

Examination of the Reading Borough Local Plan Partial Update
Written Statement in response to Inspector's Matters, Issues and Questions

Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care Board
January 2026

1. Introduction

- 1.1. The Integrated Care Board (ICB) is a statutory NHS organisation, which was established on 1 July 2022 by The Integrated Care Boards (Establishment) Order 2022 and replaces the Clinical Commissioning Groups (CCGs) under the Health and Care Act 2022. The ICB has the general function of arranging for the provision of services including the commissioning of GP services (primary care provision).
- 1.2. The NHS Buckinghamshire, Oxfordshire and Berkshire West ICB (BOB-ICB) covers Buckinghamshire, Oxfordshire and Berkshire West¹ areas, including 51 Primary Care Networks (PCNs) covering 157 GP practices in total. The ICB is also a statutory duty to cooperate prescribed body on primary healthcare matters.
- 1.3. The tests of soundness require that local development plans should be positively prepared, justified, effective and consistent with national policy. The BOB-ICB's representations in relation to the Draft Local Plan are made in the context of the requirements of the National Planning Policy Framework (NPPF) in relation to make sufficient provision for healthcare facilities to support communities' health as a component of sustainable development.
- 1.4. This statement is to address the Inspector's questions with regards to Matter 9.

2. Inspector's Questions

- 2.1. BOB-ICB set out below our responses to the Inspector's questions in light of our primary healthcare commissioner role.

Matter 9: Other Uses

Is Policy OU1 justified and effective?
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- 2.2. BOBICB generally supports the concept of co-location of facilities on a single site, but it is not clear from the Policy or the supporting text how this can be achieved, such as how the buildings can be co-shared with other service providers if they have different timeframes of their service contracts. While the ICB appreciates that the level of details will be discussed at the planning application stage, the Policy should at least provide further details about this co-location proposal. This is supported by Paragraph 27 of the NPPF, **where strategic policy-making authorities should make sure that their plan policies align as fully as possible with those of other bodies where a strategic relationship exists on these matters, and take into account the relevant investment plans of infrastructure providers, unless there is a clear justification to the contrary.**
- 2.3. Policy OU1 sets out that proposals for onsite intensification of healthcare facilities will be supported. This is not always achievable as BOBICB does not have direct control on primary care estates and any rental implication of new premises will need to be fully justified. This implies that this Policy does not fully align with how primary care estates are planned and funded. BOBICB also has raised concerns about seeking fundings to support primary care estates as Reading Borough Council has currently no plan to allocate any Community Infrastructure Levy (CIL) fundings towards primary care estates, BOBICB has raised concerns over the practicability of having any onsite intensification or co-location of health facilities. This also

¹ Berkshire West area includes Reading, Wokingham and West Berkshire

indicates that the proposed Policy OU1 is not fully justified and effective as it disregards the challenges of delivering health infrastructure.

- 2.4. Reading Borough Council has raised concern about having a new policy as it considers that impacts on health can be dealt with within a single policy (CC9). Due to the complexity of how primary care estates are planned and funded, the new policy can set out clearly how healthcare provision should be delivered including onsite and offsite mitigations and developers will need to work with the BOBICB at an early stage to ensure the mitigation(s) to be provided must be agreed, financially and operationally viable. BOBICB considers that this new Policy OU1A should be included in any forthcoming main modifications of this Plan so as to provide a clear policy indication of how health infrastructure is delivered.