

21 May 2026

Layla Moran MP
Chair of the Health and Social Care Select Committee
House of Commons
Westminster
SW1A 0AA

Dear Chair,

NHS reform: Integrated Care Boards

Thank you again for the opportunity to give evidence to the committee session yesterday on the work of NHS England. I valued being able to share the insight of our members leading Integrated Care Boards (ICB) and their experience of the ongoing changes that are underway.

There were a couple of things I hoped to raise in the session that I did not have the opportunity to within the scope of the questions, which I have set out below.

[Member views on the impact of financial savings on performance](#)

Earlier this week, The NHS Alliance published a member [survey](#) which sought to understand the demands involved in navigating 2025/26 in the NHS, how local NHS leaders plan to make progress in 2026/27 and the support they need. I wanted to highlight a handful of survey findings which I think relate to issues we touched on in the session:

- 83 per cent of NHS trust and ICB respondents are concerned about planned care in 2026/27.
- 78 per cent of NHS trust and ICB respondents are concerned about emergency care as a result of required financial savings.
- 93 per cent of ICB and NHS trust leaders say that delivering the financial savings required has led to worsening staff morale.
- Asked what support would be most helpful from government and national leaders in 2026/27, trust and ICB respondents want backing to make difficult decisions, particularly when it comes to reconfiguring local services where there is likely to be opposition from the public.

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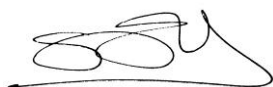
Transfer of functions

Whilst I did touch on this in the evidence session, I wanted to be more explicit about the functions ICBs will be retaining, which have increased since the initial plans were set out in the Model ICB Blueprint in May 2025. It was indicated in the model that eighteen responsibilities would be transferred out of ICBs, and ICB leaders worked with their teams to work through plans for restructure on this basis. However, in December 2025, ICB leaders were provided with an update, Model ICB 'Review for Transfer' Functions, which said ICBs would retain fourteen of those eighteen functions that had been due to transfer out. The scale of the reductions government require of ICBs in both cost and headcount remain unchanged.

As I said when I gave evidence, ICB leaders are keen to get on with the job and deliver the reforms announced in March 2025, despite the challenges experienced through the last year. But I felt these points are prescient to your scrutiny of the reforms and wanted to share them.

If The NHS Alliance can be helpful to the work of the committee on this topic going forward, or to the wider work of the committee, please don't hesitate to be in touch.

Best wishes,



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