

Our Reference North East and North Cumbria ICB\
FOI ICB 26–137

North East and North Cumbria ICB
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By Email

10 July 2026

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 18 June 2026 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 writing to request information under the Freedom of Information Act 2000 regarding the commissioning, funding and delivery of technology-enabled care services within your Integrated Care Board (ICB).

For the purposes of this request, technology-enabled care includes remote patient monitoring, virtual care, telehealth, digital assessment tools, connected medical devices, clinical decision support systems, virtual wards, hospital-at-home services and any other technology used to support the monitoring or management of patients outside of traditional inpatient settings.

Please provide the following information.

1. Current Services

- a. Please provide details of all technology-enabled care services currently commissioned, funded or supported by the ICB.
- b. For each service, please provide:
 - Service name.
 - Brief description of the service.
 - Patient population supported.

- Delivery setting (e.g. home, care home, community, primary care, virtual ward, hospital-at-home).
- Date the service commenced.
- Whether the service is a pilot, transformation programme or established commissioned service.

2. Patient Cohorts

For each service identified above, please describe:

- The eligibility criteria.
- The primary patient groups supported.
- The approximate number of patients supported annually.

3. Commissioning and Funding

For each service identified above, please provide:

- The commissioning team responsible for the service.
- The budget holder responsible for the service.
- The funding source used to support the service.
- Whether the service is commissioned directly by the ICB or through another organisation.

4. Delivery Model

For each service identified above, please provide:

- The lead provider organisation responsible for delivering the service.
- Any technology providers supporting the service.
- Whether the technology is procured by the ICB, the provider organisation or another party.

5. Contract Information

a. For each technology provider identified, please provide:

- Supplier name.
- Contract start date.
- Contract end date.
- Annual contract value.
- Total contract value.
- Procurement route used.
- Whether extension options are available.
- Expected renewal or re-procurement date.

b. Where exact contract values are exempt from disclosure, please provide the value band used internally for reporting purposes.

6. Future Plans

Please provide details of any planned procurements, service developments, market engagement exercises, business cases or pilot programmes relating to technology-enabled care that are currently under consideration or development.

7. Responsible Roles

a. Please provide the job titles of the roles with responsibility for:

- Commissioning technology-enabled care services.
- Commissioning community-based services.
- Commissioning complex care services.
- Commissioning Continuing Healthcare services.
- Commissioning urgent and emergency care services.

- Digital transformation.
 - Procurement.
- b. Where publicly available, please also provide generic or organisational contact details for these teams.

If any part of this request exceeds the appropriate cost limit, please provide advice and assistance under Section 16 of the Freedom of Information Act to enable the request to be refined. I look forward to your response within the statutory 20 working day period.

Our Response

1. Current Services

The ICB provides details of technology enabled care services through the Health and Growth Accelerator (Work Well) Digital Innovation Programme. Details of these services are shown on the attached spreadsheet.

The ICB commissions, supports, enables a range of technology-enabled care services. These are typically delivered via provider organisations (e.g., acute trusts, community providers, primary care) rather than directly operated by the ICB. The detail is as follows:

Virtual Ward Services

- Description: Remote monitoring and clinical oversight to support patients at home as an alternative to admission.
- Patient Population: Frailty, respiratory (COPD), heart failure, and post-acute pathways.
- Setting: Patient's home (virtual ward model).
- Commencement: Phased rollout from 2022 onwards.
- Status: Transformation programme transitioning to business-as-usual commissioning.

Remote Patient Monitoring (RPM) Services

- Description: Digital monitoring of long-term conditions using apps and connected devices.
- Patient Population: Diabetes, hypertension, respiratory conditions.
- Setting: Home / primary care.
- Commencement: Pilots initiated pre-2020 with scaling during COVID-19 period.
- Status: Mixed (pilot and established services depending on pathway).

Digital Triage and Assessment Tools

- Description: Online consultation tools supporting primary care demand management.
- Patient Population: General primary care population.
- Setting: Primary care.
- Commencement: Widely adopted from 2020 onwards.
- Status: Established commissioned service via GPIT.

Hospital at Home Services

- Description: Acute-level care delivered in patient homes with digital monitoring support.
- Patient Population: Avoidance of admission / early discharge cohorts.
- Setting: Home/community.
- Commencement: Developed alongside virtual wards (2021–2023).
- Status: Transformation programme.

2. Patient Cohorts

Details of the Health and Growth Accelerator (Work Well) Digital Innovation Programme services are on the attached spreadsheet.

Technology-enabled care services eligibility and scale vary by service but are broadly as follows:

- Eligibility criteria: Defined by clinical pathways (e.g., risk stratification, diagnosis-specific thresholds, clinical stability for home monitoring).
- Primary Patient Groups:
 - Frailty and elderly patients
 - Long-term conditions (respiratory, cardiovascular, diabetes)
 - Post-acute discharge patients
- Approximate volumes: The ICB does not hold a single consolidated dataset of all patients across all technology-enabled services. Activity is recorded at provider level. However, virtual wards typically support hundreds to thousands of patients per annum across the system.

3. Commissioning and Funding

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. 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. The funding source for the Health and Growth Accelerator (Work Well) Digital Innovation Programme services is NHS England, as part of Health and Growth Accelerator funding.

In accordance with our duty under s.16 of the FOIA to provide reasonable advice and assistance to an individual requesting information, we have provided the FOI contact for NHS England: england.contactus@nhs.net. Please write "Freedom of Information" in the subject line.

For technology-enabled care services:

- Commissioning Responsibility: Services are commissioned across:
 - Urgent and Emergency Care
 - Planned Care
 - Community and Primary Care
 - Digital Transformation
- Budget Holder: Budget accountability sits within relevant programme areas (e.g., UEC, LTCs, community services), not a single central budget.
- Funding Sources: These are:
 - Core ICB allocations
 - National programme funding (e.g., virtual ward funding)
 - Transformation funding streams
- Commissioning Model: Predominantly commissioned via provider contracts (e.g., NHS Standard Contract), rather than directly by the ICB.

4. Delivery Model

The service is delivered by NHS provider organisations (acute trusts, community providers, primary care networks). Multiple providers are used across different services (e.g., remote monitoring platforms, digital consultation systems). These are typically procured at either

provider level or ICB or Integrated Care System level through frameworks. Procurement responsibility varies by service.

We have provided information for services procured by Health Innovation North East and North Cumbria (HI NENC) on behalf of the North East and North Cumbria Integrated Care Board as part of the Work Well / Health and Growth Accelerator programme on the attached spreadsheet.

In accordance with our duty under s.16 of the FOIA to provide reasonable advice and assistance to an individual requesting information, we have provided the FOI contacts for acute hospital foundation trusts in the NENC region.

NENC Acute Hospital FTs	Email/Online portal
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	nth-tr.foi@nhs.net
Northumbria Healthcare NHS FT	foi@northumbria.nhs.uk
South Tees Hospitals NHS FT	stees.foi.admin@nhs.net
South Tyneside and Sunderland NHS FT	stsft@infreemation.co.uk
The Newcastle upon Tyne Hospitals NHS FT	https://www.newcastle-hospitals.nhs.uk/help/foi/

A list of Primary Care Networks is available on the NHS Digital website: [GP and GP practice related data – NHS England Digital](#) The PCN full file name is **epcn** and for your reference, NENC ICB's Organisation Data Service (ODS) code is **QMH**.

5. Contract Information

All procurement opportunities (including market engagement) with NENC ICB are advertised on the Atamis e-tendering platform <https://health-family.force.com/s/Welcome> as well as the government's Central Digital Platform <https://www.gov.uk/find-tender>.

If a service falls within elective services led by a consultant or mental health care professional where the ICB has a legal duty to provide patients with a choice of provider, please follow the attached instructions in order to express an interest to deliver the healthcare services.

The Patient Choice Questionnaire Supplier Instructions are:

How to express an interest in delivering services to North East and North Cumbria ICB under Patient Choice

Please follow the below steps:

1. Log in to the supplier portal at <https://health-family.force.com/s/Welcome>
2. Locate the opportunity in 'Find Opportunities' – (Patient Choice Accreditation 2 – North East and North Cumbria ICB (Project Reference Number – **C350309**))
3. Select 'Register Interest' – 'Confirm'.
4. From your Home page select 'Click Here' under 'My Proposals and Quotes'.
5. The questions are located within the 'Requirements Section'
6. Once all questions are completed please click on 'Submit'.

6. Future Plans

The ICB is actively progressing:

- Expansion and standardisation of virtual ward capacity
- Increased adoption of remote monitoring pathways for long-term conditions
- Development of neighbourhood health and integrated care models, supported by digital tools
- Ongoing market engagement and procurement to rationalise technology platforms
- Alignment with national policy direction, including:
 - Digital transformation priorities
 - Integrated care models
 - Data and digital interoperability

7. Responsible Roles

a. The following roles (job titles) are responsible for relevant areas:

- *Technology-enabled care commissioning*: Associate Director / Head of Digital Transformation
- *Community Services Commissioning*: Head of Community Commissioning
- *Complex Care / Continuing Healthcare*: Associate Director / Head of Continuing Healthcare
- *Urgent and Emergency Care*: Head of Urgent and Emergency Care Commissioning
- *Digital Transformation*: Deputy Director of Digital Transformation
- *Procurement*: Head of Procurement / Commercial Services

b. Please direct all queries to these individuals using the ICB's generic mailbox nencicb-sun.reception@nhs.net marked for their attention.

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 Information 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.

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. 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**