Accredited Consulting Practice

Scheme Manual
CONTENTS

1  The Accredited Consulting Practice Scheme – General Description
2  The Requirements of an ACP
3  ACP Accreditation Standard Process
4  Management of ACP Scheme by the Member Institute
5  Qualifications and training of Institute Assessors of ACPs
1 The Accredited Consulting Practice Scheme

1.1 Introduction

The ACP concept

The designation “Accredited Consulting Practice” (ACP) can be awarded by the national Institute to a management consultancy practice which has demonstrated to the Institute, by undergoing a systematic audit, that its professional standards for the training/development and assessment/qualification of its consultants, and the internal processes which assure these, are equivalent with those required for the ICMCI CMC Standard.

However, in order to assure a minimum common understanding across all members of the ICMCI, and to assure consistency in the award of CMC (and thus providing a firm basis for reciprocal recognition of both ACPs and individual CMCs), each national ACP scheme must conform to this ICMCI Standard if it is to be formally recognised within ICMCI. If an Institute has an ACP Scheme in place, it is assessed against this ACP Standard as part of the ICMCI periodic country assessments to establish conformity with the ICMCI CMC Standard.

Benefits of ACP

The professional Institutes that form the ICMCI are concerned with the professional standing of individual management consultants. Some of these Institutes also include consulting firms as direct members. The ACP concept was triggered by the idea that there was a need for those individual members-only Institutes to engage with the major consulting firms and for both types of member Institute to be able to engage with the individual consultants within these firms.

In large firms the individual consultants may not be exposed to the value of a professional qualification. These consultants assume that even on leaving the large firm that they had the use of an "ex specific large firm" consultant brand. An ACP will encourage its consultants to acquire the CMC which will be a qualification they can take with them throughout their consultancy careers.

Moreover, the concept enables the firms to become members (and thereby develop close relationships with the member Institute) of the Institutes and, in particular, for their training and development process to be recognised to the extent that their consultant staff are assumed to have met some of the requirements for the award of the CMC.
The ACP Standard

This Standard is applicable to management consultancy organisations which wish to become ACPs - as distinct from the CMC Standard, which is applicable to individual management consultants who wish to demonstrate their qualifications. The relationship between the two standards is as follows: the ACP Standard is designed to assure that a management consultancy organisation has the professional processes, the standards, and the commitment in place, in order to develop and propose CMC candidates who can be confidently accepted with minimum scrutiny as meeting the standards of the national Institute.

The ICMCI is committed to respecting variations in member institutes' detailed arrangements for Accredited Consulting Practice (ACP) schemes, dependent on individual national standards, history, culture and approach.

The ICMCI ACP Standard defines a set of core, minimum requirements. Beyond these, national institutes are at liberty to develop the ACP scheme to suit their own markets (for example, involving ACPs in various ways in Institute activities). "Best practice" guidance is available from the ICMCI, and updated as shared experience grows, in order to help national institutes to do so.

An Institute may act on a recommendation from the ACP for award of CMC to an individual consultant, confirming that the individual has been assessed against standards equivalent to the Institute's CMC standards. The candidate must be a member of the Institute. Alternatively, once the candidate is recommended by the ACP as having reached the agreed standard, the Institute may conduct a further examination of the candidate's competence in areas such as ethics and client management. The Institute reserves the right to examine through any part of its normal direct entry process a candidate recommend by an ACP.

Related to this Standard are the following the ICMCI documents:

- **The Appendices to this Manual - ACP002 to 008**
- **CMC002 – Competence Framework**
  The CMC Competence Framework specifies the cluster of related abilities, commitments, knowledge, and skills that a management consultant should demonstrate in practice in order to successfully complete an assignment, independently and unsupervised; all of which are underpinned by a code of conduct and professional ethics – professional behaviours. It sets out a standard for those within the profession that is equally relevant for sole practitioners, niche players, and internal consultancies as well as for the major practices and firms. It can be used as a benchmark for clients in developing their expectations of consultants as well as by academic bodies and training providers to align offerings to the market.

- **CMC003 - Code of Professional Conduct**
  The member institute shall have a Code of Professional Conduct and shall have in place arrangements to ensure that their Code is publicised and accessible to consultants and to other stakeholders in management consulting. It should, for example, be easily accessible on the institute’s web site. Institute members practising as management consultants should affirm their understanding, and agreement and conformance with the Code on a regular basis. They should also be encouraged to refer to the Code in contracting with clients.
The institute should seek to promote the Code through the training given to consultants and managers. The institute should have arrangements for helping members resolve ethical dilemmas arising from the application of the Code. There should be arrangements for reviewing the scope and wording of the Code from time to time.

- **CMC004 – Common Body of Knowledge**
  The ICMCI Summary Common Body of Knowledge is a broad statement of topics that covers the scope of a management consultant’s work. Each member institute of the ICMCI should have its own Body of Knowledge developed to incorporate relevant ICMCI materials presented herein plus local requirements.

The Summary Body of Knowledge applies to all management consultants. In addition, consultants are expected to have functional knowledge in the form of their subject matter expertise. This specialist knowledge is outside the scope of this Summary Body of Knowledge, which relates to the process of delivering that expertise to the benefit of the client.

The ICMCI member institutes may use this Summary Body of Knowledge to:
- help in defining the body of knowledge in their own country
- assess the scope of their own body of knowledge
- determine the topics that should be included in training for management consultants

- **CMC005 – Pre-requisites**
  Pre-requisites include:

  - Specialist Functional Knowledge
  - Specialist Sectorial Knowledge
  - Experience
  - Currently Active in Consulting
  - Independence
1.2 Scope and Aims of the ACP Scheme

1.2.1 Scope

The ACP Scheme is applicable only within full Member Institutes of the International Council of Management Consulting Institutes.

1.2.2 ICMCI general aims for ACP are:

a) Emphasising accountability of professionalism and ethics to clients and society; increasing transparency of the profession; improving public image of management consultancy in general.

b) Working together and stimulating cooperation within the whole management consulting industry for the benefit of the clients and the professionals as well.

c) Harmonizing professional standards including ethics of management consultants worldwide.

d) Creating universal baseline standards.

e) Acknowledgement of the CMC qualification by consulting practices.

f) Recognition of national institutes (IMCs) as representative and guardian of "world class" professional standards.

g) Opportunity for institutes to create corporate relationships, engaging them in the activities of the institute and increase membership from consulting practices.

h) Professional knowledge sharing between qualified management consultants, either working independently or in small, medium size or large practices.

The Scheme is connected to the ICMCI Certified Management Consultant (CMC) Standard, the aim of which is to achieve and promote globally the assurance that certified persons meet the requirements of the CMC Standard through initial assessment and periodic re-assessments of competence based on the competence standard issued by the ICMCI.

1.3 ICMCI Quality Assurance Principles for ACP

The ICMCI shall, through its quality assurance process assure the compliance of member Institutes’ national ACP standards with the ICMCI Standard for ACPs. The quality assurance process for ACP accreditation shall be conducted as part of the standard accreditation process for Member Institutes which is supported by three other documents as follows:

- **Statement of Equivalence** with the ICMCI Standard, a standard form to be completed by an Institute in preparation for quality assurance assessment of its CMC standard against the ICMCI Standard.

- **Assessment of Equivalence** with the ICMCI Standard, the corresponding form used by ICMCI appointed quality assurance assessors.

- **Guidelines for QA Assessors**, containing practical guidance for quality assurance assessors in undertaking the role.

This quality assurance process shall also be used for internal quality assurance through self-assessment by member Institutes, and for peer review between two or more Institutes.
1.3.1 The Quality Assurance Standard and Principles

a. The benchmarks shall be the CMC and ACP standards adopted by the ICMCI as mandatory (subject to a transition period where necessary) for all member Institutes.

b. The ICMCI Standards shall be those currently in place at the time of assessment.

c. The quality assurance process shall address both:
   - the Institute’s CMC and ACP standards, and
   - the Institute’s process for assessing Consulting Practices against those standards (including the arrangements for monitoring of continued compliance with the standard).

d. The onus shall be on the Institute being QA assessed to demonstrate:
   - the equivalence of its CMC and ACP standards to the ICMCI Standards.
   - the adequacy of its assessment/monitoring process in assuring these standards.

e. “Equivalence” is a key concept concerning compliance with the ICMCI Standard and the Principle of Equivalence is described in section 1.3.2.

   What the ICMCI shall require is that an Institute demonstrates to the satisfaction of the ICMCI that the Institute CMC and ACP standards require at least the equivalent level of professionalism and ethics in candidates as the ICMCI Standards. This requires the Institute to demonstrate, against each of the ICMCI Standard requirements, how its standard assures the presence of a least the equivalent of that requirement (e.g. an equivalent competence at an equivalent level) in candidates.

f. “Adequacy” of the process shall mean adequate fitness for purpose for assuring the Institute’s CMC and ACP standards; in other words is it reasonably complete, coherent, and relevant in respect of the Institute CMC and ACP standards. This means that the Institute needs to demonstrate to a reasonable degree that:
   - the process for selection of assessors and the standards of qualification/experience required of them are suitably stringent
   - the assessment process measures consulting practices appropriately and effectively against its standard;
   - the assessment process assures fair and consistent outcomes (for example, monitoring of assessment and individual assessor performance, provision for an appeal process);
   - it ensures that an ACP fulfils the required minimum level of ethical behaviour after award of ACP;
   - it ensures the continued maintenance by ACPs of their performance to the CMC standard (for example, by continued surveillance and re-certification).
1.3.2 The Principle of Equivalence

The ICMCI’s policy is that the ICMCI Standards are at a relatively high level, leaving a significant degree of freedom to member countries in the detailed specification of their national Standards. This is largely in recognition of the valid differences in background, history, and culture across the wide range of member countries. It also has the benefits of a longer term validity of the Standard in a changing world, and of allowing room for national innovation in good practice from which the ICMCI benefits.

The ICMCI respects the historical, cultural and legal diversity of its members; consequently it fully accepts diversity (within certain defined limits) in national CMC and ACP Standards and procedures in reflection of these valid differences.

What ICMCI does however require is that an Institute shall demonstrate to the satisfaction of the ICMCI that the Institute ACP standards require at least the equivalent level of professionalism and ethics in ACPs as the ICMCI Standard. This requires the Institute to demonstrate, against each of the ICMCI Standard requirements, how its standard assures the presence of at least the equivalent of that requirement (e.g. an equivalent competence at an equivalent level) in ACPs.

The policy reflects the fact that local consulting practices need to be able to operate within the culture of their own country and should be assessed on that basis. Therefore, the relative mix or emphasis of the requirements, and the way in which these are expressed, should be expected to vary from country to country in order to achieve the same desired service outcomes. The equivalence principle makes valid these variations in the competence model and the certification process adopted to meet the local needs determined by the local culture – but still within a common universal framework.

The equivalence principle emphasises the outcome, or actual effect, of a standard, rather than rigid and detailed compliance to a specific set of means to achieve it.

1.3.3 The Principle of Reciprocity

National institutes who are full members of the ICMCI are obliged to observe reciprocity rights in respect of all other full members: that is, to recognise within their own country CMCs awarded by other full member institutes; and should a consultant awarded CMC by another institute move to their country, to accept that individual into membership if he so requests.

Reciprocity of recognition of Accredited Consulting Practices, although not quite so straightforward, is clearly required in order to support the reciprocity of the CMC award. This ACP Scheme provides the ICMCI-wide protocol for recognition of Accredited Consulting Practices.

For those large consulting companies operating on a global basis the ICMCI has introduced the Large Firms Initiative, offering worldwide accreditation awarded directly from the ICMCI.

1.4 Review, changes and revisions

The ICMCI shall carry out a regular, scheduled review, update and publication of the ACP Scheme. The review shall take place at least once every three years and shall take account of input from interested parties including Full Member Institutes.

The results of the review and resultant changes to the Scheme shall be communicated to member institutes together with details of any allowed transition period.
2 Requirements of an ACP

The ICMCI is committed to respecting variations in member institutes’ detailed arrangements for Accredited Consulting Practice (ACP) schemes, depending on individual national standards, history, culture and approach.

However, in order to assure a minimum common understanding across all members of the ICMCI, to assure consistency in the award of CMC, and to provide a firm basis for reciprocal recognition of individual international ACPs, each ACP scheme needs to embody certain essential characteristics if it is to be formally recognised by the ICMCI.

These characteristics will in particular be audited as part of the ICMCI periodic country CMC assessments to establish conformity with the ICMCI CMC standard. These essential characteristics may be likened to a very high level minimum ICMCI standard for national ACP arrangements.

It is emphasised that these characteristics define simply a core, minimum requirement. Beyond these, national institutes are at liberty to establish ACP schemes as they find appropriate in their own markets. In addition, “best practice” guidance will be made available from the ICMCI, and updated as shared experience grows, in order to help national institutes to do so.

2.1 The Ten ACP Requirements

The Standard comprises ten mandatory features or “Requirements”. All of these have to be satisfactorily met in order for a national ACP scheme to comply with the standard.

1. The Organisation is confirmed as being a valid ACP Candidate
   Institutes assure that candidate ACPs are identifiable organisations OR management units undertaking a management consultancy role and providing management consulting services in accordance with the six guidelines for internal consultancy shown in 2.2.

2. Its Professional Processes are assessed to assure they are appropriate for developing consultants to the CMC Standard
   The professional recruitment, training, development, supervision, review and quality assurance processes of candidate ACPs for their consultant staff are thoroughly assessed upon application to become an ACP, in accordance with a written institute standard, in order to assure that they are suitable in nature and quality for developing consultants to the ICMCI CMC standard.

3. Its Professional Standards are assessed to assure they are at least equivalent to the CMC Standard
   The professional standards of the candidate ACPs for their management consultants, and the processes for assessment of their consultant staff against them, are thoroughly assessed upon application to become an ACP, in accordance with a written institute standard, in order to assure that they are of at least the equivalent level and rigour as the ICMCI CMC standard.
   (NOTE If a candidate ACP is already recognised as an ACP in another ICMCI member country, the institute should take due note of this fact, liaising with the other institute and limiting the scope of its audit correspondingly.)
4. **The Institute Assessors are suitably trained/qualified, briefed and quality assured**
   Institute assessors undertaking the above assessments on behalf of national institutes are suitably trained and/or qualified, are briefed in their role, and are quality assured.

5. **ACPs are formally accredited by the Institute, for a maximum of 3 years**
   ACP candidate organisations who pass this assessment scrutiny are formally recognised, for a maximum period of three years, as accredited by the national institute in respect of their professional training and development and professional standards, under the title of Accredited Consulting Practice (or the national equivalent name). The national institute maintains a register of its recognised ACPs; and notifies each new ACP to the ICMCI, which maintains an international register of recognised ACPs.

   The national institute formally re-assesses each ACP after a maximum of 3 years, covering the same areas and to the same standard as the original assessment. Reconfirmation of ACP status is subject to such an assessment.

6. **ACPs are empowered to propose CMC Candidates to the Institute**
   ACPs are empowered to identify and propose suitable management consultants from their practice for award of the CMC by their national institute, via a route different from that for direct CMC candidates. Moreover, ACPs are expected to do so in all possible cases, and to inform and encourage their consultants to wish to become CMCs. However, ONLY the national Institute (provided it is a full member of ICMCI) has the authority actually to award the CMC designation.

7. **CMC Candidates from ACPs are subject to lesser scrutiny by the Institute**
   Institutes subject CMC candidates from ACPs to significantly lesser scrutiny than direct CMC candidates, by virtue of the fact that ACPs have demonstrated the equivalence of their professional standards and processes to those required for CMC. This lesser scrutiny may (at the institute’s discretion) range from zero scrutiny (for most individual candidates), to a defined sub-set of the normal scrutiny (e.g. ethics examination) for all candidates. The principle is that the total scrutiny of candidates by a combination of the ACP and the institute must amount to the equivalent of that under the institute’s CMC standard. Institutes may also at their discretion require CMC candidates from ACPs to undergo some mandatory elements of preparation.

   **(NOTE)** Even if applying zero scrutiny, an institute must as a minimum receive a written notification from the ACP nominating (or confirming) the candidate(s), and formally stating that the candidates have met the requirements for CMC as agreed between the institute and the ACP. It is also recommended best practice that institutes should require a summary of the candidate’s CV and assessment details for its records. On receiving the candidate’s nomination, the institute must check that the ACP is a currently recognised ACP; and decide whether it wishes to apply scrutiny on this occasion to the candidate(s) as in Requirement 8 below).

8. **The Institute nevertheless reserves the right to fully scrutinise any CMC Candidate from an ACP**
   National institutes nevertheless reserve the right to fully scrutinise the details of any individual CMC application from an ACP, (and if not satisfied can require the candidate to go through the full scrutiny process, as for direct CMC candidates). National institutes should exercise this right of scrutiny at least a few times each year, for quality control purposes.
9. CMCs from ACPs are individual members of the Institute, on the same basis as direct CMCs
CMC candidates from ACPs, once approved by the institute, become individual members of the institute, on the same basis and with the same responsibilities as direct entry CMCs. This means (for example) that they should meet the institute’s CPD requirements; are subject to the institute Code of Conduct and disciplinary procedures; and may retain their CMC status after leaving the ACP, subject to the institute’s normal requirements.

10. The Institute has the right to withdraw ACP status at any time
A national institute can at its discretion, withdraw ACP status from any of its ACPs at any time, subject to simultaneously advising the ICMCI of this action. Withdrawal of ACP status should be treated as the final sanction, applied only after an ACP has been warned of problems, and given every reasonable opportunity to rectify them. Reasons for that could be any major failure to continue to observe the requirements for ACP status, such as:

- professional development to CMC level is no longer adequate
- standards are no longer equivalent to the CMC standard
- proposed individual CMC candidates are not well qualified

2.2 Internal Consultancies

Individuals employed in the role of internal management consultants in (typically) large organisations within both the private and public sectors, have long been recognised as valid potential CMCs and members of the institute. Logically, therefore, the same principle has been applied to internal management units of such consultants in the context of qualification as potential Accredited Consulting Practices.

There are six main tests for internal management consultancy units to confirm that such management units (and correspondingly the individuals within them) are actually undertaking a management consultancy role. The tests are to be used in assessing whether a unit qualifies for consideration as an Accredited Consulting Practice. Correspondingly, the same basic tests can be used to assess whether an individual from an internal consultancy qualifies for consideration as a CMC.

The tests are designed to address basic characteristics of the management consultancy role, in the central respect of the relationship between client and consultant. The argument is that, in the absence of the characteristics which the tests address, the role being undertaken (though no doubt a perfectly valid one) is not a management consultancy role.

1 Is the internal consultancy an identifiable organisation or unit, managed separately from its actual and potential internal clients?
The first part of the test - is there an identifiable organisation? - is critical in any consideration as an Accredited Consulting Practice. The second part of the test, separate management of the unit from its internal clients, is of course relative: at some level in the overall management structure the reporting lines will come together. But this should ideally be at a relatively senior level, higher than the management level of the main business or operating units, however defined. The importance of this part of the test is that it gives assurance of the relative independence and hence objectivity of the management consultancy advice provided.
2 Is there the equivalent of a fee-paying relationship between the internal consultancy and its internal clients, preferably at broadly market rates or charges?

The argument is that payment for professional advice and help is of the essence of the management consultancy/client relationship. Such payment places an obligation on the consultancy and its consultant(s) to provide a thoroughly professional service delivering value for money; and gives the client the right (and the motivation) to require and ensure this, as well as helping to assure that the use of management consultancy is undertaken seriously. It is recognised of course that “charging” for internal consultancy is, some form of internal cross-charging, using various mechanisms. The closer such internal charging is to market rates and costs, the more the assurance that the relationship is as above: if charges are very significantly below market rates, it could cast serious doubt on this. The same point applies in the case where internal consultancies offer their services externally: subsidised rates would throw some doubt on the full validity of the management consultancy/client relationship.

3 Are the clients of the internal consultancy free to use external management consultants as an alternative?

It is argued that the client having a choice between different management consultancies (together with the ability at any time to go elsewhere if not satisfied), and correspondingly a management consultancy organisation being exposed to actual or potential competition (external competition in the case of internal consultancies), is – if not actually of the essence of the client/management relationship – a crucial discipline on management consultancy, in assuring a strong focus on the highest level of professionalism, delivery of results, and client satisfaction. If an internal consultancy is not subject to this discipline, then it is argued that the degree of development of these characteristics must be in real doubt and subject to serious (and sceptical) scrutiny. The client should have the opportunity to reject the internal consultant (that is go outside).

4 Does the consultancy have the right to refuse the assignment?

An internal consultancy that may be forced to take any assignment allocated by the parent company lacks the necessary independence to exercise detached professional judgement and to give objective advice based on that independence.

5 Does the consultant have the right to withdraw for professional reasons during the course of the assignment?

Similarly to the right to refuse an assignment, a consultant or internal consultancy who is unable to withdraw for professional reasons during the course of the engagement may lack the necessary detachment and independence.

6 Would the management of the firm be able/ prepared to sign an independence statement if required?

This can be an overriding as well as a supportive test that might compensate for any doubts on the five earlier points.

Application of the Tests

As the commentary on the tests above implies, the consideration of these tests should be undertaken with judgement and discretion; they are helpful indicators not absolute requirements and should be taken together and weighed in the balance. Considered overall in this way the tests essentially form a framework for guidance in qualifying potential internal consultancy candidates for Accredited Practice consideration, alongside other facts concerning the candidate organisation. However if an internal practice did not substantially meet the spirit of these six tests, it should not normally qualify as an Accredited Practice candidate.
3 The ACP Accreditation Standard Process

The standard process for a consulting practice to become an ACP is illustrated in the process flow below:

- **Initial Contact**: The Practice contacts the Member Institute which provides Information and Explanation.
- **Declaration of Intent**: The Practice completes Declaration of Intent Sample – ICMCI-ACP002.
- **Professional Development**: The Practice develops and implements its processes for professional development and CMC Assessment – assistance may be offered by the Institute.
- **Self-assessment**: The Practice completes a self-assessment of its processes against the requirements of the Institute for ACPs.
- **Corrective Actions**: The Practice corrects any deficiencies found in the assessment and continues implementation - assistance may be offered by the Institute.
- **Initial Review**: The Practice completes the two Statements of Equivalence and submits to the Institute for review Samples – ICMCI-ACP003 and ICMCI-ACP004. The Institute provides a report with recommendations.
- **Adjustment & Enhancement**: The Practice makes adjustments and improvements based on the Institute Assessment Report recommendations.
- **Formal Audit**: Qualified ACP Assessor(s) from the Institute visit the Practice, carry out a full formal audit and complete an assessment form Sample – ICMCI-ACP005.
- **Accreditation as ACP**: If the assessment is positive the Institute formally admits the Practice as an ACP and presents a Certificate Sample – ICMCI-ACP006.
- **If the assessment is negative the Practice should implement the recommended corrective actions and submit a corrective action report to the Institute for review. The Institute may accept the report without further audit.**
3.1 Professional development of the consulting practice

Initial contact

On request of the consulting practice the Institute gives written information and oral explanation of the benefits of ACP and the process to become ACP. The purposes and considerations of the consulting practice are discussed with the Institute representatives. The ten requirements and six tests for the eligibility of consultancies as accredited practices’ are discussed. Also the financial aspects of guidance and accreditation of the Institute will be part of the first step.

Declaration of Intent

When the Practice wants to continue, it is recommended to make a letter of intent for the whole process. This is to prevent the consulting practice stopping the process too easily without any good reason. The fee for guiding the process by the Institute has to be agreed too. The consultant and/or auditor on behalf of the Institute will be presented with professional background information (CV).

Professional development

Vision and policy on professional development (standards and processes) will be discussed with practice management. All steps in the development stage and accreditation stage are explained and discussed with management. A rough time schedule has to be agreed. Important is how intensive the guidance of the Institute will be during the development stage. Is the practice doing most by itself or do they want more guidance from the Institute?

An important aspect is the information communicated to internal consultants by the Practice. How all consultants are involved in this process will depend on the size and level of professionalism of the practice.

In large practices where professional standards and HR and QA processes are well established, the HR function is responsible for information and communication. It is also advisable to appoint a steering committee with most important consulting managers to commit them to the process. All consultants have to be informed about progress regularly.

In medium size practices where professional standards and HR processes have to be developed it is more important to involve and commit all consultants in the process. One steering committee and several project teams and/or working groups would be formed to work out the different issues. All consultants should be informed regularly about progress.

In a small practice with senior consultants all of them would be involved in all steps of the process by direct information, communication and/or participation.

Self-assessment

To stimulate self-learning and self-reflection it is advisable to let the practice work out a self-assessment. It is a reality check and the result is gap analysis. Reference are the two ACP Statements of Equivalence, one for professional development and one for CMC assessment. The role of the Institute here is explaining the subjects and coaching the Practice representatives. The Practice itself is doing the self-review.
Corrective Actions

When the self-assessment is done well by the Practice, it should be clear what professional elements have to be developed before initial review of the Institute would take place. These elements could be related to:

- Professional standards of the Practice like Body of Knowledge and Skills, Competence Framework and Code of Ethics;
- HR and other processes to assure professional development and daily operation in accordance with the Practice Standards.

This development stage can take a long time when practices has to do a lot of work on standards and processes. The role of the Institute is consulting and coaching; when necessary they can give assistance to internal workshops and meetings on specific professional issues. At the end of this step the Practice has to fill in the two ACP Statements of Equivalence actually and completely.

3.2 Accreditation of consulting practice

Initial Review

When the main development topics are implemented in daily practice, the Practice can request an initial review by the Institute. All subjects mentioned in the two ACP Statements of Equivalence are discussed on level of equivalence with the IMC/ICMCI standards. Progress on implementation will be part of discussion. Review of documents with regard to professional standards and processes will take place. This is a meeting with some selected representatives of the Practice. The main purpose is to review whether the Practice is ready now for official visitation and audit by the Institute. The role of the Institute is changing from consulting and coaching to assessing and auditing.

Adjustment and Enhancement

Perhaps the Institute recommends that the Practice has to work out some subjects better before official visitation and audit will take place.

Formal Audit

The main purpose of the visitation and audit is to review whether 'written' professional standards and processes are really operational in daily practice. Therefore interviews with leading managers and several management consultants in different stages of development level will take place by the auditors from the Institute. The assessors will work out a report with findings and will discuss it with Practice representatives for reaction and feedback. When main corrections are not needed and the Practice is really serious about continued development of standards and processes, the auditors will make positive advice report to the Board of the Institute. It is recommended to do this audit with two assessors of the Institute. One could be the consultant that has given support during the development stage for continuity of the process. The other to be a new one for objectivity reasons and with a fresh and open mind.
Accreditation as ACP

The Board of the Institute will discuss the report with positive advice of the auditors and will take a decision on accreditation of the Practice. An official diploma will be made and handed over to the Accredited Consulting Practice (ACP). The ACP will be put in the Register of ACPs by the Institute and the ICMCI and published on the Institute and the ICMCI website as well. The Institute will agree with the Practice in what way CMC candidates has to be recommended to the Institute and what kind of (lesser) scrutiny will be appropriate.

3.3 On-going management of the ACP accreditation

Further implementation and continued professional development (CPD)

A list of further development topics with time schedule for next period will be agreed with practice. The purpose is to stimulate continued development. The Practice will keep the Institute informed of progress. The Institute will discuss with Practice management ways in which knowledge exchange between Practice consultants and other member consultants of the Institute will be arranged. Participation of Practice consultants into professional activities of the Institute would support this. CPD activities (training, workshops, coaching, counselling, etc.) of the Practice has to be reviewed and approved by the Institute as CPD in accordance with the IMC/ICMCI standards.

Annual visit and monitoring by the Institute

A Surveillance audit will be carried out each year to monitor the implementation of the Practice standards and assurance process. Realisation of the further development points and action plan will be discussed. This may involve an auditor of the Institute visiting the ACP or may be conducted remotely or by remote document review. Some files of CMC candidates may be reviewed from those who were recommended by the ACP to the Institute in recent year. When necessary oral explanation has to be given by the Practice management.

Triennial re-audit and re-accreditation by the Institute

The validity of the ACP diploma is three years. A re-audit will be held by assessors of the Institute each three year. Documentation review and interviews will be held with relevant leading and consulting people. Re-accreditation of following three years will be decided by Board of the Institute after studying the report and advice of the auditors.
4 Management of the ACP Accreditation Scheme

4.1 Management Organisation, Structure and System, Responsibility and Authority

The member institute shall be responsible for, shall retain authority for, and shall not delegate, its decisions relating to the CMC certification, including the granting, maintaining, recertifying, expanding and reducing the scope of the certification, and suspending or withdrawing the certification.

The member institute shall document its organizational structure in regard to the ACP accreditation, describing the duties, responsibilities and authorities of management, certification personnel and any committee.

The member institute shall establish, document, implement and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of this ACP Scheme.

4.2 Management of Impartiality

The member shall ensure that its ACP CMC Certification activities shall be structured and managed so as to safeguard impartiality and shall not allow commercial, financial or other pressures to compromise impartiality.

The member institute shall analyse, document and eliminate or minimize any potential conflicts of interest arising from its ACP activities. The member institute shall document and be able to demonstrate how it eliminates, minimizes or manages such threats.

4.3 Management of Finance

The member institute shall make its own financial arrangements for its national ACP scheme and will advise prospective ACPs of the fee structure during the initial contact activity.

4.4 Resources – Internal and Outsourced Personnel, Facilities

The member institute shall manage and be responsible for the performance of all personnel involved in the ACP Assessment process.

The member institute shall have sufficient personnel available with the necessary competence to perform ACP assessment functions.

The member institute shall define the competence requirements for personnel involved in the ACP assessment process.

The member institute shall provide its ACP assessors with documented instructions describing their duties and responsibilities. These instructions shall be kept up-to-date.

The member institute shall maintain up-to-date personnel records, including relevant information, e.g. qualifications, training, experience, professional affiliations, professional status, competence and known conflicts of interest.

ACP assessors acting on the member institute's behalf shall keep confidential all information obtained or created during the performance of the body's accreditation activities, except as required by law or where authorized by the ACP.
The member institute shall require its personnel to sign a document by which they commit themselves to comply with the rules defined by the member institute, including those relating to confidentiality, impartiality and conflict of interests.

The member institute shall require its personnel who are involved in the certification activities to declare any potential conflict of interest with any ACP.

The member institute shall monitor the performance of the ACP assessors and the reliability of their judgements. Where deficiencies are found, corrective actions shall be taken. 

*NOTE Monitoring procedures can include, for example, on-site observation, review of reports, feedback from ACPs.*

### 4.5 Control of Documents

Applicable requirements of the member institute’s CMC ACP Scheme shall be documented. The member institute shall ensure that the management system documentation is provided to all relevant personnel.

The member institute shall establish procedures to control the documents (internal and external) that relate to the fulfilment of this ACP Scheme. The procedures shall define the controls needed to:

a) approve documents for adequacy prior to issue;
b) review and update as necessary and re-approve documents;
c) ensure that changes and the current revision status of documents are identified;
d) ensure that relevant versions of applicable documents are provided at points of use;
e) ensure that documents remain legible and readily identifiable;
f) ensure that documents of external origin are identified and their distribution controlled;
g) prevent the unintended use of obsolete documents and apply suitable identification if they are retained for any purpose.

*NOTE Documentation can be in any form or type of medium.*

The member institute shall establish procedures to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of this ACP Scheme.

The member institute shall establish procedures for retaining records for a period consistent with its contractual and legal obligations. Access to these records shall be consistent with the confidentiality arrangements.
4.6 ACP Assessment Records

The member institute shall maintain records of ACP applicants and successfully accredited ACPs.

The records shall include a means to confirm the status of the ACP. The records shall demonstrate that the accreditation or re-accreditation process has been effectively fulfilled, particularly with respect to Equivalence Statements, assessment forms and other documents relating to granting, maintaining, re-accrediting, and suspending or withdrawing accreditation.

The records shall be identified, managed and disposed of in such a way as to ensure the integrity of the process and the confidentiality of the information. The records shall be kept for an appropriate period of time, for a minimum of one full accreditation cycle.

The member institute shall have enforceable arrangements to require that the ACP informs the member institute, without delay, of matters that can affect the capability of its CMC certified persons to continue to fulfil the certification requirements.

The member institute shall make publicly available without request information regarding the scope of the ACP scheme and a general description of the accreditation process.

The member institute shall develop and document policies and procedures necessary to ensure security throughout the entire accreditation process and shall have measures in place to take corrective actions when security breaches occur.

4.7 Internal Auditing and Management Review

The member institute’s top management shall establish procedures to review the management system controlling its ACP accreditation at planned intervals, in order to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of the ICMCI ACP Scheme currently in force. These reviews shall be conducted at least once every 12 months and shall be documented.

The member institute shall establish procedures for internal audits to verify that it fulfils the requirements of the ICMCI ACP Scheme and that the management system is effectively implemented and maintained.

Internal audits shall be performed at least once every 12 months. The frequency of internal audits may be reduced if the member institute can demonstrate that its management system continues to be effectively implemented in accordance with this ACP Scheme and has proven stability.

4.8 Corrective and Preventive Action

The member institute shall establish (a) procedure(s) for identification and management of nonconformities in its operations. The member institute shall also, where necessary, take actions to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions shall be appropriate to the impact of the problems encountered.

4.9 Accreditation Process by ICMCI of ACP Schemes in Member Institutes

As part of its mission to promote and maintain professional standards internationally in management consultancy, the ICMCI shall undertake an assessment of the management of ACP accreditation in member institutes against the requirements of the ICMCI ACP Scheme standard as part of its triennial assessment or audit of the CMC standard of member institutes.
5 Qualifications and training of Institute Assessors of ACPs

The role of the ACP Assessor in the development and accreditation process

The ultimate stage of the process of accreditation of a prospective ACP practice is the formal audit. This is carried out through a full day visit to the practice in its own offices by independent assessors appointed by the Institute (who may be accompanied by a member of Institute staff). This should only be undertaken after discussions with the practice have shown that it fully understands the ACP requirements, and the institute is reasonably sure that it is likely to meet these. When not ready, an auditor of the Institute can give guidance to the further development process of internal professional standards and assurance processes.

The assessors will be guided by a formal framework which sets out a structured consistent approach. The candidate ACP has to fill in completely the two Statements of Equivalence – ICMCI ACP003 and ICMCI ACP004.

The assessors will establish that a competency framework exists around which the training and development procedures are structured. And they will also undertake a comprehensive mapping of that framework against the institute's ICMCI compliant framework, in order to assure that it is at least equivalent to that standard.

The assessors will also look for evidence that the practice has in place processes and procedures for the training and development of professional consulting staff. The processes will start at recruitment and induction and run continuously thereafter. They should include procedures for periodic appraisal and assessment as well as routine feedback loops. It is expected that the consultants themselves will take a major role in formulating their training and development. The evidence may be presented either as hard copy or in electronic format.

An important feature of the audit is to agree with the prospective ACP the criteria for making an individual recommendation for the award of CMC i.e. the level of assessment or qualification within the ACP which is judged as equivalent to the CMC level. The practice should table proposals for consideration.

The assessors will interview at least three consultants in the practice, at various stages of development. The assessors will also interview those in the practice who will undertake key roles in respect of the ACP arrangement:

- The Practice Assessor: the senior person in the prospective ACP who takes responsibility for maintenance of the audited professional standard
- The In-practice Assessors; those within the prospective ACP responsible for the competence based assessment of consultants (the assessors will want to interview at least one or two).
- The Mentors: those within the prospective ACP who undertake a mentoring role for more junior staff, outside their direct line management.(again, the assessors will want to interview at least one or two).

It is a condition of the audit that these people will be made available at the time of the audit.
The assessor will submit a structured report in template form – ICMCI ACP005 covering each of the requirements of the audit framework, and including a recommendation for acceptance as an ACP or not, to the Institute. The practice will be informed in writing by the Institute about the outcome of the audit and their application for accreditation has been successful. The practice should also be on what it needs to improve.

The requirements and training for ACP auditors

The requirement is that an ACP assessor should:
- be an active management consultant or have been an active consultant within the last two years OR have a good working knowledge of professional management consultancy,
- have demonstrated experience in structured competency based assessment techniques,
- have demonstrated experience in interview techniques,
- have working knowledge of HR practices and processes,
- be confident and assured in dealing with consultants and HR professionals up to the most senior level,
- have good written and oral communication skills,
- be a Member of the Institute,
- be a CMC,
- have access to personal computer technology and an e-mail address,
- be available to travel to all parts of the Member country,
- be available at six week’s notice up to four times per year,
- be prepared to undergo up to two day's training on an expenses only basis, at four week's notice.

Time requirements

Each audit will take a full day, with half a day's preparation before and half a day's report writing subsequently.

Training and Quality Assurance

The assessor’s basic skills as professionals in the field of competence based assessment and professional learning and development are established at the recruitment stage. The selected assessors should then undergo training in the institute's ACP accreditation process, its CMC standard (particularly its competence framework), and the audit requirements. Normally this is undertaken through a one day course.

Quality is assured through this training, and through being accompanied by an institute staff member. In addition, the institute should exercise its right to regularly examine a sample number of CMC recommendations from ACPs. A triennial re-audit of each ACP also assures maintenance of standards. This is supplemented by an annual visit by a staff member to each ACP to discuss any changes to its standard or processes.