

Thurrock Borough Council

Appendix 1 - Compliance Health
Check

January 2026

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Preface

Pennington Choices provides property surveying and consultancy services to organisations nationwide. We have a wealth of experience working with more than 150 public and private sector organisations across social housing, NHS, education, retail, rail, police, and local authorities over the past 20 years. Our breadth of services makes us unique and provides a cost and time-effective solution to our clients.

Our advisory, professional and out-sourced services are:

- Housing and finance consultancy
- Occupational health and safety
- Recruitment services
- Asbestos – surveying, analysis, and management
- Chartered building and quantity surveying
- Stock condition and asset management.
- Fire safety and compliance.
- Energy - EPCs and sustainability services
- Gas and electrical – auditing, inspection, and management
- Professional training and qualifications

We develop lasting professional relationships and partnerships with all our clients. We do this by helping them to meet their strategic objectives by adding real value to organisations and projects. Many of our long-term clients are contractors, social housing organisations, local authorities, health and social care organisations, private landlords, homeowners, and education providers.

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Version Control

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27/01/2026	V0.1	First draft
12/02/2026	V0.2	Internal review
	V0.3	Draft issued
	V0.4	Client review
	V1.0	Final version

Executive summary

Thurrock Borough Council (TBC) have commissioned this Compliance Health Check to assess its approach to managing the six key compliance areas: gas, electric, fire, asbestos, lifts, and water. The report assesses TBC's compliance with various safety and regulatory standards across key areas, including governance, data management, fire safety, gas safety, electrical safety, water hygiene, asbestos management, lift safety, contract management and procurement.

Key findings

	Strong foundations with committed teams: TBC demonstrates a strong organisational commitment to property compliance across all six key safety areas, supported by regular reporting, capable staff, and generally effective contractor management arrangements. Many elements of good practice are in place, particularly in gas, electrical, and fire safety delivery
	Data accuracy and system reliance present the most significant risk: The most significant weakness identified relates to data management. Reliance on spreadsheets alongside the asset management system has resulted in discrepancies between compliance trackers and supporting certification across multiple programmes (gas, lifts, water, and asbestos). These inconsistencies undermine auditability, weaken assurance, and increase the risk of missed statutory activity.
	Oversight, assurance and documentation require strengthening: While compliance programmes are functioning operationally, there is limited independent assurance over data accuracy and programme effectiveness. The absence of a comprehensive audit framework, combined with gaps in procedures, process mapping, and validation controls, reduces confidence that compliance arrangements are consistently robust and fully evidenced.
	The Asbestos Register needs improvement: The absence of a central asbestos register indicates a need to strengthen arrangements to ensure that accurate, complete, and up-to-date information is maintained within the asset management system as a single, authoritative asbestos register. Enhancing data integrity in this way would support more effective oversight of the asbestos programme and improve overall compliance assurance.

Recommendations and next steps

We have made six subject specific practical recommendations to help improve your approach to property compliance. These are set out within the Action Plan and Roadmap (see Appendix 2):

We recommend the findings and recommendations within this report are shared with the Executive Team, Board, and any relevant scrutiny panel/committee so members understand the current position and can provide support for any further action required.

1. Introduction

- 1.1.1. We have been commissioned by Thurrock Borough Council (TBC) to undertake a Compliance Health Check as part of a wider review of compliance with the Regulator of Social Housing's Safety and Quality Standard. The Health Check provides a high-level assessment of the management and performance of six core areas of property compliance across all properties owned and managed by TBC.
- Gas and heating safety.
 - Electrical safety.
 - Fire safety.
 - Asbestos management.
 - Water hygiene.
 - Lift safety.
- 1.1.2. Our approach to undertaking this Health Check included:
- Developing bespoke key lines of enquiry to form the basis of assessment.
 - Asset data and document review.
 - Sample checks of compliance records.
 - Interviews with team members involved in delivering compliance programmes.
 - Reviewing key corporate documents and compliance policies, processes, and procedures.
 - Reviewing compliance performance reporting at management and governance levels.
 - Reviewing internal and external audit and testing arrangements.
- 1.1.3. We have assessed your compliance with legislation, regulation and Approved Codes of Practice, and considered whether your governance arrangements provide appropriate levels of assurance for meeting these obligations.
- 1.1.4. The views and assumptions set out in this report reflect the documents, reports and data we reviewed. They also reflect the information shared with us by employees during discussions held on 20 and 21 January 2026. Employees were fully engaged, open in their participation and demonstrated a strong commitment to continuous improvement.
- 1.1.5. We recommend that the findings and recommendations within this report are shared with the Executive Team, Board and any relevant scrutiny panels or committees so members understand the current position and can support any further action required.
- 1.1.6. Section 2 outlines our summary of strategic findings that apply across all six compliance areas, and Section 3 provides a position statement for each compliance area. All recommendations made throughout the report are collated into a Compliance Roadmap and action plan in Appendix 1.

2. Findings

2.1. Overview

- 2.1.1. TBC has shown a strong commitment to managing property compliance across the six main compliance areas: gas, electrical, fire, asbestos, lifts and water. You have several solid foundations in place, but there are areas that require strengthening.
- 2.1.2. One of the biggest challenges relates to data management. Compliance programmes are currently managed through spreadsheets alongside the Northgate NEC asset management system. This creates risks around duplication and errors across key compliance areas. To provide confidence to staff, leaders and tenants, information needs to be held in a single, reliable system that offers one version of the truth.
- 2.1.3. When we tested sample records provided to us, we identified inconsistencies, including discrepancies in gas records, lift servicing records and water risk assessment dates recorded in Excel compliance trackers. These are detailed in Section 2.3. Individually, these issues may seem minor, but collectively they highlight potential systemic weaknesses that undermine assurance and could expose the organisation to risk. Stronger documentation and more robust checking processes would support improvement.
- 2.1.4. Contractor management arrangements are generally robust, supported by consistent use of standardised meeting agendas and formal recording of minutes. These reflect strong governance and operational controls. However, we also noted areas where TBC is overly reliant on contractors or contractor systems. These issues are outlined within the report.
- 2.1.5. Tenant engagement mechanisms exist, but communication around property safety could be improved. Tenants do not currently receive safety-related information in a consistent or structured format, which may limit their understanding and confidence. Introducing a more coordinated communication approach will help ensure tenants are better informed and strengthen accountability and trust.
- 2.1.6. Finally, TBC needs stronger assurance that compliance arrangements are functioning as intended. There is currently no comprehensive audit programme or independent external review to validate compliance. Introducing these measures would provide the additional assurance needed that data is accurate, risks are being managed and tenants remain safe. Overall, TBC has many positive elements in place, but there are opportunities to strengthen the robustness, reliability and transparency of compliance arrangements.
- 2.1.7. Across this review, six property-compliance-specific recommendations have been made, supported by a roadmap aimed at progressing from limited to substantial assurance over the next 12 months.

2.2. Compliance Data and records

- 2.2.1. Robust and accurate data is fundamental to demonstrating compliance with legal and regulatory obligations and to evidencing that residents' homes are safe. Where data is inaccurate or incomplete, this undermines effective delivery and reduces your ability to provide assurance that statutory responsibilities are being met.
- 2.2.2. Your asset management system (AMS), Northgate NEC, is used to store asset data. However, spreadsheets are currently used to manage compliance programmes. This creates risks of duplication and inconsistencies across records. These issues highlight the need to establish the AMS as the single source of truth so that all compliance and contract information is accurate, current and consistently maintained, particularly given the discrepancies identified between compliance trackers and certificate dates, which are outlined below.
- 2.2.3. As part of our review, we compared sample records with the data held within your compliance trackers. While we noted positive practices, such as the annual validation of trackers against the AMS and the real-time updating of acquisitions and disposals, we also identified several discrepancies across your compliance programmes, including gas, lift, water and asbestos safety. These discrepancies raise concerns about the accuracy of safety documentation and the effectiveness of your monitoring processes.
- 2.2.4. Within your gas safety programme, we identified inconsistencies between your Landlord Gas Safety Records (LGSRs) and the dates shown on your tracker. For example, for 1 Beaconsfield Place, the LGSR showed a certificate date of 22 October 2025, while the tracker recorded a “current servicing year actual date” of 29 October 2025. As MOT-style servicing is not in place, there was no justified reason for this mismatch.
- 2.2.5. In your lift inspection programme, we found a similar issue. For Alma Court, the LOLER inspection certificate showed a date of 8 September 2025, but your tracker recorded 7 July 2025. While an earlier inspection may have taken place, the tracker should reflect the most recent inspection.
- 2.2.6. We also identified inconsistencies in your water safety programme. A legionella risk assessment completed on 17 June 2016, and reviewed on 17 June 2018, was accurately recorded in terms of its original date, but the review date shown on the tracker did not match the supporting evidence. The tracker recorded a review date of 26 July 2025, but no evidence was available to support this entry.
- 2.2.7. These inconsistencies undermine the clarity and auditability of compliance activity and increase the risk that critical reinspection requirements may be missed. Without a reliable and formalised recording process, it is difficult to demonstrate that statutory inspections are completed in line with regulatory requirements and internal policies, which may weaken assurance and pose potential risks to tenant safety.
- 2.2.8. We also observed that the asbestos register is not centrally maintained within the AMS and instead operates primarily as a document repository, with contractors accessing

individual survey reports. Without asbestos data being held directly in the system, it is unclear how effective notifications or warnings are generated for staff regarding the presence of asbestos-containing materials.

- 2.2.9. Current arrangements rely on contractors confirming that they have reviewed relevant surveys before undertaking work. However, this depends on contractors having the appropriate expertise to interpret survey findings, and there may be cases where areas previously identified as containing asbestos are not captured in more recent surveys due to access constraints. This requires contractors to review multiple historical surveys to gain a full understanding of risk.
- 2.2.10. The absence of a centralised asbestos register indicates the need to strengthen data management arrangements to ensure asbestos information is accurate, complete and up to date. A single, authoritative register would reduce reliance on contractors interpreting multiple reports and would strengthen assurance that asbestos risks are effectively identified, communicated and managed. This improvement would also support more effective oversight of the asbestos programme and enhance overall compliance assurance.
- 2.2.11. We have made a series of data management recommendations in the wider Safety and Quality Standard report, and these are repeated here for completeness.

Recommendations

Recommendation 4 (Safety and Quality Report) – Data validation - Critical.

1. Undertake a coordinated data validation exercise across all compliance areas to provide assurance on property assets, compliance programmes and associated records. This should be completed by an independent third party (internal or external) to ensure a robust methodology and appropriate challenge.
2. Following this validation exercise, establish a formal, regular and documented reconciliation process to ensure asset and compliance data remains accurate and up to date. Introduce compliance data reviews across all areas and ensure staff receive training on accurate and auditable record keeping.

Recommendation 5 (Safety and Quality Report) – Establish a single source of truth to strengthen compliance oversight - High.

1. Explore the capabilities of your asset management system, Northgate NEC, to centralise all compliance and contract data within the system.
2. Where the system does not fully meet organisational requirements, consider procuring suitable compliance management software to eliminate reliance on spreadsheets and reduce the risk of duplication or errors.

3. Ensure records are updated promptly by the administration team, supported by automated data transfers and monitoring arrangements to identify and address any delays.

Recommendation 6 (Safety and Quality Report) – Centralised asbestos register within the AMS - High

Develop a centrally managed asbestos register within the asset management system. The register should consolidate all asbestos-related information, including survey findings, identified asbestos-containing materials (ACMs), access limitations and review dates, and be kept accurate and up to date.

3. Subject specific findings

3.1. Gas and heating safety

Under the Gas Safety (Installation and Use) Regulations 1998, TBC must ensure that an annual gas safety check is carried out, by a qualified Gas Safe registered engineer, to ensure that all gas installation pipework, gas appliances (other than tenants' own appliances), and flues serving those appliances are maintained in a safe condition. Records must be kept for two years, and a copy of the Landlord's Gas Safety Record (LGSR) issued to tenants within 28 days. In communal properties, the gas safety record must be displayed in a prominent place.

- 3.1.1. Gas safety management within TBC is generally robust and supported by strong internal controls, ensuring compliance with the Gas Safety (Installation and Use) Regulations 1998 and the Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022. Compliance is monitored consistently, and any overdue checks are promptly escalated and addressed by the relevant teams, including the use of legal action where required. These practices help maintain tenant safety and regulatory compliance.
- 3.1.2. Additional health and safety checks are carried out in all domestic properties as part of the gas service. This includes checking smoke and carbon monoxide alarm installations to ensure compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022. Hard-wired detectors are installed as best practice.
- 3.1.3. You also shared several examples of good practice. For instance, all void properties are capped within 24 hours, with mutual exchanges treated as voids and subject to the same process. A gas service is carried out for all new tenants. Capped properties remain on the servicing programme, and the Housing Management Team carries out frequent welfare checks on these homes.

- 3.1.4. Despite this strong overall approach, we identified discrepancies between the dates recorded on LGSR certificates and the servicing dates shown in your compliance tracker. These mismatches, outlined in Section 2.3.4, were not supported by any justified explanation. Resolving these issues is important to maintain accurate records and preserve the integrity of the gas safety programme.
- 3.1.5. While strong operational practices are in place and TBC is broadly meeting its legal obligations, we identified an area where full compliance has not yet been achieved. Although gas engineers display a copy of the Landlord's Gas Safety Record on the front of communal boilers, the documentation is not positioned in an area accessible to all residents served by those boilers. This does not fully meet the requirement for records to be visible and accessible to affected tenants.
- 3.1.6. We also identified concerns that TBC does not currently have full operational control of its gas servicing programme. A property list is issued to the contractor, who then manages the programme in its entirety. Progress updates and appointment information are provided via spreadsheets circulated by email. These spreadsheets are not actively managed by TBC and are not received frequently enough to support effective oversight or provide real-time visibility. This increases the risk of delays in identifying and responding to emerging issues. We discussed the potential to explore a shared data environment, such as SharePoint, to ensure both TBC and the contractor are working from a single, up-to-date dataset. This would support timely decision-making and more effective programme delivery.

Recommendations

Recommendation 19 – Ensure accessible display of landlord's gas safety records (LGSRs) for communal boilers - High.

Display LGSRs for communal boilers in locations accessible to all affected residents to meet Gas Safety Regulations 1998 and improve transparency on gas safety.

Recommendation 20 – Strengthening control of the gas servicing programme - High.

1. Strengthen oversight and control of the gas servicing programme by ensuring that programme data is centrally managed and owned by TBC.
2. Implement a shared, real time data management solution (for example, a secure shared platform, or via a contractor portal with direct integration to the AMS) to enable both TBC and its contractors to access and update programme information consistently.
3. Establish a single source of accurate, up to date data to improve visibility of servicing status and appointments, reduce reliance on emailed spreadsheets, and

support more effective monitoring, assurance, and delivery of statutory gas safety obligations.

3.2. Electrical safety

The Landlord and Tenant Act 1985 and Homes (Fitness for Human Habitation) Act 2018 require that the electrical installation in a rented property is tested and safe at the start of the tenancy and maintained in a safe condition throughout. To demonstrate compliance with this and other applicable legislation, TBC should undertake periodic electrical inspection and testing programmes and produce electrical installation condition reports (EICRs).

The Code of Practice for the Management of Electrotechnical Care in Social Housing recommends a five-year programme for domestic properties, and British Standard BS 7671 Requirements for Electrical Installations recommends a five-year frequency for commercial properties.

- 3.2.1. The management of electrical safety is generally effective and supported by several strong practices that demonstrate a proactive and robust approach to compliance. You are operating a five-year periodic testing programme for both domestic and communal properties, with Electrical Installation Condition Reports (EICRs) produced following each inspection. Importantly, you begin this process 12 months before the expiry date, which helps you capture properties where access has historically been difficult and reduces the likelihood of gaps in compliance.
- 3.2.2. A particularly positive aspect of your approach is your zero-tolerance position on required remedial works. Any issues identified during an inspection – whether Category 1 (immediate danger), Category 2 (potential danger) or observations requiring further investigation – are either rectified on site or scheduled promptly for follow-up within defined timescales. This proactive stance supports ongoing electrical safety across your stock and reduces the risk of non-compliance or harm to residents.
- 3.2.3. However, performance data from December 2025 showed that 19 properties had EICRs more than ten years old. Access to these homes is being progressed by your legal team. You should continue to explore all available routes to gain access to these properties, as well as any that remain beyond the five-year cycle, both to ensure tenant safety and to support compliance ahead of the mandatory five-year electrical safety checks for existing tenancies due to come into force in May 2026.

Recommendations

Recommendation 21 – Targeting properties with EICRs older than five years - Medium.

Prioritise gaining access to properties which are still outside the five-year cycle by May 2026.

3.3. Fire safety

In accordance with the Regulatory Reform (Fire Safety) Order 2005, TBC must carry out a fire risk assessment (FRA) on all communal parts of its properties, based on a risk assessment of the building and its occupants. The FRA must be kept up to date through periodic review in a timescale appropriate to the premises and/or occupation risk level. TBC must evidence completion of all general fire precautions, and any other actions identified within the FRA.

- 3.3.1. Controls are in place to support compliance with your legal obligations under the Regulatory Reform (Fire Safety) Order 2005, as amended by the Fire Safety Act 2021. You have an established fire risk assessment (FRA) programme and associated work schedules to address FRA actions. You are also fulfilling requirements under the Fire Safety (England) Regulations 2022 and the Building Safety Act 2022. There is a strong interface between the Housing Management Team and the Compliance Team, which supports coordinated fire safety management.
- 3.3.2. You advised that Type 1 FRAs are undertaken as a minimum standard across the programme, with Type 3 and Type 4 assessments completed for high-rise buildings. Reassessment intervals are determined using a risk-based approach, ranging from annual reviews to three-yearly reviews, depending on building type, usage and resident profile.
- 3.3.3. We were informed of several areas of good practice in your wider fire safety management. Regular block inspections are completed as part of your overall fire safety framework, and the Housing Management Team operates a sterile environment approach to managing hazards within communal areas.
- 3.3.4. Timely receipt of FRA reports is critical to ensure identified risks are addressed promptly and to demonstrate ongoing compliance with statutory requirements and good practice. Our review of contractor timescales showed that remedial action deadlines currently begin from the date the FRA is undertaken rather than from the date the report is received by TBC.
- 3.3.5. While high-risk issues are communicated immediately by assessors on site and are not reliant on the formal report, delays in receiving FRA documentation may still result in actions becoming overdue before TBC is formally notified. This may limit your ability to prioritise and implement required actions in a timely manner and could present risks to resident safety and overall compliance assurance.
- 3.3.6. We discussed options to mitigate this risk, including ensuring that robust service level agreements are in place for the timely receipt of FRA reports or aligning remedial action timescales to commence from the date the report is received. Strengthening these

arrangements will help ensure actions are prioritised appropriately, completed within the required timescales and compliant with statutory obligations and recognised best practice.

3.3.7. Recommendations

Recommendation 22 – Timely receipt and management of FRA actions - Medium.

Strengthen controls around the receipt and management of Fire Risk Assessment (FRA) reports to ensure timely visibility of all identified actions. This should include either the implementation of robust service level agreements with contractors specifying clear timescales for the submission of FRA reports, or the adjustment of internal remedial action timescales to commence from the date the FRA report is received.

3.4. Asbestos management

In accordance with the Control of Asbestos Regulations 2012 (CAR 2012), TBC has a duty to manage all non-domestic premises (for example, communal blocks and offices) to find out if there are asbestos-containing materials (ACMs) within these premises.

TBC is required to carry out an initial asbestos management survey followed by a periodic asbestos re-inspection (typically annually) where ACMs are found to be present. A written asbestos management plan must be prepared (which should be subject to periodic review), and up to date records kept recording the location and condition of ACMs. This information must be provided to anyone who is liable to work on or disturb these materials, such as operatives and residents.

- 3.4.1. Controls are in place to support compliance with your legal obligations under the Control of Asbestos Regulations (CAR) 2012. Asbestos management and reinspection surveys are undertaken across your communal blocks to identify and manage asbestos-containing materials (ACMs).
- 3.4.2. You also carry out asbestos surveys in domestic properties where there is a reason to believe ACMs may be present. Inspections are completed during void periods and as part of major works to ensure properties receive appropriate assessment. However, there is currently no formal record of where management surveys have been completed within domestic properties. Without a structured recording process, survey outcomes and details of identified ACMs are not consistently captured, which limits the value of these assessments and represents an inefficient use of time and resources.
- 3.4.3. While your overall approach to asbestos management is reasonable, we identified several areas where oversight of the programme could be strengthened.
- 3.4.4. Domestic asbestos surveys are being undertaken, but residents are not provided with information about the location of ACMs within their homes. Sharing this information is

essential to help tenants understand where ACMs are present, how to avoid disturbing them and what steps to take should accidental disturbance occur.

- 3.4.5. As noted in Section 2.2, your asbestos register is not currently integrated into the asset management system and instead functions as a document repository. This increases the risk of difficulties in maintaining real-time updates and limits accessibility for staff. Integrating the asbestos register into the AMS would improve data accuracy, strengthen oversight and create a more robust and auditable record of asbestos management across your property portfolio. Recommendations relating to this have already been outlined in Section 2.2.

Recommendations

Recommendation 23– Recording and management of domestic asbestos surveys - Medium.

1. Implement a formal and consistent process for recording all asbestos management surveys undertaken in domestic properties. This should include capturing survey dates, locations, access limitations and details of any identified asbestos-containing materials (ACMs) within a centrally managed system.
2. Establish a structured recording process to ensure survey findings are retained, accessible and used effectively. This will reduce duplication of effort and support a more efficient, reliable and auditable approach to domestic asbestos management.

Recommendation 24 – Improving resident communications on asbestos risks - Medium.

1. Develop a clear and proportionate approach to sharing asbestos-related information with residents, including providing property-specific details on the location of known or presumed asbestos-containing materials (ACMs) within their homes where appropriate.
2. Improving resident communication in this way will increase tenant awareness, reduce the risk of accidental disturbance, and help ensure residents understand the steps to take should asbestos be damaged or exposed.

3.5. Water hygiene

The Control of Substances Hazardous to Health Regulations (COSHH) 2002 (as amended) provides a framework of actions to control the risk from a range of hazardous substances including Legionella. Approved Code of Practice L8, Legionnaires' disease: The control of legionella bacteria in water systems (ACoP L8) has been produced to help duty holders comply with their legal duties.

TBC, as the duty holder, must carry out a Legionella risk assessment (LRA) to identify and evaluate potential sources of exposure to Legionella bacteria. The LRA must be reviewed regularly, and whenever there is reason to suspect it is no longer valid, such as after changes to the water system or occupancy patterns. While the law does not prescribe a fixed timescale, industry best practice recommends a review at least every two years.

Where a risk is identified, TBC must implement a Written Control Scheme that sets out operational procedures, monitoring requirements, and corrective actions to prevent, reduce, or control the risks from Legionella. Appropriate records of risk assessments, maintenance work, and monitoring results must be kept for at least five years where monitoring is carried out.


- 3.5.1. Water hygiene management is generally effective, with arrangements in place to ensure compliance with the Control of Substances Hazardous to Health Regulations 2002 and the Approved Code of Practice (ACoP) L8.
- 3.5.2. A legionella risk assessment (LRA) programme is in place alongside written control schemes. Domestic properties are managed using a practical and proportionate approach. For example, domestic header tanks are subject to regular cleaning as part of routine water hygiene management.
- 3.5.3. However, a review of your LRAs and associated programme identified inconsistencies between the review dates recorded and the supporting evidence available. In several cases, the review dates shown in the compliance tracker could not be substantiated. This results in unclear and non-auditable records of activity. These issues are discussed in Section 2.2, where related recommendations have been made.

3.6. Lift safety

As the duty holder, TBC is legally responsible for ensuring that its passenger lifts, domestic lifts (such as stairlifts, hoists, and through-floor lifts), and other lifting equipment (such as crane lifts and scissor lifts) are safe to use and comply with the requirements of the Health and Safety at Work etc. Act 1974, the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER), and the Provision and Use of Work Equipment Regulations 1998 (PUWER).

In accordance with LOLER, a competent person must carry out a thorough examination of lifting equipment used to carry people at least every six months, and lifting equipment used only for goods at least every twelve months, unless an examination scheme specifies a different frequency. Thorough examination reports must be retained for at least two years or until the next report, whichever is longer. Under PUWER, all lifting equipment must also be subject to a regular maintenance regime to ensure it remains in an efficient state, in efficient working order, and in good repair.

- 3.6.1. Lift safety management is generally effective, with arrangements in place to meet legal obligations under the Lifting Operations and Lifting Equipment Regulations (LOLER) 1998



and the associated Approved Code of Practice (L113). A six-monthly thorough examination programme is in place for all lifts, supported by monthly servicing, and you are reporting 100 per cent compliance.

- 3.6.2. During our document review, we identified discrepancies between the lift inspection dates recorded within the compliance tracker and the dates shown on the supporting LOLER certificates. These inconsistencies undermine the accuracy and auditability of records and indicate a need for stronger data management and validation controls. This issue is discussed further in Section 2.2 and associated recommendations have been made.
- 3.6.3. These discrepancies highlight potential gaps in the completeness and reliability of monitoring and scheduling arrangements. Ensuring that all properties with lifts are accurately captured within the programme is essential to maintaining regulatory compliance, enabling timely inspections and providing assurance that lifting equipment is maintained in accordance with statutory requirements.

Mission, vision, and values

Our company brand is an integral part of how and why we do what we do. It is important to us that our people are onboard and share our sense of purpose for the organisation which are captured in our:



Our Mission

To be you Trusted Expert



Our Vision

To be the UK's leading property consultants and surveyors, delivering ethical and sustainable solutions



Our Values

We deliver | We have fun
Integrity | Resilient
Collaborative | Brave