

Consultation on the Proposed Main Modifications to the West Berkshire Local Plan Review 2022-2039

NHS Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board

January 2025

# 1. Introduction

# Independent Investigation of the National Health Service in England

1.1. The recent-published independent investigation report of national health service in England, produced by the Lord Darzi¹ critically set out the primary care estates is "not fit for purpose" (paragraph 37, Chapter 5 of the report). While the report only indicates a national picture of the GP estates, it is noted that 20% of the GP estates predates the founding of the NHS in 1948 and more than 50% is more than 30 years old. Though the focus of the report is to call for a reform to the capital framework for primary care of the NHS, the report also indicates the challenges of securing sufficient fundings to support primary care estates development and to ensure primary care estates are financially and operationally viable. The report also highlights the ongoing GP workforce issue across England. Though these issues are not directly related to planning, they do have implications to the operational model of GPs and the provision of new GP facilities.

# **National Planning Policies**

- 1.2. The National Planning Policy Framework (NPPF)<sup>2</sup> sets out the Government's planning policies for England and how these should be applied. Paragraph 2 sets out that the NPPF must be taken into account in preparing the development plan. Paragraph 20 of the NPPF clearly sets out that strategic policies should set out an overall strategy for the pattern, scale and design quality of places (to ensure outcomes support beauty and placemaking) and make sufficient provision for community facilities such as health. Paragraph 35 also sets out that plans should set out the contributions expected from development. This should include setting out the levels and types of affordable housing provision required, along with other infrastructure (such as that needed for education, health, transport, flood and water management, green and digital infrastructure). Health is clearly a material planning consideration in the planning system.
- 1.3. The Planning Practice Guidance (PPG)<sup>3</sup> sets out that strategic policy-making authorities are required to cooperate with each other, and other bodies, when preparing, or supporting the preparation of policies which address strategic matters. Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board is one of the statutory duty-to-co-operate statutory bodies which is responsible for primary healthcare matters.

# NHS Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board

1.4. The Integrated Care Board (ICB) is a statutory NHS organisation, which is established on 1 July 2022 by the Integrated Care Boards (Establishment) Order 2022 and replaces all Clinical Commissioning Groups (CCGs) under the Health and Care Act 2022. The ICB has the delegated function of commissioning primary care services. The ICB currently covers Buckinghamshire, Oxfordshire and Berkshire

<sup>&</sup>lt;sup>1</sup> https://assets.publishing.service.gov.uk/media/66e1b49e3b0c9e88544a0049/Lord-Darzi-Independent-Investigation-of-the-National-Health-Service-in-England.pdf

 $<sup>^2\</sup> https://assets.publishing.service.gov.uk/media/675abd214cbda57cacd3476e/NPPF-December-2024.pdf$ 

<sup>&</sup>lt;sup>3</sup> Paragraph: 009 Reference ID: 61-009-20190315

- West<sup>4</sup> areas with nearly 2 million population, including 154 GP practices and 51 Primary Care Networks (PCNs).
- 1.5. The ICB published Primary Care Strategy in May 2024, and it sets out that 41 out of 223 practice sites (approximate 18%) are predates the founding of the NHS in 1948 and are converted houses. It is generally in line with the findings set out in the Lord Darzi's Report.
- 1.6. The Primary Care Strategy also sets out that the ICB will develop an Integrated Care System (ICS) Infrastructure Strategy, and it will set a clear expectation that system partners will work together to utilise the public estate and community assets to deliver the priorities of this Primary Care Strategy and support primary care resilience. The ICS infrastructure strategy will aim to describe opportunities to provide primary health care in alternative settings

# 2. ICB Comments

#### **Main Modification 18**

- 2.1. The ICB notes that the Council is proposing at least 9,270 net additional homes in West Berkshire for the Plan period up to March 2041, which is equivalent to a minimum of 515 dwellings per annum.
- 2.2. The ICB has raised no objection in principle to the proposed modification, subject to appropriate healthcare mitigation, including but not limited to the provision of new GP facilities or expanding the capacity of existing GP facilities by expanding or reconfiguring the existing premises, must be secured in any forthcoming new housing development schemes to ensure adequate healthcare services can be provided to serve new residents.

# **Main Modification 23**

- 2.3. The ICB notes that several changes have been proposed to accurately reflects relevant up to date information including that in planning permissions and applications related to the site. While the proposed policy does not specifically set out the healthcare mitigation, the proposed Policy SP16 sets out that the Council will be supportive of proposals which have regard, and positively respond, to the Sandleford Park SPD (2015). According to the adopted Sandleford Park SPD (2015), it sets out a proposed extension to the current premises at Falklands Surgery is identified to serve any new population from the site.
- 2.4. Following the recent discussion with the Council regarding the proposed modification of planning obligation of the extant Sandleford Park East permission, which is approved by the Secretary of State and an outline planning application at Sandleford Park West which is recently approved by the Council's Western Area Planning Committee on 24 April 2024, the ICB is requesting to allow the developer contributions towards Falklands Surgery improvement or other Primary Healthcare facilities in the local area vicinity of the Development to allow some flexibility in delivering GP services in the local area.
- 2.5. Given that the draft Infrastructure Delivery Plan does not provide the proposed primary care mitigation in Sandleford Park and there is an absence of relevant

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<sup>&</sup>lt;sup>4</sup> Berkshire West area includes Reading, Wokingham and West Berkshire

wording in the policy to reflect this change, the ICB considers that it is necessary to amend the draft Policy SP16 to accurately reflects relevant up to date information related to the site in the Local Plan. This is also in line with the Inspector's AP27 to ensure the Policy is clear and accurately reflects relevant up to date information including that in planning permissions and applications relating to the site.

2.6. The ICB would therefore like to raise objection to the proposed main modification unless the following wording are added to the proposed Policy SP16:

Development of the site will be expected to deliver and provide:

 Developer contributions towards the improvements to the Falklands Surgery or other Primary Healthcare facilities in the local area vicinity of the Development to serve the site. Developers should engage with and the developer contributions should be agreed with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board or such appropriate body.

#### **Main Modification 25**

- 2.7. The ICB notes that the site is now allocated for the phased delivery of up to approximately 2,500 dwellings instead of the proposed 1,500 dwellings with the final number of dwellings to be determined by the adopted Masterplan SPD required by this Policy. The proposed modification is also seeking to remove the reference to the proposed 450 square metres GP surgery.
- 2.8. The ICB does not raise objection in principle to the revised number of dwellings to be delivered only if appropriate healthcare mitigation is secured. The ICB also generally supports the proposed removal of the 450 square metres provision as it is in line with the ongoing discussions between the Council and the ICB and the discussions during the Hearing Session related to this proposed Policy.
- 2.9. Currently, the proposed Policy says that the site will provide a range of community facilities, including the primary healthcare provision and associated infrastructure. The proposed wording also refers to the feasibility study carried out by the ICB, which the study is based on the relocation of an existing GP practice in the local area. The proposed wording also sets out that further details work should be carried out at the applicant's expense in collaboration with the ICB. The ICB generally supports this.
- 2.10. Paragraph 27 of the National Planning Policy Framework (NPPF) sets out that strategic policy making authorities should make sure that their plan policies take into account the relevant investment plans of infrastructure providers and to ensure a consistent approach is taken to planning the delivery of infrastructure including healthcare facilities.
- 2.11. The ICB would like to point out that the there is an ongoing nationwide GP workforce issue and currently a financial intervention and special measures are in place from NHS England towards the ICB. Though they are not directly related to planning, it inevitably would have an implication to the provision of new GP facilities and the commissioning of GP services. As a primary care commissioner, the ICB has to ensure that any new provision would have neutral or de-minimis rent implications to the ICB. Furthermore, GP providers can operate any new facilities as provided in any new developments without prejudicing the services they provide to existing

patients.

- 2.12. While the ICB notes that the Council is proposing to adopt a more general policy requirement for the provision to allow for negotiations between the ICB, the Council and the landowners to ensure a solution to be found, the ICB considers that the proposed modification wording would generate a risk of uncertainty of securing an onsite healthcare provision. Funding and delivery arrangement of the onsite healthcare provision should be included in the Policy so as to minimise the risk, given that the proposed modification indicates that the site will be a phased delivery. The ICB also notes that other infrastructure such as school provision does have such context in the Policy so it would be reasonable for the Council to have a consistent approach in healthcare infrastructure.
- 2.13. Given the ongoing GP workforce issue and the financial constraints on the ICB, the ICB's preferred option is to request a "turnkey" facility to be built by the applicant and delivered to the ICB at nil cost instead of land provision and a developer contribution. This is to minimise the risk of rising build costs by involving a third-party developer. The applicant is also required to ensure the proposed rental value of the facility will be generally in line with the existing rental value of the existing premise for a certain period before doing a full market rental review. This is to ensure that this new provision will have a de minimis or neutral rent implication to the ICB, as GPs are funded by the ICB through rent reimbursement.
- 2.14. During the hearing session, the ICB appreciates that the Inspector does mention that any healthcare mitigations to be sought should be proportionate to the quantum of the development. However, any healthcare provision to be provided which is only to accommodate the new population generated from North-East Thatcham would not be operationally and financially viable and it is unlikely to get a GP provider to operate.
- 2.15. The ICB's feasibility study clearly indicates the required size of the facility, and this is agreed by the Council and is included in the proposed modification. The ICB would like to point out that the test of soundness includes the plan should be effective which means that the plan should be deliverable over its plan period including infrastructure delivery. As a primary care commissioner, the ICB would raise serious concerns about the deliverability of the healthcare provisin.
- 2.16. In an absence of any details of the funding arrangements, the ICB would assume that the build cost of the facility would be met by the applicant through Section 106 planning obligation, the Council's Infrastructure Levy (CIL) and/or other potential fundings from the Practice. Though the Council does not object in principle to allocate the Community Infrastructure Levy (CIL) fundings towards healthcare, there is currently no formal CIL funding agreement between the Council and the ICB. The ICB considers that there would inevitably increase the risk of the failure of delivering the facility as it is likely to have a funding gap in delivering an onsite provision. The ICB is willing to discuss this with developers as the delivery of an onsite healthcare provision is a substantial social benefit to both new residents and the wider local community.
- 2.17. To summarise, the ICB considers that the proposed modification is clearly contrary to the NPPF, and the plan would not meet the test of soundness in terms of effectiveness. The ICB would like to raise objection to the proposed modification unless the Policy related to healthcare provision should be revised as below:

Primary healthcare provision and associated infrastructure, which is operationally and financially viable. A turnkey facility to be provided and delivered by the

applicant to the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or other such appropriate body, the size of the provision should take into account the feasibility study carried out by BOB-ICB. Further detailed feasibility work should be carried out at the applicant's expense in collaboration with BOB ICB;

#### **Main Modification 26**

- 2.18. The ICB welcomes the proposed modification to the supporting text to Policy SP17 as it has a dedicated paragraph related to primary healthcare facilities. As discussed above, the ICB notes that other infrastructure such as school provision includes the funding arrangement in the supporting text so it would be reasonable for the Council to have a consistent approach in healthcare infrastructure and the supporting text should be revised to reflect the ICB's proposed changes to the main text of Policy SP17.
- 2.19. The ICB would like to raise objection to the proposed modification unless the supporting text related to healthcare provision should be revised as below:

Primary healthcare facilities should be provided, with associated car parking and landscaping, , which is operationally and financially viable and take into account the feasibility study commissioned by the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB). The applicant is expected to provide an onsite "turnkey" healthcare facility in collaboration with the BOB-ICB. The facility should provide room sizes that comply with the Department of Health Building Note 11-01 (or any successor documents). While the provision and any contractual arrangement of the facility will need to be agreed as part of any planning application coming forward on the site, any proposed rental value of the facility will be generally in line with the existing rental value of the existing premise for a certain period before doing a full market rental review.

Where the onsite provision of a facility in accordance with this policy is not viable, the Council will expect other offsite mitigation measures, to ensure the primary healthcare provision can support the new population growth. The applicant should engage with the BOB-ICB at an early stage to discuss the details of any offsite provision. A further feasibility study, to identify other mitigation measures, would need to be carried out at the applicant's expense and any identified offsite mitigation measures will be funded by the applicant through developer contributions.

## **Main Modification 42**

- 2.20. The ICB notes that this modification refers to a new site allocation at Land at Henwick Park in Thatcham, which will deliver approximately 225 dwellings. The ICB expects that developer contributions should be sought to support any primary care estates projects in the local area to serve the development. However, the current modification does not set out any requirements of providing necessary primary care mitigations. The plan would likely to fail to meet the test of soundness in terms of being consistent with national policy.
- 2.21. The ICB therefore would like to raise objection to the proposed modification unless the following wording should be added to the proposed Policy:

Developer contributions should be sought to support primary care estates facilities improvement in the local area which will serve the development. The applicant should engage with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or such appropriate body regarding the mitigation details.

## **Main Modification 43**

- 2.22. The ICB notes that this modification refers to a new site allocation at Land East of Regency Park Hotel in Thatcham, which will deliver approximately 45 dwellings. The ICB expects that developer contributions should be sought to support any primary care estates projects in the local area to serve the development. However, the current modification does not set out any requirements of providing necessary primary care mitigations. The plan would likely to fail to meet the test of soundness in terms of being consistent with national policy.
- 2.23. The ICB therefore would like to raise objection to the proposed modification unless the following wording should be added to the proposed Policy:

Developer contributions should be sought to support primary care estates facilities improvement in the local area which will serve the development. The applicant should engage with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or such appropriate body regarding the mitigation details.

## **Main Modification 45**

- 2.24. The ICB notes that this modification refers to a new site allocation at Pincents Lane in Tilehurst, which will deliver approximately 138 dwellings. The development will generate a considerable amount of new population which will have a material impact to the nearby GP practices. Developer contributions should be sought to support any primary care estates projects in the local area to allow additional clinical capacity to accommodate new population generated from this new site allocation. However, the current modification does not set out any requirements of providing necessary primary care mitigations. The plan would likely to fail to meet the test of soundness in terms of being consistent with national policy.
- 2.25. The ICB therefore would like to raise objection to the proposed modification unless the following wording should be added to the proposed Policy:

Primary care mitigations should be sought to ensure there is adequate GP service in the local area to serve the development. Applicants should engage with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or such appropriate body regarding the mitigation details. A feasibility study should be carried out at the applicants' expenses to identify the mitigation measure to be secured in the development.

#### **Main Modification 57**

- 2.26. The ICB notes that this modification refers to a new site allocation at Land north of Pangbourne Hill in Pangbourne, which will deliver approximately 25 dwellings. The new population which will have a material impact to the nearby GP practices. Developer contributions should be sought to support any primary care estates projects in the local area to allow additional clinical capacity to accommodate new population generated from this new site allocation. However, the current modification does not set out any requirements of providing necessary primary care mitigations. The plan would likely to fail to meet the test of soundness in terms of being consistent with national policy.
- 2.27. The ICB therefore would like to raise objection to the proposed modification and considers that the following wording should be added to the proposed Policy:

Primary care mitigations should be sought to ensure there is adequate GP service in the local area to serve the development. Applicants should engage with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or such appropriate body regarding the mitigation details. A feasibility study should be carried out at the applicants' expenses to identify the mitigation measure to be secured in the development.

## **Main Modification 74**

- 2.28. The ICB generally supports the proposed modification as it indicates the provision of new or improved health facilities will be required as part of new development, proportionate to the additional demand that they would generate. The ICB considers that the facilities set out in the proposed modification should also include healthcare facilities as they support and promote physical health and wellbeing of West Berkshire residents which should NOT be excluded from this Policy.
- 2.29. The ICB would like to point out that both the Council and the ICB are within the same Integrated Care System (ICS), which is set up by the Government across England and it is a partnership including NHS organisation and upper-tier local councils to improve local health and wellbeing. Therefore, the provision of new and improved healthcare facilities is vital to support and promote physical health and wellbeing. One of the key roles of the ICB is to improve outcomes in population health.
- 2.30. While the draft Local Plan does not have a dedicated policy related to healthcare facilities, the ICB considers that it is vital for Policy DM3 to make a reference to the healthcare provisions. This is in line with the findings of the Council's Sustainability Appraisal/Strategic Environmental Assessment (SA/SEA) Environmental Report dated November 2024, which makes a reference to the NPPF related to the sufficient provision for community facilities, including health infrastructure. Clearly, the proposed modification fails to the test of soundness in terms of consistent with national policy as the current wording excludes healthcare facilities.
- 2.31. The ICB would like to raise objection to the proposed modification unless the following wording should be added to the proposed Policy:

Proposals for development should support healthy lifestyles, including through the use of active design principles. All proposals should take into account the

additional demand that they would generate to the local healthcare services. Applicants should engage with the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) or such appropriate body regarding any healthcare mitigations including but not limited to the provision of new onsite healthcare provisions or developer contributions towards any offsite healthcare estates projects, proportionate to the additional demand that they would generate. Where appropriate, the provision of new or improved health facilities will also be required as part of new development, proportionate to the additional demand that they would generate.

Development that would have an unacceptable impact on the health or wellbeing of existing or new communities or without providing any meaningful healthcare mitigations to accommodate the additional demand that they would generate will not be permitted.

## **Main Modification 86**

- 2.32. The ICB notes that an amendment has been made to the first paragraph of the policy to ensure the location of the proposed specialist housing is appropriate, subject to other policies in the Plan being satisfied.
- 2.33. As discussed in the ICB's Written Statement, this type of specialist housing usually will have a greater demand for healthcare services. It is important for applicants to demonstrate any new specialist housing developments would not have a material impact on nearby healthcare services. The proposed modification only specifically refers to the location in terms of accessibility of facilities and services. However, the ICB would like to point out that it is also about whether appropriate mitigations are proposed including but not limited to developer contributions towards healthcare to support offsite primary care estates projects or to deliver an onsite provision with the agreement of the ICB, as the primary care commissioner if it is providing NHS GP services. While the current draft local plan does not have a dedicated policy related to healthcare, it is vital to ensure any new specialist housing developments should be supported by a health impact assessment and other relevant Policies in the Plan. The proposed modification should be in a standalone bullet point instead of incorporating into bullet point b of the Policy.