England

The Commonwealth Fund

International Health Care System Profiles

May 2026

Overview

In England, the National Health Service offers health care that's free at the point of use to all U.K. citizens who are "ordinarily resident" in the country and U.K. Global Health Insurance Card holders. This includes access to primary physicians, hospital care, and mental health care. Other services, such as the provision of prescription drugs and dental care, are also available but are subject to a means-tested charge. Health care in England is paid for by general taxation and is overseen by the Department of Health and Social Care (as of 2025, NHS England's functions are being merged into this department).

England's system functions separately from those of Scotland, Wales, and Northern Ireland, with services delivered through NHS trusts and coordinated locally by 42 integrated care systems. Private medical insurance is available on a supplementary basis and covers only a minority of the population. The Labour government, elected in July 2024, aims to shift care from hospitals to communities, with reforms focused on improving access, tackling workforce pressures, strengthening digital infrastructure, and maintaining the principle of universal, equitable care.

HEALTH SYSTEM
BY THE NUMBERS

11.1%
Health care spending as a percent of GDP

81 years
Life expectancy at birth

100%
Public insurance coverage

Coverage and Access

Background and History

The National Health Service (NHS) was established in 1948 as one of a series of reforms originating in the 1942 government white paper known as the *Beveridge Report*, which helped to establish the modern British welfare state following World War II. One initial aim of the NHS was to change the way people accessed and paid for care, making taxpayers collectively responsible for funding it. In this sense, the improved distribution of services and equity of care were primary considerations from the beginning.[1]

Since then, the NHS has been responsible for a number of medical breakthroughs, including the world's first computed tomography scan in 1971 and the birth of the world's first baby conceived through in vitro fertilization in 1978.[2] In 2019, the NHS started trialing the use of artificial intelligence (AI) and telemedicine technologies through the NHS AI Lab, with the aim of increasing patient attendance at appointments, supporting staff, and providing more equitable access to care.[3]

The Role of Public Health Insurance

English citizens, other people who are ordinarily resident, and those with a U.K. Global Health Insurance Card are covered by public health insurance.[4] Individuals visiting England for more than six months must pay the Immigration Health Surcharge to access care.[5] The rights of those eligible for NHS care are outlined in the NHS Constitution for England. These include the right to access care without discrimination and within specific time limits for certain categories, such as emergency and planned hospital care.[6]

Insurance Coverage in the U.K. (Percentage of Population)

Source: OECD Data Explorer, Healthcare coverage, distributed by OECD, accessed November 5, 2025.

Services Covered Under Public Health Insurance

NHS services that are free of charge for all residents include:[9]

- Preventive care
- Inpatient hospital care
- Outpatient hospital care
- Maternity care
- Primary care
- Rehabilitative care
- Clinically necessary home visits (including postnatal home visits and home visits following discharge from hospital)
- Mental health care
- Palliative care.

NHS services that are means-tested:[10]

- Clinically necessary dental care
- Eye care
- Long-term care
- Assistive devices.

Cost-sharing arrangements for publicly covered services are rare. Some NHS services are means-tested (for example, clinically required dental care, eye care, long-term care, and prescription payments).[11] Others need to be paid out of pocket, including vaccinations not covered by national insurance (for example, hepatitis B, rabies, and yellow fever) and most types of cosmetic dental care.[12]

HOW DOES THE NHS IN ENGLAND RELATE TO THE NHS ACROSS THE U.K.?

In the U.K., the NHS refers to the individual health systems of England, Scotland, Wales, and Northern Ireland. In 1969, legislation separated the Welsh NHS from the English NHS and put it under the control of the U.K. government's Welsh Office.

In the second half of the 20th century, the health systems of Scotland and Northern Ireland were run by the U.K. government's Scottish Office and Northern Ireland Office, respectively. In Northern Ireland, the NHS was merged with the broader social care system in 1973 and renamed the Health and Social Care system. After devolution in the late 1990s, when authorities in Scotland, Wales, and Northern Ireland gained power over their own health care systems, the Scottish and Welsh governments and the Northern Ireland Executive each received an annual block grant from the U.K. government. The devolved powers were able to choose how to spend the grant.[7]

As a result, spending changes affecting NHS services in England are not necessarily mirrored in the health budgets of the other U.K. nations. There are other differences as well. For example, Scotland, Wales, and Northern Ireland all abolished prescription charges after devolution, whereas England continues to charge means-tested fees for many medications and services.[8]

Safety Nets

In 2025, about 89 percent of medication prescriptions from community pharmacies in England were dispensed free of charge.[13] People who are exempt from prescription drug charges include:[14]

- Children under age 16
- Full-time students ages 16 to 18
- People age 60 and older
- People with low incomes who receive certain benefit payments
- Pregnant women and women who have given birth in the preceding 12 months
- People with a valid medical exemption certificate
- People in receipt of war pensions or armed forces compensation programs.

The standard prescription charge for people who are not exempt is GBP 9.9 (USD 12.6).[15] Those who have multiple or ongoing prescriptions can buy a prescription prepayment certificate, which covers all NHS prescriptions, including dental, and allows people to cap the amount they pay for prescriptions for a period of either three or 12 months.[16]

Other safety nets include assistance with dental and eye care. People under age 18 (or under age 19 and in full-time education), pregnant and recently pregnant women, hospital dentists' patients, prisoners, and people with low incomes who receive certain benefits are not liable for dental costs.[17] Eye tests are free for those under age 18 (or under age 19 and in full-time education), those over age 60, people with low incomes who receive certain benefits, people with (or who have close relatives with) glaucoma, and people who are registered blind or partially sighted. In addition, individuals under age 18 and those with low incomes who qualify can obtain financial support to meet the cost of corrective lenses (glasses or contact lenses).[18]

Transportation costs to and from specialist appointments or diagnostic tests are also covered for people who qualify under the NHS Low Income Scheme.[19]

The Role of Private Health Insurance

In 2023, 12 percent of the U.K. population had private medical insurance.[20] People can purchase supplementary private medical insurance, but they can't opt out of the public system.[21] Private health insurance in the U.K. differs from private health insurance in the U.S., for instance, because it doesn't usually cover emergency medical treatment or maternity care, and treatment by a private specialist under private insurance usually requires a referral from an NHS general practitioner (GP).[22] Some employers offer private insurance as a benefit, but individuals can also purchase policies.[23]

The Role of Government

The U.K. Parliament, the Secretary of State for Health, and the Department of Health and Social Care are responsible for health legislation and general policy in England. Health care services are provided to the NHS via NHS trusts. Trusts are public sector organizations within the NHS that serve either a geographical area or a specialized function (such as mental health services). All NHS hospitals are operated by acute, mental health, specialist, or community trusts; in mid-2024, there were 215 trusts.[24]

NHS England was a government-funded body that operated independently of the Department of Health and Social Care. Its responsibilities included the day-to-day running of the NHS, which includes managing the NHS budget and overseeing elements of the 42 integrated care systems.[25] However, in March 2025, the U.K. government announced its plans to abolish NHS England. The government stated that bringing NHS England under direct ministerial control would streamline accountability and reduce administrative duplication with the Department of Health and Social Care. As such, over the next two years, NHS England's functions are being merged into the Department of Health and Social Care.[26]

Integrated care systems are partnerships comprising NHS organizations and local authorities, among others, which take collective responsibility for health services across defined geographical areas.[27]

Some of the public agencies involved in health care governance in England include the following:

- **The Care Quality Commission** monitors the overall performance of integrated care systems and has regulatory oversight of health and social care providers.[28]
- **The National Institute for Health and Care Excellence (NICE)** sets guidelines for clinically effective treatments and assesses the efficacy and cost-effectiveness of new health technologies.[29]
- **NHS Digital** creates and oversees national information technology and data services in health care and uses data to improve treatment.[30]

Integration and Care Coordination

In July 2022, the NHS established 42 integrated care systems to cover England. The aim was to improve cooperation between the NHS, local councils, social services, and other agencies.[31] Integrated care systems replaced clinical commissioning groups, which were statutory NHS bodies that had been responsible for planning and commissioning health services for local regions since 2013.[32]

Integrated care systems are designed to integrate health and care services to help patients access the services they need as quickly as possible in a location that is convenient for them. They are also intended to confront inequities in outcomes, experience, and access; improve productivity in the health service; and create better value for money.[33]

Operations and Resources

Overview of the Delivery System

The NHS in England is a diverse ecosystem of providers, each serving a particular purpose or specialization. These providers can be broadly categorized into four groups:[34]

- **Primary care** is typically a patient's first point of contact and includes GP surgeries, community pharmacies, dentists, and eye care.
- **Secondary care** includes planned or elective care that is usually provided in hospitals. It also includes urgent and emergency care, such as emergency and nonurgent telephone services, ambulance services, hospital emergency departments, out-of-hours GP services, and mental health care.
- **Tertiary care** includes highly specialized treatments, such as neurosurgery and transplants.
- **Community health** includes services such as district nursing, child health services, health visiting, and sexual health services.

Primary Care

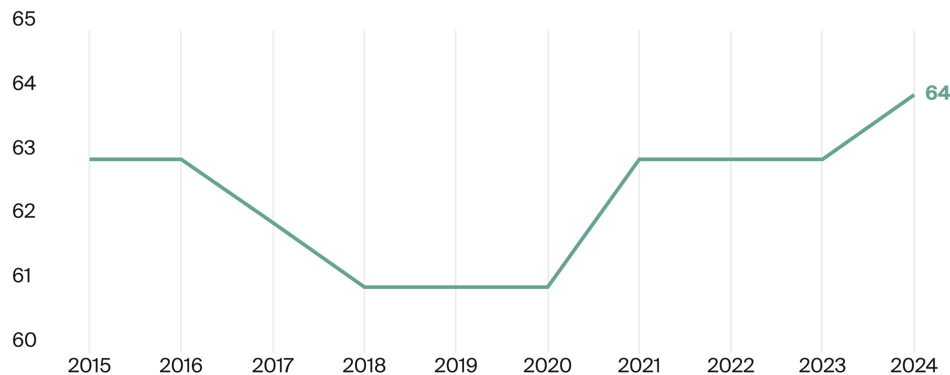
GPs are most patients' first point of contact for nonurgent health concerns, providing preventive care, managing chronic disease, and referring patients to specialists.[35] In 2024, there were 64 GPs for every 100,000 people in England. As of October 2025, there were 38,649 GPs (full-time equivalent [FTE]), including trainees but excluding ad-hoc locums.[36] In 2025, there were nearly 6,200 GP practices in England, with a median of 8,988 patients for every practice.[37]

The main subgroups of GPs are GP partners, who hold an ownership stake in a general practice, and salaried GPs, who are employed by a practice with a fixed salary and don't have an ownership stake in the practice.[38] Over the past decade, the number of GP partners has fallen by 25 percent, dropping from 24,491 in 2015 to 18,367 in 2025. In contrast, the number of salaried GPs has increased by 81 percent, representing nearly half (48%) of the workforce in 2025. Fewer trainees and newly qualified doctors are opting for partnership roles, and the decline in partner numbers spans nearly every age bracket, with the steepest fall (73%) among GPs ages 30 to 34. Multiple pressures are driving the decline, from the demanding workload and bureaucracy tied to partnership to the financial exposure of unlimited liability. These challenges discourage prospective partners and add strain to those who remain, while some practices offer few opportunities for new partners to join.[39]

In 2022–23, the average pretax income for GPs (contracted and salaried) in England was GBP 110,200 (USD 140,741).[40]

GPs are not required to provide out-of-hours care. Most parts of the U.K. have some form of GP service available 24 hours a day. However, challenges such as a lack of incentives to work out of hours mean that many GPs don't provide these services.[41]

Number of GPs per 100,000 People in England, 2015–24



Source: "General Practice Workforce, 31 October 2025," NHS England, November 27, 2025.

Note: Our calculations in this chart are estimations based on data from NHS England Monthly Workforce Statistics.

General practices also employ nurses, who play a role in most aspects of primary care, including screening and managing patients with long-term conditions and providing minor treatments. Advanced nurse practitioners have higher clinical qualifications and are able to assess, manage, and prescribe medication for some health conditions. In September 2025, there were 16,706 nurses (FTE) working in general practice.[42] NHS nurses in the U.K. (across all health care settings) face challenges that include understaffing, overwork, and low pay — the average nurse's salary is estimated to be between GBP 35,000 and GBP 40,000 (USD 44,699 and USD 50,085) per year.[43] In December 2022, this led to nurses striking for the first time in the history of the Royal College of Nursing.[44]

Outpatient/Specialist Care

Aside from mental health services, secondary care in England is mainly provided at hospitals. It includes planned or elective care, emergency care, and out-of-hours services.[45]

Nearly all specialists are salaried employees of an NHS hospital, and their salaries are agreed as part of a national contract between the Department of Health and Social Care and the British Medical Association. In 2024, there were 118 hospital specialists for every 100,000 people in England. As of July 2025, there were 71,722 hospital specialists (FTE).[46]

Integrated care boards pay hospitals for outpatient consultations at nationally determined rates. Specialists are also free to practice privately within specially designated wards in NHS or private hospitals. In 2022, the Department of Health and Social Care estimated that 20 percent of specialist doctors in the U.K. worked in private practice, with about 2 percent exclusively performing private work.[47]

Physician Education and the Workforce

As of September 2025, the NHS in England had 100,023 vacancies, an improvement from the same period in 2024 when there were 109,919.[48]

However, factors such as discontentment and burnout are driving many health care professionals to work abroad: 30 percent of doctors are likely to move abroad to practice medicine in the next 12 months.[49] In addition, a combination of staff shortages and slower pay increases in the NHS than in the private sector contributed to strikes by health care workers in 2023–24, especially among trainee doctors.[50]

In 2022, the U.K. had 13.5 medical graduates for every 100,000 people, compared with the Organisation for Economic Co-operation and Development (OECD) average of 14.2. However, this was an increase from 12.9 for every 100,000 people in 2016.[51] Medical students in England pay GBP 9,250 (USD 11,813) per year to study. This adds up to GBP 46,250 (USD 59,067) for their five years of study. Medical and dental students can apply for the NHS Bursary, which is based on household income and covers the final two or three years of tuition, depending on course length.[52]

Number of Medical Graduates per 100,000 People in the U.K., 2022

Source: OECD, Medical graduates, distributed by OECD, accessed November 27, 2024.

Hospitals

As of 2024, England had 1,140 hospitals.[55] These hospitals are organized by 202 trusts, including about 10 ambulance trusts. Many trusts operate multiple hospitals. For example, Manchester University NHS Foundation Trust manages 10 acute and specialist hospitals.[56]

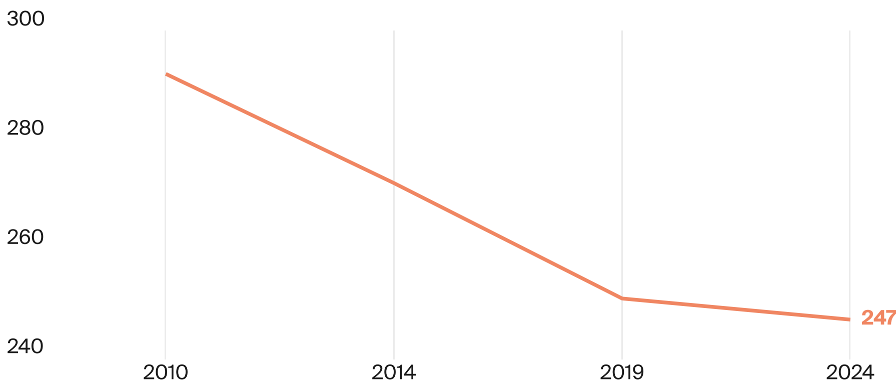
In March 2025, there were 142,157 hospital beds in England.[57] In 2025, it was estimated that consultant-led beds had halved over the preceding 30 years. Medical advances have contributed to the decline because patients can now be treated outside of hospital settings.[58] For example, in April 2025, there were 12,724 virtual beds (20 for every 100,000 people registered with a GP), enabling patients to get hospital-level care at home.[59]

HOSPITALS BY THE NUMBERS

247 hospital beds per 100,000 people in England in 2024[53]

652 nurses and midwives per 100,000 people in England in 2024.[54]

Number of Hospital Beds per 100,000 People in England, 2010–24



Source: "Bed availability and occupancy – KH03," NHS England, accessed December 3, 2025.

Note: Our calculations in this chart are estimations based on data from "NHS England Quarterly Bed Availability and Occupancy Statistics."

In 2024, the density of nursing and midwifery personnel in England was 652 for every 100,000 people, which is low for the region – the European average was 826 for every 100,000 people in 2022. However, it is an increase from 2015, when England had 623 nursing and midwifery personnel for every 100,000 people. As of July 2025, there were 392,690 nurses and midwives (FTE) in England.[60]

Mental Health Care

The NHS in England spent GBP 16 billion (USD 20 billion) on mental health services in 2022–23, which is about 14 percent of its total budget.[64]

In 2024, about 3.8 million people in England accessed mental health, learning disability, and autism services, up by nearly 40 percent since 2019. Among these, one million were children; those age 16 were found to be the most likely to seek support, with one in five girls age 16 seeking treatment.[65]

Between June 2022 and June 2024, the number of people in contact with mental health services increased by 21 percent for adults (ages 18 to 64) and by 29 percent for children and young people. Yet the number of interactions they had with these services only rose by 9 percent for adults and 11 percent for children and young people. Long wait times for appointments are an issue, with children and young people waiting a median of 142 days for a second appointment.[66] In the second quarter of 2025, there were 18,192 mental hospital beds in England, and 89 percent of overnight mental hospital beds were occupied.[67]

The 10 Year Health Plan for England, published in July 2025, aims to address wait lists, improve care, and streamline processes. The government intends to invest up to GBP 120 million (USD 153 million) in dedicated mental health emergency departments to allow patients to get same-day specialist care. It also plans to recruit an additional 8,500 mental health workers and expand mental health support teams in schools.[68]

MENTAL HEALTH CARE BY THE NUMBERS

In 2023, there were **12 psychiatrists per 100,000 people** in the U.K.[61]

In 2024, there were **31 mental hospital beds per 100,000 people** in England.[62]

In 2024, there were **265 mental health professionals per 100,000 people** in England.[63]

There has been a steep increase in the number of mental health workers in England over the past decade — from 109,028 in 2015 to 159,471 (FTE) in 2025.[69]

The NHS Talking Therapies program for anxiety and depression was implemented to improve the delivery and accessibility of evidence-based, NICE-recommended psychological therapies. It allows both GP and self-referrals; in 2024–2025, 91.6 percent of patients had their first appointment within six weeks.[70] About 1.2 million people accessed these services in 2024–25.[71]

Number of Mental Hospital Beds per 100,000 People in the U.K., 2020

Source: World Health Organization, Mental Health Atlas 2020 (WHO, 2021).

Long-Term Care and Social Support

The NHS has struggled with an underfunded social care sector, which often led to roadblocks in health care delivery.[72] In 2023, total long-term care expenditure was only 3.1 percent higher than in 2022.[73] Some individuals with complex long-term health conditions receive funding from the NHS, but the majority of adult social support is funded via local authorities on a means-tested basis.[74]

The NHS pays toward long-term care (at home or in residential facilities), including end-of-life care, for eligible individuals with care needs arising from illness, disability, or accident.[75] Long-term services range from high-intensity services, such as nursing care, to lower-intensity support in the community. Some individuals with complex long-term care needs qualify for free health and social care arranged and funded solely by the NHS.[76]

Cost and Affordability

Health Care Spending Overview

Public funding for health services in England comes from the Department of Health and Social Care's budget. In 2023–24, the department spent GBP 188.5 billion (USD 240.7 billion). The vast majority of this expenditure (94.4%) went toward day-to-day items, such as salaries and medications. NHS England received the bulk of the day-to-day spend: it was allocated GBP 171 billion (USD 218 billion) for health services in 2023–24.[77]

Overall, the U.K. devoted 11.1 percent of its gross domestic product (GDP) to health care in 2024. Government spending accounted for 81.3 percent of health expenditure. Out-of-pocket expenditures accounted for 14.6 percent of health care spending, followed by prepaid private spending at 4.2 percent.[78]

Health Care Spending as a Percentage of GDP in the U.K., 2022

Source: The Global Health Observatory, Current health expenditure (CHE) as a percentage of gross domestic product (GDP) (%), distributed by World Health Organization, accessed October 12, 2025.

Pharmaceutical Spending

In 2023, 9.7 percent of U.K. health care spending was on pharmaceuticals, equaling USD 620 per person.[79] This expenditure was split across the following categories:[80]

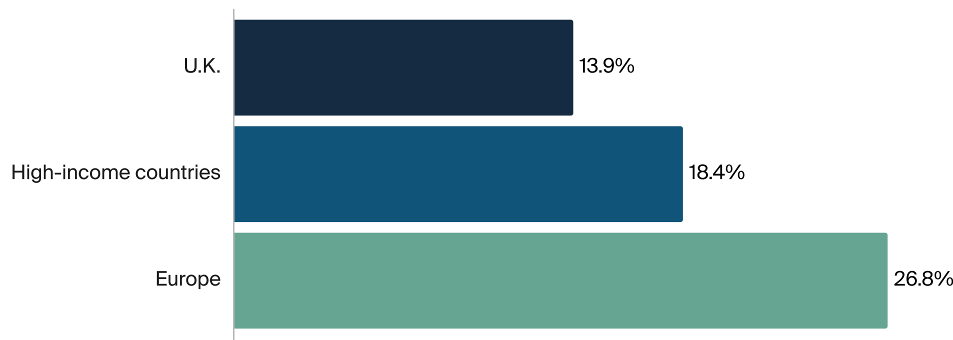
- Community-prescribed medications: 50.8 percent
- Over-the-counter medications: 24.1 percent
- Vaccines/immunizations: 7.4 percent
- Pharmaceuticals administered as part of a course of treatment: 17.7 percent.

The Voluntary Scheme for Branded Medicines Pricing and Access is an agreement between the Department of Health and Social Care, NHS England, and the Association of the British Pharmaceutical Industry.[81] It caps the allowed total sales value of branded medicines to the NHS each year. The cap increases by 2 percent each year, and any sales that exceed the cap are repaid to the Department of Health and Social Care through a levy.[82]

Cost Sharing and Out-of-Pocket Spending

Out-of-pocket consumer health expenditures, including hospital treatments, medical goods, and other health services and products, accounted for 14.6 percent of total U.K. health expenditures in 2024. In 2023, the largest portion of out-of-pocket spending was for long-term care and dental services.[83]

Percentage of Health Care Spending That Is Out of Pocket in the U.K., 2022



Source: The Global Health Observatory, Out-of-pocket expenditure as percentage of current health expenditure (CHE) (%), distributed by World Health Organization, accessed December 3, 2025.

No one in the U.K. has been pushed below the poverty line because of household health expenditure. This remained consistent between the earliest available data from 1999 and the latest available data from 2020.[84]

How Are Costs Contained?

In 2025, the government estimated that the NHS's expenditure in a single year was higher than the total economic output of Greece. As of 2025, the NHS accounts for 38 percent of its day-to-day spending and is projected to increase to 40 percent by the time of the next election (2028).[85]

In its 10 Year Health Plan, the government hopes to contain costs by changing how the NHS's finances are managed. This includes addressing bureaucratic issues, for instance, by merging departments with overlapping roles (for example, NHS England, *see The Role of Government*).[86]

Another initiative is to change how NHS providers are financed for the quality of care they deliver — rewarding those who deliver high-quality care (through bonuses) and withholding payment from those who deliver poor-quality care. Prior to the 2025 reforms, the NHS spent billions on provider deficits every year.

In 2025, the government sought to contain this cost by ensuring that the GBP 2.2 billion (USD 2.8 billion) deficit support fund would not go to agencies that failed to meet their targets. By 2026–27, this fund will be completely phased out.[87]

Poor-quality treatments are also being addressed. NICE quantifies the expected quality and length of life patients can gain (known as quality-adjusted life years, or QALYs) to assess the value of medical interventions. QALYs help determine a cost-effectiveness threshold that enables the government to stabilize its outputs.[88] Through the 10 Year Health Plan, the government is giving the agency the ability to withdraw treatments that are no longer cost-effective.[89]

The government is also targeting funds that are wasted due to poor productivity. In 2025, outpatient appointments cost the government GBP 14 billion (USD 18 billion). The government hopes to contain this cost by improving the NHS App, enabling patients to more easily book appointments, request follow-up appointments, and access virtual care.[90]

Quality and Outcomes

Health Outcomes

Average life expectancy in England has declined at an annualized rate of change of 1.6 percent since 2000. Women live about four years longer than men: in 2023, life expectancy at birth was 79.3 years for men and 83.2 years for women.[99]

Aside from biological differences, this gap is affected by lifestyle factors (men are more likely to engage in risky behaviors, such as smoking and alcohol abuse) and hazardous occupations (men are more likely to work in dangerous occupations with a higher risk of accidental death).[100]

The data also show that life expectancy is lower for men and women in local authorities with the highest levels of socioeconomic deprivation. People in the most deprived areas (top 10%) of England are three times more likely to die before age 70 than people in the least deprived areas (bottom 10%).[101] This is mainly a result of more deaths caused by lung cancer, heart disease, and respiratory diseases.[102] Women living in the most deprived areas spend more than 19 years longer in poor health than those in the least deprived areas.[103]

Overall, 64.5 percent of adults in England were classed as overweight or obese in 2024. People living in the most deprived areas were found to be more likely to be living with obesity. Nearly four in 10 (37.4%) of those living in the most deprived areas were found to be living with obesity, compared to just 19.8 percent of those living in the least deprived areas.[104]

Addressing Health Inequities

In the U.K., there are health inequities across ethnic and gender groups. For example, some minority ethnic groups are more likely to report poor health than people who identify as white British. The poorest health is reported by the white Romani and Irish Traveller group. Along with Pakistani and Bangladeshi groups, these groups are most likely to report low health-related quality of life in later life. The South Asian population is more likely to suffer from cardiovascular disease and diabetes than others.[105]

HEALTH OUTCOMES BY THE NUMBERS

Average life expectancy in England was **81 years** in 2023 (the same as the average in high-income countries).[91]

The avoidable mortality rate in the U.K. was **227 deaths per 100,000 people** in 2021 (compared with 237 across OECD countries).[92]

The top three causes of death in England in 2023 were:[93]

- Neoplasms (cancer): **75 deaths per 100,000 people**
- Diseases of the circulatory system: **66 deaths per 100,000 people**
- Diseases of the respiratory system: **30 deaths per 100,000 people.**

The maternal mortality rate in the U.K. was **8.5 deaths per 100,000 live births** in 2023 (compared with 11 on average in Europe).[94]

The infant mortality rate in the U.K. was **4.2 deaths per 1,000 live births** in 2023 (compared with 4 on average across high-income countries).[95]

In 2021, the share of the U.K. population with mental health disorders was **17 percent** (compared with 16% on average in high-income countries).[96]

Guns were responsible for **0.17 deaths per 100,000** in England in 2023.[97]

In 2024, **27 percent** of adults in the U.K. were affected by obesity (compared with 26% in high-income countries).[98]

In 2021, the rate of Black women dying after the end of their pregnancy in England was 2.9 times higher than the rate for white women.[106] In 2023, the Black infant mortality rate for England and Wales was 6.1 deaths for every 1,000 live births, compared with three deaths for every 1,000 live births among white infants.[107]

When it comes to women's health, research has found that gynecological appointments in the U.K. have more than doubled since 2020. About 630,000 people were on wait lists for women's health issues in 2024, including endometriosis and menopause care.[108]

In October 2025, the government announced its renewal of the Women's Health Strategy as part of its 10 Year Health Plan. Some important objectives include reducing wait lists for gynecology appointments, eliminating cervical cancer by 2040, and making emergency hormonal contraception free at NHS pharmacies. The government has also implemented "Jess's Rule," which requires GPs to think again if a patient returns three times without a diagnosis or with worsening symptoms.[109]

From a clinical perspective, the NHS is implementing the evidence-based Core20PLUS5 framework, which defines specific population groups and clinical focus areas in its efforts to reduce health care inequities.[110]

Many factors causing health inequities are beyond the health care system's control. "If you live in a poorer area, you're likely to die sooner and live in poorer health," says Hugh Alderwick, director of policy at the Health Foundation, a U.K. health think tank. "The answer to addressing health inequities lies largely in policy choices outside the NHS, like the level and distribution of spending on social services. But the NHS has a big role to play in reducing inequalities in access to high-quality health services."

To bring health care to more deprived areas, the government plans to bring care out of hospitals and into communities, alleviating pressures on GPs and accident and emergency units. It aims to roll out neighborhood health services and centers so that patients can be treated closer to home. Prior to this announcement, trials of these neighborhood teams across England had reduced hospital use. For example, in the city of Derby, these trials led to 1,400 fewer short hospital stays and 2,300 fewer ambulance callouts for urgent but not immediately life-threatening cases among the population that is age 65 and over.[111]

There are no data available for the share of the population that reports an unmet need for medical care.

Innovation and Reform

Health Care Innovation

In July 2025, the U.K. government launched its 10 Year Health Plan for England, which aims to shift care from hospitals to communities, from analogue to digital, and from sickness to prevention. The plan laid out ways to tackle workforce challenges, including introducing a new operating model, upgrading technology, improving transparency, and understanding how to better approach NHS finances.[112]

However, according to the Health Foundation's Hugh Alderwick, the NHS is likely to continue to struggle until the government comprehensively reforms the social care system and formulates a strategy to reduce broader health inequities. Another problem, he says, is new governments implementing new health structures before giving existing ones a chance. Alderwick offers the recently formed integrated care systems (*see Integration and Care Coordination*) as an example: "I think the biggest risk is that, ultimately, the impact of integrated care systems is going to be strongly influenced by what national government does – how much funding it puts in the health system, [and] whether it properly funds social care and public health services, and its wider strategy for improving the nation's health. Yet policymakers often underplay their own role in shaping and constraining what local leaders can do – particularly in a highly centralized political system."

Health Care Technology

Following the 10 Year Health Plan, in 2025, the government invested more than GBP 2 billion (USD 2.5 billion) in technology to improve care. As part of the "analogue to digital" aim of the plan, the government hopes to improve support to staff by utilizing AI to improve treatment and operations. For patients, the objectives are:

- To create a single patient record that can be accessed by all health care professionals with the patient's consent
- To improve the NHS App to make it easier for patients to manage appointments and discuss their care
- To create an NHS companion (virtual assistant) by 2035 to act as a doctor in patients' pockets.[113]

Some changes were already being felt in 2025. In April 2025, 87 percent of hospitals offered services via the NHS App, up from 20 percent in July 2024. Between July 2024 and April 2025, reforms to the NHS App prevented 1.5 million hospital appointments from being missed.[114]

In addition to the single patient record, the government has coinvested GBP 600 million (USD 766 million) with the Wellcome Trust into the Health Data Research Service to improve data availability for scientists and researchers, supporting diagnoses and the development of treatments.[115]

The Health Foundation's Hugh Alderwick feels positive about these developments — as long as they are steered in the right direction. "I think new technology is a means to an end, so a health system needs to think about how it can use new technology to meet its own objectives, like improving care for people with long-term conditions and reducing health inequities, rather than thinking about new technology as an end in itself," he says. "The risk is that we are driven by the priorities of the market rather than the health system."

This profile reflects data as of January 2026. New or updated information may have become available since its release.

Notes

1. Geoffrey Rivett, "1948–1957: Establishing the National Health Service," in *The History of the NHS*, ed. Geoffrey Rivett (London: Nuffield Trust, accessed October 10, 2024), https://www.nuffieldtrust.org.uk/chapter/1948-1957-establishing-the-national-health-service.

2. "EMI CT Brain Scanner," Science Museum Group, accessed December 8, 2025, https://collection.sciencemuseumgroup.org.uk/objects/co134790/emi-ct-brain-scanner; Richard Stubbs and Amy Lochtie, "Innovation: the golden thread empowering the NHS for a bright future," *NHS England (Blog)*, May 19, 2023, https://www.england.nhs.uk/blog/innovation-the-golden-thread-empowering-the-nhs-for-a-bright-future/; *Select Committee on Science and Technology Fifth Report* (House of Commons Science and Technology Committee, 2005), https://publications.parliament.uk/pa/cm200405/cmselect/cmsctech/7/703.htm.

3. *Artificial intelligence in health and care award 2020* (NHS England and NHS Improvement, January 15, 2020), https://www.england.nhs.uk/aac/wp-content/uploads/sites/50/2020/01/ai-award-2020-call-for-applications-v1.pdf; "AI knowledge repository," *NHS England*, accessed December 8, 2025, https://digital.nhs.uk/services/ai-knowledge-repository; "Artificial intelligence (AI) and machine learning," *NHS England*, last updated April 7, 2025, https://www.england.nhs.uk/long-read/artificial-intelligence-ai-and-machine-learning/.

4. "Moving to England from outside the European Economic Area (EEA)," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/visiting-or-moving-to-england/moving-to-england-from-outside-the-european-economic-area-eea/; "Get healthcare cover abroad with a UK GHIC or UK EHIC," NHS, accessed November 27, 2025, https://www.nhs.uk/using-the-nhs/healthcare-abroad/apply-for-a-free-uk-global-health-insurance-card-ghic/.

5. NHS, "Moving to England."

6. Department for Health and Social Care, "The NHS constitution for England," GOV.UK, last updated August 17, 2023, https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england; Department for Health and Social Care, "Handbook to the NHS Constitution for England," last updated January 24, 2025, https://www.gov.uk/government/publications/supplements-to-the-nhs-constitution-for-england/the-handbook-to-the-nhs-constitution-for-england.

7. Kelly Shuttleworth and Elspeth Nicholson, "Devolution and the NHS," Institute for Government, August 18, 2020, https://www.instituteforgovernment.org.uk/explainer/devolution-and-nhs.

8. Shuttleworth and Nicholson, "Devolution and the NHS.".

9. "NHS screening," NHS, accessed November 27, 2025, https://www.nhs.uk/tests-and-treatments/nhs-screening/; "NHS health check," NHS, accessed November 27, 2025, https://www.nhs.uk/tests-and-treatments/nhs-health-check/; "About the prevention programme," NHS England, accessed November 27, 2025, https://www.england.nhs.uk/ourwork/prevention/about-prevention-programme/; "NHS services," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/; "About NHS hospital services," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/hospitals/about-nhs-hospital-services/; "Your antenatal care," NHS, accessed November 27, 2025, https://www.nhs.uk/pregnancy/your-pregnancy-care/your-antenatal-care/; "Physiotherapy," NHS, accessed November 27, 2025, https://www.nhs.uk/tests-and-treatments/physiotherapy/; "Occupational therapy," NHS, accessed November 27, 2025, https://www.nhs.uk/tests-and-treatments/occupational-therapy/; "Home visit policy," Godiva Group Practice, accessed November 27, 2025, https://www.godivagrouppractice.nhs.uk/policies/home-visit-policy/; "Mental health services," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/mental-health-services/; "End of life care," NHS, accessed November 27, 2025, https://www.nhs.uk/tests-and-treatments/end-of-life-care/.

10. "Dental services available on the NHS," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/dentists/what-dental-services-are-available-on-the-nhs/; "Free NHS eye tests and optical vouchers," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/opticians/free-nhs-eye-tests-and-optical-vouchers/; *NHS Continuing Healthcare and NHS-funded Nursing Care* (AgeUK, July 2025), https://www.ageuk.org.uk/siteassets/documents/factsheets/fs20_nhs_continuing_healthcare_and_nhs-funded_nursing_care_fcs.pdf; "Walking aids, wheelchairs and mobility scooters," NHS, accessed November 27, 2025, https://www.nhs.uk/social-care-and-support/care-services-equipment-and-care-homes/walking-aids-wheelchairs-and-mobility-scooters/.

11. "When you need to pay towards NHS care," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/help-with-health-costs/when-you-need-to-pay-towards-nhs-care/.

12. "Travel vaccination advice," NHS, accessed November 27, 2025, https://www.nhs.uk/vaccinations/travel-vaccinations/travel-vaccination-advice/; "How much NHS dental treatment costs," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/dentists/how-much-nhs-dental-treatment-costs/.

13. "Prescriptions: fees and charges," UK Parliament, August 29, 2025, https://questions-statements.parliament.uk/written-questions/detail/2025-08-29/72067.

14. "Free NHS prescriptions," NHS Business Services Authority, accessed November 27, 2025, https://www.nhsbsa.nhs.uk/help-nhs-prescription-costs/free-nhs-prescriptions.

15. "NHS prescription charges," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/prescriptions/nhs-prescription-charges/.

16. "Save money with a prescription prepayment certificate (PPC)," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/prescriptions/save-money-with-a-prescription-prepayment-certificate-ppc/.

17. "Who can get free NHS dental treatment or help with dental costs," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/dentists/who-can-get-free-nhs-dental-treatment/.

18. NHS, "Free NHS eye tests.".

19. "Healthcare Travel Costs Scheme (HTCS)," NHS, accessed November 27, 2025, https://www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/.

20. OECD Data Explorer, *Healthcare coverage*, distributed by *OECD*, accessed November 5, 2025, https://data-explorer.oecd.org/vis?fs[0]=Topic%2C1%7CHealth%23HEA%23%7CHealthcare%20coverage%23HEA_COV%23&pg=0&fc=Topic&bp=true&snb=1&vw=tb&df[ds]=dsDisseminateFinalDMZ&df[id]=DSD_HEALTH_PROT%40DF_HEALTH_PROT&df[ag]=OECD.ELS.HD&df[vs]=1.0&dq=GBR.A...&pd=2010%2C&to[TIME_PERIOD]=false.

21. *Guide for Patients Thinking of Taking out Private Medical Insurance* (British Medical Association, 2019), https://www.bma.org.uk/media/1831/bma-guidance-for-patients-wishing-to-buy-private-medical-insurance-sept-19.pdf; Clinical Policy Advisory Group, *Defining the Boundaries Between NHS and Private Healthcare* (NHS Derby and Derbyshire Integrated Care Board, last updated, April 2025), https://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical-Policies/Goverance_Policies/Defining_the_Boundaries_between_NHS_and_Private_Healthcare.pdf.

22. "Health insurance exclusions," Bupa, last updated May 28, 2024, https://www.bupa.co.uk/health/health-insurance/understanding-health-insurance/private-health-insurance-exclusions.

23. British Medical Association, *Guide for Patients.*

24. *Key Facts and Figures About the NHS* (The King's Fund, July 2, 2025), https://www.kingsfund.org.uk/insight-and-analysis/data-and-charts/key-facts-figures-nhs.

25. House of Commons Committee of Public Accounts, *Introducing Integrated Care Systems: Thirty-Fifth Report of Session 2022–23* (House of Commons, January 23, 2023), https://committees.parliament.uk/publications/33872/documents/185310/default/.

26. "NHS England: Health and Social Care Secretary's statement," GOV.UK, March 13, 2025, https://www.gov.uk/government/speeches/nhs-england-health-and-social-care-secretarys-statement.

27. Anna Charles, "Integrated care systems explained," The King's Fund, August 19, 2022, https://www.kingsfund.org.uk/insight-and-analysis/long-reads/integrated-care-systems-explained.

28. Tom Powell and Rachael Harker, *The Structure of the NHS in England* (House of Commons Library, July 10, 2023), https://researchbriefings.files.parliament.uk/documents/CBP-7206/CBP-7206.pdf.

29. "What NICE does," National Institute for Health and Care Excellence, accessed November 27, 2025, https://www.nice.org.uk/what-nice-does.

30. "About us," NHS England, accessed November 27, 2025, https://digital.nhs.uk/about-nhs-digital.

31. "What are integrated care systems?," NHS England, accessed December 8, 2025, https://www.england.nhs.uk/integratedcare/what-is-integrated-care/.

32. *"What were clinical commissioning groups?"* NHS Confederation, August 17, 2021, https://www.nhsconfed.org/articles/what-are-clinical-commissioning-groups.

33. NHS England, What are integrated care systems?

34. "The healthcare ecosystem," NHS England, last updated October 26, 2022, https://digital.nhs.uk/developer/guides-and-documentation/introduction-to-healthcare-technology/the-healthcare-ecosystem.

35. Devyani Gajjar et al., *General Practice in England* (House of Commons Library, March 7, 2025), https://researchbriefings.files.parliament.uk/documents/CBP-7194/CBP-7194.pdf.

36. NHS England, "General practice workforce, 31 October 2025"; data were retrieved from "Bulletin tables – October 2025"; calculated using population data from Demography Team, *England population mid-year estimate*; full-time equivalent (FTE) is the standardized measure of workload for an employed person — this allows the NHS to express its total workforce workload as what the equivalent would be for full-time staff. See "General practice workforce, 31 May 2024," NHS England, June 27, 2024, https://digital.nhs.uk/data-and-information/publications/statistical/general-and-personal-medical-services/31-may-2024/using-this-publication.

37. The King's Fund, *Key Facts and Figures*; NHS England, *Patients registered at a GP practice – November 2025*, distributed by *NHS England*, accessed November 26, 2025, https://app.powerbi.com/view?r=eyJrIjoiNGZhOTc3ZGQtNmUwOS00M2M3LWFlZTItZjliMzNlYjExNmM5IiwidCI6IjM3YzM1NGIyLTg1YjAtNDdmNS1iMjIyLTA3YjQ4ZDc3NGVlMyJ9.

38. Becks Fisher, "The partnership model in general practice predates the NHS. Is now the time to change it?," Nuffield Trust, March 7, 2025, https://www.nuffieldtrust.org.uk/resource/the-partnership-model-in-general-practice-predates-the-nhs-is-now-the-time-to-change-it; *Salaried GPs Handbook* (British Medical Association, last updated February 2025), https://www.bma.org.uk/media/ff1j2duf/bma-salaried-gp-handbook-update-2025.pdf.

39. *GP Partnership Principles* (Royal College of General Practitioners, May 2025), https://www.rcgp.org.uk/getmedia/76288c16-8aa2-4a73-8839-06c091ca5bd0/RCGP-GP-Partnership-Principles-May-2025.pdf.

40. "GP earnings and expenses estimates, 2022/23," NHS England, August 29, 2024, https://digital.nhs.uk/data-and-information/publications/statistical/gp-earnings-and-expenses-estimates/2022-23.

41. "Out of hours care," Royal College of General Practitioners, March 2019, https://www.rcgp.org.uk/representing-you/policy-areas/out-of-hours.

42. "General practice workforce, 30 September 2025," NHS England, October 23, 2025, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey/april-2015---september-2025-experimental-statistics.

43. Matt Farrah, *A Quick Overview Of Nurses' Salaries In The UK In 2025* (nurses.co.uk, July 30, 2024), https://www.nurses.co.uk/blog/a-quick-overview-of-nurses--salaries-in-the-uk/#average

44. Royal College of Nursing, "Public Still Back Nurses Striking One Year on From Historic Action," (Press Release, RCN, December 15, 2023), https://www.rcn.org.uk/news-and-events/Press-Releases/public-still-back-nurses-striking-one-year-on-from-historic-action-151223.

45. NHS England, "The Healthcare Ecosystem."

46. NHS England, "NHS workforce statistics, July 2025"; the number of hospital specialists is an aggregate of consultants, associate specialists, and specialty doctors; data were retrieved from "NHS Workforce Statistics, July 2025 England and Organisation"; calculated using population data from Demography Team, *England population mid-year estimate.*

47. Wormald to Dame Meg Hillier MP, January 27, 2022, Letter responding to a question raised at a Public Accounts Committee hearing, https://committees.parliament.uk/publications/8697/documents/88254/default/.

48. NHS England, "General practice workforce, 30 September 2025."

49. General Medical Council, *Identifying Groups of Migrating Doctors: Research* (IFF Research, November 2023), https://www.gmc-uk.org/-/media/documents/identifying-groups-of-migrating-doctors-research-report_pdf-105936062.pdf.

50. "Britain's NHS has never seen industrial action on this scale," *The Economist*, May 2, 2023, https://www.economist.com/britain/2023/05/02/britains-nhs-has-never-seen-industrial-action-on-this-scale.

51. OECD, *Medical graduates,* distributed by *OECD*, accessed December 8, 2025, https://www.oecd.org/en/data/indicators/medical-graduates.html; *Health at a Glance 2023*, (Organisation for Economic Co-operation and Development, November 7, 2023), https://www.oecd.org/en/publications/2023/11/health-at-a-glance-2023_e04f8239/full-report/component-74.html; the average OECD data is in 2021 or nearest year.

52. "Studying medicine: a guide to medical student finance," BMJ Careers, August 11, 2022, https://www.bmj.com/careers/article/studying-medicine-a-guide-to-medical-student-finance; "NHS bursary," NHS Business Services Authority, accessed December 4, 2025, https://www.nhsbsa.nhs.uk/nhs-bursary.

53. NHS England, "Bed availability"; data were retrieved from "Beds-Timeseries-2010-11-onwards-Q2-2025-26 revised; calculated using population data from Demography Team, *England population mid-year estimate.*

54. "NHS workforce statistics, July 2025 (including selected preliminary statistics for August 2025)," NHS England, October 30, 2025, https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/july-2025; the number of hospital specialists is an aggregate of nurses and midwives; data were retrieved from "NHS Workforce Statistics, July 2025 England and Organisation"; calculated using population data from Demography Team, *England population mid-year estimate*.

55. Simon Corben, "A changing landscape," NHS England, May 3, 2024, https://www.england.nhs.uk/blog/a-changing-landscape/.

56. The King's Fund, *Key Facts and Figures*.

57. NHS England, "Bed availability"; data were retrieved from "Beds-Timeseries-2010-11-onwards-Q2-2025-26 revised; calculated using population data from Demography Team, *England population mid-year estimate*.

58. The King's Fund, *Key Facts and Figures*.

59. "Virtual ward," NHS England, accessed December 4, 2025, https://www.england.nhs.uk/statistics/statistical-work-areas/virtual-ward/; data were retrieved from "Virtual Ward – National Time Series, April 2025 – March 2026."

60. NHS England, "NHS workforce statistics, July 2025"; the number of hospital specialists is an aggregate of nurses and midwives; data were retrieved from "NHS Workforce Statistics, July 2025 England and Organisation"; calculated using population data from Demography Team, *England population mid-year estimate*; The Global Health Observatory, *Nursing and midwifery personnel (per 10,000 population)*, distributed by *World Health Organization*, accessed December 3, 2025, https://www.who.int/data/gho/data/indicators/indicator-details/GHO/nursing-and-midwifery-personnel-%28per-10-000-population%29.

61. *Census 2023* (Royal College of Psychiatrists), accessed December 3, 2025, https://www.rcpsych.ac.uk/docs/default-source/improving-care/workforce/workforce-census-2023-final-170524.pdf; calculated using population data from Demography Team, *England population mid-year estimate*.

62. NHS England, "Bed availability"; data were retrieved from "Beds-Timeseries-2010-11-onwards-Q2-2025-26 revised"; calculated using population data from Demography Team, *England population mid-year estimate*.

63. *NHS Workforce Statistics — Hospital and Community Health Services (HCHS) Mental Health Workforce Interactive Data Report* (NHS England, 2025), https://app.powerbi.com/view?r=eyJrIjoiODY0Y2I3MzUtNzZhOS00OTU0LWI1MDQtZjkxN2ZiNDMyNDRkIiwidCI6IjM3YzM1NGIyLTg1YjAtNDdmNS1iMjIyLTA3YjQ4ZDc3NGVlMyJ9; calculated using population data from Demography Team, *England population mid-year estimate*.

64. Carl Baker and Esme Kirk-Wade, *Mental Health Statistics: Prevalence, Services and Funding in England* (House of Commons Library, March 1, 2024), https://researchbriefings.files.parliament.uk/documents/SN06988/SN06988.pdf.

65. "England's NHS mental health services treat record 3.8 million people last year," NHS England, October 10, 2024, https://www.england.nhs.uk/2024/10/englands-nhs-mental-health-services-treat-record-3-8-million-people-last-year/.

66. "The state of health care and adult social care in England 2023/24," Care Quality Commission, last updated October 24, 2025, https://www.cqc.org.uk/publications/major-report/state-care/2023-2024/access/mh.

67. NHS England, "Bed availability"; data were retrieved from "Beds-Timeseries-2010-11-onwards-Q2-2025-26 revised.

68. Department of Health and Social Care, *Fit for the Future: 10 Year Health Plan for England* (UK Government, July 30, 2025), https://assets.publishing.service.gov.uk/media/6888a0b1a11f859994409147/fit-for-the-future-10-year-health-plan-for-england.pdf.

69. NHS England, *NHS Workforce Statistics — Hospital and Community Health*.

70. "NHS talking therapies, for anxiety and depression," NHS England, accessed November 28, 2025, https://www.england.nhs.uk/mental-health/adults/nhs-talking-therapies/.

71. NHS England, "NHS talking therapies, for anxiety and depression, annual reports."

72. "Delayed discharges: why it's hard to say how many are due to social care capacity," The King's Fund, May 21, 2025, https://www.kingsfund.org.uk/insight-and-analysis/blogs/delayed-discharges-social-care-capacity.

73. UK Health Accounts Team, *Healthcare expenditure*.

74. "Care and support statutory guidance," Department of Health and Social Care, July 22, 2025, https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance.

75. "NHS continuing healthcare explainer video transcript," NHS England, last updated March 24, 2025, https://www.england.nhs.uk/long-read/nhs-continuing-healthcare-explainer-video-transcript/; NHS, "End of life care."

76. Department of Health and Social Care, "Care and support statory guidance."

77. Sarah Arnold and Danielle Jefferies, "The NHS budget and how it has changed," The King's Fund, June 19, 2025, https://www.kingsfund.org.uk/insight-and-analysis/data-and-charts/nhs-budget-nutshell.

78. UK Health Accounts Team, *Healthcare expenditure*, Figure 3; Note: prepaid private spending is an aggregate of voluntary health insurance, nonprofit institutions supporting households and enterprise financing.

79. OECD Data Explorer, *Health Expenditure and Financing*, distributed by *OECD*, accessed November 5, 2025, https://data-explorer.oecd.org/vis?lc=en&pg=0&snb=1&vw=tb&df[ds]=dsDisseminateFinalDMZ&df[id]=DSD_SHA%40DF_SHA&df[ag]=OECD.ELS.HD&df[vs]=&pd=2015%2C&dq=GBR.A.EXP_HEALTH.XDC_PS%2BUSD_PPP_PS%2BPT_EXP_HLTH._T..HC51%2BHC3.._T...&to[TIME_PERIOD]=false&lb=bt&ly[cl]=TIME_PERIOD&ly[rs]=PRICE_BASE&ly[rw]=COMBINED_UNIT_MEASURE%2CFUNCTION%2CMODE_PROVISION.

80. UK Health Accounts Team, *Healthcare expenditure*.

81. Department of Health and Social Care and Association of the British Pharmaceutical Industry, The 2019 Voluntary Scheme for Branded Medicines Pricing and Access — Chapters and Glossary (UK Government, December 2018), https://assets.publishing.service.gov.uk/media/5c07b29ded915d747c45af76/voluntary-scheme-for-branded-medicines-pricing-and-access-chapters-and-glossary.pdf.

82. Department of Health and Social Care Media Team, "Voluntary Scheme for Branded Medicines Pricing and Access — Media Fact Sheet," *GOV.UK Blog*, March 28, 2023, updated November 20, 2023, https://healthmedia.blog.gov.uk/2023/03/28/voluntary-scheme-for-branded-medicines-pricing-and-access-vpas-media-fact-sheet/, https://healthmedia.blog.gov.uk/2023/03/28/voluntary-scheme-for-branded-medicines-pricing-and-access-vpas-media-fact-sheet/.

83. UK Health Accounts Team, *Healthcare expenditure*.

84. The Global Health Observatory, *Impoverishing health spending: population pushed below the $1.90 a day poverty line by household health expendi-*

tures (%, national, rural, urban), distributed by *World Health Organization*, accessed December 8, 2025, https://www.who.int/data/gho/data/indicators/indicator-details/GHO/population-pushed-below-the-1.90-a-day-poverty-line-by-household-health-expenditures.

85. Department of Health and Social Care, *Fit for the Future*.

86. Department of Health and Social Care, *Fit for the Future*.

87. Department of Health and Social Care, *Fit for the Future*.

88. *The Guidelines Manual: NICE Process and Methods* (National Institute for Health and Care Excellence, November 30, 2012), https://www.nice.org.uk/process/pmg6/chapter/assessing-cost-effectiveness.

89. Department of Health and Social Care, *Fit for the Future*.

90. Department of Health and Social Care, *Fit for the Future*.

91. Austin E Schumacher et al., "Global age-sex-specific all-cause mortality and life expectancy estimates for 204 countries and territories and 660 subnational locations, 1950–2023: a demographic analysis for the Global Burden of Disease Study 2023." *Lancet* 406, no. 10513 (October 18, 2025):1731–1810, https://www.thelancet.com/action/showPdf?pii=S0140-6736%2825%2901330-3.

92. OECD Data Explorer, *Avoidable mortality*, distributed by *OECD*, accessed December 8, 2025, https://data-explorer.oecd.org/vis?pg=0&fs[0]=Topic%2C0%7CHealth%23HEA%23&fs[1]=Topic%2C1%7CHealth%23HEA%23%7CHealth%20status%23HEA_STA%23&fc=Topic&snb=16&df[ds]=dsDisseminateFinalDMZ&df[id]=DSD_HEALTH_STAT%40DF_AM&df[ag]=OECD.ELS.HD&df[vs]=1.0&dq=GBR.A.AVM.DT_10P5HB..M%2BF%2B_T.......&pd=2010%2C&to[TIME_PERIOD]=false&ly[cl]=TIME_PERIOD&ly[rs]=SEX&vw=tb; Organisation for Economic Co-operation and Development, *Health at a Glance 2023*.

93. Health and Society Team, *Avoidable mortality in England and Wales*, distributed by *Office for National Statistics*, April 29, 2025, https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/avoidablemortalityintheuk; data retrieved from "2023 edition of this dataset."

94. *Evan D. Gumas, Munira Z. Gunja, and Irene Papanicolas, Maternal and Child Mortality: How Do U.S. States Compare Internationally? (Commonwealth Fund, Oct. 2025). https://doi.org/10.26099/jhr7-k178*; World Health Organization, *Maternal mortality ratio (per 100,000 live births)*, distributed by *WHO*, accessed November 27, 2025, https://data.who.int/indicators/i/C071DCB/AC597B1.

95. *Evan D. Gumas, Munira Z. Gunja, and Irene Papanicolas, Maternal and Child Mortality: How Do U.S. States Compare Internationally? (Commonwealth Fund, Oct. 2025). https://doi.org/10.26099/jhr7-k178*; rate per 1,000 calculated by the Commonwealth Fund; World Health Organization, *Child deaths in infants, infant mortality rate (between birth and 11 months per 1,000 live births)*, distributed by *WHO Data*, last updated April 15, 2025, https://www.who.int/data/gho/data/indicators/indicator-details/GHO/infant-mortality-rate-%28probability-of-dying-between-birth-and-age-1-per-1000-live-births%29.

96. Institute for Health Metrics and Evaluation, *Share of population with mental health disorders*, distributed by *Our World in Data*, last updated May 20, 2024. https://ourworldindata.org/grapher/share-with-mental-and-substance-disorders?tab=table.

97. Institute for Health Metrics and Evaluation, *GBD results*, distributed by *IHME*, https://vizhub.healthdata.org/gbd-results/; overall firearm mortality is the aggregate of physical violence by firearm, self-harm by firearm, and unintentional injuries by firearm.

98. Office for Health Improvement & Disparities, *Obesity profile: short statistical commentary, May 2025*, distributed by GOV.UK, accessed November 27, 2025, https://w1ww.gov.uk/government/statistics/obesity-profile-may-2025-update/obesity-profile-short-statistical-commentary-may-2025; The Global Health Observatory, *Obesity among adults, BMI >= 30, prevalence (age-standardized estimate) (%)*, distributed by *World Health Organization*, accessed December 3, 2025, https://www.who.int/data/gho/data/indicators/indicator-details/GHO/prevalence-of-obesity-among-adults-bmi-=-30-%28age-standardized-estimate%29-%28-%29.

99. Schumacher et al., "Global age-sex-specific all-cause mortality."

100. Aaron O'Neill, *Life expectancy through history – statistics and facts*," distributed by *Statista*, July 3, 2024, https://www.statista.com/topics/12260/life-expectancy-through-history/.

101. Ann Raymond et al., *Health inequalities in 2040: current and projected patterns of illness by deprivation in England* (The Health Foundation's REAL Centre, April 2024), https://www.health.org.uk/sites/default/files/upload/publications/2024/Health%20inequalities%20in%202040.pdf.

102. Veena Raleigh, "What is happening to life expectancy in England?," The King's Fund, April 10, 2024, https://www.kingsfund.org.uk/insight-and-analysis/long-reads/whats-happening-life-expectancy-england.

103. Adam Briggs et al., "Health equity and the UK Health Security Agency," The UK Health Security Agency, October 19, 2022, https://ukhsa.blog.gov.uk/2022/10/19/health-equity-and-the-uk-health-security-agency/.

104. Office for Health Improvement & Disparities, *Obesity profile*.

105. Veena Raleigh, "The health of people from ethnic minority groups in England," The King's Fund, accessed November 28, 2025, https://www.kingsfund.org.uk/insight-and-analysis/long-reads/health-people-ethnic-minority-groups-england.

106. A Felker and M Knight, *MBRRACE-UK Data Brief: Maternal Mortality 2020–22* (National Perinatal Epidemiology Unity, University of Oxford, 2024), https://www.npeu.ox.ac.uk/mbrrace-uk/data-brief/maternal-mortality-2020-2022?utm_source=chatgpt.com#maternal-mortality-rates-uk-2020-2022.

107. Population Health Monitoring Group, *Child and infant mortality in England and Wales: 2023*, distributed by *Office for National Statistics*, April 22, 2025, https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/childhoodinfantandperinatalmortalityinenglandandwales/latest.

108. Smitha Mundasad and Catherine Burns, "Gynaecology waiting lists double," *BBC News*, November 18, 2024, https://www.bbc.co.uk/news/articles/clyvg2157mvo.

109. Department of Health and Social Care and Wes Streeting, "Government Announces Women's Health Strategy to be Renewed" (Press Release, GOV.UK, October 23, 2025), https://www.gov.uk/government/news/government-announces-womens-health-strategy-to-be-renewed.

110. "Core20PLUS5 (adults) – an approach to reducing healthcare inequalities," NHS England, accessed November 28, 2025, https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/core20plus5/.

111. Department of Health and Social Care et al., "PM Launches New Era for NHS With Easier Care in Neighbourhoods" (Press Release, GOV.UK, July 2, 2025), https://www.gov.uk/government/news/pm-launches-new-era-for-nhs-with-easier-care-in-neighbourhoods.

112. Department of Health and Social Care, *Fit for the Future*.

113. NHS, *Fit for the Future*.

114. Department of Health and Social Care et al., “Major NHS App Expansion Cuts Waiting Times” (Press Release, GOV.UK, April 28, 2025), https://www.gov.uk/government/news/major-nhs-app-expansion-cuts-waiting-times.

115. NHS, *Fit for the Future*.