

# Briefing: 015/25: Fit for the future: 10 Year Health Plan for England

The Government published their long awaited [10 Year Health Plan for England](#) on 3rd July 2025. This followed eight months of work to develop the plan, including extensive engagement with the public, staff and healthcare providers, including Community Pharmacy England and other representatives of community pharmacy.

This Community Pharmacy England briefing provides a summary of the key points in the document of most relevance to community pharmacy owners and their teams.

For those who want to know more about the Government's plans, we recommend reading the 9-page executive summary or the full document, if time allows:

[Fit for the future: 10 Year Health Plan for England – Executive summary](#)

[Fit for the future: 10 Year Health Plan for England – Full document](#)

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## Summary of the key points within the plan

The plan describes the current NHS standing at an existential brink, with the impact of demographic change and population ageing set to load more demand on an already stretched service. The Government has therefore concluded that the stark choice for the NHS is to reform or die, with their choice being reform.

The Government says they will take the NHS' founding principles – universal care, free at the point of delivery, based on need and funded through general taxation – and from those foundations, entirely reimagine how the NHS does care so patients have real choice and control over their health and care.

Science and technology will be key to that reinvention, with the NHS being the best-placed system in the world to harness advances in artificial intelligence (AI) and genomic science.

The Government will reinvent the NHS through three radical shifts – **hospital to community**, **analogue to digital** and **sickness to prevention**.

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**From hospital to community: the neighbourhood health service, designed around you:** the document acknowledges the current hospital-centric approach of the NHS and the need to shift to provide continuous, accessible and integrated care via the development of a **neighbourhood health service**. The plans says this will bring professionals into patient-centred teams, reducing fragmentation of care and improving access to general practice and enabling hospitals to focus on providing specialist care.

The Government says the neighbourhood health service will embody their new preventative principle that care should happen as locally as it can: **digitally by default, in a patient's home if possible, in a neighbourhood health centre when needed, in a hospital if necessary.**

Over the course of the 10-years and starting over the next 3-4 years, the share of expenditure on hospital care will fall, with proportionally greater investment in primary and community care. Two new contracts will also be introduced to support general practices to work over larger geographies and to lead new organisations providing care to neighbourhoods.

A neighbourhood health centre, open at least 12 hours a day, 6 days a week will be established in every community, beginning with places where healthy life expectancy is lowest; this will be a 'one stop shop' for patient care and the place from which multidisciplinary teams operate.

**From analogue to digital: power in your hands:** the document notes that modern technology has given us all more power over our everyday lives, but that is not currently reflected in the NHS. The change will involve:

- Creating a **Single Patient Record**, giving patients and healthcare professionals access to data, which will enable more co-ordinated, personalised and predictive care.
- **Transforming the NHS app**, with patients able to:
  - Get instant advice for non-urgent care and help finding the most appropriate service first time, through My NHS GP.
  - Choose their preferred provider of healthcare, based on outcomes data and patient feedback, through My Choices.
  - Book directly into tests where clinically appropriate and undertake remote consultations via My Consult.
  - Manage their medicines through My Medicines and view their vaccination record and book vaccine appointments through My Vaccines.
  - Manage a long-term condition through My Care, access and upload health data through My Health or get extra care support through My Companion.

- Manage their children's healthcare through My Children, or co-ordinate the care of a loved one or relative through My Carer.
- Leave feedback on the care they have received, which is then compiled and fed back to healthcare providers and clinical teams.

Regarding the My Medicines tool in the NHS app, the plan says medicines should be much easier to organise and manage than they are today and the My Medicines tool will make it simple to manage repeat prescriptions for delivery or collection. The tool will remind patients what they need to take and when and in the longer-term, it will be able to guide patients on drug interactions – using scientific advances like pharmacogenomics – and help avoid adverse drug reactions.

The plan also commits to introduce a single sign-on for staff within NHS IT systems, to remove the need for multiple credentials across different IT systems and to scale the use of technology like AI scribes to create notes during consultations, to reduce the current burden of administration for staff.

**From sickness to prevention: power to make the healthy choice:** the Government's overall goals are to halve the gap in healthy life expectancy between the richest and poorest regions, while increasing it for everyone, and to raise the healthiest generation of children ever. The plans says that if there are achieved, they should boost the health of individuals but also ensure the future sustainability of the NHS and support economic growth. The plan says this will be achieved by harnessing a huge cross-societal energy on prevention, working with businesses, employers, investors, local authorities and mayors. This will include a focus on reducing smoking and use of vapes (particularly by children), improving diet to address obesity, alongside using weight loss medication to greater effect and incentivising people to make healthier choices through a health reward scheme.

To deliver on the three shifts, the plan says a new operating model will be developed for the NHS, with the Department of Health and Social Care (DHSC) absorbing some of the current roles of NHS England (which itself is to be abolished).

Integrated Care Boards (ICBs) are reducing their operating costs, with many working with neighbouring ICBs ahead of mergers in the future. ICBs will lose some of their current roles and the plan says they will become the local NHS strategic commissioners.

NHS trusts will be able to earn more freedoms if they demonstrate excellence and some of the best Foundation Trusts will be able to hold the whole health budget for a defined local population as an **integrated health organisation**.



## The pharmacy elements of the plan

The plan makes several references to community pharmacy:

- It notes that as well as improving patient choice and convenience, there is now strong evidence that a bigger role for pharmacy can deliver efficiencies and support financial sustainability. Over the next 5 years, community pharmacy will transition from being focused largely on dispensing medicines to becoming integral to the Neighbourhood Health Service, offering more clinical services.
- As community pharmacists increasingly become able to independently prescribe, their role will be increased in the management of long-term conditions, complex medication regimens, and treatment of obesity, high blood pressure and high cholesterol.
- Community pharmacy will also have a bigger role in prevention by expanding their role in vaccine delivery and in screening for risk of cardiovascular disease and diabetes.
- Pharmacists will play a critical role in the Government's ambition to improve access to fast and convenient healthcare for women. In addition to emergency contraception being added to the Pharmacy Contraception Service in 2025, the plan says from 2026, women and young people who missed out on the human papillomavirus (HPV) vaccination at school will be able to have the vaccine administered at a pharmacy.
- The plan notes that many people now get many of life's essentials delivered straight to their home and goes on to say medicines should not be an exception. Over the first half of the plan, the Government will modernise its approach to dispensing of medicines and make better use of the technology available, including dispensing robots and hub and spoke models where they can fill prescriptions far more quickly and accurately than humans. The Government will engage with the sector and the public on proposals to modernise the approach to dispensing, so that it is fit for the 21st century.
- Over time, community pharmacy will be securely joined up to the Single Patient Record, to help pharmacy teams provide a seamless service and to give GPs sight of patient management.
- The plans also states that the system for getting new medications to patients is needlessly complicated. The process by which each local area decides which drugs are available is

bureaucratic and creates a postcode lottery. These local formularies do not make sense in a universal service that should provide a core standard of high-quality care to everyone. The NHS will therefore move to a **Single National Formulary** (SNF) for medicines within the next 2 years. The Government will create a new formulary oversight board, responsible for sequencing products included in the formulary based on clinical and cost effectiveness, supported by the National Institute for Health and Care Excellence (NICE). Local prescribers (such as doctors and pharmacists) will be encouraged to use products ranked highly in the SNF but will retain clinical autonomy as long as they prescribe in line with NICE guidance. The intention of this policy is to ensure that the Government can drive rapid and equitable adoption of the most clinically and cost-effective innovations. They will work with industry throughout the implementation of these policies to make sure they realise these objectives together.

### The implications for community pharmacy

This is a wide-ranging set of policy proposals which will have a significant impact on the NHS (including community pharmacy) over the next few years. You can read our initial response to the plan [on our website](#).

There are many topics within the plan which require further exploration in order to fully assess the likely implications and opportunities for community pharmacies and we will be undertaking this work over the next few weeks.

If you have any queries or require more information, please contact: [services.team@cpe.org.uk](mailto:services.team@cpe.org.uk)