

Appendix C: Joint capital resource use plan 2026/27 template

Integrated care boards (ICBs) can use this non-mandated template to present their information in their published plans.

Region	East of England				
ICB	Central East				
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Introduction

The Central East Integrated Care Board (ICB) which formed on 1 April 2026 serves approximately 3.53 million people across Cambridgeshire, Peterborough, Bedfordshire, Luton, Milton Keynes, and Hertfordshire. The population is living longer but with a growing challenge of long-term illness, widening inequalities linked to deprivation. Of the population:

- 16.4% aged 65+ (rising); 9.6% live in most deprived quintile nationally
- 4.9 years male/3.8 years female life expectancy gap between healthiest and least healthy areas
- 15% with multimorbidity overall (43.8% in 60+)

Central East ICB is the NHS commissioner responsible for delivering health and related care including Emergency and Urgent care, General Medical Services, Pharmacy, Optometry and Dentist Services, Community Nursing, Mental Health Support, Rehabilitative Care, most Planned Hospital Care and Continuing Healthcare for adults and children with long-term complex physical or mental health needs to its population.

Those services are provided from the following Trusts:

Bedfordshire Hospitals Foundation Trust

Milton Keynes University Hospital Foundation Trust

East and North Hertfordshire Trust
Hertfordshire Community Trust
Hertfordshire Partnership Foundation Trust
West Hertfordshire Teaching Hospitals Trust
Cambridge University Hospitals Foundation Trust
Cambridgeshire & Peterborough Foundation Trust
North West Anglia Foundation Trust
Royal Papworth Hospital Foundation Trust
East of England Community Health and Care Trust
East London Foundation Trust
Central Northwest London Trust
Central London Community Trust
South Central Ambulance Service
East of England Ambulance Service

Across all Trusts there are 171 sites with a total Gross Internal Area (GIA) of 1.93 million square metres. There are also 411 premises accommodating General Medical Services (GMS) with a total Net Internal Area (NIA) of 177,000 square metres. (Note that Trusts capture area in GIA and GMS premises are captured in NIA).

Currently, Central East ICB has 22 Local Authorities, including 2 county councils, it is unknown how many there will be following Local Government reorganisation, however, the geographical area remains the same with significant areas of new homes planned. Below are some examples of the planned new homes and growth:

- Hertfordshire's population is growing faster than the national average, with 100,000 homes planned by 2050, including a new garden community at Hemel Hempstead (10,000 homes / 11,000 jobs).
- Milton Keynes – 11,000 new homes are planned by 2050 with a population of 410K by 2050. Milton Keynes is considered to be the fastest growing city in the country.
- Luton - large scale regeneration projects are planned that support diverse housing, with the aim of building 1,144 new homes per year.
- Bedfordshire – a new town at Tempsford has Government support, with major developments proposed across the county including at Marston Vale.
- Peterborough – 20,000 new homes are planned by 2044.
- Cambridgeshire – strong science, university and tech sectors are driving the need for new homes with 50,000 homes planned for the greater Cambridge area by 2045, and new settlements at Cambourne North and near Abington.

The purpose of Central East ICB is to manage the clinical and financial risk for the 3.5 million people it serves, ensuring that the right health interventions are in place to improve lives, reduce avoidable harm, and use public resources responsibly. This is set out in the ICB's 'Our Way – Strategy to Delivery' which was published on 1 April 2026.

As an ICB, we receive a relatively small capital funding allocation (~£20m in 2026/27). Any capital allocated to us will be fully directed toward delivering ICB priorities and enhancing health outcomes at the neighbourhood level and we will need to be highly selective about how future capital is prioritised, ensuring that investment directly supports our strategic care model, neighbourhood delivery, and population outcomes.

Over the next five years, we will work with NHS England and the Department of Health and Social Care to establish a stronger pipeline of community-based capital schemes, aligned to neighbourhood health and integrated care delivery and also aligning to the 10 Year Health Plan that was published in July 2025 and the Neighbourhood Health Centre Guidance published in April 2026. This will include working with a wide range of providers - primary care, community services, mental health providers, voluntary and community sector organisations, and local authority partners—to identify opportunities where capital investment can unlock better access, coordination, and utilisation reduction.

2026/27 CDEL allocations and sources of funding

The table below includes schemes across the Trusts which NHS England are considering. The Central East ICB will have oversight of the projects that are supported in principle by NHS England and support the delivery of projects that are approved via business cases.

CDEL	ICB	BHFT	CPFT	CUHT	EECT (CCS/NCHC)	ENHT	HCT	HPFT	MKFT	NWAFT	RPFT	WHTH	Total
													Full-year Plan %H
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
Operational Capital – ICB	16,417												16,417
Operational Capital – Provider		53,500	5,950	37,977	11,552	16,386	3,847	10,597	16,335	14,327	14,088	21,546	206,105
Total Operational Capital	16,417	53,500	5,950	37,977	11,552	16,386	3,847	10,597	16,335	14,327	14,088	21,546	222,522
National Programme Spend:													-
National Hospital Programme		-	-	10,000	-	-	-	-	7,955	47,524	-	7,274	72,753
RAAC		-	-	-	-	-	-	-	-	16,720	-	-	16,720
STP WAVE 4		-	-	3,555	-	-	-	-	-	-	-	-	3,555
Estates Safety		7,365	1,121	7,356	1,574	16,926	1,592	990	2,640	719	-	4,876	45,159
PFI Charges		230	354	2,904	-	144	-	-	-	23,004	432	-	27,068
National Programme sub total	-	7,595	1,475	23,815	1,574	17,070	1,592	990	10,595	87,967	432	12,150	165,255
Constitutional Standards:													-
Community		-	-	500	1,250	1,900	705	-	-	-	-	-	4,355
Diagnostics		19,999	-	-	-	5,630	-	-	1,490	450	-	10,702	38,271
Mental Health		-	1,215	-	-	-	-	600	-	-	-	-	1,815
UEC		23,000	-	2,600	300	3,000	-	-	650	1,338	-	5,301	36,189
Primary Care UMF	2,750												2,750
Constitutional Standards sub-Total	2,750	42,999	1,215	3,100	1,550	10,530	705	600	2,140	1,788	-	16,003	83,380
Total CDEL	19,167	104,094	8,640	64,892	14,676	43,986	6,144	12,187	29,070	104,082	14,520	49,699	471,157

Capital prioritisation

As outlined in the introduction, the Central East ICB receives a relatively small amount of capital in any one year, circa £20m for 2026/2027 and because it must be highly selective on how capital is deployed, schemes were prioritised to the maximum available capital using the criteria below:

- Only investment within core assets were supported
- Where investment will increase clinical capacity
- Where value both on capital and revenue were demonstrated
- Where there would be a reduction in health inequalities and/or inequities in service provision
- Where investment would support more sustainable service models and enable transformation
- Where investment would support more sustainable infrastructure that allowed for growth
- Where deliverability and readiness were demonstrated
- Where investment would improve utilisation of assets

Whilst Central East ICB receives a relatively small amount of capital, the wider NHS system receives a greater amount of capital. Proposals for seeking capital from this broader allocation were considered in three categories:

1. Upgrading, repurposing, extending existing NHS assets
2. Repurposing, upgrading and adapting non NHS assets
3. New builds

For 2026/2027 there has been a change in approach on how capital is allocated, moving from ICB responsibility and now managed directly by NHS England with Trusts. NHS England have managed the prioritisation, allocations and process, and at the time of drafting this report, this process is still ongoing.

Provider Trusts primarily have three capital budgets available to them over the next four years:

1. Operational capital (Trust allocation);
2. Estates Safety (direct allocation between NHSE and Trusts); and
3. Constitutional Standards and Left-Shift funding – which is being made available under six categories:
 - Diagnostics
 - Urgent & Emergency Care (UEC)

- Mental Health, Learning Disability & Autism (MHLDA)
- Community
- Elective
- Ambulance

Trusts have received initial feedback on their bids and discussions are ongoing with NHS England to confirm the final allocation and timing of funding against individual schemes across the four years. The ICB expects to be consulted on any final proposals such that it can be assured on the potential ongoing revenue implications of any capital investments, ensuring that these support the commissioners' strategic priorities and address population need.

Capital planning

Central East ICB does not hold information on Trust's backlog maintenance, this information is only held by Trusts. Trusts will have considered their respective priorities to reduce backlog maintenance, address Critical Incident Reporting and equipment replacement, as part of their proposals to NHS England under the Estates Safety Fund.

Overview of ongoing scheme progression

All capital proposals within Central East ICB were less than £10m in value and based on criteria as set out under the prioritisation section. As outlined, for 2026/2027 there has been a change of process for the allocation, prioritisation and management of capital, moving from ICB responsibility to a direct relationship between NHS England and Trusts. Going forward the Central East ICB will have oversight of business cases giving specific attention to affordability where there may be increased revenue consequences.