

**Enter and View:**

**The Gate**

**Surgery:**



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## About us

### Healthwatch Rotherham:

We are the independent champion for people who use health and social care services in Rotherham. We are here to make sure that those running services put people at the heart of care.

Our sole purpose is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. We focus on ensuring that peoples' worries and concerns about current services are addressed and work to get services right for the future.

## Details of visit:

Address	Chatham House Doncaster Gate Rotherham S25 1DJ
Service Provider	The Gate Surgery
Date and time of visit	27th January 2025, 10am - 1pm
Representatives	Alison North Kym Gleeson
Visit status	Announced

### The Gate Surgery:

The Gate Surgery is located at Chatham House, Doncaster Gate, S25 1DJ.

The provider, Gateway Primary Care C.I.C. (Community Interest Company) is a social enterprise. Gateway Primary Care has a total of 10291 registered patients across their 3 sites, of which 3294 patients attend The Gate Surgery. The Gate Surgery provides, to a predominantly younger age group, accessible and inclusive healthcare for Rotherham's hard to reach and vulnerable groups. The Gate surgery is situated in one of the most deprived areas nationally, with more than half of the patients who attend having English as their second language.

There is a team of 5 GP's , 2 Nurse Practitioners, 5 Nurses and 3 Healthcare Assistants. The clinical teams are supported by a team of Reception and Practice Management staff. The practice management team provides overall managerial oversight. The surgery also has a Shared Care Coordinator.

The practice was rated as 'Outstanding' when it was inspected in March 2017. A review conducted on 6th July 2023 found no evidence that this rating should be reassessed.

[Information taken from the latest CQC inspection dated 22/06/17]

## Disclaimer:

Please note that this report is related to findings observed on the date listed above. Our report relates to this specific visit to this service and is not representative of the experiences of all service users and staff, only an account of what was observed and contributed at the time. This report is written by Healthwatch Rotherham using the information gathered by the Enter and View Authorised Representatives named above who carried out the visit on behalf of Healthwatch Rotherham.

## What is Enter and View?

The Health and Social Care Act 2012 legislation allows Enter and View activity to be undertaken on premises where health and social care is publicly funded, such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. We visit:

- To gather the views of health and social care service users, families and carers.
- To report what we see and hear to providers, regulators, Local Authority and NHS commissioners and quality assurers, the public, Healthwatch England and any other relevant partners to improve the quality of health and social care services.
- To develop insights and recommendations across multiple visits to inform strategic decision making at local and national levels.

### **Purpose of the visit:**

- To collect the views from patients, families, volunteers and staff on services.
- To observe how the facility operates and provides its services.
- To identify 'Best Practice' and highlight any areas of concern.

## Methodology:

We follow Healthwatch England guidelines for Enter and View visits. The steps below summarise the process:

- **Plan:**
  - Appoint an Enter and View lead for the visit.
- **Communicate:**
  - Inform the provider of the visit, and relevant details including the purpose, date, time, estimation of how long it will take, how many people will be carrying out the visit, and the name of the lead person.
  - Include information about how members of the public can contact Healthwatch Rotherham if they are not able to when the visit is taking place.
- **Prepare:**
  - Prepare resources such as surveys and questionnaires.
  - Identify any requirements for special support necessary to facilitate the visit such as access or security. This must be done before the visit, as you may be refused entry.
- **Report:**
  - On completion of the visit a draft report is shared with the service provider requesting comments on factual accuracy and responses to any recommendations within 20 working days.
- **Follow up:**
  - The final report is published on Healthwatch Rotherham website and shared with the Care Quality Commission (CQC), Healthwatch England and the service provider.

The visit to The Gate Surgery took place from 10am to 1pm on 27th January 2025 with two trained Enter and View representatives.

During the visit the team were able to spend time observing the daily work of the surgery, noting the general environment such as cleanliness, comfort, and information displays, and to speak to both patients and staff.

## Enter and View observations:

### External and entrance:

On arrival, the surgery is well signposted with a large sign to the front of the building. There is a ramp up to the entrance or it can be accessed via 2 steps.

Initial access to the building is through an automatic sliding door into an internal conservatory porch area. This area contains pull up banners and posters for services such as Pharmacy First, Healthwave, Purple Buss, Substance misuse service and IAPT. There is also seating in this area but it is cold when the door opens.

Entry to the main reception waiting area is through a second, single push door, to the side of the conservatory porch area.

There are no opening times on display.

### Internal environment and waiting area:

On entering the reception area, we noted that it felt quite stark as all the walls and skirting were painted white. However, we noted that the doors were painted in a bright red colour which provided a good contrast. There were black chairs, mostly in good repair bar one which had a tear in it, arranged around the walls. The chairs were fixed to the floor which doesn't allow for wheelchairs to be parked. The area was clean and well ventilated, with hand sanitiser available throughout. CCTV was in operation in all communal areas.

There was a self check in point which allowed patients to check in using alternative languages. The reception desk was located as you came in through the main entrance and this was manned by a member of staff. Reception staff sit behind a glass screen and we noted that conversations could be heard throughout the reception waiting area. We also noted that due to the microphone enhancement behind the reception glass, conversations between patients and reception staff could be clearly heard in the back office. Although the reception waiting area was moderately busy, it still felt like a calm and safe space.

There are lots of posters on the walls in different languages. We noted a good poster explaining the triage system but felt this could've been bigger. We also saw lots of inspirational quotes placed on walls throughout the surgery. There was a TV on the wall but it was not on when we visited. There was also an electronic information sign but although this was on, it wasn't displaying any information.

A board with 'Your opinion matters' was in the reception waiting area, with information on how to complain and a suggestion box. However, there was no paper available to write any suggestions on. There is no Patient Participation Group at this surgery.

Consultation rooms are white, stark and clinical and there are no staff names on the doors. We did note there were no signs showing how to exit when leaving the consultation rooms. There is a rear door which patients were allowed to leave by which leads to a car parking area. Patients are not permitted to enter this way, but we were concerned that patients could hold this door open when leaving, allowing people into the building and into the secure area where patients are seen. We noted there was a chaperoning policy on one door, but not on others. There was also a white sign placed on a white wall making it difficult to see.

Toilet facilities were clean, large and spacious, with a good sized window. We did note that as everything was white, they were not dementia friendly.

Staff information is not freely available to patients and there are no boards showing staff pictures or names where patients can see (although this information was displayed in the back office). When we raised this with staff, it was explained that this was for staff safety reasons.

We noted the emergency exit door had no push bar and there is no sign for the way out.

### **Staff:**

We were made to feel very welcome by the staff at the surgery and all were observed carrying out their duties.

Lots of staff come and go through the reception waiting area and patients are collected by staff from there. However, there is only 1 receptionist working in the reception area, all other staff work upstairs. We observed reception staff speaking to patients very politely and answering any concerns that were raised.

There are 47 different languages spoken by patients attending the surgery, so staff use a Big Word tablet and Google translate when communicating with patients in other languages. The surgery operates a triage system for appointments which is overseen by a GP or Advanced Nurse Practitioner, which helps to prevent the service from becoming overwhelmed.

The surgery provides extra support to their patients, such as sleeping bags and clothes. They also have food parcels available through FareShare every Tuesday lunchtime.

Whilst we were there we observed a patient coming to pick up a food parcel and the member of staff at reception knew them by name, highlighting the level of care the surgery provides. The surgery is also used as a postal service to allow patients without a permanent address to receive their hospital appointments. Patients call in every few days to ask for their post.

Staff spoke about how their wellbeing is considered by the surgery and they take part in mindfulness sessions as well as games lunches and treating each other on birthdays. All staff take part in mandatory online training and other monthly training sessions.



## Survey Responses:

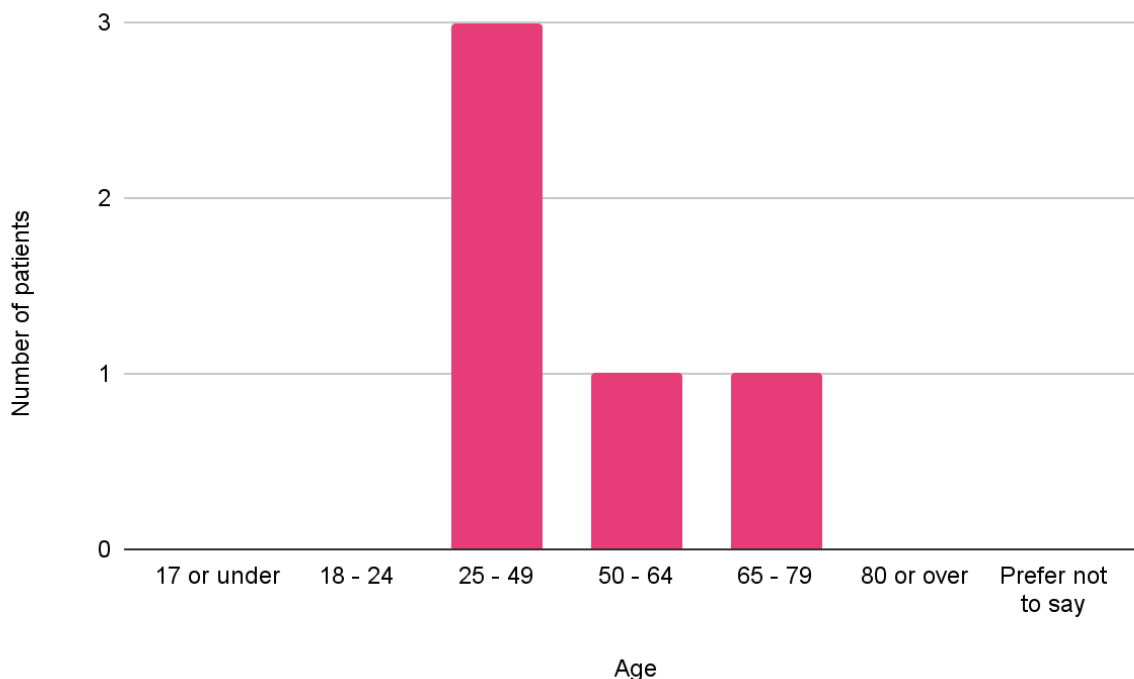
Prior to our visit, we had left some surveys and QR codes to our online surveys with the surgery, so that both patients and staff could provide us with feedback. We did this to get true and honest feedback from people who use and work at the surgery. We use this data combined with our own observations to form a summary and any recommendations.

Unfortunately, during our visit to the surgery we were unable to speak to any patients and we had no responses to our online survey. 5 surveys had however been completed by patients prior to our visit, so these form the basis of the feedback below. It should be noted that due to the low number of respondents, the validity of the results is limited and they may not form a representative sample.

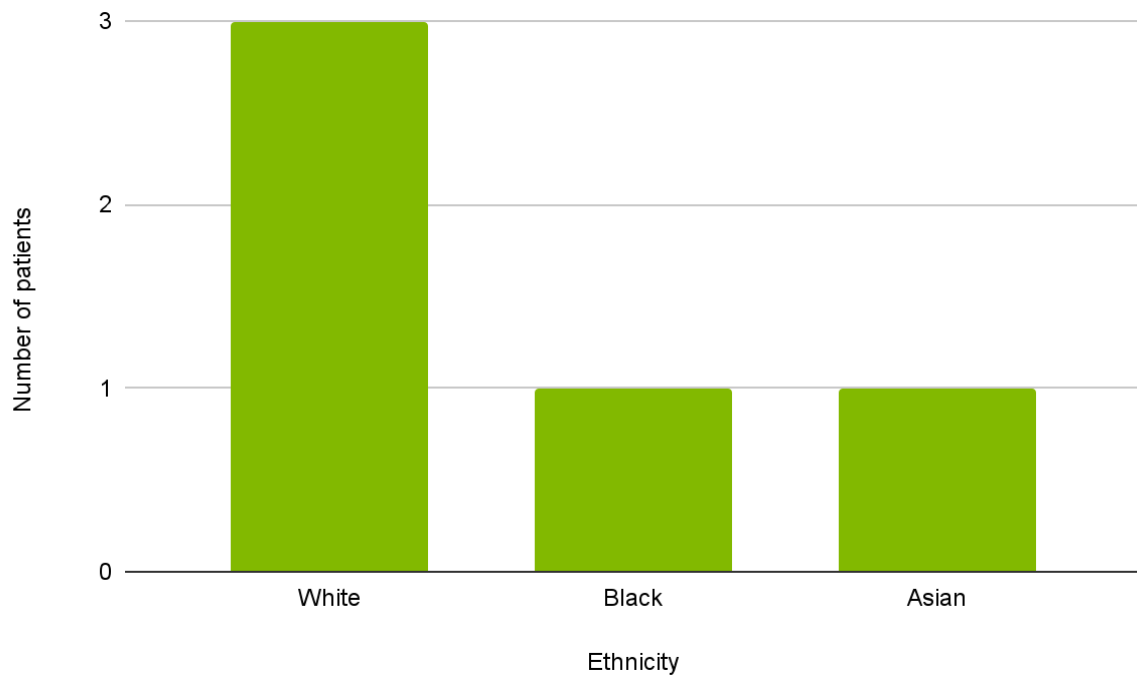
### Patients feedback:

#### Demographic data:

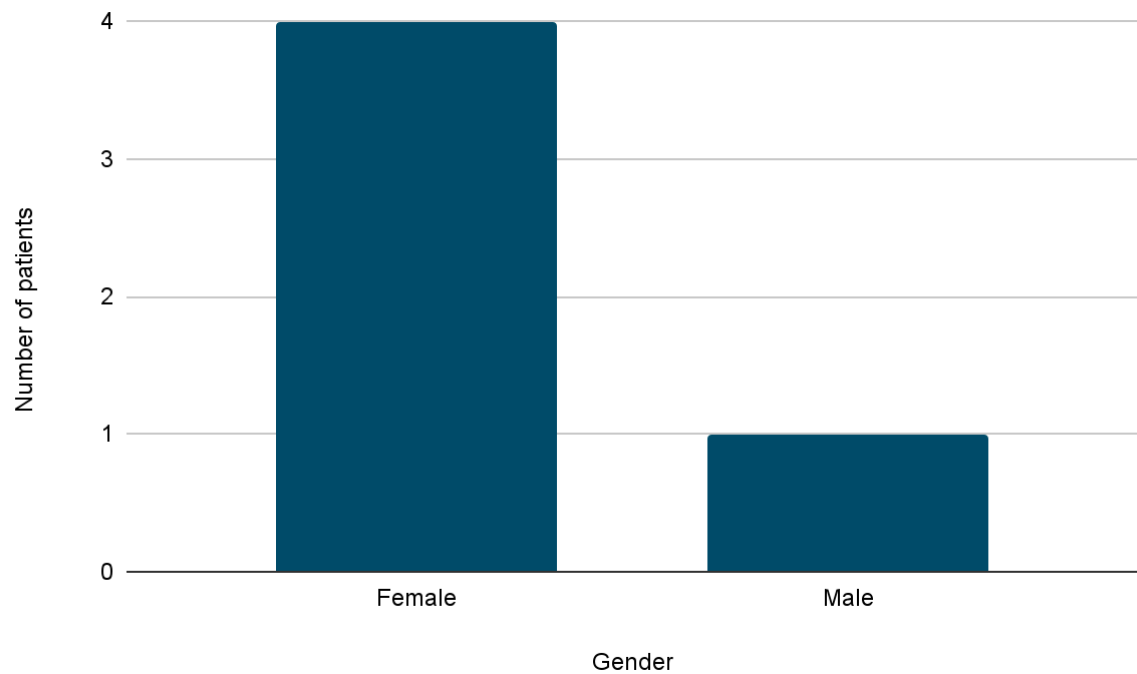
##### Age:



**Ethnicity:**

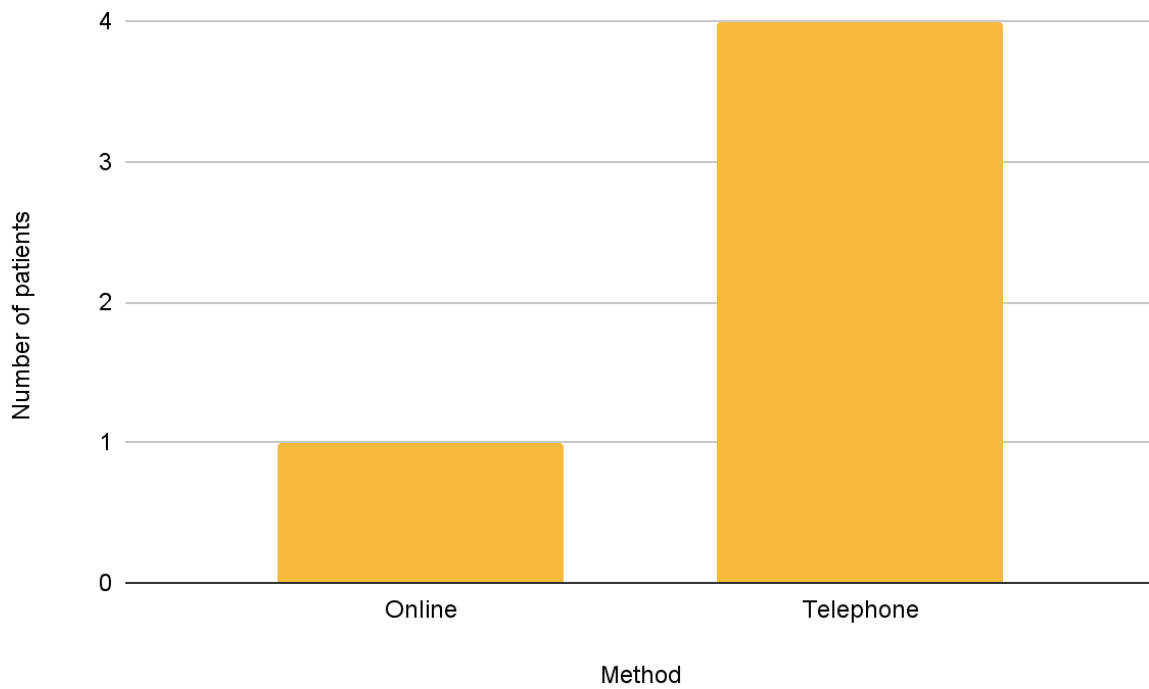


**Gender:**

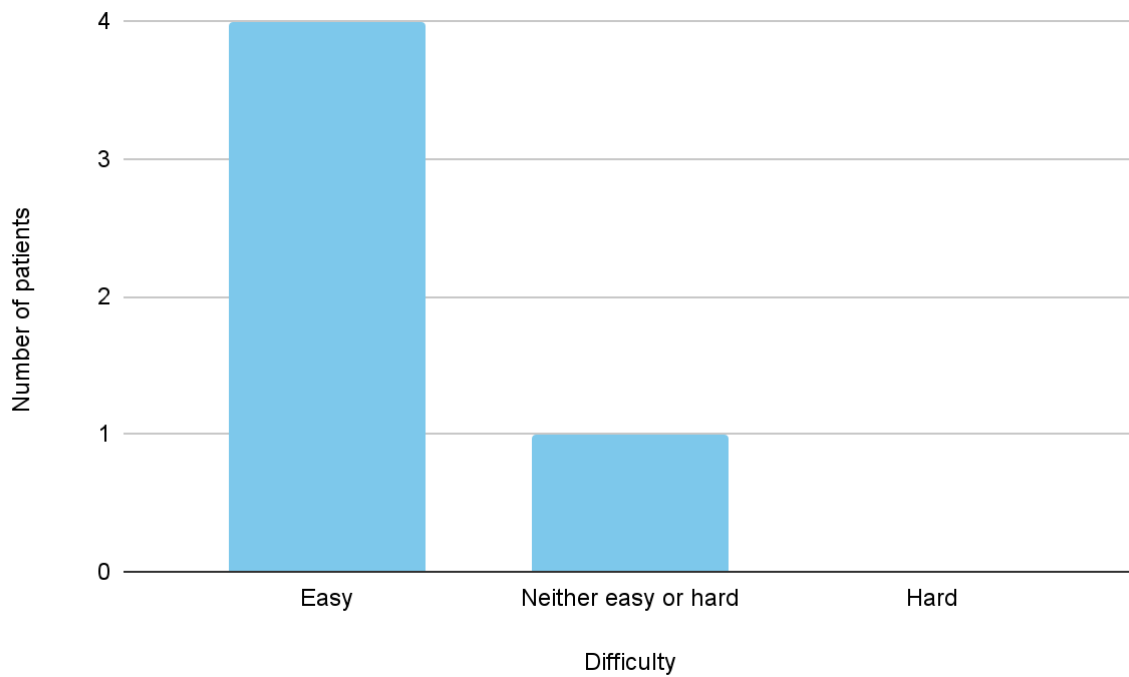


**We asked:**

**1. How did you book today's appointment?**

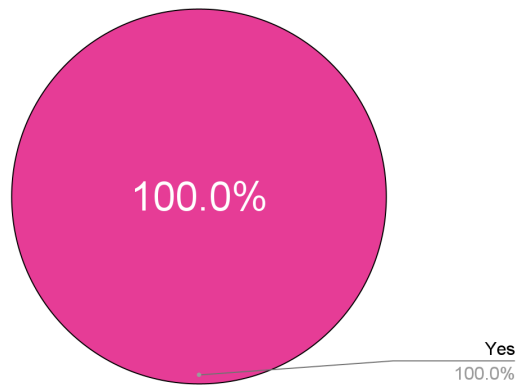


**2. How easy was it to make the appointment?**

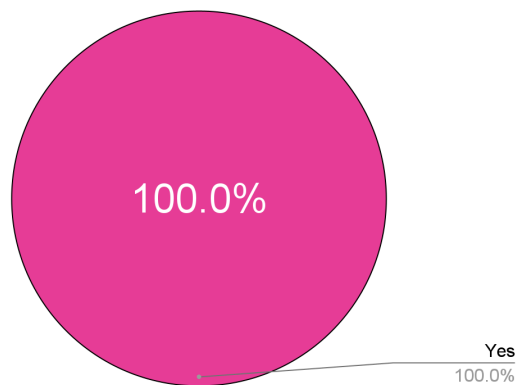


- "I call to reception"

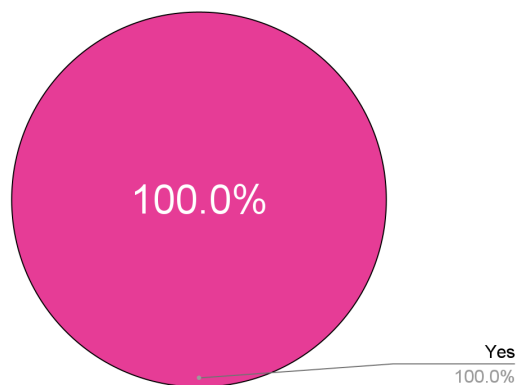
**3. Were you asked the reason why you wanted to see a doctor/clinician?**



**4. Were you comfortable giving the reason?**



**5. Were you happy with the appointment you were given?**



- "Thank you for everything"

## 6. When visiting the practice, how helpful were the following in relation to your individual needs?

### Reception staff:



Out of everyone who dealt with a member of reception staff, all said that they were helpful.

### Doctor:



Out of everyone who saw a doctor, all said that they were helpful.

### Nurse:



Out of everyone who saw a nurse, all said that they were helpful.

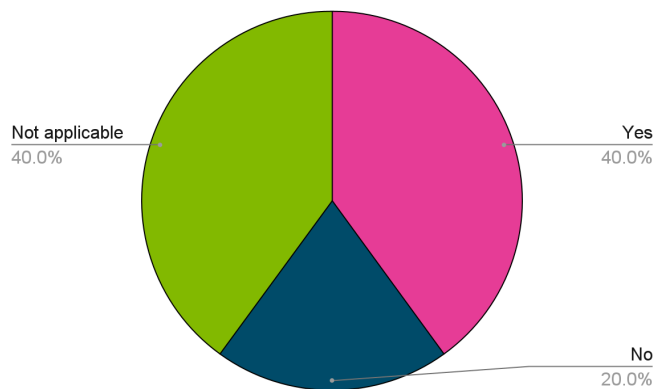
### Other medical professional:



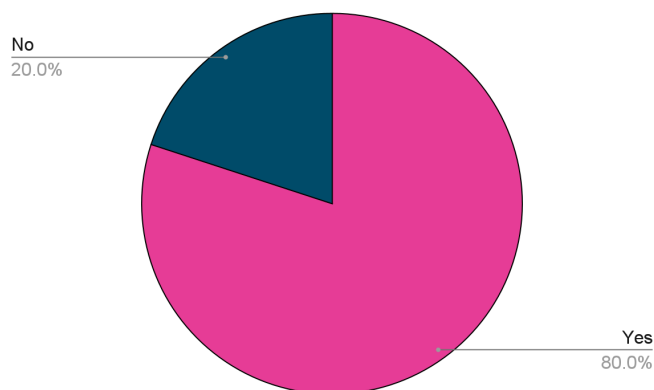
Out of everyone who saw another medical professional, all said that they were helpful.

- "Thank you. Good GP"

**7. If you need an interpreter, do you know how to arrange this with the practice?**



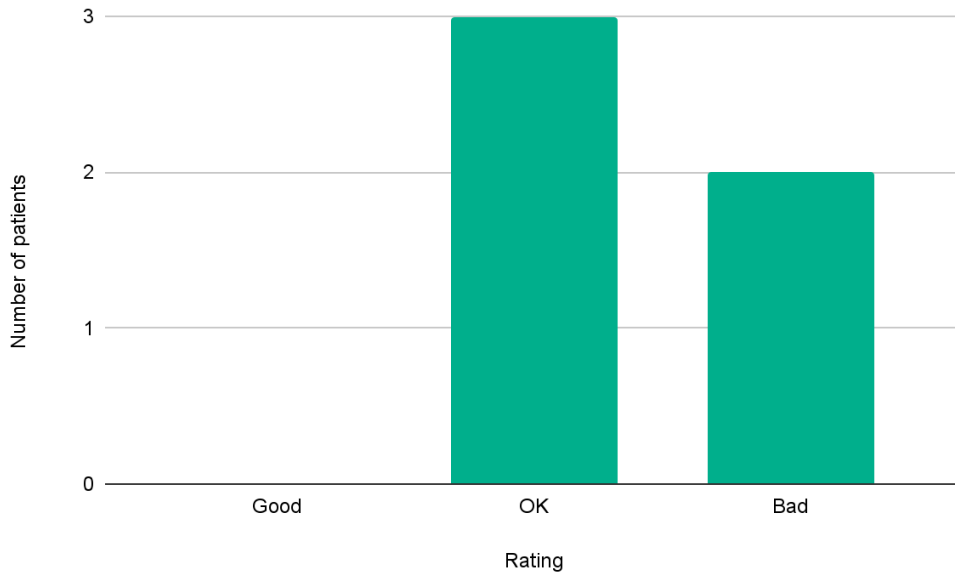
**8. When you're seeing a doctor/nurse/other medical professional, do you feel you are listened to and do you think your concerns are taken seriously?**



- "It sometimes is hard to get an appointment and when I do get one, it feels rushed and usually my concerns are not all spoken about at the appointment"

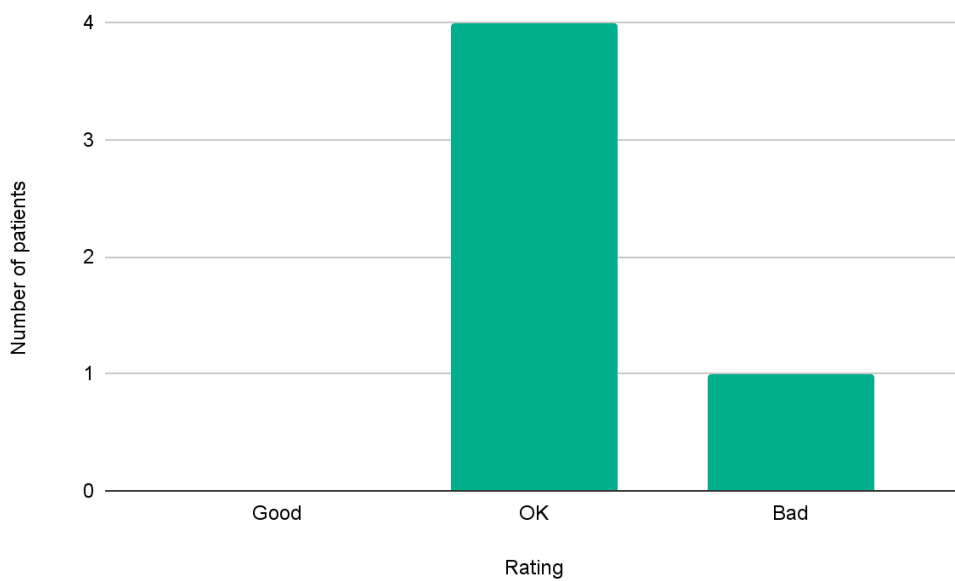
### 9. What are your views on the waiting room and your experience of waiting for your appointment?

#### Privacy

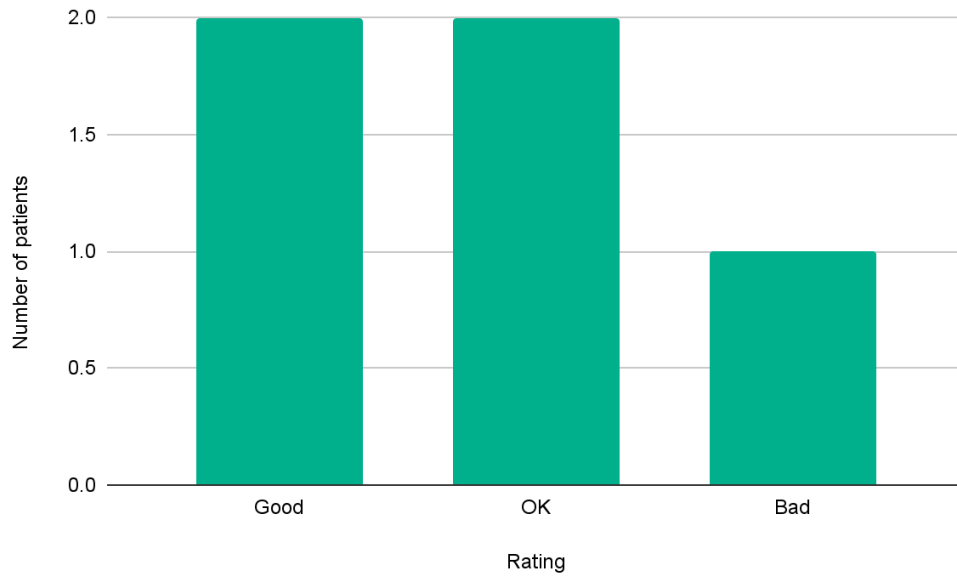


#### Comfort:

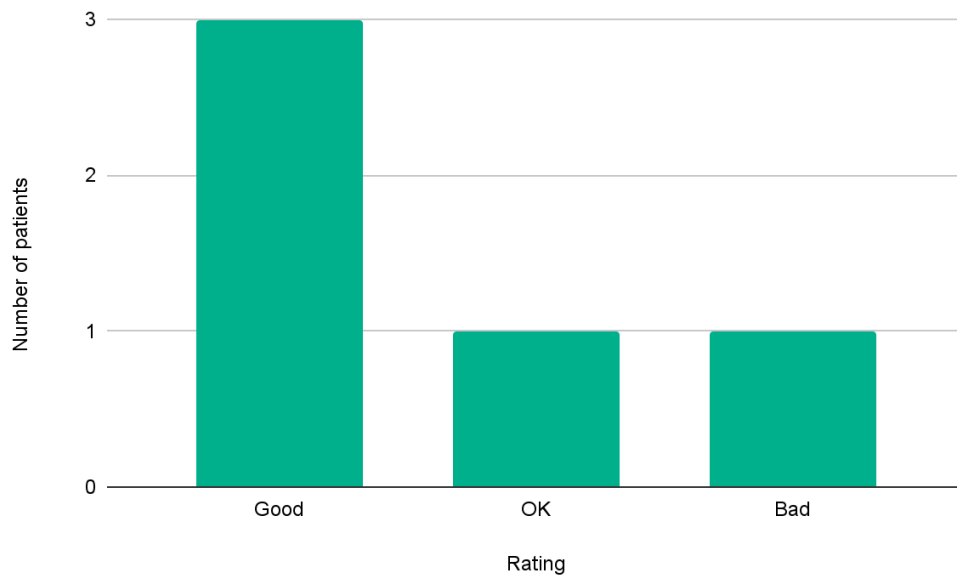
#### Chairs



### Temperature

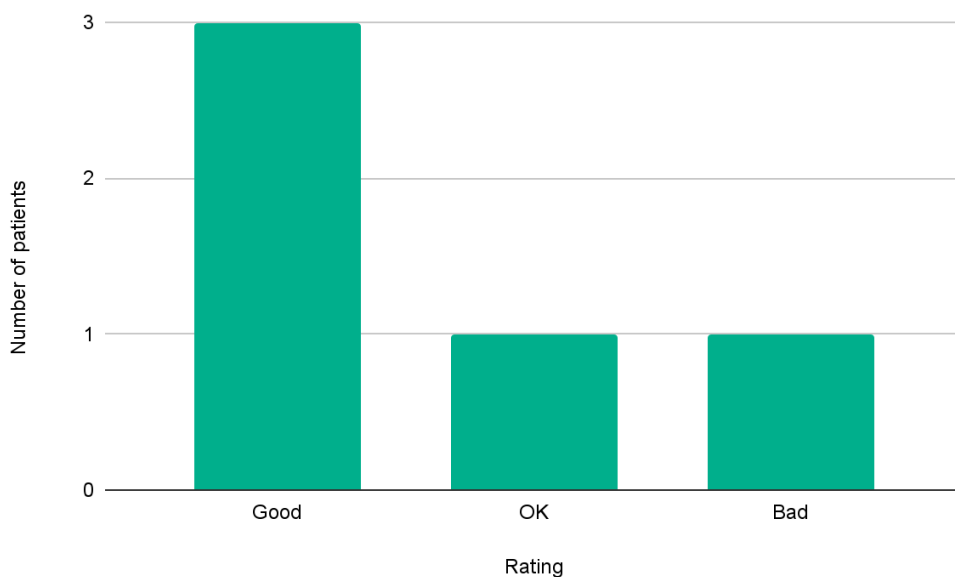


### Cleanliness

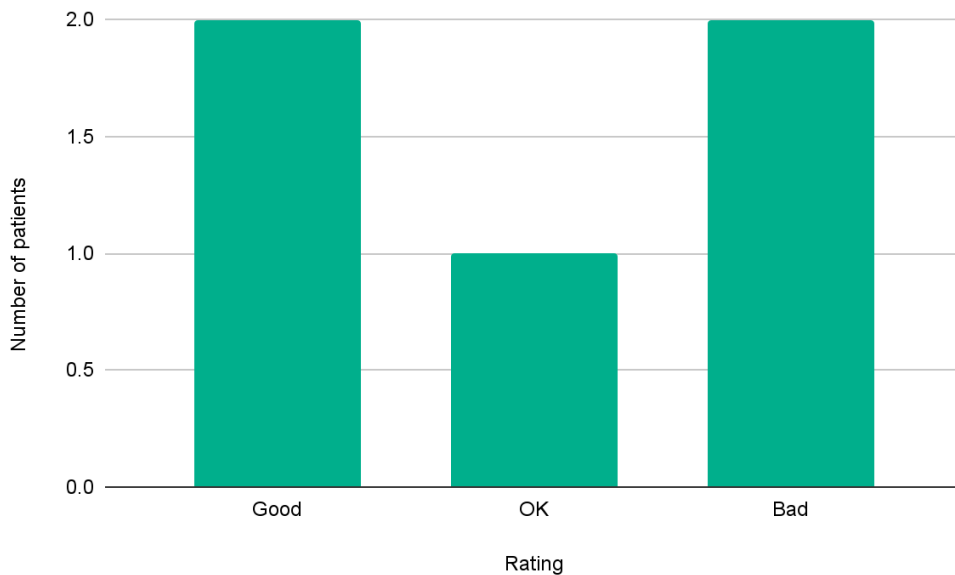




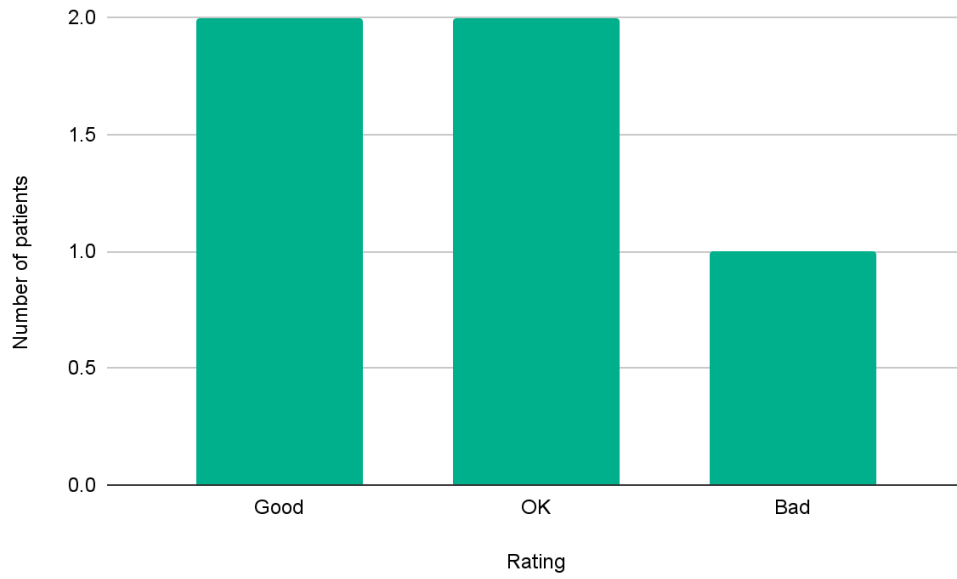
### Lighting



### Being updated on your appointment ie delays

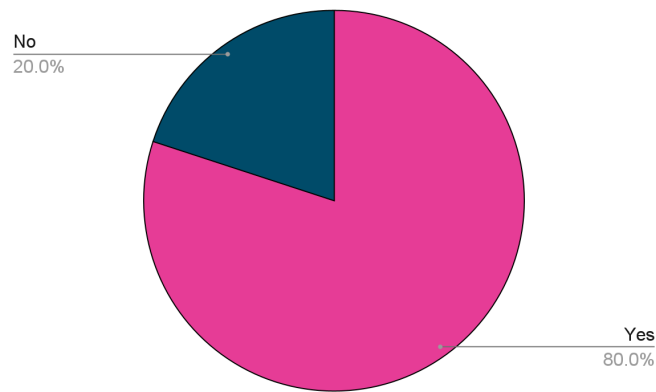


### Practice information - is it up to date and relevant to you?

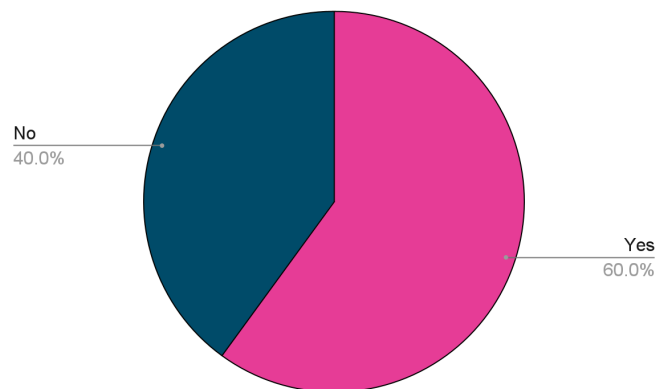


### 10. Are you always clear on what to do next? For example how to get:

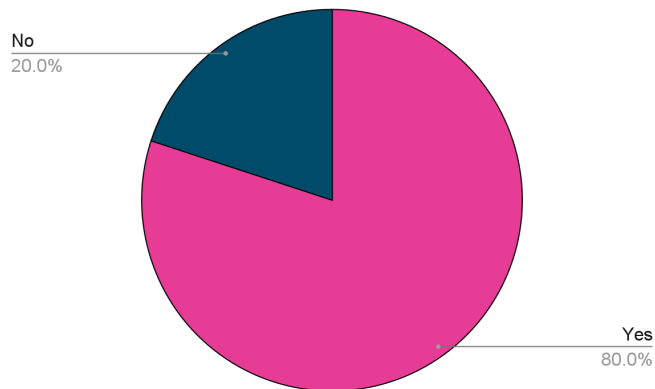
#### A repeat prescription



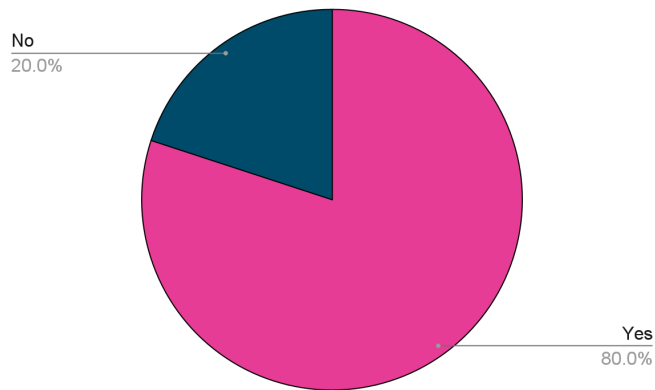
#### Your test results



**A follow up appointment (with a doctor/nurse/other medical professional)**

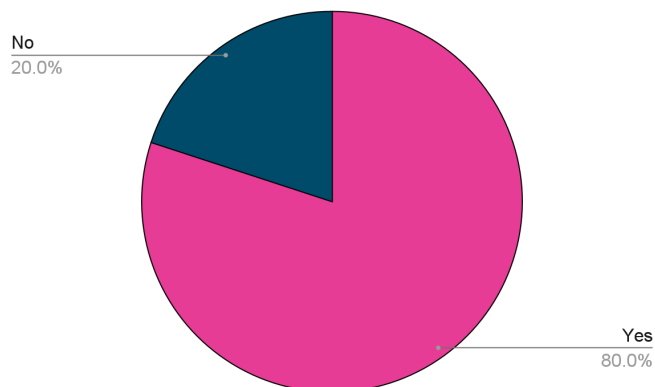


**Referrals for other treatment or advice (for example physiotherapy, hospital specialist or clinic)**

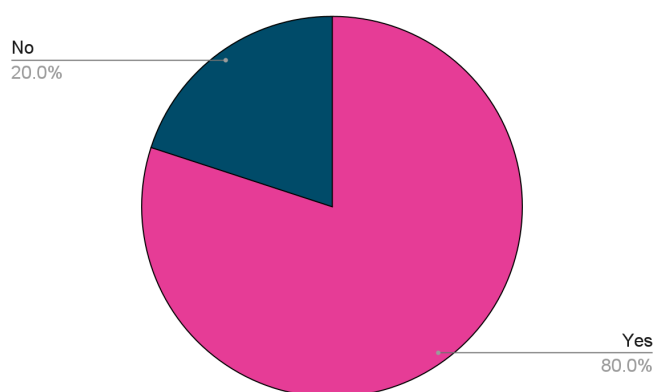


**11. Do you know how to give feedback to the practice? For example through:**

**Complaints procedure**



## Friends and family test



### 12. a) If you have left feedback or made a complaint, what was the outcome (if relevant)?

No one who completed our survey had made a complaint or left feedback.

### b) Were you satisfied with the way your feedback/complaint was dealt with (if relevant)?

### 13. Is there anything else you'd like to tell us?

- "I'm very happy with everything from my GP, every time help. Thank you"

## **Staff feedback:**

12 members of staff completed our survey. Those who completed the survey were employed by the surgery in a variety of positions, both medical and non medical support functions. All answers were anonymous.

### **1. What's the best thing about your job?**

For most staff, meeting patients and being able to help them to have positive outcomes was the best thing about their job. A lot of staff valued the face to face contact that they have with patients. It is clear that staff appreciate each other and feel that they work in a caring and supportive environment.

- "Meeting people face to face, or speaking over the phone and hopefully being helpful, and working with the team I work with. It helps the day go smooth"
- "Supportive management and staff"
- "Successfully completing daily work load, adding appropriate codes, making practice run smoothly"
- "Helping patients to manage health issues to the highest standard by support and appropriate referrals if necessary"
- "Making positive changes and seeing the difference they make"
- "Variety"
- "Staff"
- "Face to face patient contact"
- "Being part of an excellent team. Being respected by senior manager"
- "Relationship with patients and being able to positively impact their life"
- "Variation - no two days are the same. The wide variety of people I meet from all backgrounds. The supportive and caring people I work with"
- "Meeting patients face to face and having successful outcomes (making a positive difference in patients lives)"

### **2. What's the most frustrating thing about your job?**

Time constraints made worse by patients not turning up for appointments are the biggest frustrations faced by staff. Patient expectations resulting in staff abuse were also raised. It was nice to note one member of staff found nothing frustrating about their job!

- "Trying to explain to patients the procedures and policies and getting them to understand this is the way things go"

- “Nothing”
- “Increase in workload”
- “Time constraints”
- “Patient expectations and the level of abuse staff endure”
- “Not have enough time and patients that do not attend appointments”
- “Patients that do not attend appointments”
- “Difficulty contacting other services I’ve referred to Hospital”
- “Media giving patients wrong information and expectations. Demands outstripping resources”
- “Time pressure - not having enough time to see patients. Pressures (service) to see too many patients per day”
- “Lack of time, often due to having complex patients. Patients that do not attend appointments. No restriction on patients being able to book themselves into any appointment ie someone wanting to see a GP booking into a baby clinic with the nurse”
- “Demanding patients, threatening abusive patients. Patients expectations”

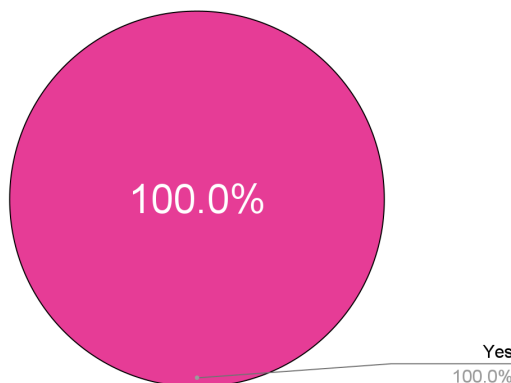
### 3. What are the main challenges you face?

The main challenge highlighted by staff at the surgery is the language barriers they face with their patients. Although they do their best with the translation services at their disposal, they recognise that this still creates difficulties. General underfunding for primary services and workload increases were also highlighted as an overall challenge, along with the referral process to secondary care providers.

- “The language barrier can be challenging but we do work hard to accommodate”
- “Patient demands and language barrier”
- “Difficulty listening to poor dictations for some referrals”
- “Underfunding of the NHS”
- “General workload increase within the NHS, sometimes feels like there are not enough hours in a week”
- “Interpreting service”
- “Interpreting service”
- “Referral process”
- “Day going too quickly”
- “Service pressures - increasing demand/time pressure. Not enough time in my day to deal with everything. Lack of funding for primary care”

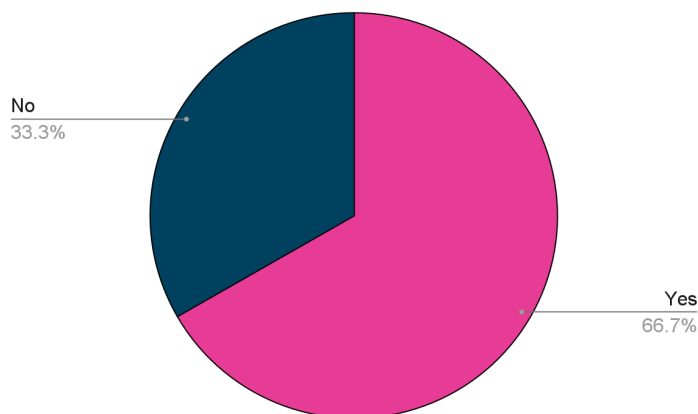
- “Challenging patients. Getting patients in for their appointments, particularly for reviews and screening. Language barriers (although we use translation services, often things get lost in translation or misunderstood)”
- “Patients expectations with regards to secondary care referrals. Abusive and threatening patients”

**4. Do you have the right equipment to support you to do your role?**



- “We are always supplied with appropriate equipment as and when required”

**5. Do you have a break?**



Although most staff appear to have a 30 minute lunch break, some don't appear to be having a break during the day. Although this may be down to personal choice and shift patterns, at least one person said that their breaks were sometimes inadequate due to workloads.

- “I break of 30 mins in 8 hours”
- “My shift pattern doesn't warrant one”
- “As and when I need one”

- "30 mins dinner"
- "30 mins but additional as required"
- "Sometimes not/not adequate due to workload"
- "30 mins lunch"
- "I can decide when I want a break. If I don't take a break it's totally my own fault"
- "I work 7 hours per day and prefer not to have a lunch break, can eat at my desk and have time to make drinks when needed"

## 6. a) Are you given the support and training you need to do your job?

**12 out of 12** said they were given the support and training they needed to do their job.

- "We have a practice learning afternoon once a month. We also can do all our online training in work time"

## b) Is there any additional training you would like to have?

**11 out of 12** said that there wasn't any additional training that they would like.

Only one person highlighted a specific course they would like to do as extra training.

- "Any training I feel I need to fulfil my role has always been agreed"
- "Children assessment module at SHU"

## c) Are there any barriers to your training?

**10 out of 12** said that there were no barriers to their training. However we had 2 responses where staff considered there were barriers, and both regarded time as one of them:

- "Financial and time. My professional development courses have to be self funded"
- "Time restraints"

## 7. How do you think the practice could be improved? What suggestions would you make?

Suggestions ranged from practical redecorating to primary services wide recommendations. A couple of staff highlighted that the new triage system was a recent improvement that had been made that had made a positive impact for both staff and patients.



- “To redecorate, a bit of paint or modernising, new blinds etc, just to bring it up to date”
- “I think the inside of the practice could do with a bit of TLC”
- “Better quality of dictations on Lexacon”
- “I think the practice has already improved since the introduction of the triage booking system”
- “We recently reviewed our appointment system as a whole, especially around the use of GP/ANP appointments. We did extensive research on various appointment systems used across other GP practices and decided to implement our patient triage services. Since implementation, both staff and patient feedback has been overall positive and happier”
- “Passing on information to all the team”
- “Information being passed on”
- “If ICB gave more money to general practice”
- “Swap all GP appointments for 10 minutes to minimum of 15 minutes”
- “Most decisions are out of the control of the practice, therefore difficult to make suggestions. Issues we have tend to get dealt with where practically possible”
- “I feel that due to all the demands within the NHS we provide an excellent service to our patients. I wish the surgery that I am registered at was as good as this one”

#### **8. Do you feel able to make suggestions and/or raise concerns and if so, do you feel they are taken seriously by the practice?**

**12 out of 12** respondents said that they felt able to do this and that their concerns or suggestions were taken seriously. We heard really lovely, positive comments about how supportive and responsive management are and how staff pull together as a team.

- “Concerns raised regarding urgent referrals. Policy put into place to outline time frame of all referrals”
- “Supportive management who listen and respond to concerns”
- “Feel we work as part of a team and all suggestions/concerns are listened to and discussed”
- “Management easy to discuss things with”
- “Day to day challenges to solve”
- “Generally our managers are available and responsive to our feedback and suggestions”

## 9. Are you up to date with your organisation's policies and procedures on the following?

### Whistleblowing policy:

12 out of 12 are up to date.

### Complaints policy:

12 out of 12 are up to date.

### How to access interpreters procedure:

11 out of 12 are aware of how to access interpreters.

## 10. Are you supported with:

### Stress management:

11 out of 12 said yes.

### Mental health:

11 out of 12 said yes.

### Physical health:

10 out of 12 said yes.

It should be noted that one of the responses was 'No' to all 3 but purely because they hadn't had the need to access any support. They acknowledged that it would be available if they needed it.

- " We did have a mindfulness session last year"
- "Weekly GP/ANP peer support meeting"

## 11. Is there anything else you would like to tell us?

Staff were keen to highlight just how much they valued working at the surgery and that any frustrations and challenges were not due to any failings at the surgery.

- “I enjoy my job, the environment for working is excellent, we have a good team and we all work as a team, from GP’s to reception staff”
- “Gateway primary care is my work family. We have team building, mindfulness sessions, flowers when off ill, birthday cards and gifts on several occasions”
- “The biggest stresses and challenges in my work are due to systematic failures, not a failure at practice level. ie inadequate funding for primary care”

## Summary and Recommendations:

Overall, The Gate Surgery is somewhere where patients are looked after holistically, caring not only for their medical needs, but also for their basic needs such as clothing, bedding and food. This helps their most vulnerable patients access support easily, as and when they need it.

Although we only heard back from a small number of patients (and care must be taken to acknowledge that this feedback may not be a representative response), those we heard from were extremely positive about the service they receive. Given the number of languages spoken by the patients accessing the surgery, those who provided feedback all found it easy to make an appointment and were happy with what they were given. We did hear from one patient who told us that they sometimes find it hard to get an appointment and when they do, not all their concerns can be spoken about. Staff themselves acknowledge that time constraints are one of the biggest frustrations and challenges they face and one of the suggestions that they came up with was to allow 15 minutes for each consultation, rather than the current 10 minute allowance.

All the patients who provided feedback said that the staff they dealt with were helpful and, importantly given the language barriers between many patients and staff, the majority of patients who needed to use an interpreter knew how to arrange for one. However, not everyone was clear about the processes following appointments such as getting repeat prescriptions or test results. Also, although patients were generally happy with the reception waiting room, some felt that they could be updated on delays better and privacy was raised as an issue for some. The privacy issue was supported by our observations as we did note that conversations could be heard throughout the waiting area. We also felt that although the waiting area was clean and bright, the

whiteness of all the walls made the area feel quite stark and clinical and not as welcoming as it could be.

The staff that we observed on our visit were all very welcoming and polite, both to us and the patients. We witnessed lovely personalised care from reception staff who clearly know their patients well. The provision of extra services by the surgery to their patients may well help nurture these relationships and this is very positive.

From the feedback we received, staff feel well supported by colleagues and management, and their wellbeing is looked after. Staff enjoy working there and feel that they pull together as a team well. Some of the challenges and frustrations they face are shared throughout primary care services such as time constraints and work loads but additionally, the language barriers between staff and patients at The Gate Surgery are acknowledged to create difficulties. Staff do their best with the translation services they have, but it recognised that these aren't perfect. Patients with language barriers are further supported by the surgery through posters displaying information in different languages and the self service check in which allows patients to check in using alternative languages.

Although staff do face abusive and demanding patients, they still value the relationships they are able to build with patients and the face to face contact they get. The new, carefully considered, triage system is viewed positively by both staff and apart from ensuring information is passed on to all team members, the main suggestion for improvements is to just redecorate and modernise the surgery.

### **Recommendations:**

- Add a sign to show patients the way out
- Improve the dementia friendliness of the toilets and walls by adding colour
- Make sure signs are a different colour to the walls to improve visibility
- Add additional chaperoning signs
- Put names on the consultation room doors so that patients know who they are seeing
- Provide a photo board of staff in the waiting room
- Display opening times in the entrance conservatory porch area
- Utilise the TV in the waiting room to broadcast public health information in different languages
- Make sure electronic information sign is working
- Provide paper for the suggestion box
- Look into setting up a Patient Participation Group (PPG)
- Mend the torn seat in the waiting room

- Provide posters to help patients understand how to order repeat prescriptions or access test results.

## Response:

### Response from The Gate Surgery:

Thank you for your visit, report/recommendations which we have noted and will take necessary action where required. It was disappointing that so few patients completed your survey despite having access to it for some time, however this is not uncommon with our patients although we do seem to get decent numbers returning the Friends and Family monthly survey.

The Gate surgery is an old building. As we advised on the visit we are in the process of planning/ refurbishment/redecorating of our waiting area/clinical corridor/clinical rooms etc. it being an older building we have for some time kept the walls neutral, currently painted magnolia.

External and Entrance - re access to patient waiting area, this is accessed via a conservatory porch area as the report states, which has seating, however this area is commonly used only as a walk through and station for buggies and prams on eg baby clinic days. This is not our waiting area and patients would only sit and wait in this area by choice as obviously it is cold when the outer entrance door slides open. As you noted there is a further door into the patient waiting area which is kept closed.

Regarding opening times not being displayed we can assure you that a notice is and was displayed on the fixed glass pane to the right of the external entrance door.

Regarding the chairs in the patient waiting area again we can assure you that these are not fixed to the floor and can be moved as necessary for cleaning etc and as we explained at the time of the visit the seating on these chairs is constantly being repaired due to damage/vandalism and were last renewed in September 2024.

Regarding the side door of the building (referred to as rear door) this is not the exit route for patients, occasionally patients may exit via this door when they have been seen by the clinical staff eg patients with prams, mobility scooters etc on these occasions it is our practice that the staff show them out and ensure the door is closed.

Our reception desk is always staffed by 1 member of the reception team, with backup from the back area of reception which consists of four desks, staff coming on duty at

varying times, on the day of your visit a second member of the team was in this area however a further member of staff had called in unfortunately sick.

Our staff photo board is usually displayed in the patient corridor area, however as explained at the times of your visit it was not on display this being due to staff safety as two of the younger female members of our team were being targeted by patients. This situation continues to remain under review and the board will be reinstated when we consider it safe to do so.

Our food parcel delivery is Tuesday am, extra food is also shopped for and provided financially by ourselves in order to top up supplies, parcels are available throughout the week subject to supply.

The surgery has previously had PPG groups running, however we have always struggled with this area, we do however use Accurx, family and friends, printed in house survey and a suggestion board which as you rightly pointed out on the day of your visit was without paper/pens.

Across general practice 10 min appointment slots are usual, however the Gate has always run on 15 min appointment slots, sadly when a patient presents with multiple issues the clinician must prioritise the ones deemed to be the most urgent and advise given re further appointment to deal with their other concerns. When accessing translating services – Big Word is a telephone system not a tablet as your report states, reception staff do have a tablet where they also access google translate etc.

## Acknowledgments

Thank you to The Gate Surgery for being friendly, welcoming and allowing us to look around the premises. Thank you also to everyone who took the time to complete our surveys.

## References:

CQC inspection summary:

[www.cqc.org.uk/location/1-638829433/inspection-summary](http://www.cqc.org.uk/location/1-638829433/inspection-summary)



## Committed to quality

We are committed to the quality of our information. Every three years we perform an in depth audit so that we can be certain of this.