



Department  
of Health &  
Social Care

*From Karin Smyth MP  
Minister of State for Health*

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Julia Lopez MP

By email to: [julia.lopez.mp@parliament.uk](mailto:julia.lopez.mp@parliament.uk)

2 April 2025

Dear Julia,

Thank you for your correspondence of 17 January about Queen's Hospital, Havering. I am sorry for the delay in replying.

I appreciate your concerns.

I would like to assure you that this Government is committed to delivering a NHS that is fit for the future, and to ensuring that patients receive the healthcare they deserve. We recognise the importance of strategic, value for money investments in capital projects, such as new facilities, significant upgrades, or other targeted capital investments.

In support of this, as announced at the Autumn Budget, capital health spending is set to increase by £1.8billion to £13.6billion in 2025/26. Excluding COVID-19 years, this represents the highest budget in real terms since before 2010. Within this, £1billion will be invested to address the backlog of critical maintenance and repairs, and over £100million to upgrade primary care estates, supporting improved use of existing buildings and space, boosting productivity and enabling delivery of more appointments. Around £1.5billion additional capital funding will also provide new surgical hubs, diagnostic scanners, and beds across the estate to create more treatment space in emergency departments, reduce waiting times, and help shift more care into the community.

National capital programmes, operational capital envelopes, and allocation processes for 2025/26 are now set out in the NHS planning guidance, published 30 January. Capital funding levels for future years will be determined through the current Spending Review which concludes in June 2025.

NHS commissioners are responsible for the delivery, implementation, and funding decisions for services. Local health and care organisations are best placed to make decisions on commissioning services for their communities, working with local authorities, stakeholders and local populations to meet people's needs. Decisions about services should be clinically led, following appropriate engagement with patients and stakeholders.

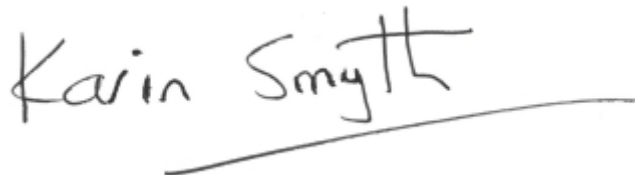
Any changes to services should be led by clinicians and be in the best interests of patients. Substantial planned service change and reconfiguration of services are subject to a public consultation and must meet Government and NHS England's tests to ensure good

decision making, and that proposals are demonstrated to be in the interests of service users and the wider public.

I would therefore urge you to engage with North East London Health and Care Partnership Integrated Care Board, to demonstrate the urgency of this scheme. Working alongside wider system partners whilst phasing the programme over several financial years may allow for greater flexibility within capital budget limits.

I hope this reply is helpful.

Yours sincerely,

A handwritten signature in black ink that reads "Karin Smyth". The signature is written in a cursive style and is positioned above a solid horizontal line.

**KARIN SMYTH**