Introducing our Resource Room prioritisation process

24 February 2026

Message sent on behalf of Matt Sandford, Director of Place and Partnership

To: Bradford District and Craven Health and Care Partnership Oversight Executive, Strategy Delivery Group leads

Please share this with colleagues in your organisations and other partners who you feel would benefit from reading this update.

Dear colleagues,

As you know, ICB capacity is reducing significantly, in Bradford District and Craven this represents a substantial structural reduction in the ICB team at place. The impact is already being felt. Teams are smaller, expertise has reduced, and demand has not reduced alongside capacity. I am writing to ask for your support to protect safe delivery and staff wellbeing during this extremely challenging period of change.

Through March and early April, a significant number of colleagues will leave through voluntary redundancy, resulting in a sudden and material loss of capacity. Further change will follow. There will be a period of instability before a new steady state is established.

From July, the ICB presence at place will be significantly smaller. Based on current proposals, what remains will be an Integrator Function of approximately 30 colleagues focused on defined strategic priorities. It will not provide the previous breadth of commissioning and programme infrastructure.

We have undertaken a structured prioritisation process across more than 120 areas of work. Statutory responsibilities have been protected. Remaining work has been assessed against agreed criteria including national requirements, local strategy, financial impact, health inequalities and deliverability.

The outcome is clear. During this transition period, only statutory, highest priority and deliverable work can continue. Some work will pause. Some will transfer. Some will stop.

To manage this safely, we have established the Resource Room. This is a small group of senior colleagues who review all current and new work requests, prioritise them against agreed criteria and match them to the remaining staff capacity.

All new requests for ICB at place input must be submitted using the agreed template and sent by email for review through the Resource Room. This applies regardless of seniority or urgency. No work will be allocated outside this route. This approach has been agreed by the BDC ICB Extended Leadership Team.

In practical terms, colleagues may no longer attend meetings that are not directly aligned to prioritised work. They may step back from projects they have historically

supported. Responses to emails may take longer. Work that is not statutory or high priority may not progress.

Where an ICB colleague says they do not have capacity, this must be respected. Informal approaches, direct escalation or attempts to bypass the Resource Room process create unmanaged demand and additional pressure at a time when capacity is significantly reduced.

The emerging Place Provider Partnership will take time to become fully operational. During that period, there will not be additional ICB capacity at place to absorb activity. Where work remains essential but sits outside the reduced ICB remit, partners will need to lead or resource that activity.

I am asking you to actively support this reset. Please cascade this position within your executive teams and operational leads and ensure expectations of ICB at place capacity are aligned accordingly.

This will only work if we are consistent. Mixed messages or parallel routes will undermine prioritisation and increase pressure on remaining staff. Aligning expectations to the capacity that genuinely exists is necessary to protect staff wellbeing and keep our focus on system priorities. All requests need to go through the Resource Room for review by emailing **wyicb-bdc.pmo@nhs.net**

Thank you for your support,

Matt

Matt Sandford

Director of Partnership and Place, Deputy Accountable Officer BDC ICB

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