



2024/25

ANNUAL REVIEW

DDHF
DURHAM DALES HEALTH FEDERATION

ABOUT THE FEDERATION

Durham Dales Health Federation (DDHF) is a not-for-profit organisation that supports 12 GP practices and 3 Primary Care Networks (PCN) across Wear Valley, Bishop Auckland and Teesdale, and the Integrated Neighbourhood Team (INT) in Durham Dales.

DDHF delivers 20 individual contracts through 93 members of staff and works in close partnership with the Integrated Care Board (ICB), County Durham and Darlington NHS Foundation Trust (CDDFT), Tees, Esk and Wear NHS Foundation Trust (TEWV), Durham County Council and the VCSE. DDHF supports statutory and voluntary organisations to work together to support better health and wellbeing for the local population.

The Federation employs a mix of skilled and experienced healthcare professionals; both clinical and non-clinical teams support patients and service users with their health and wellbeing, and wider economic, social and lifestyle issues. This Annual Review highlights the services and how they are reducing our GP practices workload and helping to avoid unnecessary impact on the wider system.

DDHF continuously strives to improve patient experience and ensure a consistent high quality level of care. In December 2024 the CQC rated the Federation as Good across all domains - Safety, Effectiveness, Caring, Responsiveness and Leadership.

VISION:	MISSION:	VALUES:
To be a federation of GP Medical Practices working together to provide high quality cost effective primary healthcare services.	To ensure, maintain and develop the provision of General Practice in the rural and urban communities of Durham Dales.	Equity of provision Supportive, caring and inclusive Performance oriented Proactive

Further information can be found on our website www.ddhf.co.uk

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CEO INTRODUCTION

I am delighted to introduce the Durham Dales Health Federation second annual review. Our first major contract began 11 years ago and over those years we have continued to grow as an organisation, and we continue to provide support to our member General Practices and health services to the population of the Durham Dales.



DDHF Board of Directors

Dr Daniel Wilmer (Chair)
Dr Dilys Waller
Dr Catherine Harrison
Dr Tom Rowley
Dr Andrew Hardman
Dr Andrew Hetherington
Dr Jemma Carr
Dr Shashikiran Chandrasekhar
Dr Rob Carter
Dr Alison Crisp
Stephanie Markwick
Tom Lee (Finance Director)

Dr Stewart Findlay
Chief Executive Officer

Andrew Dowson
Chief Operating Officer

Susan Maddison
Head of Clinical Services

General Practitioners

Pharmacy Team

Sam Palombella
Head of Business Services

Social & Wellbeing Team

Clinical Team

Administration Team

The most important people in our organisation are our front line staff and the administrative and management team that supports them. We have a fantastic team who work hard and deliver excellent services. Over this last year we have continued to encourage staff to express their views and to influence the way we work and the services we deliver. All staff are able to contribute to developing new services.

We invest in our staff and their wellbeing and I am pleased that in the last year we have achieved Silver status for the Better Health at Work Award.

The NHS is undergoing huge change with the abolition of NHS England and the changing role of our North East and North Cumbria Integrated Care Board. The ICB has a large financial deficit to manage and this will impact on our ability to deliver new contracts and indeed has already impacted on our current services.

As a result of the above changes, we have had to protect front line staff, by undertaking a management restructure towards the end of 2024. This is always a difficult process, but the result has been that we are now in a sustainable financial position with front line roles being protected.

An additional benefit of the restructure is that the Team Leads in the organisation have had an opportunity to grow and develop their skills and now have more autonomy to run and manage their own teams.

The NHS 10 year plan is encouraging neighbourhood working and a shift of care from hospitals to community based services. We already support our neighbourhood organisation in the Durham Dales and are well placed to continue delivering services in the community. We have strong relationships with our partner organisations and the voluntary sector, but we must strengthen those relationships further over the coming years. We have also started to work more closely with other GP Federations across County Durham.

In February 2025 we won two new services, awarded by the Northern Cancer Alliance (NCA). We were the only Federation to be awarded contracts by the NCA and it has allowed us to improve bowel screening in the general population and skin cancer awareness in our rural farming community.

Finally we were inspected by the Care Quality Commission (CQC) on 2nd December 2024 and have been assessed as "Good" across all domains - safe, effective, caring, responsive and well led.

This last year has not been without its difficulties, but was ultimately another very successful year for the Federation and I commend this report to you.



Willington Medical Group
The Weardale Practice
North House Surgery
Auckland Medical Group
Station View Medical Centre
Bishopgate Medical Centre
Evenwood Medical Practice
Woodview Medical Practice
Pinfold Medical Practice
Barnard Castle Surgery
Gainford Surgery
Old Forge Surgery

GOVERNANCE

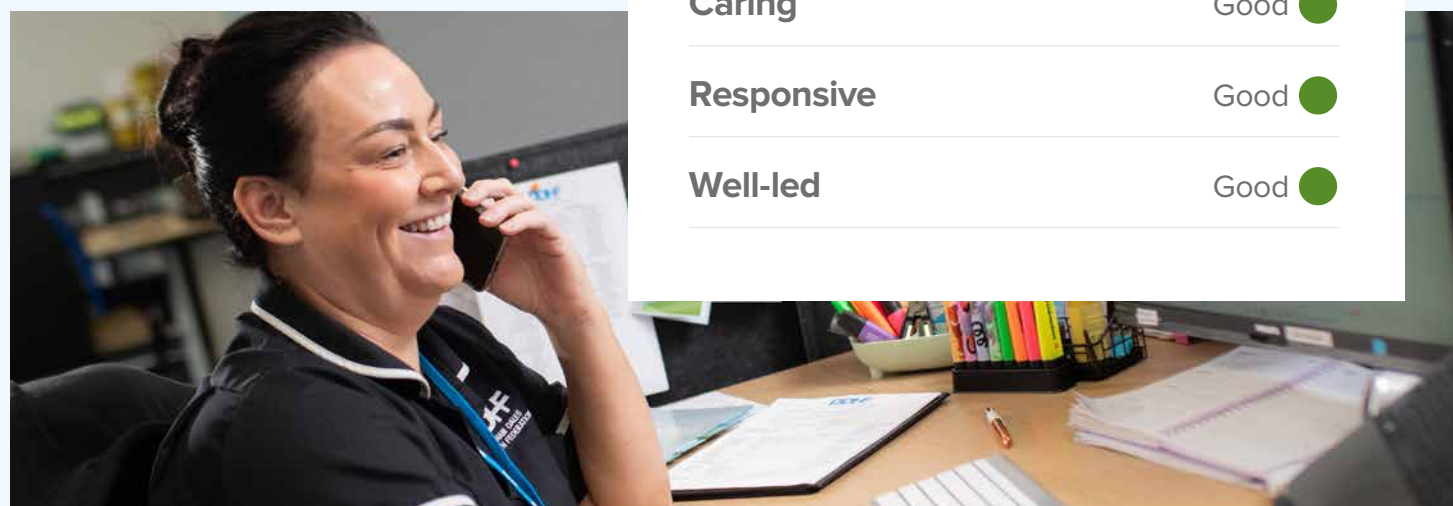
The founding principle of DDHF is to work together with the GP practices to provide high-quality, cost effective primary healthcare services.

This is reflected in the composition of the Board which has a GP or manager from all 12 member practices (3 of whom are PCN Clinical Directors), along with the DDHF CEO and Finance Director.

As a Primary and Urgent Care provider DDHF is CQC registered and following an inspection received a Good rating across all domains in December 2024.

Patients were positive about the quality of their care and treatment. The service used feedback from the NHS Friends and Family Test, for patient feedback. 93.5% of patients said they were likely or very likely to recommend the service to friends and family and 92.3% of patients said they had their needs met.

CQC Report



Overall Rating:
Good

Safe	Good
Effective	Good
Caring	Good
Responsive	Good
Well-led	Good

Incidents occurring in the service, including the recording of any safeguarding issues, are reported through the Safeguarding Incident Reporting Management System (SIRMS).

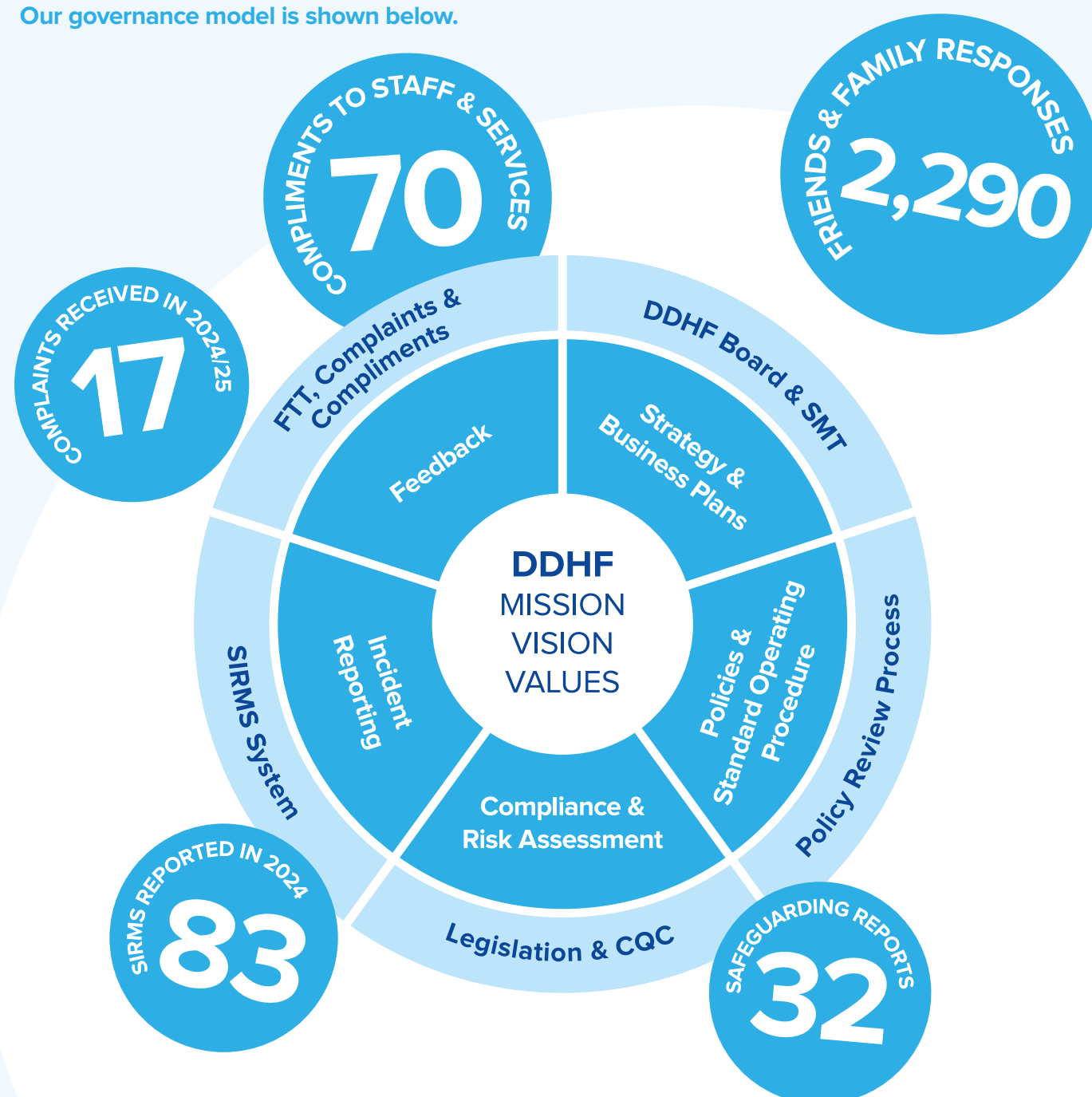
A year end audit identified certain trends including documentation, discharge and medication issues and actions taken forward through team meetings or, where necessary, directly to an external organisation involved.

Similarly a year end audit of complaints picked up trends on documentation identified, and training was used within Team meetings on clinical documentation and clinical negligence as a result.

DDHF has an extensive Policy, Standard Operating Procedure and Risk Management governance arrangements which includes a staff consultation in Policy Approval Process with any new documents. Reviewed policies now include a Equality Impact Assessments as standard.

Friends and Family Tests provide important feedback, and patient and carers views are used to continuously improve our service.

Our governance model is shown below.



SECTION 3

WORKFORCE

Current Number
of Staff:

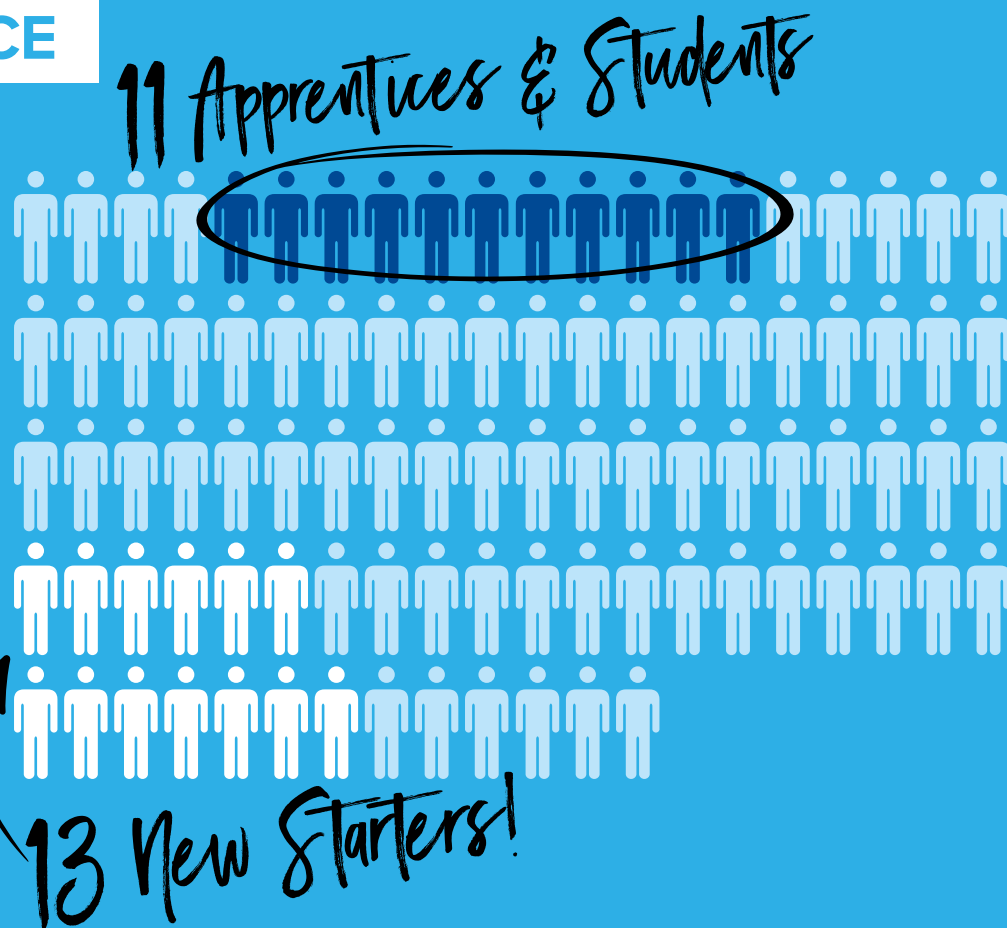
93

Apprentices & Students:
11 (placements from
Paramedics and Nurses)

Sickness levels: 3%

New Starters: 13 all
undertaken 2 week
inductions which has
a current satisfaction
rating of 97%

Leavers: 21 over the year



Independent Workforce
Survey for work-life balance:

7/10

Facebook Engagements:

3,049

LinkedIn Engagements:

103

Website Views:

25,073

from 9,647 users

Fundraising:

Our staff undertook creative ways to raise funds in 2024/25, including a Northumberland Coast Mighty Hike which raised **£610 for MacMillan Cancer** Support, walking a mile a day in September for Dementia UK, a radical headshave for St.Cuthbert's Hospice, **Man Health CIC Bake off raised £74**. Collections for Feeding Families Food Bank and Tinned Goods Collection for Angel Trust, and for **Soldiers, Sailors, Air Force Association (SSAFA)** staff donated **£135**.

Awards Achieved:



**Better Health
at Work Award**

Silver Award

In 2024, DDHF achieved the Better Health at Work Silver Award, reflecting its commitment to staff wellbeing.

This award highlights the collective effort to create a healthier, more supportive environment for colleagues.

Green Impact

BRONZE AWARD

Delivered by Students Organising for Sustainability - UK

DDHF work on sustainability is vital for reducing our environmental footprint and delivering on the NHS net zero commitment.

DDHF achieved Green Impact for Healthcare Award – Bronze Status in November 2024. This hard work and training has supported a healthier planet for future generations.



EMPLOYER RECOGNITION SCHEME

BRONZE AWARD

Proudly supporting those who serve.

DDHF signed up to the Armed forces covenant and has received the Bronze Award from the Defence Employer Recognition Scheme (ERS).

This along with the work of our Armed Forces Social Prescribing Link Worker means that Armed Forces veterans and families should not face disadvantage and that special consideration is appropriate in some cases.



St Cuthbert's Hospice



SECTION 4

SAME DAY URGENT CARE

Our Same Day Urgent Care Services at both Bishop Auckland General Hospital (BAGH) and University Hospital of North Durham (UHND) have handled over 27,500 patient contacts.

These Federation services are delivered by Multi-Disiplinary Teams of GPs, Advanced Nurse Practitioners and Admin staff who help local people to access healthcare in under 15 minutes.

Working closely with County Durham and Darlington NHS Foundation Trust and 111, the services ensure that 93% of patients are kept within Primary Care.

These services show the flexibility within DDHF of increasing the number of appointments when industrial action happens. The NHS continued to experience significant industrial action in 2024/25 with DDHF facilitating extra appointments into our service to bolster the system during this time.

From December 2024 - April 2025 we offered appointments for Acute Respiratory Infection (ARI) hubs for the third year running with over 1,700 patient contacts over the two sites - largest majority of these referred (91% at Bishop and 61% at UHND) were from the GP practices with an additional 252 patients (25%) streamed from A&E into the service.

	Bishop Auckland	Durham
Appointments used	16,106	11,395
Streamed from A&E	N/A	3,330
Average Wait Times (Minutes)	14:46	13:20
Kept in Primary Care	96%	88%
Friends and Family Recommendations	94%	94%
ARI Hub	749	1019

“ I was seen on time. The Doctor was very thorough and professional. He explained everything to me. I felt listened to. ”

The Figures

Based on 2,175 patients feedback responses.



of patients are **VERY LIKELY** to recommend our service to friends and family, if they needed similar care or treatment



of patients rate their overall experience of our services as **VERY GOOD**



of patients feel that Durham Dales Health Federation, met their needs

“ Got an appointment straight away, was seen immediately and given antibiotics. Doctor was lovely. Absolutely superb service from start to finish. ”

SECTION 5

SPOTLIGHT ON ACUTE RESPIRATORY INFECTION HUBS



DDHF delivered one of 29 special respiratory hubs in the North East at University Hospital of North Durham to help the NHS cope with winter pressures and keep flu patients out of A&E which was next door.

“We are constantly working with our member GP practices and the ambition of all of this is to help them all to get through the winter pressures on general practice too. What we are able to do is to flex the service when the needs are greatest and we can provide the additional appointments when the pressure is there.”

Towards the end of 2024/25 winter hospitals struggled with flu patients and 8% of available NHS general and acute adult hospital beds in the North East and North Cumbria were occupied by flu patients at one stage.

Advanced Nurse Practitioner Anna Baines, said “What we do is we treat people here and try to take away pressure from GPs and urgent and emergency care. It’s usually a full clinic here.

“We see people who might be experiencing an exacerbation of acute respiratory illness or coming in with a cough or cold. I think that because the hub is so accessible given the public transport links and being in the centre of Durham, people know they can get here and then they will be seen promptly.”

DDHF GP Dr Godwill James: “Basically when it comes to people having respiratory infections we are in a very, very busy period of the year and we have had many many patients coming into our respiratory hub. What the hub means is we can see patients promptly.

“We have 15 minute appointments with them and the result is usually a smiling face. We are always on our toes, given how busy it can be, but the main aim is to help make the patients better. One of my patients today was really pleased by the promptness of the service – she said she had arrived and been called almost immediately.

ICB medical director Dr Catherine Monaghan added: “The idea behind respiratory hubs is three-fold. One, it’s to provide extra capacity. Last winter we saw 35,000 people across a 12-week period. That’s patients getting the same-day care that they need. They’ll be seen and assessed by an appropriate healthcare professional who can make a diagnosis and then get them appropriate treatment.

“The second driver is around how busy and under-pressured A&E departments are over the winter period. Providing these extra appointments means patients can be treated and back at home freeing up A&E staff to look after the most acutely unwell patients.

“And the third part of this is that we know that respiratory illnesses spread very, very easily. The last thing we want is patients with respiratory symptoms sharing these viruses with other patients in GP waiting rooms or hospital A&E departments. So by doing this we stream them off.”

“ It was really good, quick and the doctor was excellent. ”

SECTION 6

VULNERABLE ADULTS & HOME VISITING

Vulnerable Adults Wrap Around Service (VAWAS) and Home Visiting

Our services that care for frail and vulnerable people closer to home have been in our DNA since 2015.

Vulnerable Adults Wrap Around Service (VAWAS) and Home Visiting Service supported GP practices to transform the care of their ageing population and reduce avoidable admissions to acute secondary care.

GPs directly refer to DDHF and a qualified clinician triages all referrals prior to any home or care home visit. This clinical service is delivered by salaried GPs, paramedics and nurse practitioners, and a health care assistant; fully supported by our admin team as first point of contact for calls.

Telephone Triage:

8,754

Care Home Visits:

5,037

Community Visits:

2,245

“Always approachable, friendly, caring, and compassionate.”

Enhanced Health in Care Homes (EHICH)

For over 10 years DDHF has employed Health Care Coordinators to support frail or elderly patients within their own homes and in care homes.

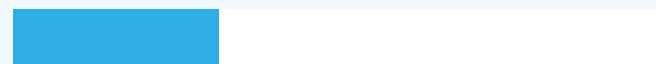
Working alongside Primary Care Networks (PCN) and through the Directed Enhanced Services (DES), the Enhanced Health in Care Homes incorporated personalised planning and holistic care into their role.

The team work across the 3 PCNs integrating with other services and providing support for weekly ward rounds and MDTs, carrying out Comprehensive Geriatric Assessments (CGA) and Personalised Care Support Plans (PCSP).

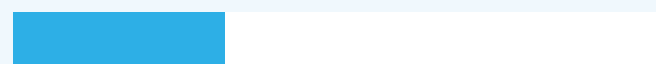
EHICH Falls Assessment: **696**



EHICH DNACPR Completed: **321**



EHICH EHCP Completed: **330**



Ward Round patient Contacts:

38,109

Personalised Care Support Plans:

43,130

“Feels like they are part of their team at the care home not from another company.”

SECTION 7

PHARMACY

DDHF Pharmacy teams work within all 3 PCNs and are seen as integral to GP Practices ways of working - supporting primary care resilience and providing patients with enhanced support.

The team undertakes elements of both patient facing work and background administrative and safety processes.

DDHF continues to support the development of the local Pharmacy workforce by working in partnership with Clemitson's Pharmacy (Crook) to employ two pre-registration pharmacy technicians. In addition, Pharmacists have been supported through Independent Prescriber qualification and have set up new Hypertension and Lipid Optimisation Clinics that support patients with high blood pressure and raised cholesterol, whilst reducing GP workload.

Routine pharmacy support activities:

- Discharge and clinic letter medicines reconciliation and new patient reviews
- Medication queries from staff and patients.
- Medication initiations and acute request support.
- Medication reviews and repeat dispensing.
- Out of stock management.
- Medication safety searches and high risk drug management.

Medicine Optimisation Work

Each quarter the Integrated Care Board (ICB) set workstreams contributing to the NHS Long Term plan, local prescribing initiatives, safety and quality work and medicines cost-effectiveness.

“Excellent consultation and service”

Contacts by the Pharmacy Team:

107,198

Medication Reviews:

18,076

Care Home Patients Supported:

3,734

“I cannot fault your service, I have been contacted multiple times with regards to medication support and it has been a fantastic service.”

STOMP

Stopping Over-Medication of People with a learning disability, autism, or both, is a national NHS England programme to reduce the inappropriate use of psychotropic medications.

Public Health England estimates a cohort of 35,000 adults are taking prescribed antipsychotics daily without a diagnosis of serious mental illness.

DDHF pharmacists in partnership with TEWV have been reviewing and reducing the use of psychotropic medication, when safe to do so, to reduce and prevent long-term health concerns, sedation and even premature death.

SOCIAL & WELLBEING

The Social and Wellbeing Team offer a range of support to patients from Durham Dales GP Practices, providing additional appointment capacity and an invaluable link from primary care into other services in the local area.

Social Prescribing Link Workers, Health & Wellbeing Coaches and Care Coordinators see patients that have additional complex needs that require personalised support to help overcome them. These social, emotional and practical needs impact patient's lives and the team helps them to access housing support or debt advice, activities to reduce loneliness and isolation or manage a life event. DDHF has a dedicated Armed Forces Social Prescriber Link Worker who works alongside veterans who are struggling with complex issues.

In 2024/25 the team made over 61,000 contacts, managing complex caseloads and delivering significant social and wellbeing outcomes. Through the Community Mental Health Transformation activity they are involved in weekly huddles with TEWV and integrated neighbourhood organisations.

I thought the treatment and advice was very personalised and not a generic approach. I felt involved in goal setting and felt these were achievable whilst also being beneficial.

My life has been literally turned around with the help of my Social Prescriber.



Number of Patients Seen for Whole Service:

61,253

Social Prescribing Link Worker:

9,415

Health & Wellbeing Coach:

4,671

Care Coordinator:

46,167

National Academy for Social Prescribing (NASP) found that **social prescribing services can deliver between £2.14 and £8.56** in social and economic value for every £1 invested.

Nov 2024 Report

Our Early Cancer Diagnosis Facilitator works with Northern Cancer Alliance (NCA) to drive improvement in cancer outcomes and uptakes in cancer screening and prevention, especially via earlier diagnosis working closely with all PCNs across County Durham.

By providing 1:1 sessions with practice staff, developing toolkits and helping to identify areas for improvements has supported the increase in reaching targets.

Extending the organisation's work around prevention and early cancer diagnosis DDHF has secured two additional projects for 2025/26.



FITTER

A proactive outreach campaign with tailored information to educate patients about the bowel screening process to increase the first-time screening completion rates of 50-year-olds.



SCARF+

Our SCARF+ (Skin Cancer in Agriculture, Rural, and Farming +) programme promotes awareness of skin cancer, safe sun and cancer screening through targeted educational materials & digital outreach to farmers and rural workers.



SECTION 9

FIRST CONTACT PHYSIOTHERAPY

DDHF supports the 3 PCNs in Durham Dales and directly employs First Contact Physiotherapists (FCP) through the Additional Roles Reimbursement Scheme (ARRS) Wear Valley and Teesdale PCNs. The Federation works in partnership with County Durham and Darlington NHS Foundation Trust who manage some FCPs in Bishop Auckland.

With an estimated 1 in 5 GP appointments supporting musculoskeletal (MSK) related conditions such as joint aches and pains, muscular injuries, sciatica and osteoarthritis. First Contact Physiotherapists aim to reduce GP time by supporting and advising patients with MSK; undertaking initial assessments, recommending appropriate treatment, supporting patients with self managing their condition and referring those that need further investigation or orthopaedic care.

The current service improvement aim is to reduce the wait for patient access to a First Contact Physio from 2 weeks to a same day/same week appointment, whichever is more appropriate for the particular issue.

Contacts from First Contact Physio (DDHF) in 2023/24:

1,863

“

A thorough, professional and friendly diagnosis of my injuries and treatment.

”



SECTION 10

FUTURE PLANS

With the abolition of NHS England and the huge organisational restructure of North East North Cumbria Integrated Care Board, the commissioning and delivery landscape is unknown territory.

The NHS 10 plan expects to set out a path to bring more neighbourhood healthcare, with prevention and digital seen as essential components to ensure the NHS is sustainable long into the 21st century.

After more than 10 years of supporting the patients of Durham Dales, DDHF is well placed to support this left shift and working closely with our partner general practices can offer a range of scalable healthcare services to patients closer to home. Working with other local GP Federations we can demonstrate the added value Federations offer.

Our plan is to continue collaborating with our General Practices, PCN Clinical Directors and colleagues in CDDFT, TEWV and the voluntary sector within Integrated Neighbourhood Teams (INT) enhancing services and develop new solutions to population health.

Our organisation will continue to make progress with the ambition to achieve the Better Health at Work Gold Award by 2026 and improve our green credentials working to gain Silver Award in Green Impact for Healthcare Award.

We recognise that our supportive staff continue to be the most important ingredient in how DDHF delivers our high quality, clinically safe healthcare to patients across Durham Dales. Ensuring that our team continues to feel included and listened to will help keep our people's morale higher.



CLOSING COMMENTS FROM THE CHAIR

If you've just read all this report like I have, DDHF is an amazing organisation. If not, you'll have to trust me. It is possible to say without bias when we have strong positive feedback from the patients across all services.

The figures really do support a primary care federation linked into the community and pushing what is possible with local healthcare provision, not least testament to and celebration of the staff dedicated to making that happen.

With bias, I have been watching the organisation grow and flex to support healthcare in the community at scale for many years. Every year provides unique challenges and every year DDHF continues to enhance its portfolio of services to offer more, not just to our patients but to the practices it represents and stakeholders it supports too.

And the challenges this year for healthcare have not been small.

The changes to the NHS over the past 5 years have been dramatic to say the least and this year has been no exception. Every month our board meets to decide on a direction for DDHF that can continue to provide the level of service we all want, to be a sustainable public healthcare organisation despite those challenges. This is not an easy ask.

With more GP surgeries across the UK closing every week and the remodelling of NHS infrastructure causing significant organisational instability, this and the coming years are without doubt a candidate for 'interesting times' in healthcare.

Despite those challenges, DDHF has continued to remain steady, resourceful and supportive. The member practices are able to feel confident that their federation continues to build and support their patients while managing significant system pressures; this includes key services like our Extended Access Provision (EAP), Vulnerable Adult Wrap Around Service (VAWAS), home visiting support, Enhanced Health in Care Homes (EHICH). We add this year our new Frailty at Home service, and to continue to provide adhoc provision like the ARI hubs that take pressure off the wider system.

These are just a few examples of at scale work that helps support and help protect our practices.

These services also serve to keep patients out of hospital and our close collaboration with the local foundation trusts, our ICB and community partners continues to remain strong. Our Integrated Neighbourhood Team (INT) gives a platform to tie all this together with our partners. We directly support our acute trust County Durham and Darlington Foundation Trust (CDDFT) with our Same Day Urgent Care (SDUC) Service at University Hospital of North Durham and Bishop Auckland Hospital. Our Primary Care Networks (PCNs) directly interface with the local teams on the ground, our local authority and our patients. We jointly employ mental health nurses and first contact physiotherapists with our trusts to ensure in practice level support. I can confidently say we are working more closely together than ever before to provide better care than ever before.

I may have buried the lead a little here in what DDHF does for what it is. A highly versatile and adaptable organisation with a strong and dedicated skill-mix of clinical and non-clinical staff that do brilliant work.

I'm going to echo Stewart's thanks to all the staff at DDHF. This document is about what our staff have achieved in the past year, of where we are now. Without our wonderful team none of this would have been possible. I extend this too to everyone who has been part of DDHF over the years and helped build what it is today. It is a feat to be proud of so thank you one and all.

As we face yet more challenges to the NHS restructure, I can only repeat my closing statement from last year, DDHF remains in a strong and flexible position to meet and exceed those challenges.

Thank you for sharing in our achievements.



Thanks to all the staff at DDHF. This document is about what our staff have achieved in the past year, of where we are now. Without our wonderful team none of this would have been possible.

DR DANIEL WILMER

Chair

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