**Consultation on proposals for Newcastle City Council and the** **North East and North Cumbria Integrated Care Board (ICB)** **to jointly commission paediatric occupational therapy services.**

**This would be done by making changes to an existing Section 75 agreement.**

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**Consultation** **closes:** 6 June 2025

**1. Introduction**

Newcastle City Council would like to consult on a proposal to work with the North East and North Cumbria Integrated Care Board (ICB). The proposal is to commission a children's occupational therapy (OT) service. The occupational therapy service would join together the community OT team and the OT adaptations team.

The Council and the ICB have an agreement in place under Section 75 of the National Health Service (NHS) Act 2006. This agreement allows the joint commissioning of speech and language services within Newcastle. The agreement was designed so that it could be varied to include other therapies at a later date. The proposal we are consulting on is to include occupational therapies in the existing Section 75 agreement. This variation is permitted within the terms of the current agreement.

This would be done under regulation 8 of the NHS Act 2006. Statutory (legal duty) responsibility for the service would remain with the Council. This is because Newcastle City Council is the welfare authority. This would mean that the Council would delegate the budget and the following responsibilities to the ICB:

**Responsibility for completing OT assessments if a child needs specialist equipment at home or needs an adaptation to their home.**

**Responsibility for letting health or housing know when their services might be needed after an OT assessment.**

**The agreement would allow the Council and the ICB to put their budgets together. This would mean that we would be able to jointly commission (buy) a joint OT service. The ICB would be the lead commissioner.**

**We think that this would benefit children, young people, and families. It would mean a more consistent approach. It would also give a better understanding of the children and young people. It would reduce the number of services a child would need to use for OT. It should also reduce waiting times.**

**The purpose of this consultation is to:**

Understand what this could mean for young people with specialist adaptation needs and their families.

Know what this could mean for providers and services in both OT adaptations and community OT pathways.

Has the Council looked at all the important issues? Or are there more things we should consider?

**2. How to take part**

You can make consultation responses via the Let’s Talk portal www.letstalknewcastle.co.uk or you can email them to linzi.mcmeekin@newcastle.gov.uk.

Alternatively, you can write to:

Linzi McMeekin

Commissioning Programme Lead (Education and Early Help)

Newcastle City Council

4th Floor, Civic Centre

Newcastle upon Tyne NE1 8QH

All feedback to the consultation must be received by **5pm** on **Friday 6 June 2025**.

**3. Background**

The Council and the ICB are dedicated to working together to provide services for children and young people where it will bring benefit. This is in line with the Children and Families Act 2014 and the special educational needs and disabilities (SEND) code of practice.

Within Newcastle, children’s community OT services are jointly commissioned by the ICB and the Council. There are two teams in the service. These are the mainstream nursery, school and community team and the specialist schools team. At the moment the children’s OT adaptations team is a separate service.

The Council is responsible for assessing children for OT adaptations and equipment at home. In the past, a Council OT team completed assessments. The Council has hired an outside organisation to provide the service for now because of staffing changes.

Recent service reviews show that most children are known to the community OT team and the OT adaptations team. Jointly commissioning both services should give a better understanding of the child. It should also reduce waiting times, and the number of times a child has to move from one service to another.

**4. The consultation**

To support the shared approach, we would change the existing Section 75 agreement between the Council and the ICB. The agreement currently outlines shared working responsibilities for speech and language therapy (SALT). It allows for other therapies to be included at a later date. The change we are proposing is to include occupational therapy.

This means there will be a legal agreement outlining how the Council and the ICB will work together to provide SALT and OT therapies.

**5. The legal framework**

As local authorities and the NHS work under different rules, there is a specific system designed to allow joint working between the two. It is called Section 75 of the NHS Act 2006. It allows the NHS and Councils to work together if is thought that this will improve services.

One of the benefits of Section 75 arrangements is that it means that NHS Act flexibilities can be used. These are:

* Pooled funds. This means that the ICB and the Council can combine their budgets to spend on agreed projects and services.
* Lead commissioning. This means the ICB and the Council can agree on one organisation to manage the commissioning. In this case the lead commissioner would be the ICB.

Section 75 agreements follow the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000. The regulations ensure that any Section 75 agreement includes the following information:

* the names of the statutory (legal) partners;
* date of agreement;
* start date of the partnership;
* which NHS Act flexibilities are being used (see above);
* the agreed aims and results;
* the intended improvements to services;
* how the partners will achieve planned goals;
* who has been consulted;
* how the partnership encourages existing joint working;
* a definition of who will be using the service;
* the budget each partner will contribute.

After the consultation, the people who will sign the Section 75 agreement need to be sure that the following points are properly managed:

* governance (the systems used to ensure that the arrangement works well);
* review of the arrangement to see if anything needs to be changed;
* human resources (the skills of the staff);
* information sharing;
* clearly set roles and responsibilities;
* who can use the service and how they will be assessed;
* complaints;
* financial issues;
* solving disputes.

**6. Relevant factors**

The change to the Section 75 agreement will mean the ICB can Act as lead commissioner of a joint occupational therapy service for children and young people.

The Section 75 agreement defines what the ICB will need to do as lead commissioner. It will also outline:

* which staff from each organisation will be involved at each stage;
* how contracts will be monitored to make sure that the service is working well;
* what each organisation will do to make sure that children and young people achieve good results. This is called contract monitoring arrangements.
* how information will be shared in the best interests of the child or young person;
* the budget amount given by each organisation;
* how disagreements between the Council and the ICB will be resolved.

The benefits of having a lead commissioner include consistency. Organisations offering the service and the families using it will know who to contact. This will mean that we simplify the service and make it easier to use.

Potential benefits for those who may be affected by the agreement are outlined below:

**7. Providers**

Providers are the organisations that will be providing occupational therapy. The Council has not found any risks to providers from this arrangement. The lead commissioner setup means providers only need to reach out to one organisation if they have any issues or concerns.

There will also be one process for reviewing and monitoring the contracts.

**8.** **Children, young people and families**

Our aim is to make sure that **all** OT needs of children and young people are met by the commissioned provider. This means families won't have to explain their situation to many different OT providers. This should reduce waiting times and delays.

**9. Costs pressures**

The ICB and the Council both have a legal duty to provide and fund a paediatric occupational therapy service for children and young people. There will be no cost pressure on either the ICB or the Council from entering into a Section 75 agreement. The existing budgets are believed to be sufficient to meet the needs of children and young people if the changes in section three are made.

**10. The Equality Act 2010**

The proposal does not disadvantage or unfairly treat any particular group. The proposal will ensure fair treatment for children and young people needing occupational therapy services. It will also improve the quality and the monitoring of the service.

There are not believed to be any implications to the human rights of children and young people receiving a service or to the sense of community.

Jointly commissioning a service will create a clear and structured approach. The rules of the Section 75 agreement will mean that there will be equal treatment in terms of funding.

It is not believed that this proposal will impact any environmental issues negatively.

**11.** **Requests for feedback**

The consultation will be open for four weeks. We would like to know what you think:

* Do you agree that Council and the ICB should change the Section 75 agreement to include paediatric occupational therapy services for children and young people in Newcastle?
* Do you think there are any benefits to this way of working?
* Do you think that there are any risks to this way of working?

Please add any extra comments to support your view. Please read section two for details on how to share your views.

**12. Contact details**

If you have any questions about the consultation or would like the document in a different format such as large print please e-mail linzi.mcmeekin@newcastle.gov.uk.

Alternatively, you can write to:

Linzi McMeekin

Commissioning Programme Lead (education and early help)

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