Quality Strategy for NHS-funded care in England

Experts in health

Recent reviews and data show a mixed picture of care quality across the NHS in England. While there have been improvements, for example in early diagnosis of lung cancer, gaps remain:

58%
Of people with type 2 diabetes receive NICE-compliant care

Lowest since 2011
UK healthy life expectancy at birth

28%
of people with hypertension remain undiagnosed

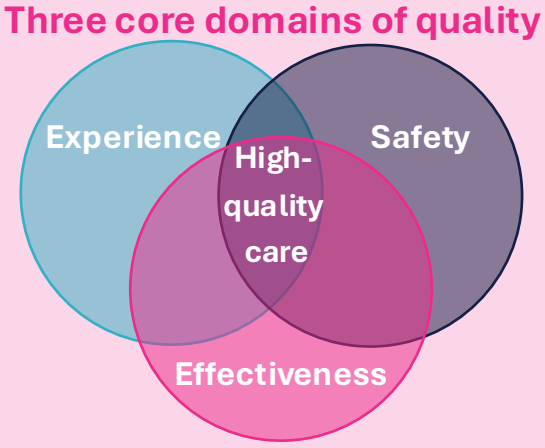
The understanding of care quality is limited by the inconsistent availability of timely, robust outcome data, and public satisfaction in the NHS remains below pre-pandemic levels: **further action is needed**.

The National Quality Board published a 10-year strategy on 14 July 2026, highlighting **quality as the organising principle for all NHS-funded care in England**. This responds to the Darzi (2024) and Dash (2025) reviews by establishing one shared, value-based definition of quality.

The shift: a single, value-based approach to quality

The strategy shifts quality towards a coordinated, value-based approach built on three domains, in line with the three shifts of the 10 Year Health Plan, led by a strengthened National Quality Board. **Timeliness and accessibility remain prerequisites for high-quality care**: people need early diagnosis and prompt treatment, which eases demand for emergency and high-cost care.

Three core domains of quality



Where it focuses first – seven initial priority areas:

- **Improving outcomes, reducing variation:** consistent, evidence-based care
- **Maternity and neonatal services:** sustained safety improvement via national taskforce
- **Patient safety across all settings:** extending the Patient Safety Strategy into primary care
- **Reducing inequalities:** Core20PLUS5 approach for adults and children
- **Modern service frameworks:** long-term outcome targets per pathway across priority groups
- **Experience of care and trust:** establishment of Directorate of Patient Experience complaints reform
- **Monitoring outcomes:** clinical and population outcomes, with boards held to account

Fragmented, inconsistent oversight → **Coordinated, transparent, value-based management**

Ten enablers for quality improvement

Drawing on the 10 Year Health Plan and the Dash review, 10 enablers create the conditions for improvement across the whole system.

1. **Accountability:** Clear responsibility for quality at every level
2. **Clear priorities:** Transparent, coordinated and value-based method for choosing where to focus effort
3. **Leadership:** Building capability, culture and consistent conditions for improvement
4. **Listening:** Working with people and communities on what matters, using PREMs, PROMs and complaints
5. **Data:** Using data to manage quality, inform decisions and support accountability
6. **Transparency:** Opening up quality information to the public
7. **Technology:** Embed technology to underpin quality management (e.g. AI, Single Patient Record)
8. **Incentives:** Align payments, rewards and levers with accessible, high-quality care
9. **Innovation:** Promote innovation and research to improve clinical care and operations in the NHS
10. **Regulation:** Make oversight more coordinated and improvement-focused

Putting it into action – a shared responsibility

Individuals and teams
Continuously improve using data, insight and feedback from people and communities

ICBs
Prioritise quality during commissioning: meet local needs, improve life expectancy, reduce inequalities

Providers, boards and leaders
Deliver safe, effective care and a positive experience; plan and monitor quality

National bodies and regions
Direct resources to set clear, consistent expectations

Source: NHS England, Quality Strategy for NHS-funded care in England, 14 July 2026