

Our Reference

North East and North Cumbria ICB\ FOI ICB 24-506

NECS - John Snow House **Durham University Science Park** Durham DH1 3YG

Tel: 0191 301 1300

E-mail: necsu.icbfoi@nhs.net

By Email 15 April 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 by North of England Commissioning Support (NECS) on 24 March 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, Gateshead, Newcastle, North Cumbria, North Tyneside, Northumberland, South Tyneside, Sunderland, and Tees Valley (which covers the five local authorities of Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees).

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 implementation of the Medical Emergencies in Eating Disorders: Guidance on Recognition and Management (CR233) within your Integrated Care Board (ICB).

Specifically, I request the following information:

- 1. Adoption of MEED Guidance:
  - a. Has your ICB formally adopted the Medical Emergencies in Eating Disorders (MEED) Guidance (CR233) for the management of eating disorder-related medical emergencies?
  - b. If so, when was it adopted, and was it incorporated into local policies, protocols, or commissioning frameworks?
- 2. Service Provision and Commissioning:
  - a. What steps has your ICB taken to ensure that local NHS Trusts, Acute Hospitals, Community Eating Disorder Services, and Mental Health Services adhere to MEED recommendations?





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- b. Have specific service pathways been developed to comply with the guidance? If so, please provide copies or summaries of relevant protocols.
- c. What additional funding, if any, has been allocated to support the implementation of MEED guidance?

### 3. Training and Workforce Development:

- a. What training has been provided to medical, psychiatric, nursing, and allied health staff regarding the MEED guidance?
- b. Is training on the recognition and management of medical emergencies in eating disorders mandatory for emergency department staff, general practitioners, paediatricians, liaison psychiatrists, and acute medical teams?
- c. Please provide details of any training programmes, materials, or schedules related to MEED implementation.

### 4. Monitoring and Compliance:

- a. Has your ICB conducted any audits, evaluations, or reviews to assess compliance with MEED recommendations?
- b. What mechanisms are in place to ensure that patients with eating disorders receive appropriate medical and psychiatric care in line with MEED standards?
- c. Please provide any reports, minutes, or documents that reflect monitoring, compliance, or outcome measures related to the implementation of MEED guidance.

### 5. Emergency Admission and Care Pathways:

- a. What arrangements are in place to ensure that patients with eating disorders admitted to general medical or paediatric wards receive appropriate specialist input?
- b. How does the ICB ensure that there is a clear protocol for nasogastric feeding, refeeding syndrome prevention, and the use of mental health legislation where necessary?
- c. Are there established pathways for transferring patients between medical, psychiatric, and specialist eating disorder services?

#### 6. Commissioning of Specialist Services:

- a. What specialist medical support (e.g., consultant liaison psychiatry, specialist dietetics, eating disorder medical teams) is commissioned to support the care of eating disorder patients in acute settings?
- b. How many dedicated inpatient beds for medical stabilisation of eating disorder patients does your ICB commission, and where are these located?

#### 7. Patient Outcomes and Feedback:

- a. What data is collected on patient outcomes following medical admissions for eating disorders?
- b. Has your ICB sought feedback from patients, carers, or advocacy groups regarding the implementation of MEED guidance?

If any of the requested information is not held by your ICB, please indicate where such data may be obtained.

### **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.

## 1. Adoption of MEED Guidance:

- a. Yes, NENC ICB has formally adopted the MEED Guidance (CR233) for the management of eating disorder-related medical emergencies.
- b. Work started to operationalise when guidance was first published through local networks and was incorporated into formal commissioning arrangements through specialised Provider Collaboratives in 2023. This includes expectations around joint working and scaffolding for acute trusts in particular in relation to MEED, and senior clinicians from that service are providing leadership in relation to local multi agency MEED groups. Work has been completed to develop ICB-wide CYP ED Community specification, this includes expectations around MEED delivery and compliance and will be in place from 2025/26. The ICB Provider Leadership Group (which includes all FT Chief Executives) are also aware of requirements around MEED.

## 2. Service Provision and Commissioning:

- a. Please refer to the response to question 1b.
- b. 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. However, we have determined that the information is held by the acute hospital NHS foundation trusts (FTs) within the North East and North Cumbria region.

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 email addresses for those foundation trusts, plus other Provider Collaborative trusts, to make your request.

NENC Ambulance FT	Email
North East Ambulance Service NHS FT	publicrelations@neas.nhs.uk

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

NENC Mental Health Hospital FTs	Email
Cumbria, Northumberland, Tyne and Wear NHS FT	foi@cntw.nhs.uk
Tees, Esk and Wear Valley NHS FT	tewv.foi@nhs.net

c. There was a bid through the Provider Collaborative to use some non-recurrent money to recruit a MEED champion to support this work across NENC. This was supported but was

with the providers to implement. Please redirect your question to the acute trusts, using the contacts in response 2b.

## 3. Training and Workforce Development:

- a. Please refer to the response to question 2b.
- b. There is not currently any training on the recognition and management of medical emergencies in eating disorders mandatory for emergency department staff, general practitioners, paediatricians, liaison psychiatrists, and acute medical teams?
- c. Please refer to the response to question 2b.

## 4. Monitoring and Compliance:

- a. NENC ICB has conducted no formal audits, evaluations, or reviews to assess compliance with MEED recommendations.
- b. There are local clinical monitoring mechanisms in place for individual patients.
- c. There is a Provider Lieadership Group and sub committee and provider collab meetings. Please redirect your queries to the Provider Collaborative contacts.

## 5. Emergency Admission and Care Pathways:

a. 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. However, we have determined that the information is held by the acute hospital NHS foundation trusts (FTs) within the North East and North Cumbria region.

Please refer to the response to question 2b for contact information for these acute trusts.

- b. 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. However, we have determined that the information is held by the Provider Collaborative. Please redirect your question using the contact details noted in the response to question 1b
- c. Yes, there are established pathways for transferring patients between medical, psychiatric, and specialist eating disorder services.

## 6. Commissioning of Specialist Services:

- a. There are acute psychiatric liaison teams in place across all Acute Trusts. Specialist Eating Disorder in reach (dietetics, medical and others) is available across the ICB from specialist community ED teams and/or intensive day/inpatient ED services (CYP and adults).
- b. There are no dedicated inpatient beds for medical stabilisation of eating disorder patients, but arrangements are in place with key acute trusts to ensure that wherever possible people are admitted to nominated wards.

#### 7. Patient Outcomes and Feedback:

- a. Please refer to the response to question 2b.
- b. There has been no specific work through the ICB, but there are established and highly functioning Lived Experience Advisory Groups within the Provider Collaboratives who provide input across the full ED pathway. In addition to providing feedback on their own experiences, they are also able to engage a wider population to get feedback on experience of physical health care. This is fed into the Provider Collaborative governance structures (of which the ICB is a part).

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 <a href="https://northeastnorthcumbria.nhs.uk/">https://northeastnorthcumbria.nhs.uk/</a>.

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 complaints procedure provided by the North of England Commissioning Support Unit.

The Information Commissioner can be contacted at:

Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

#### 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 <a href="https://www.legislation.gov.uk">www.legislation.gov.uk</a>. This will not affect your initial information request.

Yours sincerely

S Davies

S Davies Information Governance Officer