

Integrated Care Boards workforce transition frequently asked questions

These frequently asked questions (FAQs) were developed by the ICS Transition Partnership Group (TPG) of the national Social Partnership Forum. They are based on feedback received from surveys of UNISON and MIP members carried out earlier in the year, and issues identified at TPG meetings.

What organisational changes can I expect when the Integrated Care Board (ICB) is created, and I am transferred to my new employer?

Your transfer to the new ICB is under TUPE equivalent protection, meaning that changes your employer seeks to make will be limited, if those changes are related to the transfer. This means that before the transfer takes place, you should be informed about changes that are being planned once the new ICB is set up. These are called measures. Once you have transferred, your employer can still make changes to the way you work, but they will need to plan these changes, and make sure they don't breach your legal protections and rights, including TUPE equivalent protections. For example, there may be economic, technical or organisational reasons for the change that the employer needs to consult you, and your trade union representatives about.

How will I know what my job in the ICB will be like when I've transferred? For example, who will my line manager be and what will be roles and responsibilities be?

You will transfer on your existing terms and conditions, and for all staff below board level it is a lift and shift of people in their current posts. During the consultation phase, and before the transfer, you should have a one-to-one conversation with your current, or future line manager, about your duties and responsibilities.

Any such measures should be consistent with the lift and shift principle. This may only be possible once the new ICB has consulted on the measures it needs to put in place to ensure the ICB is functional from day one.

Are there any changes linked to the establishment of ICBs for staff or functions currently in NHS England and NHS Improvement?

Yes, a number of direct commissioning functions (pharmacy, optometry and dental) will be delegated to ten ICBs in three regions with effect from 1 July 2022. It is likely that the remaining 32 ICBs across the remaining regions will take responsibility for pharmacy, optometry, and dental functions in their regions from 1 April 2023. The people impacts are currently being worked through including understanding with each region and ICB, how they will utilise the published [HR Framework for developing Integrated Care Boards](#). It is currently unclear whether staff will remain employed by NHS England or whether staff might transfer to ICBs, dependent upon which employment model is proposed by each ICB. For those ICBs taking delegation from 1 July 2022, it has been proposed that NHS England and NHS Improvement staff are aligned to the ICBs at this time. Decisions have not yet been made about specialised commissioning services.

What needs to be done now in advance of the transfer in terms of payroll?

Clinical Commissioning Groups (CCGs) will engage with their local payroll providers, to seek guidance and provide information on the steps that need to be taken for employees to access their payslips, and P60 before transfer to the ICB.

Can/should my CCG employer be harmonising policies with the other CCGs that will be merging into the ICB before the transfer?

It would not be normal to harmonise policies between the transferor and the transferee prior to a TUPE transfer. Organisations may be working in partnership with local trade unions, to agree an approach to employment policy alignment and develop new policies/processes for staff joining the ICB after 1 July 2022. However, any contractual elements of current employment policies

are protected by the transfer schemes (along with all other contractual terms) for those staff transferring into the ICB.

I have special class status or mental health officer status in the NHS Pension Scheme. What will happen to this through the transfer?

Your NHS Pension benefits (accrued and future) are maintained in membership of the NHS Pension Scheme because ICBs will be NHS employers. From 1 April 2022, active scheme members accrue benefits in the 2015 Scheme which has no Special Class status (SCS) or Mental Health Officer (MHO) status provision. However, if you have MHO status or SCS now, it will be protected for any 1995 Section benefits you have for as long as you stay within the qualifying rules - and you will still be able to claim your 1995 Section benefits from age 55 without any reduction. You can find out if you qualify for MHO and SCS on the [NHS BSA website](#).

We would recommend that you discuss your status with your employer so this can be specifically and accurately recorded in the transfer documentation. If you have any personal concerns about either your SCS or MHO status, we suggest that you speak to your relevant trade union representative following clarification/discussion with the employer.

