

Our Reference North East and North Cumbria ICB\
FOI ICB 26-098

North East and North Cumbria ICB
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By Email

9 June 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 28 May 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 make a request under the Freedom of Information Act 2000. I would be grateful if you could provide the information set out below, which relates to the prescribing of ADHD medication where treatment has been initiated and a shared care agreement with an NHS GP has not been established.

I understand that some ICBs may hold this information at system level, while others may hold it at place or primary care network level. Please provide information at whatever level of granularity is available to you.

1. Patients Receiving Privately-Initiated ADHD Treatment Without NHS Shared Care

Please provide the following information, as at the most recent date for which data is held, or for the most recent complete financial year:

- a. The total number of patients registered with a GP within your ICB area who are currently receiving treatment for ADHD, where a shared care agreement with their NHS GP has been declined, has not been established, or has lapsed.
- b. Of the figure provided at 1(a) above, please break this down by whether the patient is currently receiving ongoing prescriptions from: (i) the private provider; (ii) no prescriber (i.e. treatment has been interrupted); or (iii) another arrangement. If this breakdown is not held, please confirm that.

- c. Please indicate whether the figures above are drawn from a central ICB dataset, aggregated GP-level data, or another source, and confirm the reference date or period.

Clarification — what we mean by 'shared care declined or not established'

This includes situations where: (a) a GP practice has formally refused to enter a shared care agreement; (b) an LMC or PCN has issued guidance discouraging or prohibiting entry into shared care agreements with private providers and the GP practice has adopted that policy; or (c) a shared care agreement was never sought because local policy made it clear it would not be accepted. It does not include patients where shared care is in place and functioning, nor patients on an NHS waiting list.

2. Reasons Recorded for Absence of Shared Care Agreement

If your ICB or its constituent GP practices hold data on the reasons recorded for declining or not entering into a shared care agreement for ADHD medication prescribed by a provider, please provide:

- a. A breakdown of the reasons recorded, using whatever categories are held (for example: GP practice policy; LMC or PCN guidance; clinical concerns regarding the private diagnosis; capacity grounds; lack of familiarity with the private provider; no reason recorded).
- b. The number or proportion of cases falling into each category, even if approximate.
- c. If no structured reason data is held, please confirm this and indicate whether any qualitative information (such as correspondence, GP feedback, or patient complaints logged with the ICB) is held that might speak to the reasons for refusal.

3. ICB Policy or Guidance on GP Participation in Shared Care Agreements

Please confirm whether your ICB holds, has issued, or has adopted any of the following:

- a. A formal written policy governing GP participation in shared care agreements with ADHD prescribers (including whether GPs are permitted, encouraged, or discouraged from entering such agreements).
- b. Any formal or informal guidance issued to GP practices, Primary Care Networks, or Local Medical Committees within your ICB area regarding shared care for ADHD medication initiated by private providers.
- c. Any correspondence between the ICB and Local Medical Committee(s) in your area relating to shared care agreements for ADHD.

Where any such policy, guidance, or correspondence exists and is held by your ICB, I request that copies or extracts be provided with this response, or that I be directed to where these documents are publicly available.

If any document is withheld under an exemption, please identify the document, the exemption relied upon, and whether the public interest test has been applied.

Cost Limit and Refinement

I am aware that the appropriate cost limit for public authorities under the Freedom of Information (Fees and Appropriate Limit) Regulations 2004 is £600 (18 hours at £33.60 per hour).

If any part of this request, taken alone or in aggregate, is likely to exceed this cost limit, please do not refuse the request in its entirety. Instead, I ask that you:

- advise me which specific question or part of a question is the source of the excess cost;
- provide the information that can be provided within the cost limit; and
- advise me how the request might be refined or broken into smaller requests in order to bring it within the limit.

I am happy to prioritise questions if that would assist. Questions 1 and 3 are of greatest priority to me if cost limits require a choice to be made.

Preferred Format and Handling

I would be grateful to receive the response by email in a common electronic format (PDF, Word, or spreadsheet as appropriate). If data is being released in a spreadsheet, please include column headers and confirm the reference date.

I understand that you have 20 working days from receipt of this request to respond, in accordance with section 10 of the Freedom of Information Act 2000. If you need to clarify any aspect of this request before the clock begins, please contact me promptly.

Our Response

1. Patients Receiving Privately-Initiated ADHD Treatment Without NHS Shared Care

- 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 individual private providers and GP practices 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, a list of practices is available on the NHS Digital website: [GP and GP practice related data – NHS England Digital](#). The GP Practices full file name is **eppracur** and NENC ICB's Organisation Data Service (ODS) code is **QMH**.

- b. Please refer to the response to question 1a.
- c. Please refer to the response to question 1a.

2. Reasons Recorded for Absence of Shared Care Agreement

- 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 individual private providers and GP practices within the North East and North Cumbria region.

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- b. Please refer to the response to question 2a.
- c. The ICB do not hold the data as to why a shared care agreement is declined as the clinical decision to accept a shared care agreement sits entirely with the GP Practice. Guidance issued by the General Medical Council (GMC) states the GP is not obliged to enter into a shared care arrangement with any provider, and GP practices can decline shared care requests on clinical and capacity grounds.

For your reference, a list of practices is available on the NHS Digital website: [GP and GP practice related data – NHS England Digital](#) The GP Practices full file name is **epraccur** and for your reference, NENC ICB's Organisation Data Service (ODS) code is **QMH**.

3. ICB Policy or Guidance on GP Participation in Shared Care Agreements

- a. The ICB does not have a policy that governs GP participation in shared care agreements with ADHD prescribers. However, we do hold the following locally commissioned enhanced services for GPs.
 - Primary Medical Care NENC Local Enhanced Service – Medicines Specification service specification for GP practices (see attached document). This includes references to ADHD and shared care. Please refer page 2 section 5.2; section 6.1 page 2; section 7.1 page 5-6; sections 8.3 – 8.4 on page 7.
 - NENC ICB Primary Medical Care NENC Local Enhanced Service – Attention Deficit Hyperactivity Disorder (ADHD) Shared Care Medication Local Enhanced Service – Additional patients post 31.12.2025 Service Specification 2026-27 (see attached document). Please refer to section 4.2 (page 2); sections 5.2-5.4 (page 2); section 7 (page 3) covers shared care.

Please note, these are not policies, but locally enhanced service agreements (contractual arrangements) that have been offered to GP practices to sign up to or not.

- b. All the ICB issued guidelines and shared care arrangements are available publicly. The NENC ICB shared care protocols including medicines that are used for ADHD are published on the Northern Treatment Advisory Group (NTAG) website. This is the link: <https://ntag.nhs.uk/shared-care-guidelines/>.

The NENC ICB guidelines including medicines that are used for ADHD are published on the Northern Treatment Advisory Group (NTAG) website. This is the link: [North East and North Cumbria Formulary](#).

In accordance with s.21 of the FOIA, we are not required to provide information in response to a request if it is reasonably accessible to you by other means.

The ICB has also issued advice to GP's regarding ADHD and ASD "Right to Choose Providers." This is:

ADHD and ASD 'Right to Choose' Providers

The ICB is aware that there are a number of ADHD and ASD providers advertising virtual assessment services to NENC patients under choice regulations. It is correct that where these providers have a contract with any NHS commissioner then they can be a choice/option for patients. Importantly however, the provider can only offer services in line with the specification and contract that they hold with their local NHS commissioner. The ICB has implemented consistent checks of these providers and has found that many are offering to deliver services to NENC ICB patients that they are not commissioned to provide by their local commissioner, and as such are not entitled to offer to NENC patients. Therefore prior to offering any of these providers as a choice to your patients, please can you check with the ICB first so that we can carry out the necessary checks to determine the service they are able provide.

Where it has been previously determined that referrals to out of area providers of these services have been valid, there have been issues around varying expectations around

shared care and access to other related services along the pathway. This is because the providers will deliver services in line with their local commissioner's contract and not NENC ICB pathways. GPs should be aware of these potential differences and implications and the ICB will aim to identify these as part of the checks they undertake so that referrers have all relevant information to support their patients to make an informed choice and so referrers can make a decision on whether the referral would be clinically appropriate at the outset.

- c. Shared Care Protocols are developed and approved through a governance process, which is managed by NTAG. This includes a 30-day consultation period and so any person, including GP's, Local Medical Committee's, specialists can submit comments. The minutes of the meetings (will include consideration of any comments made) and decisions made on shared care arrangements and formulary decisions are available on the NTAG website: [NTAG Meetings and minutes – NTAG](#).

NENC ICB has published patient focused information and FAQ's in relation to ADHD and Autism and covers areas such as medication, shared care and right to choose providers. This is published on the NENC ICB website: [Attention Deficit Hyperactivity Disorder \(ADHD\) and Autism](#).

In accordance with s.21 of the FOIA, we are not required to provide information in response to a request if it is reasonably accessible to you by other means.

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**