

Our Reference      North East and North Cumbria ICB\  
FOI ICB 25–152

North East and North Cumbria ICB  
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By Email

13 August 2025

Dear Applicant

**Freedom of Information Act 2000 – Request for Information – NHS North East and North Cumbria Integrated Care Board (NENC ICB)**

Thank you for your request received on 21 July 2025 for information held by NHS North East and North Cumbria Integrated Care Board (the ICB) under the provisions of the Freedom of Information Act 2000. The ICB covers the areas of County Durham, Newcastle Gateshead, North Cumbria, North Tyneside, Northumberland, South Tyneside, Sunderland, and Tees Valley.

Please find the information you requested on behalf of the ICB as follows.

**Your Request**

I am contacting you to make a Freedom of Information request for information regarding clinical nursing services in educational settings.

Under section 3 (1) of the NHS Act 2006, ICBs have a duty to commission nursing services, which includes the clinical nursing services that children and young people may require in their educational settings. These clinical services are separate and distinct from the local authorities' public health school nursing offer. Therefore, I would be grateful if you could answer the following:

1. Does the ICB commission a clinical school nursing service(s) that covers universal, targeted and specialist clinical nursing care for its population of children and young people in their state-funded educational setting? Please respond separately for:
  - a. mainstream schools
  - b. special schools
  - c. alternative provision
2. If yes to any or all of Q1 a-c,
  - a. Does the ICB-commissioned nursing service deliver all clinical nursing procedures in the educational setting, such as administering prescription medicines (inc. controlled drugs) and undertaking nursing procedures such as enteral feeding, suctioning and intermittent

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catheterisation? (For information, see [Nursing and Midwifery Council – Standards of proficiency for registered nurses](#), Annexe B Nursing Procedures pg. 36 – 44.)

- b. If no to 2a), what clinical nursing care is excluded from the ICB-commissioned nursing service(s)?
3. If no to any or all Q1 a-c, what is the ICB's commissioning arrangement to ensure that children and young people have access to the clinical nursing support they need in their educational setting? Please respond separately for:
  - a. mainstream schools
  - b. special schools
  - c. alternative provision
4. What systems and processes are in place to ensure that the ICB commissions clinical nursing services that reflect and respond to the changing needs of the children and young people in educational settings in your area? Please respond separately for:
  - a. mainstream schools
  - b. special schools
  - c. alternative provision
5. Where the ICB does NOT commission a provider to deliver clinical nursing care (Q2b/Q3) and other local arrangements have been made, what systems and processes are in place to assure the quality, i.e. safety and effectiveness of the alternative arrangements? e.g. contractual KPIs, performance management systems and incident management processes. Please respond separately for:
  - a. mainstream schools
  - b. special schools
  - c. alternative provision

## **Our Response**

We can confirm, as per Section 1(1) of the Freedom of Information Act 2000, the ICB holds some of the information you have requested.

### County Durham place

We can confirm, as per Section 1(1) of the Freedom of Information Act 2000, the ICB on this occasion is not able to provide the requested information for County Durham place. In line with your rights under section 1(1)(a) of the Act to be informed whether information is held, we confirm the ICB does not hold any of the information requested. However, we have determined that the information is held by Public Health within Durham County Council.

In accordance with our duty under s.16 of the FOIA to provide reasonable advice and assistance to an individual requesting information, the council's FOI mailbox address is [foi@durham.gov.uk](mailto:foi@durham.gov.uk)

### Newcastle Gateshead place

Within Newcastle Gateshead ICB place, there is a pilot ongoing whereby a staff member from Newcastle-upon-Tyne Hospitals NHS Foundation Trust is currently going into schools to administer medications. We would suggest that you redirect your request to the trust to obtain further information, using their FOI email address further down this letter.

### North Cumbria place

1. The ICB commissions a clinical school nursing service in partnership with the local authority, Cumbria County Council.
2. Children's Community Nurses do not directly deliver the care above due to capacity. They are commissioned to collaborate with all Schools and Community Services:
  - The Children's Community Nurse Team liaises with schools, nurseries, and other community services to ensure the child's needs are addressed in these settings, particularly for children who may continue to attend school during their illness.
  - Nurses will provide educational support and guidance to school staff, ensuring that they are aware of the child's condition and any specific care needs
3. To ensure that children's needs are safely met and that all staff involved are fully supported, a Managing Complex Health Needs in Specialist Schools working group has been set up to clarify current need, roles and responsibilities and embed partnership working. This involves health, education and LA and has oversight from NHSE.
4. Please refer to the response to question 3.
5. To ensure that children's needs are safely met and that all staff involved are fully supported, a Managing Complex Health Needs in Specialist Schools working group has been set up to clarify current need, roles and responsibilities and embed partnership working. This involves health, education and LA and has oversight from NHSE. A governance group has been set up to address the needs of children attending mainstream schools, specialist schools and alternate provision.

#### Northumberland and North Tyneside place

1. From a Clinical School nursing perspective:
  - a. mainstream schools – no, the dedicated clinical school nursing team is part of the 0-19 service provided by Harrogate and District NHS Foundation Trust (FT), commissioned by Public Health in Northumberland and provided by the local authority within North Tyneside. The children's community nursing team (CCN) across Northumberland and North Tyneside commissioned by the ICB and delivered by Northumbria Healthcare do work with children on their caseload both in and out of educational settings.
  - b. Special schools – yes, there is a specific Special School Nurse team in Northumberland and North Tyneside commissioned by the ICB.
  - c. alternative provision – yes.
2. The Special School Nurse team carries out all tasks above, however, in addition they provide training and oversight to education staff in special schools to carry out a number of delegated health tasks and there is a Standard Operating Procedure developed to support with this.
3. Please refer to the response to question 1.
4. Systems and processes in place:
  - a. mainstream schools – the 0-19 service is commissioned by public health in Northumberland and by the local authority in North Tyneside – both services provide clinical nursing support within mainstream education settings, in addition the ICB commission the Children Community nurses who work with children on their caseload in and out of educational setting.
  - b. special schools – answered yes to question 1.
  - c. alternative provision – answered yes to question 1.
5. Systems and process are contract monitoring arrangements and oversight of population need.

6. In mainstream schools Public Health and the local authority conduct their own monitoring of the services including KPI's performance management systems, etc. Regular monthly catch ups take place between the ICB CYP commissioner and the Public Health Lead for the contract.

#### South Tyneside and Sunderland place

School nursing team is provided by Harrogate and District Foundation Trust (FT) and funded by Public Health (PH) in Sunderland and provided by South Tyneside and Sunderland FT in South Tyneside and funded by PH. Links are in place between Universal school nursing provision and the specialist provision which is detailed below:

1. From a Clinical School nursing perspective, Targeted and Specialist clinical care are funded:
  - a. mainstream – delegate tasks through robust training within RCN guidance via Children's Community Nurse (CCN) team.
  - b. special – deliver and delegate targeted and specialist clinical nursing care via CCN service in South Tyneside. In Sunderland we have a Special School Nursing Service with on sight nurses.
  - c. alternative provision – deliver and delegate targeted and specialist clinical nursing care via CCN service
2. Following the response to question 1:
  - a. mainstream – delegated to school staff with appropriate CCN oversight, relevant training, care planning and assessment.
  - b. special – through appropriate training some tasks are delegated to school staff with relevant CCN/Special School Nursing oversight. Nursing staff do administer medication and are available for other tasks as required.
  - c. alternative provision – same as mainstream.

Where there is a specialist need such as Epilepsy/Diabetes – these would be supported by the relevant specialist team into schools.

3. Please refer to the response to question 1.
4. Strong partnership working between ICB commissioners, Designated Clinical Officer with the CCN/Special School Nursing Team to report on changes in need. Service is needs led with robust care planning and training in place. Early Health Notification panels in both localities allow health to advise education of needs of younger children to inform strategic planning of school places.

#### Tees Valley place

##### *Darlington, Hartlepool, Stockton*

1. Commissioned clinical school nursing services in *Darlington, Hartlepool and Stockton*:
  - a. mainstream schools – no.
  - b. special schools – no.
  - c. alternative provision – no.
2. Please refer to the response to question 1.
3. Commissioning arrangements:
  - a. mainstream schools – the ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care

when clinically indicated, provide training to Teaching Assistants (TAs) and school staff to undertake tasks Ensure care plans are in place.

- b. special schools special – the ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care when clinically indicated, provide training to TAs and school staff to undertake tasks and ensure care plans are in place and reviewed.
- c. alternative provision – the ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care when clinically indicated, provide training to TAs and school staff to undertake tasks and ensure care plans are in place and reviewed

4. Systems and processes are:

- a. mainstream schools – Designated Clinical Officer (DCO) links with Children's Continuing Care (CCC) team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of Children and Young People (CYP) which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. Local Delivery Team(s) (LDT) meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity
- b. special schools – DCO links with CCC team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of CYP which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. LDT meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity
- c. alternative provision – DCO links with CCC team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of CYP which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. LDT meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity

5. Systems and processes to reflect and respond to the changing needs:

- a) mainstream schools – if child has CCC and has personal assistant or TA, the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.

- b) special schools – if child has CCC and has personal assistant or TA the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.
- c) alternative provision – if child has CCC and has personal assistant or TA the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.

### *Middlesbrough and Redcar*

1. Commissioned clinical school nursing services in Middlesbrough and Redcar:
  - a. mainstream schools – no.
  - b. special schools – yes, the ICB commissions special school nursing who are based in the schools.
  - c. alternative provision – no.
2. For special schools:
  - a. No, the commissioned nursing service does not deliver all clinical nursing procedures in the educational setting.
  - b. Tracheostomy care and Bilevel positive airway pressure (BIPAP) are excluded. The service is not an emergency response service. Children are seen by other community nursing team specialists. The service is not for provision for every child in specialist school.; only those with specific health care tasks which special school nursing deliver.
3. NENC ICB's commissioning arrangement:
  - a. mainstream schools – the ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care when clinically indicated, provide training to TAs and school staff to undertake tasks and ensure care plans are in place.
  - b. special schools special – school nursing team and ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care when clinically indicated, provide training to TA's and school staff to undertake tasks and ensure care plans are in place and reviewed.
  - c. alternative provision – ICB commission community nursing team and specialist nursing teams to support individual children on their case load. This includes delivery of direct care when clinically indicated, provide training to TA's and school staff to undertake tasks and ensure care plans are in place and reviewed
4. Systems and processes to reflect and respond to the changing needs:
  - a. mainstream schools – DCO links with CCC team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of CYP which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. LDT meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of

contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity.

- b. special schools KPI data and reporting from special school nursing team and DCO links with CCC team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of CYP which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. LDT meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity.
- c. alternative provision. DCO links with CCC team, DCO sits on statutory assessment panels and gains valuable intelligence of the needs of CYP which feeds into commissioning. Link in with specialist services where we see increase in presentation in needs to gather further information to feed into local delivery team commissioning. At individual level to ensure health needs can be met in school through coordination of health care plan, identify staff to take on tasks ensure training in place. Ensure equipment is in place. DCO is part of the local children local delivery team where data used to inform commissioning. LDT meet with acute trust to review commissioned service contracts to determine sufficiency. DCO point of contact for school, Parent Carer forums and health providers to flag CYP with health needs to ensure coordinated support is put in place at an individual level at the earliest opportunity.

5. Systems and processes to reflect and respond to the changing needs

- a. mainstream schools – if child has CCC and has personal assistant or TA, the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.
- b. special schools – if child has CCC and has personal assistant or TA the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.
- c. alternative provision – if child has CCC and has personal assistant or TA the CCC team will ensure staff receive training and annual updates training from a commissioned provider or NHS commissioned service. Where the CCC team commission a support worker from a health care provider. The health care provider is responsible for ensuring staff are trained to undertake health care tasks, ensure care plans and medication charts are in place. Contract managed by CCC team.

In accordance with our duty under s.16 of the FOIA to provide reasonable advice and assistance to an individual requesting information, the FOI mailboxes for councils and foundation trusts noted in the responses above are noted in the table below:

| NENC Acute Hospital FTs | Email |
|-------------------------|-------|
|-------------------------|-------|

|  |                                    |
|--|------------------------------------|
| County Durham and Darlington NHS FT      | cdda-tr.cddftfoi@nhs.net           |
| Gateshead Health NHS FT                  | ghnt.foi.enquiries@nhs.net         |
| North Cumbria Integrated Care NHS FT     | foirequest@cumbria.nhs.uk          |
| North Tees and Hartlepool NHS FT         | foi@nth.nhs.uk                     |
| Northumbria Healthcare NHS FT            | foi@northumbria.nhs.uk             |
| South Tees Hospitals NHS FT              | foi@stees.nhs.uk                   |
| South Tyneside and Sunderland NHS FT     | stsft.freedomofinformation@nhs.net |
| The Newcastle upon Tyne Hospitals NHS FT | nuth.freedom.information@nhs.net   |

| Other Hospital FTs            | Email            |
|-------------------------------|------------------|
| Harrogate and District NHS FT | hdft.foi@nhs.net |

| NENC Local Authorities             | Email   |
|------------------------------------|---|
| Cumbria County Council             | information.governance@cumbria.gov.uk         |
| Darlington Borough Council         | freedomofinformation@darlington.gov.uk        |
| Durham County Council              | foi@durham.gov.uk                             |
| Gateshead Council                  | informationrights@gateshead.gov.uk            |
| Hartlepool Borough Council         | freedomofinformation@hartlepool.gov.uk        |
| Middlesbrough Borough Council      | foi@middlesbrough.gov.uk                      |
| Newcastle City Council             | freedomofinformation@newcastle.gov.uk         |
| North Tyneside Council             | foiofficer@northtyneside.gov.uk               |
| Northumberland County Council      | foi@northumberland.gov.uk                     |
| Redcar & Cleveland Borough Council | informationgovernance@redcar-cleveland.gov.uk |
| South Tyneside Council             | foi@southtyneside.gov.uk                      |
| Stockton-on-Tees Borough Council   | foiandcomplaints@stockton.gov.uk              |
| Sunderland City Council            | freedom.information@sunderland.gov.uk         |

In accordance with the Information Commissioner's directive on the disclosure of information under the Freedom of Information Act 2000 your request will form part of our disclosure log. Therefore, a version of our response which will protect your anonymity will be posted on the NHS ICB website <https://northeastnorthcumbria.nhs.uk/>.

If you have any queries or wish to discuss the information supplied, please do not hesitate to contact me on the above telephone number or at the above address.

If you are unhappy with the service you have received in relation to your request and wish to request a review of our decision, you should write to the Senior Governance Manager using the contact details at the top of this letter quoting the appropriate reference number.

If you are not content with the outcome your review, you do have the right of complaint to the Information Commissioner as established by section 50 of the Freedom of Information Act 2000. Generally, the Information Commissioner cannot make a decision unless you have exhausted the ICB's complaints procedure.

The Information Commissioner can be contacted at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or [www.ico.org.uk](http://www.ico.org.uk).



Any information we provide following your request under the Freedom of Information Act will not confer an automatic right for you to re-use that information, for example to publish it. If you wish to re-use the information that we provide and you do not specify this in your initial application for information then you must make a further request for its re-use as per the Re-Use of Public Sector Information Regulations 2015 [www.legislation.gov.uk](http://www.legislation.gov.uk). This will not affect your initial information request.

Yours faithfully

*Information Governance Support Officer*

**Information Governance Support Officer  
North East and North Cumbria Integrated Care Board**