

# Dr Chidambaram Balachander

## Inspection report

25 Wouldham Road  
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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

## Ratings

### Overall rating for this location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Dr Chidambaram Balachander on 04 December 2018. The overall rating for the practice was requires improvement. The full comprehensive report on the December 2018 inspection can be found by selecting the 'all reports' link for Dr Chidambaram Balachander on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

After our inspection in December 2018 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

We carried out an announced comprehensive follow-up inspection on 31 October 2019 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 04 December 2018. At this inspection we found that the practice had met the requirements. This report and accompanying evidence table covers the findings in relation to those requirements.

**We have rated this practice as good overall and good for all population groups.**

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Risk assessments had been completed and acted on in a way that helped keep patients safe.
- Security risks had been resolved and risk assessment action plans contained time frames.

- Alerts were now flagged up on the records of household members of children on the child protection register.
- There had been improvements to the arrangements for medicines management in the practice. All issues identified at the previous inspection had been resolved and patients were now being kept safe as a result.
- All staff that were assessed as requiring a DBS check had received one.
- Quality improvement activity had been effective and was ongoing.
- Staff had completed the essential training identified as incomplete at the previous inspection.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Care records were now available at the practice and to staff when visiting patients in their place of residence.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- Governance arrangements had been improved and were effective. Governance documents were signed and dated appropriately.
- The practice had established a patient participation group.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

Whilst we found no breaches of regulations, the provider **should:**

- Continue to monitor the temperature of water from all taps using the revised template.
- Ensure that discussions with patients as part of the practice's duty of candour are always recorded.
- Continue to monitor and record staff training to ensure that all staff remain up to date with essential training.
- Ensure that recruitment procedures and protocols are applied to all staff.
- Investigate ways of increasing the number of carers identified.

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

<b>Older people</b>	<b>Good</b>	
<b>People with long-term conditions</b>	<b>Good</b>	
<b>Families, children and young people</b>	<b>Good</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Good</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b>	

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a second inspector and a GP specialist advisor.

## Background to Dr Chidambaram Balachander

The registered provider is Dr Chidambaram Balachander and Dr Nickila Balachander.

Dr Chidambaram Balachander is located at 25 Wouldham Road, Rochester, Kent, ME1 3JY.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury.

Dr Chidambaram Balachander is situated in the Medway Clinical Commissioning Group (CCG) and provides services to 4400 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice staff consists of two GP partners (one male and one female), a salaried GP (female), a Foundation Year Two Doctor (male), two advanced nurse practitioners (female), a practice nurse (female), a clinical pharmacist,

a finance manager, two practice administrators, a secretary and reception staff. The practice is part of a wider network of GP practices (a federation) Medway Practices Alliance Limited and is also part of the Rochester Primary Care Network.

The number of patients over the age of 65 years is below the national average (practice 16.5%, national 17.3%). The National General Practice Profile states that 90.8% of the practice population is from a white background with a further 9.2% of the population originating from black, Asian, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as seven on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 79 years compared to the national average of 79 years. Female life expectancy is 81 years compared to the national average of 83 years.