

HSJ Advisory



MINI INSIGHTS

NHS PRIORITIES & OPERATIONAL PLANNING GUIDANCE

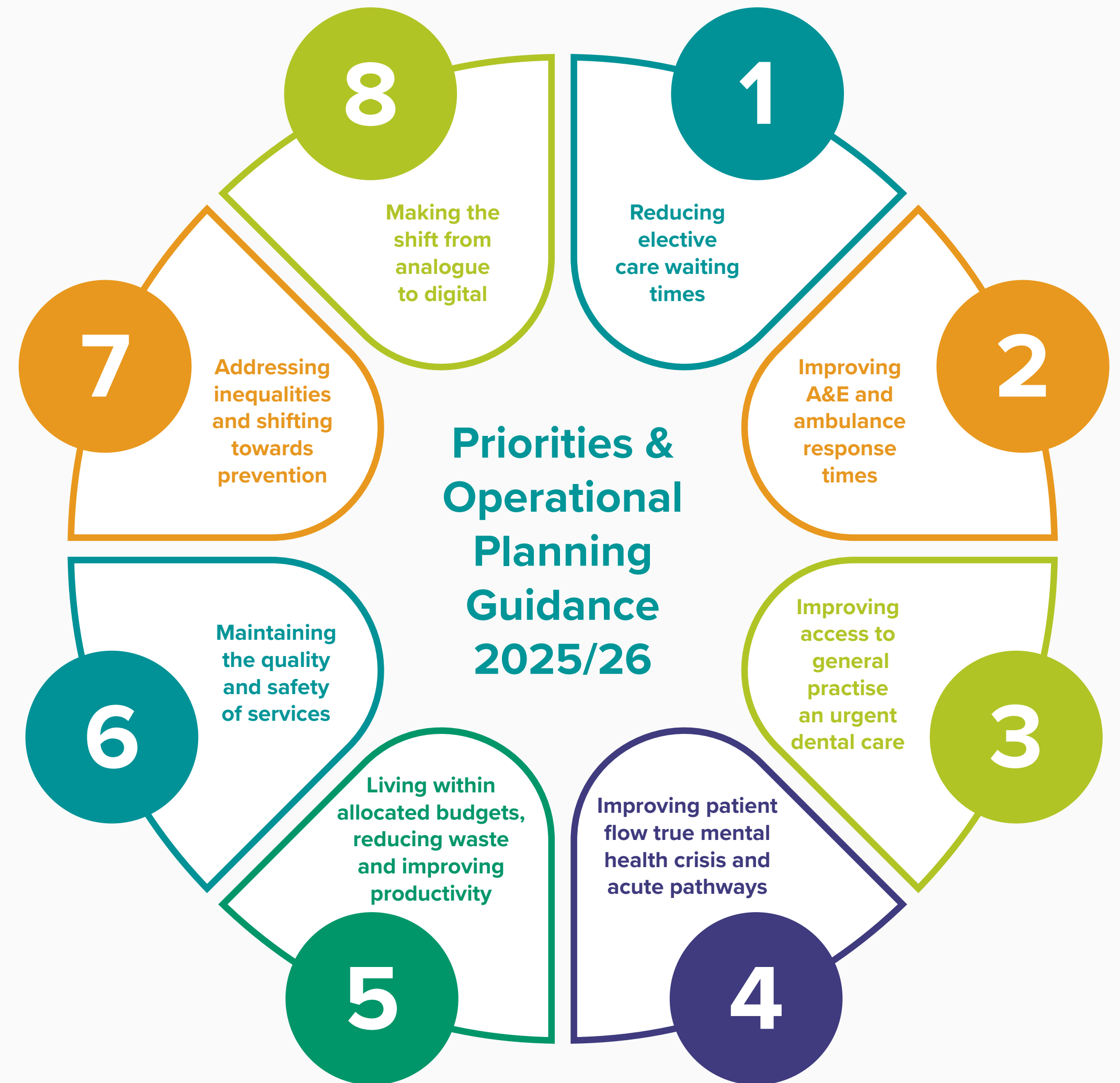
2025/26



NHS Priorities & Operational Planning Guidance 2025/26: What are the Priorities?

- 1 Reducing elective care waiting times:** 65% of patients waiting no longer than 18 weeks by March 2026 - down from its current 92%.
- 2 Improving A&E and ambulance response times:** a minimum of 78% of patients should be seen within four hours in A&E by March 2026.
- 3 Improving access to general practice and urgent dental care:** including patient experience of access. Provide 700,000 additional urgent dental appointments.
- 4 Improving patient flow for mental health crisis and acute pathways:** reduce the average length of stay and improving access for children and young people. The target is to reach 345,000 additional children and young people (CYP) aged 0 to 25 compared to 2019.
- 5 Living within allocated budgets, reducing waste and improving productivity:** organisations expected to reduce their cost base by at least 1% and achieve 4% improvement in productivity.
- 6 Maintaining the quality and safety of services:** especially “fragile” maternity and neonatal services.
- 7 Addressing inequalities and shifting towards prevention:** in line with the *Core20Plus5* approach with focus on cardiovascular disease (CVD) and diabetes.
- 8 Making the shift from analogue to digital:** prioritising digital tools, improve patient outcomes, reduce costs and staff time.

Reference: NHS England: 2025/26 Priorities and Operational Planning Guidance



Want to know more or discuss further?

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What does it mean for medicines optimisation?

- 1 Optimising medicines value:** optimise the value of medicines, improve compliance with best value frameworks in medicines procurement. Prescribe most cost effective and clinically appropriate medicines.
- 2 Reducing unwarranted variation in prescribing:** reduce unwarranted variation in prescribing, standardise guidelines, promote evidence-based treatments, ensure consistency across different regions and healthcare settings.
- 3 Promoting biosimilar medicines:** prescribe the best value biologic medicine where available. Use more cost-effective alternatives to brand name biologics where appropriate.
- 4 Implementing guidance on low value prescribing:** a focus on reducing or eliminating the use of medicines that offer limited clinical benefit or are not cost effective.
- 5 Cost reduction and financial reset:** pressure to reduce costs which will affect all areas including medicine prescribing. (Overall costs need to reduce by 1% and productivity needs to increase by 4%).
- 6 Integrated care systems (ICS) responsibilities:** integrated care boards (ICB) and providers to work together to deliver a balanced financial position. Use medicines optimisation to reduce costs. Consider financial implications when making prioritisation decisions.
- 7 Productivity and efficiency:** improve operational and clinical productivity, avoid duplication and low activity prescribing. Reduce wastage, optimise prescribing practices.
- 8 Digital tools:** NHS looks to digital tools to optimise medicines management to support better efficiency.
- 9 Local prioritisation:** ICBs to take difficult decisions about how to prioritise their resources.



Reference: NHS England: 2025/26 Priorities and Operational Planning Guidance

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NHS Priorities & Operational Planning Guidance 2025/26: What does it mean for the pharma industry?

- 1 Emphasis on cost reduction and productivity:** the NHS will focus on optimising medicines value and improving compliance with value frameworks, reducing unwarranted variation, prescribing best value biological medicines.
- 2 Focus on prevention and proactive care:** opportunities for preventative medications, vaccines, and other health management tools. Support GPs to target blood pressure and lipid control with data and appropriate medications.
- 3 Digital transformation:** align your proposition with greater use of the NHS App for patient communications, health record access, online consultations, appointment management, prescriptions management and patient messaging - and digitally connected healthcare records.
- 4 Focus on reducing elective waiting times:** ensure efficient delivery and availability of medications used in elective care pathways. Engage on referral management.
- 5 Mental health:** opportunities for the pharmaceutical industry to supply related medications and support services.
- 6 Local prioritisation:** understand and engage with integrated care boards (ICBs) and providers to ensure medicines align with local priorities.
- 7 New care models:** engage on neighbourhood health service models which aim to reduce demand for hospital care.
- 8 Collaboration:** more close working with other healthcare providers and align their services with NHS priorities.

Reference: NHS England: 2025/26 Priorities and Operational Planning Guidance



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Priorities & Operating Planning Guidance 2025/26

In summary, the planning guidance suggests a changing landscape for the pharmaceutical industry.

To succeed, companies may need to focus on demonstrating value, providing cost-effective solutions, supporting preventative care, and adapting to the increasing digitisation of healthcare.

The industry may also need to be more responsive to local priorities and collaborate with NHS organisations to ensure their products align with the needs of patients and the healthcare system.

Reference:

NHS England » 2025/26 priorities and operational planning guidance

WANT TO KNOW MORE OR DISCUSS FURTHER?

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