

# NHS England easy read planning guidance for 2025 and 2026



We have made this guidance for people with a learning disability

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## What this guidance is about



The NHS is struggling to keep up with providing care to everyone.

This is because there are more people who are living longer than in the past.



Some people are spending a lot of their life being ill and they are waiting too long for care.



To work on this, the NHS needs to agree and deliver plans to change.



This guidance tells the services what they need to do in 2025/26. This is the 12-month period starting in April 2025.

#### Important messages



The NHS is not working as well as we want.



Staff are trying hard to make things better.



But care is still too slow. More people are treated in accident and emergency (A&E) in 4 hours, but some wait 12 hours or more.



In other services, like mental health, there are lots of people that need care.



This means not everyone gets help quickly.



The government has reduced the number of targets for the NHS. This means local areas have more control over how they best look after people.



They will also have more control over their money.

They must make tough choices and look for ways to save money.

#### What we will try to do in the next year



By March 2026:



People should get **elective care** quicker than they do now.

Less people should wait more than 1 year for treatment.



Elective care is healthcare you know about before it happens. It is not an emergency.

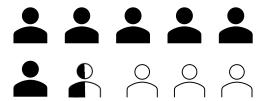


It means you are:

 waiting for an appointment to see a doctor or nurse



 waiting for a test like a scan or blood test or waiting for an operation or treatment



Between 6 and 7 out of every 10 patients should



get their treatment within 18 weeks.



Each **NHS trust** should improve waiting times.



**NHS trusts** are the healthcare services in your local area. These include hospitals and mental health services.



Waits for cancer **diagnosis** and treatment should be shorter.



**Diagnosis** is where a doctor or expert identifies an illness or condition by looking at the signs and symptoms a person has.



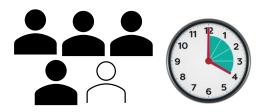
4 out of 5 patients should get a diagnosis within 28 days.



3 out of 4 patients should start treatment within 62 days.



Accident and emergency waiting times should be shorter.



4 out of 5 patients should be seen within 4 hours by March 2026.



More patients than last year should be sent home or to the right part of the hospital for treatment within 12 hours.

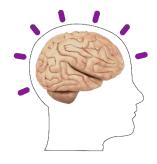


Ambulance response times should also get better in 2026.



Ambulances should respond to **category 2 calls** in 30 minutes.

A **category 2 call** is an emergency ambulance call for serious conditions such as:



strokes



difficulty breathing



chest pain



This will help people get care faster.



Access to general practice should be better. This means patients will have a better experience when they need to see a doctor (GP).



Urgent dental care should improve. There should be 700,000 more urgent dental appointments available for people who need them.



We will maintain our focus on quality and safety of our services and improve safety in maternity and **neonatal** services.



**Neonatal** is newborn baby services and care.



We will continue to stay focused on reducing **health inequalities** for adults, children and young people.



Health inequalities are differences in the care that people get and the chance that they have to lead healthy lives.



Health inequalities can be differences in:

 health, for example, how long someone can live



• how people can access care



quality of care



The number of patients being treated for high blood pressure will increase.



Using digital tools is an important way of making some changes happen.

# Parts of the planning guidance about mental health, autistic people and people with a learning disability



Mental health crisis care should be better. The time people stay in mental health hospitals should be shorter.



People should not have to travel long distances to receive hospital care when they need it.



More children and young people should get help from mental health services. By 2026, 345,000 more young people should get help.



Long waits in A&E for people with mental health needs should reduce by:

using more crisis options like:



111 mental health option



 crisis resolution, which are mental health teams that give fast assessments and treatment at home for people having a mental health crisis



 home treatment teams and community mental health services



There will be more mental health support teams in schools and all schools should have them by 2030.



There is more money to support NHS Talking Therapies and to support people who are not being active because they are unwell through individual placement support (IPS).



**NHS Talking Therapies** help adults with anxiety and depression.



Individual placement support (IPS) helps people with severe mental illness find and keep jobs.



Integrated care boards should work with local systems to make sure that there is high quality and accessible community services for people with a learning disability and autistic people.



An **integrated care board** is a group that helps plan and manage health services in a local area.



They should also make sure that people going to stay at a mental health hospital are going for assessment and treatment that can only be given there.



The full version of the planning guidance can be found on the NHS England website: NHS England » 2025/26 priorities and operational planning guidance.