10-Year Capital Plan for Health and Social Care

Experts in health

The 10-Year Capital Plan, published on 8 July, represents **the delivery chapter of the 10 Year Health Plan**, laying out the **capital investments needed** to deliver the three shifts (hospital to community, analogue to digital, and sickness to prevention). This document also **consolidates existing commitments** into a single capital framework with **longer term funding certainty**.

Where we are now

£37 billion cumulative capital shortfall compared to international peers **since 2010**

Over **4,100 clinical service incidents from estates failures** in 2024/25

Backlog maintenance bill more than tripled since 2015/16 from £4.9 billion to £15.9 billion

11% of NHS estate pre-dates the formation of the **National Health Service**

This capital plan lays out a settlement designed to bring **an end to short-term capital raids:**

- **Capital Departmental Expenditure Limit (CDEL) rises to £15 billion by 2029/30**, a 16% real-terms growth from 2024/25 and **the largest healthcare capital budget on record**
- **£65 billion 10-year settlement for operational capital and maintenance**, confirmed through the 10-Year Infrastructure Strategy, with **maintenance budgets extended to 2035**

Key Commitments

Hospital to community:

- **250 new neighbourhood health centres (NHCs)**, 120 operational by 2030, via public capital and a new public-private partnership model
- **£6.75 billion** spent through the **Estates Safety Fund over 9 years**, and **£1.6 billion to eradicate RAAC** by 2035, alongside the **New Hospital Programme at around £3billion per year from 2030**

Analogue to digital:

- **Over £4.4 billion** of capital in **technology**, expected to return over **£38 billion in benefits**
- **A Single Patient Record** and **expanded NHS App** to join up care, with digital connectivity built into new estate

Sickness to prevention:

- More than **£650 million for genomics** over five years, including **sequencing up to 150,000 adults**
- Around **£1 billion** in both capital and revenue in **pandemic preparedness and cyber resilience**

How will capital be delivered differently

Certainty will replace annual cliff-edges: operational capital **will flow straight to providers** up to 2029/30, and **maintenance funding will be confirmed** up to 2035

Funding with conditions: a new **outcomes framework will guide decisions**, with funding tied **to evidenced health improvement** and greater **autonomy for high performers**

Faster approvals: Treasury sign off **only above £300 million**, and **no further approvals** needed at full business case stage **unless costs are over £1 billion** or scope changes materially

Private capital returns: a new **NISTA-developed partnership model** will fund neighbourhood facilities **where public capital alone cannot**, beyond the 40 to 50 deliverable in this Parliament

It is likely that the reforms laid out in the 10-Year Capital Plan will **benefit organisations with strong, well evidenced infrastructure strategies**. These organisations will be better placed to **secure faster capital spending approvals**, more **devolved control of capital spend** and a stronger hand in **shaping their local pipeline for local needs.**

Source: https://www.gov.uk/government/publications/10-year-capital-plan-for-health-and-social-care/10-year-capital-plan-for-health-and-social-care