



BRITISH ACCREDITATION COUNCIL INSPECTION REPORT

INTERIM INSPECTION (Short Course Provider)

PROVIDER: Mobility Oil and Gas Ltd

ADDRESS: Devonshire House
Manor Way
London Elstree
Borehamwood
Hertfordshire
WD6 1LQ

HEAD OF PROVIDER: Mr Abiodun Grillo

ACCREDITATION STATUS: Accredited

DATE OF INSPECTION: 26 May 2021

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

PART A – INTRODUCTION

1. Background to the provider

Mobility Oil and Gas Limited (MOGL/the Provider) was established in 2010. It is a private training company limited by shares.

MOGL delivers courses in technical oil and gas subject areas and business and management. These are offered as part of the sector's Continuing Professional Development (CPD) requirement. Courses are delivered either outside the United Kingdom (UK) on clients' premises, or staff are sent to the UK for training, or training is online. British Accreditation Council (BAC) accreditation is for MOGL's delivery in the UK only.

The Provider's registered office is based in a serviced office building in London Elstree. In-person training is normally delivered on clients' premises, in rented conference facilities or at MOGL's registered office.

MOGL aims to deliver high-quality professional development for the global oil and gas industry.

The Provider is owned by a sole shareholder, who is the Managing Director (MD). There is also a General Manager (GM), who is in charge of operational management. The management team is supported by two administrators.

Since March 2020, MOGL has adapted in-person courses for online delivery.

Owing to the specialist nature of the courses offered, most participants are sponsored by their employers, with places commissioned and funded by these organisations' human resources departments.

2. Brief description of the current provision

MOGL offers an extensive range of sector-specific technical courses, as well as courses in business and management subjects. These technical areas include engineering, geology, project management and geophysics.

Most courses are commissioned and are run specifically for individual clients on their premises. In a small minority of cases, participants apply directly to the Provider for courses run on specific scheduled dates. In the UK, the Provider also offers a six-month Diploma in Drilling Engineering Technology. Most of the courses run over three to five days.

Content is delivered through a blend of lectures, seminars and facilitated workshops. MOGL's registered office has access to rooms that are suitable for classes of up to 14 participants. Class sizes in a client's own premises are limited to 20 participants. Online courses are limited to 20 participants.

Instruction and training are undertaken by a team of training consultants who are commissioned on demand to deliver courses as and when they are required. MOGL provides course descriptors to employers, who then select employees appropriate for course entry.

MOGL's training and instruction are for participants aged 18 years and over. At the time of the inspection, there were no courses running. Over the past year, participants have been an even balance of male and female, predominantly from Nigeria, UK, Canada, Oman and Pakistan.

3. Inspection process

The inspection was carried out remotely by a single inspector in one day. The inspector met with the MD, the GM and two instructors. A range of documentation was sampled and scrutinised by the inspector. It was not possible to inspect the premises during this inspection. The Provider's staff co-operated throughout the inspection and the inspection documentation was well organised.

4. Inspection history

Inspection type	Date
Full Accreditation	24 & 28 October 2014
Interim	3 August 2015
Supplementary	21 August 2017
Re-accreditation	20–21 November 2018
Supplementary	9 January 2020

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

Since the last inspection, the number of courses running has reduced and in-person courses have been adapted for online delivery.

Administrative staff have been furloughed since March 2020, and the GM has been on maternity leave. As a result, the MD has taken on all the administrative and operational responsibilities.

2. Response to action points in last report

2.4 Policies must be reviewed for relevance to the scope of MOGL's operation and so that they accurately reflect the name of the Provider and include creation and review dates.

Some policies have been reviewed and are now relevant to the operation. However, the majority of policies have not yet been reviewed and are, therefore, still not relevant. No policies include creation and review dates.

8.1 The Provider must review and strengthen the quality policy so that it reflects current practice and the provision and enables managers to undertake accurate self-assessment and quality improvement planning.

The quality policy has not yet been reviewed or strengthened and does not, therefore, reflect current practice and provision. As a result, managers cannot undertake accurate self-assessment and quality improvement planning.

17.5 The Provider must put in place policies to avoid discrimination and a published procedure for dealing with any abusive behaviour.

There are no policies or published procedures in place for dealing with abusive behaviour.

17.7 An effective policy and procedures must be put in place to protect participants from the risks associated with radicalisation and extremism to include a risk assessment and staff training.

There is no policy, risk assessment or staff training in place to protect participants from the risks associated with radicalisation and extremism.

24.4 The Provider must ensure that the fire safety information produced by the building management is provided to staff, participants and visitors.

The Provider has produced a set of clear guidelines for safely evacuating the building in the event of a fire. This is suitable to provide to staff, participants and visitors. The information is displayed in appropriate places in the premises, including the lift and meeting rooms.

24.5 The Provider must ensure that there is sufficient signage inside and outside the premises and that there are noticeboards displaying information for participants.

The Provider operates from a rented building that has more than 30 other companies working from the same building. The managers of the building have a policy that the names of all the individual companies cannot be permanently displayed at the entrance to the building.

3. Response to recommended areas for improvement in last report

MOGL should consider strengthening the staff appraisal process by consistently setting achievable performance improvement targets.

This recommendation has been partially acted upon. The GM's most recent appraisal includes performance targets. However, due to staff absence, administrative staff have not engaged with an appraisal process and do not have performance targets. The Provider intends to implement a full appraisal programme when staff return from absence.

MOGL should consider extending the reporting process currently used for a minority of sponsor organisations to all provision, in order to strengthen self-assessment and support quality improvement planning.

This recommendation is no longer in place following discussions with the Provider, who clearly articulated that the vast majority of sponsors do not request reports on training, and it is therefore not necessary to extend the reporting process to other sponsor organisations.

It is recommended that MOGL extends the focus of the lesson observations to include evaluating teaching practice and methodology to better support the instructors' professional development.

The Provider has not yet acted upon this recommendation. It is intended to extend the focus of the lesson observations when the GM returns to work.

It is recommended that MOGL extends the formal communication of its health and safety information and evacuation procedures to visitors.

The MD meets all visitors on arrival and ensures that they are briefed on health and safety procedures. In addition, the Provider has produced a set of clear guidelines for safely evacuating the building in the event of a fire. This is suitable to provide to staff, participants and visitors.

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 management structure is clearly defined and known and understood by employees and contracted instructors. The MD and GM have postgraduate qualifications in MOGL's field of engineering ensuring that they have suitable expertise.

2.4 While some policies have been reviewed and are relevant to the operation, the majority are generic and do not refer to the specific context of MOGL. Policies do not include creation and review dates.

Effective staff recruitment policies and procedures are in place, ensuring that new recruits are interviewed and have appropriate suitability checks prior to appointment.

Current staff have had a full recent appraisal that includes a meeting with the GM and the setting of performance targets, providing effective staff monitoring and review. However, due to absence, administrative staff have not engaged with an appraisal process and do not have performance targets. The Provider intends to implement a full appraisal programme when staff return from absence.

Publicity via the Provider's website is up to date and gives an accurate description of the location, premises and facilities, giving rise to realistic expectations among prospective participants.

The Provider communicates with participants' employers to ensure that courses are suitable for their employees. In addition, instructors feed back to the Provider on participants' progress on a daily basis, ensuring that their suitability is monitored on an ongoing basis.

Participants are registered every day and records of attendance are kept by instructors. Any absences are reported to the MD, who follows up and discusses rescheduling of sessions with participants.

8.1 The quality policy does not reflect current practice and provision. As a result, managers cannot undertake accurate self-assessment and quality improvement planning.

Annual reports and performance reviews are not carried out, resulting in a lack of self-assessment and quality improvement planning.

4.2 Teaching, Learning and Assessment (spot check)

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

Comments

The MD has responsibility for teaching, learning and assessment and works closely with trainers to ensure the effective management of courses.

Trainers develop courses themselves, using materials and outlines created by the Provider. The MD monitors courses, ensuring that they are regularly reviewed and revised.

Trainers adapt materials according to participants' needs by reviewing course objectives and key learning points at the beginning of the course, and on an ongoing basis. This ensures that the course objectives are met and the needs of the participants are satisfied as far as possible.

Trainers have extensive professional backgrounds working in the oil and gas sector, as well as high levels of experience in teaching. As a result, their subject and pedagogic knowledge is at a level that allows them to deliver courses effectively.

The focus of the lesson observations is limited and does not include the evaluation of teaching practice and methodology and therefore does not support trainers' professional development effectively.

Trainers pursue their own Continuing Professional Development (CPD) and update their subject knowledge through active participation in professional bodies, which includes attending lectures, participating in discussions and reading the latest research.

While there are no formal assessments on the courses, participants are given frequent individual feedback on their performance by instructors at the beginning and end of each day. As a result, they know what they are doing well and what they need to do to improve.

4.3 Participant Welfare (spot check)

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

Comments

The GM is responsible for participant welfare and is suitably experienced. The GM is available to participants prior to and during courses and is able to provide appropriate advice before courses begin and when they are running.

Participants receive a thorough induction from the MD, the GM and from their trainer at the start of the course. This ensures that they receive good and useful initial information covering appropriate academic, pastoral and logistical areas.

17.5 There are no policies in place to avoid discrimination and no procedures for dealing with any abusive behaviour, including cyberbullying.

17.7 There is no policy, risk assessment or staff training in place to protect participants from the risks associated with radicalisation and extremism.

Participants have access to a fair complaints policy via the participants' handbook, which is shared with them prior to the start of the course. The policy includes an appropriate 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

The Provider confirmed by e-mail and during the inspection that the use of the premises has not significantly changed since the last inspection when the premises were inspected. As it was not possible to inspect the premises, compliance is based on the outcomes of the previous inspection. No contrary indicators were noted during this inspection.

4.5 Compliance Declaration

Declaration of compliance has been signed and dated. Yes No

PART C – SUMMARY OF STRENGTHS AND ACTION POINTS

STRENGTHS

The management structure is clearly defined and clearly understood by employees and contracted instructors.

Publicity is up to date and gives an accurate description of the location, premises and facilities, giving rise to realistic expectations among participants.

Courses are planned to meet participants' needs. Course delivery focuses on ongoing feedback to ensure that participants' learning objectives are met.

ACTIONS REQUIRED

2.4 Policies must be reviewed for relevance to the scope of MOGL's operation and so that they accurately reflect the name of the Provider and include creation and review dates.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
8.1 The Provider must review and strengthen the quality policy so that it reflects current practice and the provision.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
A reporting system must be put in place to strengthen self-assessment and support quality improvement planning.	<input type="checkbox"/> High	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> Low
17.5 The Provider must put in place policies to avoid discrimination and a published procedure for dealing with any abusive behaviour.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low
17.7 An effective policy and procedures must be put in place to protect participants from the risks associated with radicalisation and extremism.	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low

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

MOGL should consider strengthening the staff appraisal process by consistently setting achievable performance improvement targets.

It is recommended that MOGL extends the focus of lesson observations to include evaluating teaching practice and methodology to better support instructors' professional development.

COMPLIANCE WITH STATUTORY REQUIREMENTS – FURTHER COMMENTS, IF APPLICABLE