants' next-of-kin details and make them suitably accessible to staff in and out of operating hours, to notify families in the event of an emergency.

This action point has not yet been addressed because courses run since the previous inspection have been hosted online. The Provider intends to address this point when in-person teaching and learning recommence.

3. Response to recommended areas for improvement in last report

It is recommended that the Provider builds on the work being undertaken to develop detailed goals and considers ways of sharing its goals with stakeholders.

This recommendation has not been acted on. The Provider intends to introduce ways of sharing goals with stakeholders in the near future.

The Provider should ensure that participants complete the pre-course questionnaire in order for instructors to plan according to individual needs and backgrounds.

The Provider strongly encourages participants to complete the questionnaire. The participants spoken to reported that they had completed one during the registration process. Instructors reported that they found the questionnaires to be helpful in supporting their course planning.

4. Compliance with BAC accreditation requirements

4.1 Management, Staffing and Administration (spot check)

The standards are judged to be: Met Partially Met Not Met

Comments

The Provider has very clear channels of communication at all levels. As well as regular recorded meetings between different management and staff members, there are daily communications between team members, as well as formal monthly reports that focus on performance, finance and customer service. As a result, the staff are aware of the Provider's priorities and how they contribute to meeting them.

Administrative policies and practices are detailed, known and communicated to all employees. These policies and practices lie at the heart of the Provider's operations. Participants commented that administration was highly effective.

3.5 While managerial and administrative staff update their skills to support their day-to-day work, there is no formal policy or procedure for CPD to ensure consistency.

Publicity is clear and accurately describes the courses on offer. Participants commented on the accuracy of the website, and how it had supported them in choosing appropriate courses.

4.3 The website does not include key policies.

The Provider has developed a pre-event questionnaire to review delegates' needs and ensures that these match the course on which they are enrolled. Participants reported that courses did meet their needs and that responses to application enquiries were prompt and helpful.

All online courses have an administrator assigned to the course. The administrator takes a register for every session and records participant responses to trainer questions during sessions, ensuring that participants are actively present throughout.

The Provider has produced a quality assurance policy that outlines how and when feedback is collected, the review process, how feedback is shared with staff and management teams, and how actions are recorded. This results in some effective systems to monitor performance.

7.2 However, the framework for collecting staff feedback has not yet been implemented.

4.2 Teaching, Learning and Assessment (spot check)

The standards are judged to be: Met Partially Met Not Met

Comments

The members of the team with responsibility for teaching, learning and assessment are suitably qualified. They have the specialist knowledge and experience of working with finance and accounting standards, teaching and learning, and online delivery.

The academic team reviews the course offer according to new accounting and finance standards and taking into account participant feedback and requests. As a result, courses reflect current knowledge and practice and are designed to enable participants to succeed.

Trainers are enabled to develop pedagogical techniques through training from the academic management team, as well as through written guidelines and meetings where effective pedagogic techniques are shared.

Participants' performance and progress are checked during training sessions through regular surveys, open questions and quizzes. Trainers and administrators keep records of assessments, ensuring that assessment is effectively monitored.

4.3 Participant Welfare (spot check)

The standards are judged to be: Met Partially Met Not Met

Comments

Pre course information is detailed and contains appropriate advice and information. Participants commented that this information was excellent.

16.4 Participants are not issued with a contact number for out-of-hours emergency support.

Participants are provided with excellent support for the duration of courses. Every course has a host who is able to support them with access to the online learning platform and answer any questions about the course.

The Provider reviews its extremism and radicalisation risk assessment and policy annually and shares updates with staff. There are appropriate measures in place to protect participants from the associated risks.

16.9 The Provider does not collect participants' next-of-kin details and make these suitably accessible to staff in and out of operating hours.

Terms and conditions are clear, transparent and available on the website and upon enrolment. In addition, participants are informed of the Provider's complaints policy, which includes reference to BAC's complaints procedure.

4.4 Premises and Facilities (spot check)

The standards are judged to be: Met Partially Met Not Met

Comments

It was not possible to inspect the premises during this inspection. Compliance is based on the findings of the previous inspection, and no contrary indicators were identified during this inspection.

4.5 Online, Distance and Blended Learning (spot check)

The standards are judged to be: Met Partially Met Not Met NA

Comments

Online courses have been developed by the academic team, led by the Chief Academic Officer, who has significant experience in directing online programmes. Trainers have received induction and training for the online learning platform, and participants spoke very positively in regard to course content, methodology and outcomes. Inspection findings confirm this view.

Trainers demonstrate proficient understanding of online and distance learning, including frequent monitoring of participants' understanding and engagement.

Participants reported that they felt very comfortable with the online learning platform and the digital literacy required to use it.

In addition to the trainer, a host is present during the online training sessions. The host can promptly and effectively resolve any general or technical issues that participants may experience.

4.6 Compliance Declaration

Declaration of compliance has been signed and dated.

Yes No

PART C – SUMMARY OF STRENGTHS AND ACTION POINTS

STRENGTHS

Administrative policies and practices are detailed and communicated to all employees, resulting in well-organised administration and an enhanced participant experience.

The members of the team with responsibility for teaching, learning and assessment are well qualified and experienced, ensuring that the academic programme meets participants’ needs.

Pre-course information is detailed and contains appropriate advice and information, ensuring that participants are clear about course content and are satisfied that it meets their needs.

Participants are provided with excellent support for the duration of each training course from their trainer and a dedicated host.

ACTIONS REQUIRED

3.5 Policies and procedures must be developed in order to ensure that all staff are supported in their Continuing Professional Development.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
4.3 The Provider must ensure that all key policies are published on its website and accessible to all stakeholders.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
7.2 The Provider must fully implement formal procedures for collecting feedback from all staff.	<input type="checkbox"/> High	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> Low
7.6 Reports that include the results of performance reviews and data analysis must be produced annually.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
16.4 The Provider must devise systems and procedures to be able to issue participants with a contact number for out-of-hours emergencies.	<input type="checkbox"/> High	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> Low
16.9 The Provider must collect participants’ next-of-kin details and make them suitably accessible to staff in and out of operating hours, to notify families in the event of an emergency.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low

RECOMMENDED AREAS FOR IMPROVEMENT *(to be reviewed at the next inspection)*

It is recommended that the Provider builds on the work being undertaken to develop detailed goals and considers ways of sharing its goals with stakeholders.

COMPLIANCE WITH STATUTORY REQUIREMENTS – FURTHER COMMENTS, IF APPLICABLE