

THE UK'S MODERN INDUSTRIAL STRATEGY

LIFE SCIENCES

Sector Plan

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Ministerial Foreword



Rt Hon Peter Kyle MP Secretary of State for Science, Innovation and Technology



Rt Hon Jonathan Reynolds MP Secretary of State for Business and Trade



Rt Hon Wes Streeting MP Secretary of State for Health and Social Care

The UK's Life Sciences sector is one of our greatest national assets. It is a sector that not only saves lives – it creates jobs, drives investment, and powers innovation across our economy. From world leading research institutions to dynamic start-ups and global pharmaceutical firms, our Life Sciences ecosystem is rich with potential. This Plan is about unlocking that potential.

We are clear-eyed about the challenges. For too long, the journey from discovery to delivery has been too slow, too fragmented, and too often held back by outdated systems. But we are equally clear about the opportunity. With the right leadership, the right investment, and the right partnerships, Life Sciences can be a cornerstone of both our economic renewal and our mission to build a fairer, healthier United Kingdom.

This Sector Plan sets out how we will do that – by aligning our Industrial Strategy with our health mission. It is a plan rooted in science and driven by purpose: to grow our economy and improve people's lives. The Plan will be supported over the lifetime of the Spending Review by government funding of over £2 billion, alongside funding from UK Research and Innovation (UKRI) and the National Institute for Health and Care Research (NIHR).

We have forged this strategy hand-in-hand with industry, engaging with over 250 organisations and 400 individuals across Life Sciences businesses, providers, and patient charities.

Ours is a new approach – one with coordination and collaboration at its core. Across sectors, across government, and across industry, we are building the engine needed to supercharge both Life Sciences and economic growth. We will make difficult choices – on areas like planning, infrastructure, and data – to support and drive economic growth. That collaboration will be bolstered by genuine accountability on delivery and on progress. Every single action in this plan has a single accountable owner – a mechanism never previously used – and each of those owners will be bound by metrics and headline targets.

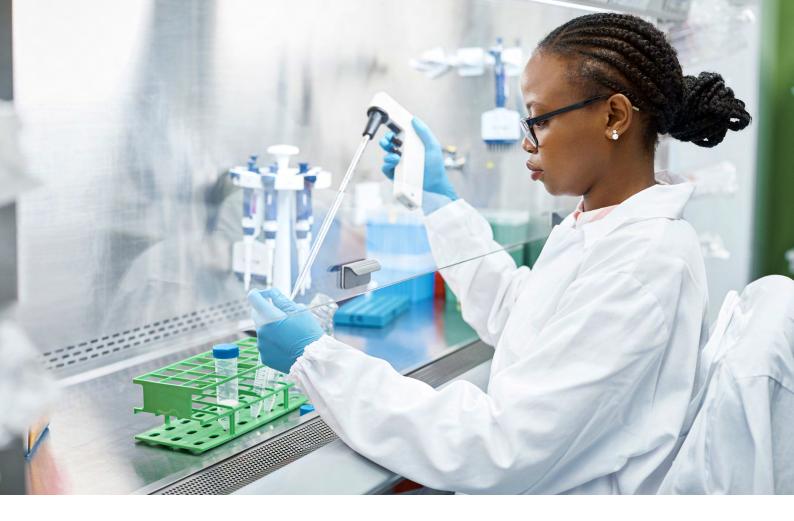
Crucially, we will remove the barriers holding the sector back. As a builder, not a blocker, this Government will remove regulatory hurdles through the proper reform the sector has been urging for a decade. We will do the basics well, smoothing access points and working together with industry on things that need a quicker pace of change. This strengthened foundation will give the sector the base it needs to flourish.

By supporting innovation from lab bench to bedside, and strengthening our clinical trials ecosystem, we will make the UK the most attractive place in the world to develop and deploy new treatments and technologies. And we will do so in a way that supports our National Health Service (NHS), not strains it – by embracing the three major health shifts this Government is determined to deliver:

- From hospital to community: enabling care closer to home, supported by new diagnostics and digital tools.
- **From analogue to digital:** embedding data and Artificial Intelligence (AI) to improve outcomes and reduce pressure on frontline staff.
- **From sickness to prevention:** using genomics, early detection, and personalised medicine to keep people healthier for longer.

This is a new model of partnership between science and society, between government and industry, and between economic and health policy. It is a model that recognises that better health and stronger growth go hand in hand, and that, increasingly, the most effective healthcare relies on the rapid adoption of new technologies and treatments.

Together, we can make the UK not just a global leader in Life Sciences, but a country where innovation delivers for everyone.



Executive Summary

The Opportunity

The UK Life Sciences sector has achieved a huge amount, and has extraordinary potential. Many of the most important medicines and technologies in use around the world, from vaccines to monoclonal antibodies, and from hip replacements to CT scanners, were first developed in the UK.¹

This track record of innovation continues to this day, whether through the UK being the first country to license and deploy COVID-19 vaccines,² providing the world's first regulatory approval for a medicine utilising CRISPR technology,³ or running one of the world's largest platforms for the development of personalised cancer vaccines.⁴

Not only are the medicines and medical technologies the sector develops transformational for health and resilience, they are also vital for growth and productivity, as the sector delivers high value jobs for the UK economy. The sector has experienced high growth rates over the past five years and could grow by £41 billion (165%) by 2035 if these trends continue.⁵

The Challenge

But potential is not enough. In developing this plan, the Government has consistently heard from patients, businesses, researchers, and staff across the health and care system that the UK could, and needs to, do much better. Policy ideation has been strong, but delivery poor.

The UK Life Sciences sector faces perennial challenges: it excels at discovery, with pharmaceutical R&D accounting for 17% of all UK business R&D in 2023, the highest of any product area,⁶ but struggles with commercialisation and adoption. Of the technologies developed in the UK listed above, none – other than vaccination – were primarily commercialised in the UK. Alongside these perennial economic challenges, the UK faces profound health challenges with an ageing population which is increasingly multi-morbid.⁷

Even in areas of traditional strength such as regulation and clinical trials, the UK has underperformed in recent years, with a slower median time for setting up and approving commercial trials compared to many competitors,⁸ and a series of (now addressed) backlogs across medicines approvals.

Despite significant investment in world class science and technology and progress in fostering start-ups, UK Life Sciences companies have struggled to scale and capture economic benefits. This reflects challenges accessing the institutional capital needed for later-stage growth, including a relatively cautious domestic investor base and more limited sectoral familiarity in UK public markets.⁹

The scale of the challenge is global, with the UK facing intense competition for investment, heightened by proactive measures from the world's largest economies. This challenge has only intensified post-COVID-19, necessitating comprehensive reform rather than incremental adjustment, to ensure the UK is a competitive and attractive destination for investment.

The Plan

The Government's plan is for Life Sciences to support the repair and transformation of both the nation's economy as part of the Industrial Strategy, and the nation's health in alignment with the commitments set out in the 10 Year Health Plan. It will be supported over the lifetime of the Spending Review by government funding of over £2 billion, alongside funding from UKRI and NIHR.

This Life Sciences Sector Plan focuses on three core, interconnected pillars:

- 1. **Enabling World Class R&D** to take advantage of, and build upon, the UK's historic scientific strengths.
- 2. Making the UK an Outstanding Place in Which to Start, Grow, Scale, and Invest to ensure that brilliant ideas are built and scaled into multi-billion pound companies in the UK, our manufacturing sector is supported to thrive, and that we drive Foreign Direct Investment (FDI).

3. Driving Health Innovation and NHS Reform – ensuring patients get rapid access to the most clinically and cost-effective new technologies, and enabling the shifts from sickness to prevention, hospital to community, and analogue to digital.

Government will especially focus its initial efforts on six clear headline actions that are critical to the success of this strategy. These actions will deliver demonstrable impact early on, helping to build momentum and accelerate progress across the wider plan.

The six headline actions we will prioritise to demonstrate our commitment to delivering this plan in full include:

- **Realising a Health Data Research Service (HDRS):** Up to £600 million investment from Government alongside the Wellcome Trust, to create the world's most advanced, secure, and AI-ready health data platform. It will unite genomic, diagnostic, and clinical data at population scale, turning NHS and wider healthcare data into a magnet for global trials and AI investment.
- **Slashing trial set up times to under 150 days:** By implementing the O'Shaughnessy reforms,¹⁰ updating the NIHR governance and placing a dual health and growth mandate on the NIHR, we will cut delays that deter investors and aim to double commercial interventional trial participants by 2026, and again by 2029.
- **Backing manufacturing with up to £520 million:** The Life Sciences Innovative Manufacturing Fund (LSIMF) will bring globally mobile manufacturing investments to the UK. This will help build and maintain the UK's critical sovereign capability across the sector, creating high-value jobs nationwide, and strengthen domestic health resilience and supply chain security. The Government will also develop a new, bespoke approach to supporting investments over £250 million.
- **Streamlining regulation and market access:** Supporting the Medicines and Healthcare products Regulatory Agency (MHRA) to become a faster, more agile regulator, and giving industry a clearer route to market through joint advice and parallel approvals with the National Institute for Health and Care Excellence (NICE), alongside a route for international reliance for medicines and medical devices so patients benefit sooner from cutting-edge innovation.
- Introducing low-friction procurement: Streamlining the route to procurement, ensuring it is clearer and less bureaucratic, giving industry low-friction access to the NHS through a Rules Based Pathway (RBP) for MedTech and an NHS 'Innovator Passport', enabling innovative MedTech products to reach patients more quickly.
- **Partnering with industry to drive growth and innovation:** Building on our collaborative approach with the sector, we will continue to partner with industry throughout delivery, and working directly with individual companies, we will secure at least one major strategic partnership annually with leading Life Sciences companies. Additionally, a dedicated support service will be established to help 10–20 high-potential UK companies to scale, attract investment, and remain headquartered in the UK.

The delivery of these core actions will be done alongside implementation of the wider suite of actions set out in this document: recognising that the UK needs to simultaneously deliver in the most high-profile areas of this Plan, while also building the Life Sciences ecosystem's end-to-end competitiveness.

The Vision

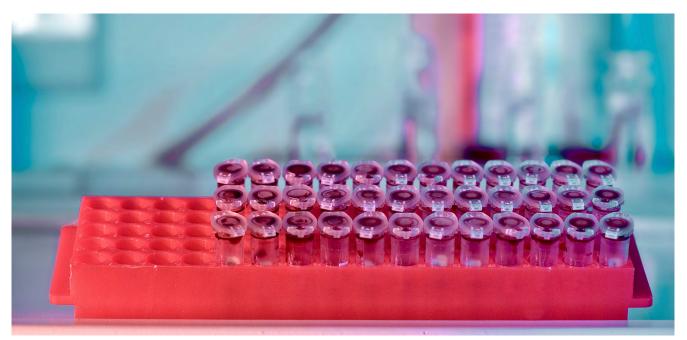
Through delivering the actions in this Plan, we will be uniting the strengths of science, capital, industry, and the NHS. By 2035, the UK will have fully harnessed its world leading science and genomics capabilities, become a global leader in regulatory and clinical research infrastructure, and developed a data ecosystem that drives research, diagnosis, and a strong focus on prevention. Our capital markets will support and fund entrepreneurs to scale, and - critically - our health system will adopt and scale innovation, from medicines to MedTech and Al-enabled technologies.

This dynamic and reinforcing environment will drive sustained economic growth and significant health improvement. This will be fuelled by our ecosystem of innovative Small and Medium-sized Enterprises (SMEs), which can scale into major companies, alongside our existing cadre of world leading larger firms.

Judged on the combination of measures set out below, the Government's ambition is that the UK will be:

- By 2030, the leading Life Sciences economy in Europe; and
- By 2035, the third most important Life Sciences economy globally, behind the US and China only.

If the UK can achieve this Vision, it will be at the forefront of global innovation. Groundbreaking discoveries will transform into life-saving treatments, increased investment and scaling companies will create high-value jobs, and our thriving ecosystem will significantly enhance healthcare outcomes across the nation while delivering economic growth.



The Targets

The delivery of this Plan will be measured across four targets, reflecting the sector's unique contribution to the UK's health and wealth.

- 1. Investment in commercial R&D: The UK will have more investment in commercial R&D than any other European economy by 2030, and more than any other country globally (excluding the US and China) by 2035.¹¹
- 2. Access to scale-up capital: More scale-up finance will be raised by Life Sciences businesses in the UK than anywhere else in Europe by 2030, and more than any other country globally (excluding the US and China) by 2035. Alongside measuring the volume of capital raised, government will also measure the:
 - Number of UK Life Sciences companies with a valuation of over £10 billion.
 - Number of Life Sciences companies on the FTSE 350.
 - Number of Life Sciences Initial Public Offerings (IPOs).
- **3. Patient access:** By 2030, the UK will be one of the top three fastest places in Europe for patient access to medicines and MedTech. To achieve this, government will measure:
 - The speed with which products are licensed and/or registered on the UK market in comparison to other European markets.
 - The timeline and cost to achieving appropriate Health Technology Assessment (HTA) in England.
 - The uptake and widespread adoption of products in the NHS in England.
- **4. FDI:** The UK will secure more Life Sciences FDI than any other European economy by 2030, and more than any other country globally (excluding the US and China) by 2035.

The Execution

The Government will not repeat the mistakes of past strategies that offered warm words without concrete action or hinted at difficult trade-offs without confronting them.

This Sector Plan sets out specific commitments across each of the three core pillars. Every commitment includes metrics to track progress and has a named Senior Responsible Officer (SRO).¹²

Progress against these commitments will be transparently reported through an annual Sector Plan Implementation Update, making clear where the Plan is succeeding or failing. A refreshed and bolstered Life Sciences Council, co-chaired by government and industry, will meet on a six-monthly basis to assess and assure progress. The Life Sciences Council will work closely with the Industrial Strategy Council to ensure alignment with the overarching aims of the Industrial Strategy. As a sign of the Government's intent to proceed with delivery at speed, in advance of the publication of this Plan, the Prime Minister has already launched two of its key initiatives. First, the Government, alongside the Wellcome Trust, will invest up to £600 million to establish a new HDRS. Second, concerted action will be taken to substantially reduce the time taken to establish and start a commercial clinical trial, so that set up times fall to fewer than 150 days by March 2026.

However, there is much more to do. The Government will work relentlessly alongside industry, the NHS, the wider healthcare system, devolved governments, and the UK's medical research charity and academic sectors to deliver this Plan and realise the full health and wealth impact of this critical sector. The Government has also accelerated the Mid-Scheme Review of the Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG), which has the potential to unlock a substantial further package of measures.

In delivering this Plan, government will harness the economic potential of Life Sciences clusters across the UK. We will work in partnership with devolved governments in Scotland, Wales, and Northern Ireland, and with Mayoral Strategic Authorities (MSAs) in England, to identify, develop, and deliver investible propositions across the UK. Together, we will coordinate our strategies and business offer to unlock growth in every part of the UK's Life Sciences ecosystem.

This Sector Plan will support delivery of the Government's wider Industrial Strategy, and its core focus on driving UK economic growth that is inclusive, sustainable, and resilient.

Endnotes

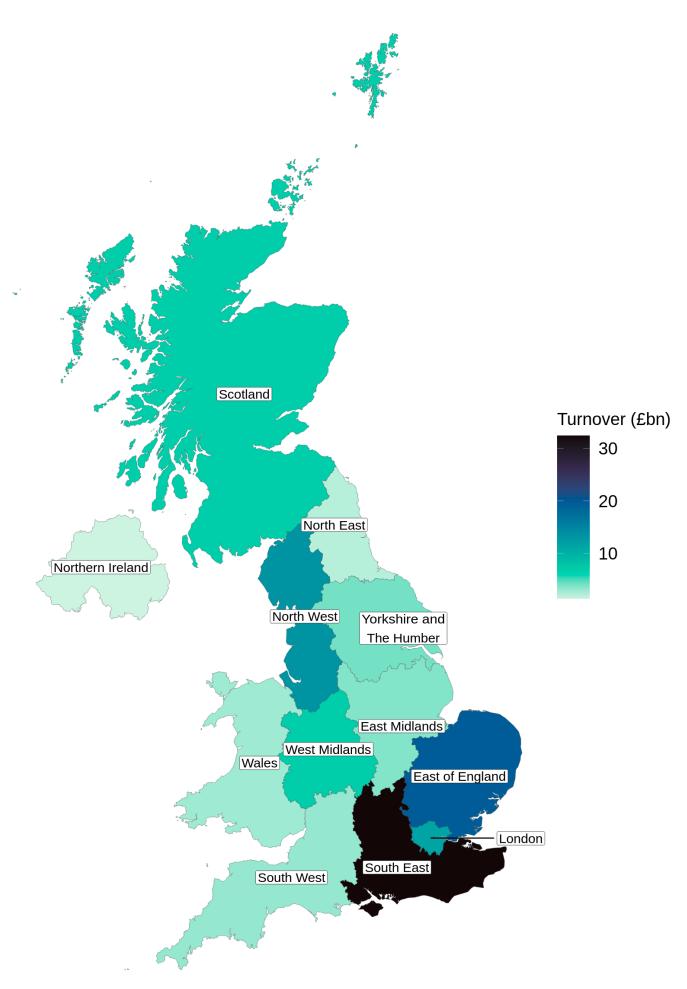
- 1 <u>Medical Schools Council (2008), Improving Lives: 150 Years of UK medical school</u> <u>achievements</u>.
- 2 Department of Health and Social Care (2021), UK COVID-19 vaccines delivery plan.
- 3 <u>Medicines and Healthcare products Regulatory Agency (2023), press release</u>.
- 4 National Health Service England, Cancer vaccine launch pad.
- 5 Department for Business and Trade analysis of the Office for National Statistics Annual Business Survey, methodology outlined in the Industrial Strategy. The analysis covers UK Standard Industrial Classification codes: 211, 212, 266, 325, 7211. Many SIC codes include an element of Life Sciences activity. Within this group several SIC codes have a greater representation of the Life Sciences sector which are the set this analysis is based on, though collectively they only account for part of the Life Sciences sector. See Industrial Strategy Technical Annex for further details on defining sectors and sector data sources.
- 6 Office for National Statistics (2024), Business enterprise research and development.
- 7 <u>National Institute for Health and Care Research (2021), Multiple long-term conditions</u> (multimorbidity): making sense of the evidence.
- 8 Office for Life Sciences (2024), Life Sciences competitiveness indicators.
- 9 PwC (2023), Life Sciences: Future50.
- 10 Department of Health and Social Care, Department for Science, Innovation and Technology and Office for Life Sciences (2023), Commercial clinical trials in the UK: the Lord O'Shaughnessy review.
- 11 Target will be tracked via <u>Office for National Statistics (2024)</u>, <u>Business enterprise</u> <u>research and development and equivalent international datapoints</u>. This definition will include R&D spending on clinical trials within the pharmaceuticals product group reported in BERD.
- 12 See Annex A.



1. Ease, speed, and long-term stability for business

Sector overview^{1, 2, 3, 4, 5}

Metric	Fact
Employment	The UK Life Sciences sector – comprised of pharmaceutical and MedTech frontier industries – employed 304,200 people in 2021/22. A sharp increase has been seen in recent years, with employment being 15% higher in 2021/22 compared to 2018/19.
Workforce value	Many roles in the sector are highly valuable, such as employees in pharmaceutical manufacturing businesses, who have a much higher Gross Value Added (GVA) per worker than other similar manufacturing businesses.
Turnover	The UK Life Sciences industry generated £108.1 billion in turnover in 2021/22, a 13% increase from the previous year, with notable growth recorded since 2014/15.
Regional impact	41% of turnover generated outside of London, the South East, and the East of England.
Exports	In 2023, the value of UK exports of pharmaceutical products was £25.6 billion and the value of exports of medical technology products was £10.1 billion.



How the Life Sciences sector grows the UK economy

The Life Sciences sector plays a distinct and strategic role in driving UK economic growth in six primary ways:

- 1. Direct employment: The sector employs over 300,000 people. While the South East had the highest employment of all regions in the UK at 71,300 in 2021/22, Life Sciences roles were geographically spread across the UK, with 77% located outside of the South East.⁶
- 2. Indirect economic impact through population health: The sector boosts growth indirectly by improving the health of the UK population. A healthier society with a healthier workforce is a more productive one, leading to higher Gross Domestic Product (GDP). The Department for Work and Pensions (DWP) estimates that £132 billion is lost in economic output due to working-age ill health that prevents work.⁷ This "health dividend" is often not captured in economic models but can be transformative, especially at a time when long-term illness is now a major drag on labour market participation. The sector also supports direct revenue generation for the NHS via clinical trials.⁸
- **3. Raising national productivity:** Many roles in the sector are highly economically valuable.⁹ Given the UK's flatlining productivity since the 2008 global financial crisis, this makes the sector critical.¹⁰
- **4. Attracting investment and expenditure on R&D:** The sector is a leading driver of investment into the UK economy, with the UK Life Sciences sector raising the third highest amount of equity finance in 2023 amongst comparator countries, behind only the US and China.¹¹ Pharmaceuticals made the largest contribution to the total of business R&D performed in 2023, totalling 17% of all R&D performed by UK businesses.¹²
- 5. Exports and trade: Medicines and medical technologies are extremely valuable: medicinal and pharmaceutical products were the UK's third biggest goods export by value in 2024.¹³
- 6. Driving innovation and total factor productivity (TFP) growth: Innovation is a key enabler of long-term growth, and Life Sciences is one of the UK's most innovation-intensive sectors, with pharmaceuticals being the largest contributor to business R&D in the country.¹⁴ Research has shown that regions specialising in more R&D, particularly those anchored by university-led ecosystems, have higher productivity and faster growth.¹⁵ This is a key aspect of the Life Sciences sector, and thus the sector drives not just output, but TFP.

Barriers to growth

Through the development of this Plan, stakeholders from across the sector have consistently raised a series of barriers to growth and investment in the UK. These barriers are broadly in three areas that reflect the focus of this Plan:

Science and research

- The speed, ease, and cost of setting up an interventional commercial clinical trial in the UK,¹⁶ especially when compared to some health systems in the US and Europe.
- The accessibility and quality of data for health research. The accessibility of NHS and wider healthcare data for research is variable, as the data often needs and lacks curation to support its use in research.

UK business environment

- Access to growth capital, which is comparatively weak, especially post series B funding rounds.
- Business support for investment and export. Key competitor countries were often viewed as faster and more effective at supporting inward investment, in addition to supporting UK firms to export.
- Planning rules and regulations. The ease and speed with which planning permission can be obtained, and the cost of land, were viewed as being very internationally uncompetitive.
- Electricity prices. The cost of industrial electricity is much higher than in comparable countries, providing a disincentive for investment.¹⁷

Deployment of innovation in the NHS

- MHRA performance. All statutory performance targets are now being met, but performance dropped very significantly following the pandemic.¹⁸
- NHS pricing and access policy. The UK is viewed as a comparatively low payer for medicines and medical technologies, not always recognising the full economic benefits of some innovations, impacting industrial sentiment.
- Speed and ease of NHS uptake. Uptake of medicines and medical technologies is
 viewed as being highly variable across the NHS. Even where a product had been
 assessed as highly clinically and cost-effective, we do not reward or incentivise the use
 of innovation.

Action Plan

Strategic Pillars

To become the leading Life Sciences economy in Europe by 2030 and the third globally by 2035, the UK must deliver on three interdependent pillars of activity:

- 1. Enabling World Class R&D
- 2. Making the UK an Outstanding Place in which to Start, Grow, Scale, and Invest

3. Driving Health Innovation and NHS Reform

In this Sector Plan we commit to ambitious actions to deliver each of our strategic pillars, but we are clear that without consolidated action – as part of which discovery, commercialisation, and deployment activity is aligned – the UK will not be able to maximise its full potential and deliver the ambitions set out.

The actions outlined in this section are the result of extensive sector engagement, co-creation through a series of externally chaired Task and Finish groups, and cross UK Government Industrial Strategy engagement. These groups, comprising senior industry and system leaders, advised on policy development. The actions presented here are based on insights gathered from over 250 organisations, ensuring that the actions are well-informed and address the most significant barriers to growth.

Devolution

Life Sciences policy in the UK is shaped by a combination of reserved and devolved powers. For example, health and skills policy are devolved. This chapter of the Plan therefore contains a range of policy actions, some of which are UK-wide and others which are England only. The Annex of this Plan confirms the territorial intent of each action. Where policy is devolved and an action is applicable in England only, the Government will work with devolved partners to support the development and delivery of equivalent policies as appropriate.

Each devolved government also pursues its own strategic priorities for Life Sciences, innovation, and health. The UK Government will coordinate with these strategies; this Plan is intended to complement rather than duplicate or replace them.

The UK Government will continue to engage closely with devolved governments to ensure UK-level actions are aligned where appropriate, and that opportunities are maximised for collaboration and mutual benefit.



1.1 Enabling World Class R&D

1.1.1 Summary

In the 2025 Spending Review, the UK Government invested a record amount in R&D. The UK Government budgeted more in health R&D as a proportion of GDP than any other comparator country aside from the US in 2021.¹⁹

Under the delivery of this Plan, there will be a particular focus on three areas:

- Investment in discovery and curiosity driven science.
- Delivering applied research and supporting companies to invest in R&D at scale in the UK.
- Prioritisation, governance, accountability, and incentives.

By cultivating groundbreaking discoveries and supporting large-scale R&D investments, while safeguarding our existing strengths in R&D, health data, and maintaining the UK's balanced and internationally renowned intellectual property (IP) standards, the actions outlined in this chapter will lay the essential research foundations for the UK's leadership in Life Sciences.

The UK has a rich health science ecosystem, from discovery science through to clinical research. This is enabled by, and will benefit from, improvements in our data capabilities, as well as digital solutions that are coming online, particularly in reducing the cost and timeliness of trial set up and recruitment. This package of actions ensures investment across the full ecosystem to maximise impact and accelerate progress.

1.1.2 Investment in discovery and curiosity driven science

The UK has formidable capabilities in discovery science. Such science is critical both in underpinning long-term improvements in our understanding and treatment of disease, and in generating the ideas and technologies required for the formation and growth of new companies.

• Action 1: The Government will continue to invest at scale in discovery science. We will ensure that the UK remains a bastion of early-stage science, identifying and de-risking new ideas which improve health and create jobs, and developing the ideas and IP which new companies can be formed around. As a sign of the Government's commitment in this area, the Laboratory of Molecular Biology, one of the world's preeminent scientific institutions, will also receive a 10-year funding allocation to support pioneering research, foster global talent, and drive breakthroughs that underpin the Life Sciences sector.

1.1.3 Delivering applied research and supporting companies to invest in R&D at scale in the UK

The UK has real potential to be a world leader in applied science. We have all the base ingredients but do not always pull these together to maximise their full potential. We will invest more across three key areas: translational models and networks, commercial clinical research, and our data and genomics capabilities. Alongside this investment we will explore mechanisms to incentivise researchers in leveraging Al to accelerate scientific discovery in areas which have a direct contribution to the growth of the Life Sciences sector.

Maximising our translational capabilities

- Action 2a: The Government will establish pre-clinical translational infrastructure to drive development of pre-clinical models as an alternative to animals, and will develop up to three fully integrated translational networks in key areas of health research. Global Life Sciences companies are clear that they would find it highly attractive if the UK were to develop both:
 - a pre-clinical translational models hub, bringing together cutting-edge human disease modelling capabilities and essential data.
 - a small number of health research specific networks that deliver a consolidated offer, from pre-clinical to late-stage research for industry.

This infrastructure will be backed by at least £30 million of government funding. These networks will reduce fragmentation across the translational research ecosystem, join up existing infrastructure and expertise to drive the delivery of translational research, accelerate the development of new medicines and medical technologies, and support the generation of data for regulatory submission.

• Action 2b: The Government will, by the end of 2025, publish a strategy to support the development, validation, and uptake of alternative models to reduce and, where possible, eliminate the use of animals, ensuring that that the full suite of policy levers is deployed in addition to further investment in R&D.

Improving the speed and capacity to deliver commercial trials and research

Research is exceptionally valuable to patients and the NHS. In particular, commercial research allows patient access to cutting-edge treatments before they become more widely available, with the Association of the British Pharmaceutical Industry (ABPI) estimating that on average in 2022/23, NHS Trusts were paid £26,311 per patient enrolled in commercial interventional clinical trials.²⁰

However, it is widely accepted that the UK could drive significant globally mobile investment by substantially speeding up trial set-up and delivery, to the benefit of patients and the economy. This will build on the delivery of – and go further than – the response to the 2023 O'Shaughnessy Review,²¹ in addition to fully utilising unique UK assets such as Our Future Health.

- Action 3: The Government will cut bureaucracy and standardise contracts to
 reduce the set-up time for commercial interventional clinical trials to fewer than 150
 days by March 2026. The Government will also create full transparency on performance
 by publishing a monthly scorecard for the NHS on trust-level clinical trial performance,
 broken down by commercial and academic trials and between interventional trials and
 observational studies, and expand the UK-wide National Contract Value Review
 (NCVR) into neighbourhood health services and other out-of-hospital settings.
- Action 4: Significantly expand commercial clinical trials capacity via funding from the VPAG Investment Programme. The clinical trials aspects of the VPAG Investment Programme represent the largest consolidated programme in UK history to build dedicated capacity and capability for commercial research. It can therefore play a crucial role in enabling significant inward investment that will improve clinical trials in the UK. The Programme will be delivered in partnership with industry, according to the terms set out in the 2024 VPAG Scheme.
- Action 5: Substantially enhance the UKRI offer to BioTech and MedTech SMEs. Accelerating the transition from ideation to commercialisation through evolution of the Innovate UK (IUK) Biomedical Catalyst, greater transparency and connectivity across the system to identify and scale game-changing opportunities, and improved coordination of activity across UKRI and the NIHR.
- Action 6: Substantially enhance the NIHR offer to BioTech and MedTech SMEs to develop and evaluate high value innovation. Delivered through the introduction of a new NIHR R&D Innovation Catalyst, pulling through innovations developed by UKRI and other routes, and meeting the demands of the health and care system. This will provide R&D funding through the translational phases of research if key milestones are met, and wraparound support will connect innovators to testbeds, venture capital (VC) funds, regulators, procurement processes, and support for commercialisation.

It will also include **building new digital connectivity to increase the speed and scale of real-world evaluations of Al**. Currently too many Al products are stuck in pilot phases due to the need for bespoke IT solutions for each research project. To reduce this bottleneck, government will build new digital connectivity to make research studies quicker and more affordable, starting with Al for screening pathways. Additionally, the newly established HDRS will simplify access to NHS data.

Catalysing the UK's health data and genomic potential

Health and omics data is increasingly fundamental to the development of new medicines, medical technologies, and diagnostics. Through the development of a new HDRS, utilising the UK's outstanding research cohorts, large-scale genomic programmes, and population-wide health-relevant data assets, the Government will build a globally competitive data ecosystem as part of the UK's overarching research offer to attract international R&D into the UK. We will also work with the UK's consented health research cohorts to ensure they are effectively supporting UK SMEs.

• Action 7: Establish the national HDRS. To transform access to research-ready health data, making national population-scale data assets and deep multi-modal data securely available for commercial, academic, and other research on an unprecedented scale, with ease of access and clear value capture.

Delivery in 2025 will be focused on the set up of the service. A CEO and Chair for the Board will be appointed by Autumn 2025, with the new entity up and running by Spring 2026. We will improve access to existing national data assets this financial year, while continuing to bring new data into existing Secure Data Environments (SDEs) while HDRS develops. Go live for the minimum viable product is expected in 2026. It will provide a unified service across existing data assets to resolve system fragmentation.

By 2030, the HDRS will provide timely access and a single point of entry to a breadth of data assets including general practice, hospital episode, prescribing/dispensing, and death registration data, covering the whole population, with Al-ready datasets including linked pathology, radiology, and genomic data. Service design will be informed by robust engagement and analysis from the outset in collaboration with partners in the devolved governments and across the data landscape. The national HDRS will provide secure and streamlined access to health data and services, underpinned by strong cyber security principles.

- Action 8: Government will use a combination of policy and legislative change to speed up access to health data for research and other secondary purposes, streamlining governance processes to maintain core safeguards while operating in a more efficient way. This will be supported by an extensive programme of public engagement to ensure we continue to build public support and trust for major data transformation programmes, alongside continued consultation with health and care professionals. Cyber security principles will be embedded within the process to reinforce core safeguards.
- Action 9: Expand and enhance the UK's consented health research datasets and develop the cutting-edge infrastructure needed to deliver a comprehensive genomics ecosystem, maximising patient benefit, with the potential for genomics to contribute to half of all healthcare interventions by 2035:
 - i. By 2030, backed by up to £354 million of government support, **Our Future Health** will become the largest longitudinal health research cohort and clinical trials resource in the world, with up to five million consented participants with linked primary and secondary care health data, genomic data and biobanked samples, in

addition to 10,000 incident cases for more than 100 diseases occurring in the following 2.5 years. Our Future Health will also facilitate 50,000 participants in commercial clinical trials per year by 2030.

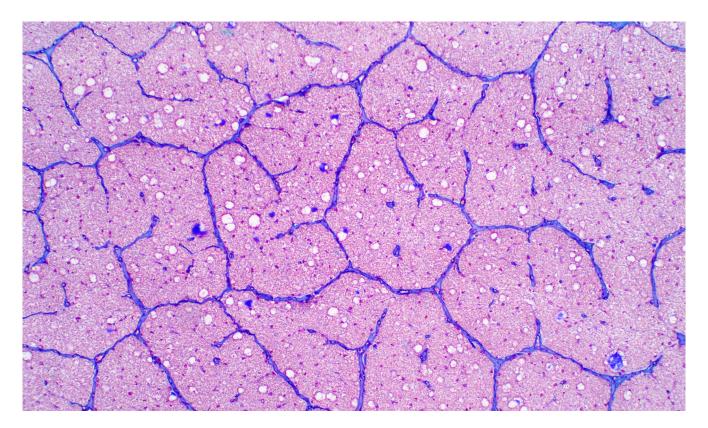
- ii. By 2030, UK Biobank will expand the impact of its pre-eminent biomedical research resource with enhanced characterisation of participants. This will be supported by up to £20 million of government funding and will include proteomic analyses of all 500,000 participants alongside other multiomic data, and their health outcomes via linked primary and secondary care health records available within the UK Biobank Research Analysis Platform, maximising the value of these data.
- iii. By 2030, **Genomics England**, supported by over £650 million of government funding, will host one of the largest genomic research databases globally with over 500,000 genomes. This includes those from the landmark 100,000 Genomes Project, the NHS Genomic Medicine Service, and the Generation Study. As a next step towards mainstream genomics population health for adults, Genomics England will deliver a new Adult Population Genomics Programme, which will sequence the genomes of 150,000 adults to harness the potential of genomics for routine preventative care. These programmes will build the evidence and digital infrastructure to position the UK as the leader in genomics-enabled prevention and diagnostics. They will also support ground-breaking work on cancer innovation, including clinical trials and Al.
- iv. The **NHS Genomic Medicine Service (GMS)** will work with industry, academia, and other partners, including through the NHS Genomic Networks of Excellence, to generate evidence and models of adoption for genomic innovations in specific priority areas, such as cancer, rare and infectious disease, and pharmacogenomics. This will inform commissioning decisions, accelerate adoption, and ensure equity of access to genomic testing across England. Additionally, the NHS GMS will roll out a Unified Genomic Record to integrate patient genomic data with relevant clinical and diagnostic data, shorten genomic testing turnaround times, and work with industry to align testing with clinical trials targets and precision medicine access.

1.1.4 Prioritisation, governance, accountability, and incentives

To maximise industrial investment in R&D in the UK, it is critical that there is clear alignment of activity, supported by transparent data to manage performance.

 Action 10: The Government will shift investment in health R&D with a focus on primary and secondary prevention and Multiple Long-Term Conditions (MLTCs). The Government's goal is to mobilise public and private investment into prevention that improves our health and prosperity, and to make this country a global leader in preventative healthcare products and services. The Government will change its approach to research funding to encourage more R&D capital to flow into prevention, supporting shifts in Medical Research Council (MRC) and NIHR funding flows to increase the proportion of the budget invested into the prevention, detection, and treatment of physical and mental long-term conditions.

- Action 11: The Government will promote closer coordination and collaboration across UK health and Life Sciences research funders. This will build on the strengths and coordination function of the Office for Strategic Coordination of Health Research (OSCHR). In the immediate term, this will be delivered in two ways:
 - i. The creation of an OSCHR-led UK-wide research portfolio database and management tool for government funded research. Simplifying access to and increasing transparency of the public and charity-funded national portfolio will make it easier for the UK to attract collaboration and inward investment from industry, investors, and other commercial finance actors, ensuring best value for money and impact for every pound invested.
 - ii. The Government will support the creation and maintenance of a single comprehensive UK database for clinical trials. This will operate as a comprehensive database for all ethically approved research, utilising data from the MHRA, Health Research Authority (HRA), and other relevant national organisations in the devolved governments to showcase the clinical trial activity within the UK.
- Action 12: The Government will update NIHR's governance model and require the NIHR to work to a dual health and growth mandate, driving focus on activity which is growth-maximising alongside improving health outcomes, building a strong foundation for future research. Commercial clinical trials and commercial research more broadly are significant drivers of growth in the UK Life Sciences sector,²² and these will be tracked with clear key performance indicators (KPIs) agreed with industry. To support this, the NIHR will report progress against this mandate to the DHSC Secretary of State, under new governance to include additional independent Non-Executive Directors (NEDs), with the main NIHR board being co-chaired with the lead independent NED and supported by an industry advisory group.



How AI will impact the sector

Al is revolutionising the Life Sciences sector across research, diagnostics, treatment, and manufacturing, reshaping how we prevent, treat, and manage disease. The potential economic impact is substantial, with McKinsey Global Institute estimating that Al could generate \$60–110 billion annually for the pharmaceutical and medical-product industries alone.²³ Recognising this potential, the UK is accelerating biomedical research through national assets like **Dawn**, the country's first Al-focused supercomputer dedicated to health and Life Sciences, and **Isambard-Al**, one of Europe's most powerful supercomputers.

The Government is committed to making the UK a global leader in Al-driven Life Sciences through the **Al Opportunities Action Plan** and the aligned **Digital and Technologies Sector Plan**, which provides cross-sectoral support for digital innovation. The Al Opportunities Action Plan outlines 50 ambitious recommendations to drive Al growth and adoption across the economy, including the establishment of a new **Sovereign Al Unit** and the appointment of national **Al champions** across the IS-8, including Life Sciences. The unit will leverage the whole-of-government alongside existing initiatives (such as the National Data Library), while pursuing additional targeted measures to secure access to cutting-edge Al, build strategic UK-controlled assets, and capture economic value by supporting frontier Al firms. The **Office for Life Sciences (OLS)** will also collaborate with the **Al Safety Institute** to ensure responsible and secure Al deployment.

One of the most dynamic areas of growth is **TechBio**, which fuses biotechnology with data science. TechBio companies are pioneering Al-driven applications in drug discovery (e.g. **Isomorphic Labs**) and regulatory conformity assessment (e.g. **Scarlet**), using machine learning and advanced computational techniques to tackle biological challenges.

The Life Sciences Sector Plan will support TechBio companies across its three core pillars:

- Enabling World Class R&D significant R&D investment across UKRI and NIHR in AI and related areas, while the HDRS will make the UK's health data safely and securely available at unprecedented scale.
- Making the UK an Outstanding Place in which to Start, Grow, Scale, and Invest the Government will invest in bespoke Life Sciences AI skills programmes and explore opportunities for strategic partnerships with TechBio firms.
- Driving Health Innovation and NHS Reform in England extensive work to improve the regulatory environment and speed of uptake of TechBio.

Ease, speed, and long-term stability for business 25

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1.2 Making the UK an Outstanding Place in which to Start, Grow, Scale and Invest

1.2.1 Summary

The UK has exceptional heritage in Life Sciences. But for too long, the UK's offer for those looking to scale and invest in the sector has been internationally uncompetitive, despite valued incentives such as R&D tax reliefs and VC schemes. Access to capital has been limited, meaning that countries where funding is more easily available, such as the US,²⁴ may be seen as a more appealing option for scaling companies, while incentives to land globally mobile FDI have been limited.

This will now change. The Chancellor has already launched the LSIMF: the largest programme in our history aimed at incentivising globally mobile Life Sciences manufacturing investments in the UK, as well as the British Business Bank's (BBB) British Growth Partnership, which seeks to crowd in pension fund capital into the UK's high-growth businesses. This Plan sets out further action across five areas:

• Access to finance

Net zero

Skills

High value partnerships

Manufacturing

Through our focus on these five interconnected areas, we will create a robust business environment which makes the UK an attractive destination for Life Sciences start-ups and investments. We commit to fully addressing the conclusions of the Harrington Review of FDI, and as part of this, the OLS will continue to expand and improve its company management and support offer. The actions outlined in this chapter will empower companies to thrive in the UK, attracting significant global investment.

Case Study: BioNTech Strategic Partnership

In 2023, the Government and BioNTech – the pioneering company behind mRNA vaccines used to tackle COVID-19 – entered into **a strategic partnership, which aims to provide personalised cancer therapies for up to 10,000 UK patients** by 2030²⁵ (either in clinical trials or as authorised treatments), ensuring they have early access to innovative new cancer treatments and strengthening the UK's position as a global leader in Life Sciences.

The partnership has already made significant progress and is a prime example of the positive change that can be delivered through collaboration between government and industry. This includes:

- Leveraging improvements to the UK's R&D ecosystem through supporting the establishment of the world leading, company-agnostic Cancer Vaccine Launch Pad (CVLP), led by NHS England and designed to increase opportunities for patients to access innovative cancer vaccine trials. The CVLP has been instrumental in accelerating trial activity in cancer research, with CVLP sites driving faster activation and enrolment timelines, enabling the acceleration of a recent study by nearly a year. The CVLP has now expanded to work with other industry partners, fast tracking UK patients to further cutting-edge studies, including with Scancell on a melanoma vaccine.
- **Expanding patient access to innovative investigational candidates**, in pursuit of the government's aim to enable UK patients to be among the first in the world to participate in trials for promising personalised cancer immunotherapies. BioNTech and their partners are now running 11 clinical trials in the UK across over 90 trial sites, with more trials in the pipeline. Thanks to the CVLP, patient reach for a recent cancer study increased from 17% to 60% across England in a matter of months.
- Stimulating economic growth as part of the partnership, BioNTech has set up a new temporary R&D hub and office in the UK. Building on this, and supported by a grant from the Government, in May 2025, BioNTech committed to broadening its UK R&D activities, with the plan to invest further up to £1 billion over 10 years and create hundreds of highly skilled jobs. BioNTech intends to set up two R&D hubs – the first one in Cambridge focused on genomics, oncology, structural biology, and regenerative medicine. In London, BioNTech plans to establish its UK headquarters, which will be home to BioNTech's Al hub, to enable medical research, using Al, among others looking into understanding disease causes, drug target selection, and predictive analytics.

1.2.2 Access to finance

The UK has an exciting array of emerging Life Sciences firms. However, we have heard consistently through the development of the Plan that they struggle to raise capital in the UK, especially at series B and in later funding rounds. The wider Industrial Strategy sets out cross-sectoral plans to address this. Notably, the National Wealth Fund's (NWF) Statement of Strategic Priorities from the Chancellor indicates that it should consider the role it can play in supporting the delivery of the wider Industrial Strategy, including in Life Sciences. This Plan will focus on the scaling and retention of UK Life Sciences companies.

- Action 13: The Life Sciences sector will benefit as the BBB commits an additional £4 billion of Industrial Strategy Growth Capital to support investment and growth in the Government's Industrial Strategy growth-driving sectors (IS-8), crowding in £12 billion of private sector capital. This will include the Bank doubling its investment in new fund managers, cornerstone funds, and building the capacity to make direct investments of up to £60 million in strategically important companies. The Bank's overall annual investment is increasing by two-thirds, bringing its total financial capacity to £25.6 billion. This will enable greater funds and direct investment into high growth Life Sciences companies. Unlocking domestic capital will reduce scaling companies' reliance on international investment, and help UK businesses resist pressure to shift activities overseas.
- Action 14: Crowd in additional global investment into UK Life Sciences by publishing the BBB's VC investment return data. A recent BBB report showed that Life Sciences funds outperform the wider market in realising returns for investors,²⁶ demonstrating that the sector is an attractive investment proposition. Going forwards, the Bank will look to publish data on its own VC investment portfolio returns, helping to build a stronger evidence base which, alongside increasing liquidity, can create a virtuous circle of increased investment.
- Action 15: Develop dedicated support for Life Sciences SMEs to export. This will involve working closely with UK Export Finance the UK's world class export credit agency, who have £80 billion in finance capacity to support UK exporters,²⁷ including in the IS-8 and the Government's global trade promotion and diplomatic network, as well as utilising a portfolio approach of export missions, global exhibitions, international partnerships, networking facilitation with industry alumni, and dedicated account management.

1.2.3 Skills

Having the right skills base is fundamental for the competitiveness of the UK Life Sciences sector, which relies on a highly qualified and increasingly interdisciplinary workforce. The UK has a strong skills and training ecosystem but, building on Skills England's assessment of skills needs, government will take additional action to improve the quality and quantity of this training. This will help learners and employers to make informed choices, drive up employer engagement in training, and continue to attract global talent.

Boosting diversity and inclusion will be embedded across all our actions, recognising the role that a diverse workforce plays in innovation and economic growth. Programmes such as *STEM ReCharge* – which supported Science, Technology, Engineering, and Mathematics (STEM) returners, 71% of whom were women – demonstrate the potential to tap into underutilised talent and help people back into high-skilled roles in Life Sciences and related sectors.²⁸

- Action 16: Build a training and skills system that delivers a diverse and highly skilled Life Sciences workforce. Skills England will work with Life Sciences employers and gain insight from devolved governments to understand the skills needs of the sector, ensuring training and qualifications meet those needs. This will enable all Life Sciences employers to engage meaningfully with training and education partners, supporting them to enhance careers information, advice, and guidance to inspire and attract learners into Life Sciences careers.
- Action 17: Maximise the use of existing programmes and deliver specific new programmes to improve sector-specific skills in identified high-priority areas. This will include a focus on specialist AI and entrepreneurial skills and will respond directly to industry feedback on where current skills gaps are precluding growth and investment. New Turing AI Pioneer Fellowships will improve AI skills across multiple scientific and research domains, including Life Sciences. We will also continue to support the development of highly qualified research talent – including clinical researchers – and supporting the Centre of Excellence in Regulatory Science and Innovation (CERSI) programme to ensure the next generation of skilled regulatory professionals.
- Action 18: Promote UK strengths to exceptional international Life Sciences talent through the Government's Global Talent Taskforce initiatives and ensure the visa system enables the movement of world class talent. As well as building a robust pipeline of skilled workers in the UK, it is critical UK firms can access the most highly skilled globally mobile talent who can help the UK grow across both multinational businesses and SMEs.

1.2.4 Manufacturing

Manufacturing is a critical part of the Life Sciences value chain, but in recent decades the UK has become increasingly uncompetitive in this area. However, action has been taken through sustained effort to increase the scale and availability of capital grants to support globally mobile investments and to deliver an increasing range of manufacturing innovation programmes. The Government will now consolidate and drive this work further to support the UK manufacture of patent-protected and off-patent medicines, MedTech, and diagnostics. Greater manufacturing capability within the sector will also help to improve its supply chain resilience through onshoring critical elements of the Life Sciences value chain.

- Action 19: Deliver the £520 million LSIMF. Life Sciences manufacturing provides exceptional economic value, and has a critical role in enhancing UK resilience, including to biosecurity threats as set out in the Biological Security Strategy. To build the UK's attractiveness as a location for investment and to stimulate growth in the UK Life Sciences manufacturing sector, government will provide up to £520 million in grants, in addition to a comprehensive and coherent manufacturing support package. This will include a new, bespoke approach to supporting investments over £250 million: the Life Sciences Large Investment Portfolio.
- Action 20: Continue to invest at scale in Life Sciences manufacturing innovation. Investing in a concerted manner in manufacturing innovation allows the Government to attract globally mobile investment to the UK, ensures UK companies developing new types and modalities of product are incentivised to remain in the UK, and catalyses increased productivity and sustainability of UK manufacturing. Through delivery of the Sustainable Medicines Manufacturing Innovation Programme's investments and activity across the Catapults and network of manufacturing innovation centres, the UK will gain and retain globally mobile investment.

1.2.5 Net zero

The Government will deliver this Plan in coherence with its broader commitments on net zero. We will build on unique UK initiatives, such as the Sustainable Medicines Manufacturing Innovation Programme, to support the sector to decarbonise and develop and utilise more sustainable technologies.

In addition, we will take further action to support the NHS to work in partnership with businesses in delivery of its Net Zero Roadmap.

• Action 21: Continue to refine the implementation of the NHS Net Zero Roadmap. In continuing the implementation of the roadmap, we will ensure that companies, and especially SMEs, continue to have the confidence and capacity to supply the NHS. To this end, we will work towards appropriate and clarified measurement processes, so that the NHS and firms work in partnership towards net zero while ensuring no undue burden is placed on firms. This will maintain our progress towards net zero and ensure that businesses are supported and enabled to grow, invest, and continue to supply the NHS, including through initiatives like the Department for Health and Social Care's (DHSC) Design for Life Programme, which aims to deliver a circular economy for MedTech by 2045.

1.2.6 High-value partnerships

In recent years, the Government, in partnership with the NHS, research funders, and regulators, has delivered a suite of major inward investments that showcase the UK's ability to operate at pace and scale to support the development and deployment of new medicines and technologies.

Partnerships in action

Guy's & St Thomas' NHS Foundation Trust is delivering a Clinical Respiratory Metagenomics Collaborative Programme in partnership with the UK headquartered Oxford Nanopore, **using their cutting-edge metagenomic sequencing technology to match patients with severe respiratory infections to the right treatments** within six hours. Supported by £34.8 million of Department for Science, Innovation and Technology (DSIT) funding, the programme will expand from 10 to 30 NHS sites, increasing accurate diagnoses of respiratory infections and providing data to the UK Health Security Agency on known and emerging pathogens – a world-first combination of a clinical service with national biosurveillance.

Partnerships like this will continue, while concurrently expanding government's work with the UK's most promising growth firms.

- Action 22: Land at least one major strategic partnership per year over the Spending Review period. Each strategic partnership will demonstrably deliver a significant improvement in health outcomes and economic growth, and the OLS will be ready to enter into substantive discussions with Life Sciences firms with exceptional value propositions that can be delivered through partnership. We will also develop our mechanisms to better support R&D investments, which will complement our Life Sciences Innovative Manufacturing Fund, and directly build the attractiveness of the UK offer.
- Action 23: Establish a dedicated service to support 10-20 high-potential UK companies to scale, invest, and remain domiciled in the UK. Working closely with the Office for Investment, this service will ensure the UK's most promising Life Sciences businesses understand the breadth of government support available as they grow, simplify the process of accessing support, and uncover new investment opportunities and areas for collaboration.

• Action 24: Empower the Health Innovation Network to drive innovation and investment at scale by strengthening support. The Network will continue to foster partnerships with innovators and the health system in developing, testing, commercialising, and scaling solutions to the NHS's most pressing challenges-building on the £2.6 billion already leveraged by the network to date,²⁹ creating jobs and supporting innovative companies to grow and scale, while driving improvements in patient outcomes and experience.

Building a more secure and resilient Life Sciences sector

The Life Sciences sector depends on complex global supply chains, often reliant on a small number of international suppliers for critical components. This creates exposure to economic shocks, geopolitical instability, and direct threats such as cyber-attacks or IP theft. Strengthening resilience is essential to safeguarding long-term growth and security.

Through our new Supply Chain Centre, **we will identify strategic vulnerabilities and take targeted steps to build resilience** – whether by supporting UK manufacturing capability, diversifying sources of key inputs, or improving access to resilience finance. Future programmes, including the LSIMF and the NWF, will **embed economic security objectives from the outset**, helping to secure critical supply chains, grow domestic capability, and future-proof UK Life Sciences.





1.3 Driving Health Innovation and NHS Reform in England

1.3.1 Summary

This Plan has outlined how the Government will make concerted efforts to grow the volume and quality of industrial Life Sciences in the UK, as well as ensuring that the economic value of the science is captured in the UK. But ultimately, the tangible impact of that work for the public will be limited if government cannot ensure they have timely access to the medicines and medical technologies that our science underpins.

In the past, government's industrial policy in relation to the Life Sciences sector has been detached from its health policy. This time it will be different. This Plan has been developed in conjunction with the 10 Year Health Plan to ensure alignment of objectives and means of delivery. Delivery will be enabled by the broader shifts in the NHS Operating Model, described in the 10 Year Health Plan.

Incentives and greater freedoms will be utilised to support, enable, and encourage the NHS to operate more innovatively, and to be more readily able to embrace the transformative potential of innovation. As part of the implementation of the 10 Year Health Plan and the Life Sciences Sector Plan, we will also consider the opportunity for further, radical devolution at place-level, where that could both support the spread and adoption of innovation, and enable and drive economic growth.

In doing so, government aims to ensure that the sector and the medicines, medical technologies, and diagnostics it produces – especially those that can have the most transformative impact on patient care – fundamentally underpin the reform of the NHS. This will help drive not just the recovery of constitutional standards, but also the shift from sickness to prevention, hospital to community, and analogue to digital.

It will do this through a focus on:

- Ensuring our regulatory and market access systems get innovation to the NHS fast.
- Ensuring that all patients have access to clinically and cost-effective innovations.

Alongside their health impacts, medicines and MedTech bring vital economic benefits to individuals, their productivity and incomes, as well as to the wider economy in numerous ways. We will ensure those benefits are reflected in how we invest in health and improve access for patients in the future.³⁰ The actions in this chapter will nurture a health system and NHS that seamlessly integrates cutting-edge technologies and innovations, ensuring the best possible outcomes for patients, clinicians, and the broader economy.

1.3.2 Ensuring our regulatory and market access systems get innovation to the NHS fast

The UK's Life Sciences ecosystem benefits enormously from the expertise of the MHRA and NICE. However, there is a recognition that more can be done, by both agencies individually and collectively, to get new innovations to the NHS and wider healthcare providers faster, where safe and cost-effective.

- Action 25: Reduce unwarranted barriers to market entry, through faster, riskproportionate, and predictable routes to regulatory approval. This will be done through:
 - i. Boosting support for the MHRA with more investment to enable them to deliver a risk-proportionate and predictable service to users, which adheres to statutory timelines (with a clear ambition to exceed statutory timeframes). This will include the capacity to support wider growth-driving activities such as the expansion of the Al Airlock project.
 - ii. Deliver the MHRA's digital transformation at pace, so that from 2026 their digital platforms far better support industry applications and enquiries, and utilise Al where appropriate to accelerate the pace of regulation.
 - iii. Create a reformed medical devices regulatory framework that includes an innovation friendly domestic route to achieving UK Conformity Assessment (UKCA) certification.
 - iv. Use international reliance and recognition routes for medicines and medical devices, to streamline the route to market for products which have previously sought Comparator Regulator approval, to enable a focus on getting cutting-edge and transformative products to patients. DHSC will introduce a pre-market statutory instrument, including the International Reliance Framework, to Parliament, by Autumn 2026.
 - v. The MHRA will capitalise on its thought leadership and reputation in Al and Software as a Medical Device to be the fastest, safest, and quickest place to regulate Al and Software. This year, the MHRA will review regulations and publish a new framework for Al in 2026.

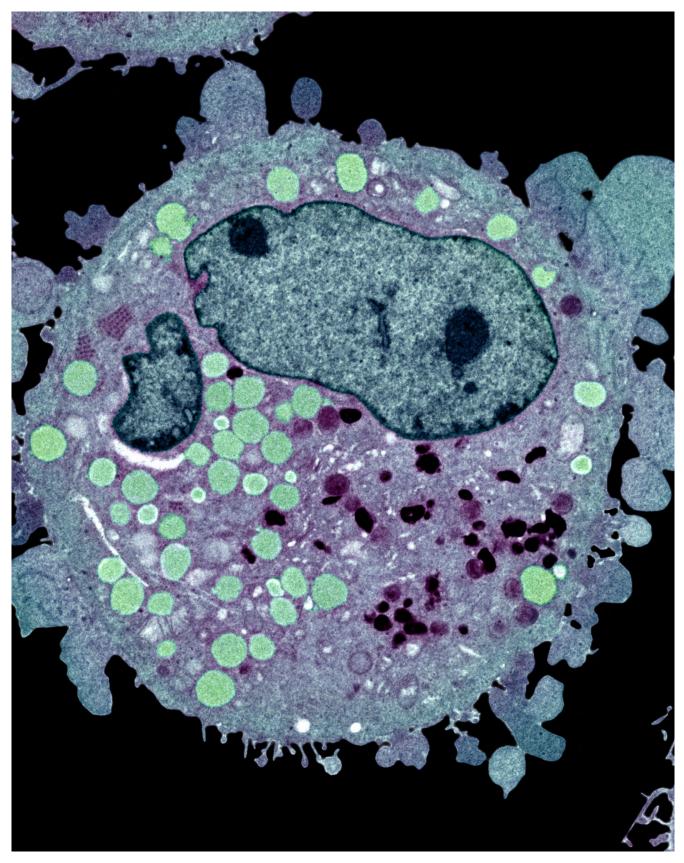
- vi. The MHRA will work with the sector and with the Regulatory Innovation Office (RIO) to consider how the ecosystem can support the use of AI in drug discovery, to ensure seamless delivery by aligning the system across the pathway.
- vii. The MHRA will continue to work with industry through the Electronic Patient Information (EPI) taskforce to explore how the UK can use new technological approaches to move to user-centred, digital-first information that is inclusive and accessible for all, better for patients, and better for the environment.

The MHRA brand remains a marker of excellence. We must capitalise on this and ensure the MHRA takes its place as a global leader of agile and proportionate regulation, focused on the regulatory challenges of tomorrow. Through this consolidated programme of work, regulatory focus and effort will be freed up to focus on the most transformational new medicines and medical technologies, being a reference regulator when making first approvals.

Models of international partnership and reliance will support the risk-proportionate regulation of products that already have approvals from other comparator international regulators.

- Action 26: Streamline market entry and ensure patients receive the most effective care, by ensuring NICE processes are timely, agile and transparent. This will include:
 - i. Streamlining NICE processes to ensure a transparent and predictable service to users, ensuring the maintenance of stated timelines, with the capacity to support wider growth driving activities.
 - ii. Ensuring any future changes through NICE's modular updates can be considered where they are evidence based, financially sustainable, and represent value to the taxpayer.
 - iii. Expanding dynamic assessments of priority care pathways to give clinicians clarity on the most clinically and cost-effective care. NICE will improve patient outcomes and maximise the value of innovations by keeping guidance in priority clinical areas up to date as new evidence emerges.
- Action 27: Streamline market entry, through enhanced coordination between the MHRA and NICE. To ensure patients in England are able to access medicines 3 to 6 months faster, this will include:
 - i. Working in partnership, the MHRA and NICE will launch a fully integrated scientific advice service, accessed through a single point of entry.
 - ii. Improved alignment between MHRA decisions and NICE guidance publication. MHRA and NICE will tackle information sharing and collaboration between technical experts to streamline the licensing and HTA process in England.
 - iii. Delivering sustainable innovation pathways for products that meet unmet patient needs and enable the three shifts. There will be collaboration between regulatory approvals and HTA assessment, building on the Innovative Licensing and Access Pathway (ILAP) and Innovative Devices Access Pathway (IDAP) to enable joined up early engagement to support market access.

• Integrating scientific advice and improving provision of accelerated access pathways for the most promising new medicines and medical technologies, supporting industry to get products to market faster, and supporting the UK's healthcare providers to more effectively utilise them once approved.



1.3.3 Ensuring that all patients have access to clinically and cost-effective innovations

It is critical to ensure that not only do safe, clinically and cost-effective medicines and medical technologies get to market, but that they are used at scale across the NHS and wider UK healthcare providers. There are still too many examples of unwarranted variation in uptake³¹ (which is bad for patients) and complicated, locally variable routes to procurement (which is bad for innovators).

Linked to this, the acceptance of real-world evidence is often challenged with respect to product evaluation, approvals, and procurement, as it is often seen as inferior to randomised control trials, which is particularly acute for MedTech. Clear national innovation priorities and pathways are essential to address these challenges, providing focus for the health system, speeding up adoption, and giving industry the confidence to invest and develop solutions that align with NHS needs.

The Government will more clearly set out its national innovation priorities. These will be updated regularly, and will reflect priorities across different horizons. This will include priority areas of focus for the development and testing of innovations with transformational potential but which require additional evidence on how they can be most impactfully deployed, as well as areas where proven innovations will be prioritised for national scaling. The NHS will also bring in a national scheme for the procurement of innovation to ensure the best value for the taxpayer.

- Action 28: Reduce friction in the system to optimise access and uptake of new medicines so the most clinically and cost-effective can reach patients faster. This will include:
 - Introducing a new and proportionate approach to NICE appraisals and NHS indication-specific based pricing agreements for medicines with large numbers of indications, strong long-term outcome data, and low affordability risk, in order to streamline the value assessment and reimbursement of multi-indication medicines. In doing so we will speed up patient access and reduce costs to industry, while achieving good value.
 - ii. The roll-out of confidential commercial pricing models in primary care in England.
 - iii. Introducing a Single National Formulary to remove bureaucratic delays to patient access, reduce unwarranted variation in prescribing, and free-up healthcare staff administrative time to focus on caring for patients. We will work with industry throughout its implementation.
 - iv. Driving early and widespread uptake of new biosimilars, by working with local healthcare systems on implementation plans to ensure that switching is introduced as soon as clinically appropriate, and to reduce variation at the local level.

These actions will speed up market access for clinically and cost-effective new medicines and reduce local unwarranted variation in medicine use. It will also allow for the NHS to deliver cash savings, which can be reinvested in newer medicines, when new biosimilars or generics become available. To support this, we will work with industry to accelerate growth in net spend on innovative medicines over the course of this Plan

compared with the previous ten years - particularly those medicines that help keep people out of hospital. Together, this will help ensure that by 2030, the UK will be one of the top three fastest places in Europe for patient access to medicines.

- Action 29: Streamline access and adoption of MedTech by reducing duplication and introducing low-friction procurement and contracting mechanisms. The Government will therefore:
 - i. Implement the RBP for proven MedTech innovations that address an unmet need. From April 2026 we will expand NICE's technology appraisal process, which includes mandated funding by the NHS, to cover some devices, diagnostics, and digital products. RBP will also provide accelerated commercial support, and enable quicker and simpler access to NHS infrastructure for evidence generation and intensive adoption and pathway transformation support.
 - ii. Introduce an "Innovator Passport" in the NHS for MedTech by 2026: whereby agreed standards enable better sharing of evaluation information, and reduce duplication in local purchasing decisions, removing the need for repeated evaluations in each local health system, with the aim for this to become standard practice in future for all local procurements. Information that could be included in the passport includes Digital Technology Assessment Criteria (DTAC), Data Protection Impact Assessment (DPIA), Value-based Procurement (VBP) and Evidence Validation requirements (including Real-World Evidence).
 - iii. Implement national standard guidance on VBP for MedTech and create new commercial models for potentially high value technologies, including exploring outcome-based agreements. Appropriately incentivise both national and local procurement functions to drive uptake of VBP practices through targeted KPIs on a number of uses over multiples of years, akin to existing value for money targets.
 - iv. Work across the system to ensure transparency and predictability in the route to market for Managed Services, ensuring Managed Service providers can continue to free up clinician time and support in delivering the most effective technologies.
 - v. For patients, we will build, test and iterate a 'HealthStore', which will enable access to approved health apps to manage or treat their condition. Areas with digital tools that show significant promise include dermatology, physiotherapy, and cognitive behaviour therapy for mental health conditions. The products will be funded from the centre and nationwide rollout will be piloted once the HealthStore is established. The costs will be borne from central budgets procured once by the NHS as a whole. Some apps made available through the HealthStore will be made available to everyone and some will be made available to those who have a condition diagnosis, accompanied with a recommendation from a clinician to use the technology. Where one exists, patients will have choice of which app best suits them and meets their needs.

Through this suite of actions, and by harnessing the flexibility and transparency offered by the new Procurement Act 2023, the pathway to uptake for MedTech will be significantly clearer and cleaner, with substantially less bureaucracy and local unwarranted variation in both practice and uptake. This activity will support the delivery of the new NHS principles in the framework for technology.

- Action 30: Place a growth mandate on NHS commercial activity including NHS Supply Chain, and within the Medicines Procurement and Supply Chain Frameworks. This will drive focus on activity which is growth-maximising, and ensure that promoting innovation is seen as an institutional objective, alongside achieving value for money. With NHS Supply Chain responsible for 57% of the NHS medical device spend,³² activity on and investment in innovation, even at the margin, can have a substantial longterm impact.
- Action 31: Strengthen innovation metrics for medicines and MedTech through an updated and expanded Innovation Scorecard. We will apply this to monitor uptake of innovation across England and allow for more accurate international comparisons. This will enable targeted, tangible action at local and national levels to address unwarranted variation in uptake.
- Action 32: Deliver the ambitions of the Government's Healthcare Goals programme across Addiction, Cancer, Dementia, Mental Health, and Obesity, with continued significant government funding. Each Healthcare Goals programme is led by ministerially-appointed international experts operating as Chair(s), who, in collaboration with partners across the public, private, and charitable sectors, will support the delivery of distinct, bespoke initiatives to support the research, development, and adoption of new medicines and medical technologies, in addition to inward investment. Our focus here reflects the significant health and economic burdens felt through these diseases.
- Action 33: Establish Regional Health Innovation 'Zones' for large scale development and implementation of innovation, for scale-up across the health and care system. When our large health systems have been given the permissions and flexibility to behave radically, they have shown that they can be pro-innovation and forwardlooking, providing learnings for other systems to follow. Empowered by devolutionary freedoms, the Zones will bring together existing entities – including Integrated Care Boards (ICBs), providers, mayors, and industry – to experiment, test, and generate evidence for complex interventions. They will have the means to experiment with new commissioning models, to redesign patient pathways, and simplify procurement. They will do this by working with and through existing infrastructure and innovation assets in their regions, including NIHR infrastructure and Heath Innovation Networks, and in partnership with industry. Initially two to three regions with strong Life Sciences, health and data assets will be identified as Zones to act as trailblazers. Our ambition is for Zones to scale nationally over time.

Supporting generic and biosimilar medicines

Generics and biosimilars are a **crucial part of the Life Sciences sector**, ensuring that we can provide value for patients and the NHS. Government will continue to work with generics and biosimilars companies including through:

- **Bringing cutting-edge products to patients faster** while reducing duplicative efforts and unnecessary regulatory burdens on companies through the use of the International Recognition Procedure for medicines.
- Building on the success of previous schemes with the implementation of the LSIMF, which includes opportunities for generics and biosimilars companies.
 This funding supports UK economic growth and builds our resilience for future health emergencies.
- Becoming a world leader in the uptake of off-patent medicines. Building on our strength of a high rate of generic prescribing, there is an opportunity to save £1 billion over 5 years³³ by rapidly taking up new biosimilar drugs that have or shortly will be available in the UK market. This would create space for new innovations, so is win for both generic and innovative parts of the pharmaceutical sector.
- Harnessing the opportunities offered by the Procurement Act (2023) to be able to give earlier sight of NHS tenders for suppliers. This will streamline procurement processes, provide more flexibility, and improve our horizon scanning capabilities.



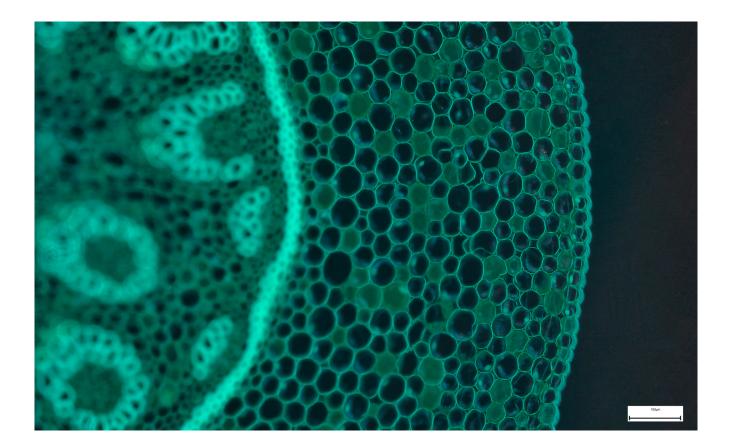
1.4 Cross-sectoral action through the Industrial Strategy

The Life Sciences Sector Plan is strongly supported by the broader Industrial Strategy, which sets out cross-cutting interventions to drive growth and innovation.

Key enablers include:

- **Electricity prices:** From 2027, a new British Industrial Competitiveness Scheme will reduce electricity costs by approximately £35-40/MWh up to 2030 and support thousands of businesses. The scheme will benefit manufacturing electricity-intensive frontier industries in the IS-8, and foundational manufacturing industries in their supply chains, such as chemicals. Eligible businesses will be exempt from paying the costs of the Renewables Obligation, Feed-in Tariffs, and the Capacity Market. The scheme will bring GB electricity costs more in line with other major economies in Europe, and level the playing field for British businesses. Eligibility will be determined following consultation, which will open shortly, with a review point in 2030.
- **Skills and talent:** Reforms to the skills system, including in post-16 education and the new flexibilities within the growth and skills offer, alongside the new Global Talent Taskforce will ensure that the Life Sciences sector can attract, train, and retain a diverse and highly skilled workforce.
- **Infrastructure and planning:** Planning reforms will unlock new research, manufacturing, and clinical facilities. We will support the fast-tracking of key projects – including laboratories, gigafactories, and data centres – by enabling them to 'opt in' to be treated as Nationally Significant Infrastructure Projects, providing greater certainty and speed through the planning system.

• IP: Government will establish a new working group convening relevant departments and authorities. It will engage closely with industry, commercial banks, and other financial institutions, to address regulatory and non-regulatory barriers to lending to IP-rich SMEs. As part of this, the BBB and the Intellectual Property Office (IPO) will explore how to support lending to IP-rich sectors and encourage IP-backed lending. Government will publish an update on this work and next steps by the end of 2025.



1.5 International

Life Sciences is a global sector. This Plan reflects that, both in terms of aiming to substantially increase the UK's competitiveness, as well as outlining measures which will support companies in the UK to access the global Life Sciences market, estimated to grow to more than \$2 trillion by 2028.³⁴

The Government will continue to partner internationally to improve the cost and speed of Life Sciences trade and seek to secure trade partnerships which entrench this.

Improving market share in a world facing increasing global competition, trade disruption and distortion, will require practical support to boost trade and collaboration, as well as shaping global norms. UK interventions, influence, and advocacy should open markets.

The UK Government will enhance practical support to help the sector engage, compete, and collaborate internationally. From Summer 2025 we will:

- 1. Begin the implementation of our Trade Strategy.
- 2. Address how we will approach renewing relationships with the US and EU and prioritise how we engage with other markets, informed by the sector, and leveraging a whole-of-government approach to growth in key markets.
- 3. Tailor export promotion and export finance to better suit sector needs, enhance relationships with strategic buyers, pursue investment and export synergies, and better leverage government and industry networks.
- 4. Address market access barriers where industry tells us they need government support to unblock and unlock growth.
- 5. Identify UK Life Sciences solutions with high export potential, such as successful deployments and uptake of technology in the NHS.

The Government will utilise a whole-of-government approach to growing the UK's Life Sciences sector globally. We aim to create opportunities across a broad spectrum of markets by harnessing the diverse international capabilities of each government department and the full breadth of our geographical footprint. This includes capitalising on our relationships in markets where shared health interests serve as a strategic entry point and shaping the markets of the future in low and middle-income countries. Importantly, we will work collaboratively in priority markets, combining strengths for greater impact. By aligning our resources and expertise, we will ensure coordinated and complementary efforts, creating ambitious opportunities for the Life Sciences sector.

The UK will be a reliable partner in trade and advocate for high standards and rules that support our knowledge economy, security and resilience.

To reflect the global nature of the sector we will use our trade policy levers to support innovation, remove, or reduce regulatory barriers and work tirelessly to improve supply resilience:

- 1. On IP, we will encourage trading partners to raise their IP standards to those of the UK and continue to support positive bilateral and multilateral IP outcomes, including through our global IP Attaché network and interagency cooperation.
- 2. Using all our international dialogues, partnerships, and agreements, we will champion strong international regulatory cooperation and harmonisation. We will use all levers, including our Mutual Recognition Agreements and bilateral engagement between regulators. The latter will be supported by the newly announced Ricardo Fund, which will provide backing for UK regulators, expert bodies, and our overseas trade teams to open up and shape priority growth markets, across frontier sectors.
- 3. Multilaterally, we will support the vital work of preparing for future health emergencies. We will promote the role of regulatory cooperation in facilitating trade and continue to reduce unnecessary trade barriers in health. We will continue our active and vocal role in supporting strong IP protection and upholding the existing international IP system. The UK continues to participate in the World Trade Organisation's (WTO) Agreement on Trade in Pharmaceutical Products, which is a plurilateral agreement that eliminates tariffs and other duties on a large number of pharmaceutical products and substances used to produce them.
- 4. Medical supply chains are complex, global, and vulnerable to disruption. The UK is working with international partners to strengthen resilience, identify critical dependencies, and support stable access to medical goods. This includes promoting transparency in trade measures, engaging through multilateral platforms like the WTO, and joining initiatives such as the European Critical Medicines Alliance which support innovation and growth. Additionally, recent agreements, including an MoU with India, reflect the UK's commitment to collaborative approaches that align supply resilience with economic growth. Additional support will come from our newly established Supply Chain Centre, which will work with business to build resilient supply chains.

Endnotes

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2. Supporting our frontier industries

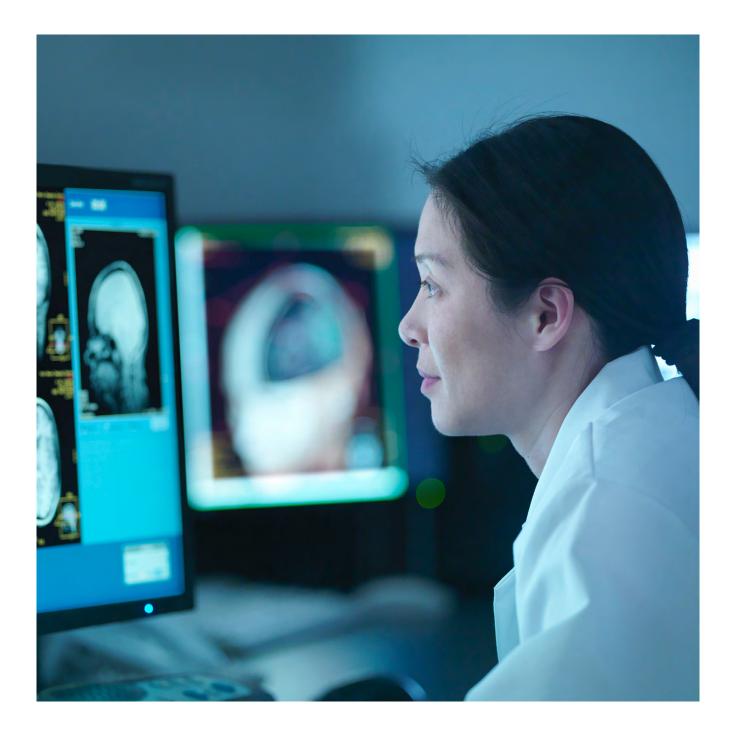
The UK's Life Sciences sector is divided into two principal frontier industries: pharmaceuticals and medical technologies.

Pharmaceuticals

The UK's pharmaceuticals frontier industry employed around 150,000 staff and generated £74 billion in turnover in 2021/22.¹ This includes: very large UK headquartered firms, such as AstraZeneca and GSK; UK affiliates of large multinational firms; and a range of smaller firms. The UK's rich industrial ecosystem covers both companies focused on the development and sale of branded medicines, in addition to firms focused on generic and biosimilar medicines. Expenditure on pharmaceutical R&D totalled £9 billion in 2023, the largest contribution (17%) to total business R&D in the same year.² However, the UK had the eighth longest median time for setting up and approving clinical trials compared to similar countries, and our ranking in the value of pharmaceutical goods exports has decreased from sixth in 2013 to tenth in 2023 amongst comparator countries.³

Medical Technologies (MedTech)

The UK's MedTech frontier industry employed around 154,000 staff and generated £34 billion in turnover in 2021/22.⁴ The frontier industry encompasses medical devices, diagnostics (both in vivo and in vitro), and digital technologies, and includes large FTSE 100 listed firms such as Smith and Nephew, Convatec, and Oxford Nanopore, in addition to a notable number of SMEs. The frontier industry has averaged 6% annual growth in turnover since 2018/19,⁵ but faces substantive regulatory and procurement challenges. For example, in 2024, 33% of MedTech firms reported removing products from the UK market due to a combination of regulatory and procurement barriers.⁶



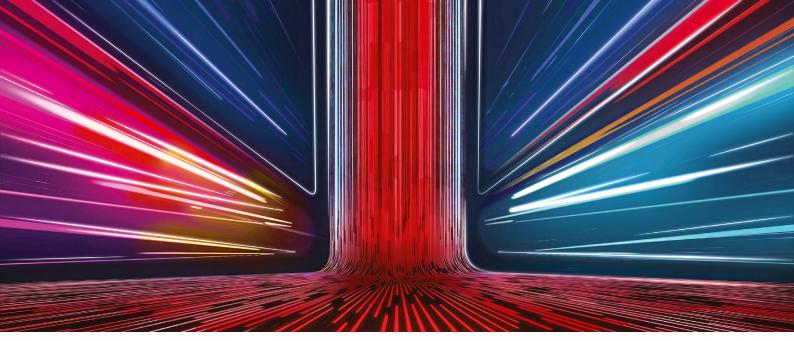
Foundational Industries

The Life Sciences sector relies on several inputs from foundational industries.

- The Critical Minerals Strategy includes essential minerals like helium and rare earth elements (REEs) used in MRI scanners, CT scanners, x-ray tubes, and ultrasound machines, as well as tantalum in medical applications. To ensure a secure supply and leverage the UK's strengths in midstream and recycling, the strategy outlines plans to optimise domestic capabilities and collaborate internationally.
- Despite limited domestic production, the UK's innovation and R&D offer global leadership opportunities, such as the second-largest Platinum Group Metals (PGMs) refiner and rare earth magnet recycling.
- The Critical Minerals Intelligence Centre will enhance its horizon scanning and expert analysis capabilities. To reinforce our supply chains for the long term and support green industries of the future, the Government is publishing the 2025 Critical Minerals Strategy. The Critical Minerals Strategy aims to secure a steady supply of critical minerals and harness the UK's competitive advantage in midstream and recycling, by optimising domestic production and through strategic international collaboration.
- Steel is crucial for MedTech products, requiring a secure, high-quality supply base. The Government's steel strategy will define sovereign capabilities to protect producers and better utilise domestic scrap.
- Construction is vital to address the shortage of lab space and clean rooms. The UK particularly the Oxford to Cambridge Growth Corridor – suffers from a chronic shortage of lab space and clean rooms compared to other leading global hubs like Boston and the Bay Area.
- Mid-stage firms often struggle to expand, while even global companies report difficulty scaling manufacturing in the UK due to infrastructure constraints. To overcome obstacles, the Government is reforming the planning system, updating its infrastructure pipeline, and tackling stakeholders concerns about skills, by investing £625 million in construction skills to train thousands of new workers.

Endnotes

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- 2 Office for National Statistics (2024), <u>Business enterprise research and development</u>.
- 3 Office for Life Sciences (2024) <u>Life sciences competitiveness indicators</u>.
- 4 Office for Life Sciences (2023), <u>Bioscience and health technology sector statistics</u>.
- 5 Office for Life Sciences (2023), <u>Bioscience and health technology sector statistics</u>.
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3. Supporting the UK's city regions and clusters

Unleashing the full potential of our city regions and clusters is a core objective of our modern Industrial Strategy. The Industrial Strategy seeks to concentrate government's efforts in places with the greatest potential for national prosperity and the IS-8: in our city regions and high potential clusters.

The UK's Life Sciences sector is a national strength with global reach. Its impact is powered by dynamic city regions and clusters across every nation and region - from the Oxford to Cambridge Growth Corridor to the M4 Corridor, Yorkshire and the North West city regions; from growing clusters in South Wales to the Glasgow–Edinburgh–Dundee triangle; and from Belfast to Derry/Londonderry. These city regions and clusters bring together businesses, universities, healthcare systems, and investors, creating dynamic ecosystems where innovation thrives and investment follows.

It is not sufficient to support individual city regions or clusters in isolation. To ensure our city regions and clusters thrive we must also build networks and connections between them. The Industrial Strategy is connecting city regions and high potential clusters across the Oxford to Cambridge Growth Corridor and a corridor across our Northern city regions, making them globally competitive engines of the IS-8. In many cases, this is anchored by flagship infrastructure investments such as East-West Rail, HS2, and Transport for City Regions funding. The investments and partnerships set out within this Plan support these corridors and go further to deepen Life Sciences networks across the whole of the UK.

3.1 Supporting the UK's city regions and clusters^{1 2}



Scotland (Dundee and Glasgow, Edinburgh and Aberdeen City Regions)

Advanced Therapies & Manufacturing, AI, Digital Health & Data, MedTech, Precision Medicine

- Fastest-growing UK Life Sciences turnover.
- Anchored by NHS/university translational research networks.
- Assets such as CPI Medicines Manufacturing Innovation Centre, Robotarium, Living Lab, DHI.
- Presence of a Triple Helix model with industry, academia & the NHS.
- Strengths in Biopharma, advanced therapies and data innovation.

North East (Tees Valley, North East)

Pharma Manufacturing, MedTech, Cell & Gene Therapy

- Leader in end-to-end Biopharma manufacturing.
- CPI's expertise in RNA, National Horizons Centre's biosciences facilities and National Innovation Centre for Ageing.
- 9,300 employees, £2 billion industry turnover.
- Access to scientific talent; high Life Sciences student density across five universities.
- Excellence in clinical trials, diagnostics, and advanced therapies.

3 Northern Ireland (Belfast, Derry/Londonderry, Coleraine)

Precision Medicine & Diagnostics, MedTech & Digital Health, Biopharma

- Dual UK-EU market access with regulatory advantage.
- Fastest growing UK Life Sciences employment.
- Research-intensive universities, UK leading indigenous global companies and spin-outs.
- Integrated longitudinal electronic health records.
- Wider Advanced Manufacturing and Cyber strengths supporting Biopharma and clinical trials.

5 North West (Greater Manchester, Liverpool City Region, Cheshire)

Genomics, Diagnostics, Advanced Therapies, IPC, Health Data

- Leading hub for collaborative development & commercialisation.
- Large employment cluster including Greater Manchester's Oxford Road Corridor, Knowledge Quarter Liverpool, Sci-Tech Daresbury & Cheshire's Alderley Park.
- Assets including UK BioBank HQ, Medicines Discovery Catapult, Biomanufacturing Cluster and Europe's largest cancer campus - the Christie.

7 West Midlands

MedTech, Diagnostics, Digital Health

- Over 500 MedTech sites, the 3rd highest number of MedTech sites out of the UK regions.
- £5 billion Biopharma & £2 billion MedTech turnover.
- Nine universities, four medical schools producing 11,000 medical science graduates a year & largest UK trial environment.
- Key hubs include Birmingham Health Innovation Campus, Birmingham Knowledge Quarter, Arden Cross, WM Health-Tech Accelerator.

9 Oxford to Cambridge Growth Corridor

Therapeutic Discovery, Omics, Vaccines, Medtech, Cell & Gene Therapy

- Leader in R&D, translational medicine and Al adoption for healthcare outcomes.
- Anchored by world-leading Oxford & Cambridge Universities and NHS teaching hospitals.
- Presence of global pharma firms such as AstraZeneca, GSK, Moderna, BioNTech, Novo Nordisk.
- Extensive talent, incubator, VC, advisory and science park networks.

Yorkshire and the Humber (West Yorkshire, South Yorkshire)

HealthTech, Diagnostics, MedTech

- Second highest regional employment in MedTech (14,800 employees).
- West Yorkshire hosts one of the world's largest pathology labs.
- The West Yorkshire Investment Zone is scaling HealthTech with new facilities in Huddersfield and Leeds, including a £250 million innovation campus and the refurbishment of the historic Old Medical School.
- South Yorkshire drives health-manufacturing convergence.

6 East Midlands

MedTech, Biomanufacturing, Diagnostics

- East Midlands Freeport boosts global trade & investment.
- Strong diagnostics, device testing & MedTech expertise with expanding NHS & university R&D assets such as the University of Nottingham, University of Leicester, and Nottingham University Hospitals NHS Trust.
- Skilled vocational pipeline supports sector growth.
- Strategic location strengthens manufacturing & health-tech development.

8 Wales (Cardiff City Region, Swansea City Region, Wrexham) Precision Medicine, Genomics, MedTech, Clinical Trials, Health Data, Neuroscience

- SAIL databank enables secure population-level health data research.
- Health & Care Research Wales supports commercial studies via One Site Wales model.
- Cardiff excels in neuroscience (e.g. CUBRIC, Neurotherapies).
- Export-driven, investable location with targeted skills investment.

10 Greater London

Al in health, Diagnostics, Advanced Therapies, Venture Capital

- Global Life Sciences gateway with 1,200 sites, 34,800 employees.
- Anchored by University College London Hospitals Trust, King's College Hospital Trust, Imperial, Marsden, the Crick - Europe's largest biomedical institute.
- Key innovation hubs including Knowledge Quarter, White City, Paddington.
- Plans for boosting sector laid out in London Growth Plan.

3.2 Realising the economic potential of Life Sciences city regions and clusters

The Government's intention is to grow the economic and health impact of the sector nationally, while also working in deeper partnership with local places to unlock the growth potential of Life Sciences city regions and clusters across the UK.

We will drive action at a national level to raise the potential of Life Sciences businesses across the country. This includes the actions set out above on regulation or access to capital which will have impacts across all Life Sciences city regions and clusters.

Alongside national activity, the Government will also invest in specific place-based interventions. These include:

- Establishing Regional Health Innovation Zones for large scale development and implementation of innovation, for scale-up across the health and care system.
- Continued investment in fifteen Health Innovation Networks across England, which will help innovators and the NHS to develop, spread, and adopt innovation.
- Ongoing investment in the LSIMF to land large, globally mobile manufacturing investment in Life Sciences city regions and clusters. This includes:
 - ONE BioHub: a key industry innovation project in the Aberdeen City Region Deal.
 Led and co-funded by ONE with capital funding from the UK Government, Scottish Government, and Scottish Enterprise.
 - Ipsen: a £75 million investment to grow the manufacture of innovative medicines for neurological conditions, creating 39 new jobs, and safeguarding a further 37 at Ipsen's Wrexham facility.
- Investment in health-focused R&D institutions such as the Medicines Discovery Catapult in Cheshire; the Cell and Gene Therapy Catapult in London, Braintree, Stevenage and Edinburgh; the Centre for Process Innovation in Darlington, Glasgow, Sedgefield and Redcar; the Life Sciences Innovation Hub in Dundee; and iREACH in Northern Ireland.
- Continued support for Life Sciences-focused Investment Zones in:
 - West Yorkshire, which is driving innovation and growth of HealthTech in the region.
 - Liverpool City Region, which is focused on breakthrough research in infection, therapeutics, mental health, advanced manufacturing, and the use of data and AI to lead healthier lives.

This comprehensive package of existing and future interventions ensures that Life Sciences growth is driven by the strengths of city regions and clusters across the UK, contributing to national prosperity and health outcomes.

3.3 How we are working with devolved governments and regional leaders

Partnership working with devolved governments and MSAs is central to delivering this Sector Plan.

Across the UK, various nations and regions have, or are actively developing, strategies to enhance the Life Sciences sector. Scotland's 'Life Sciences Scotland Industry Leadership Group' is creating a strategy that integrates Human Health with Agritech, Aquaculture, and Animal Health. Wales is advancing its Innovation Strategy and Health and Care Research Wales Strategy. Northern Ireland is implementing the 'Health and Wellbeing 2026: Delivering Together' plan, alongside the Department for the Economy Life and Health Science Sectoral Action Plan. These efforts collectively aim to strengthen the UK's position in Life Sciences.

The OLS will work in partnership with counterparts in the devolved governments, as will other relevant English organisations with their devolved counterparts. This collaboration will reflect the manner in which the devolution settlement impacts this sector, given industrial and science policy is reserved, and health policy is devolved.

MSAs in England will deliver ambitious 10-year Local Growth Plans (LGPs). These statutory, locally owned, long-term plans will set out how each MSA will use their powers and funding to drive growth in their region. Growing the Life Sciences sector will be central to many of these plans. The OLS will establish a new MSA Life Sciences Working Group to align local and national interventions for maximum impact and identify how to support Life Sciences focused investable propositions in LGPs. To deliver our objectives, we will also:

- Establish regular strategic dialogues with English regions to identify and develop investable propositions, align national and local funding streams, and support regional ambitions.
- Maintain close collaboration with Local Authorities and regional ecosystems, ensuring businesses across the UK benefit from national programmes.

Endnotes

- 1 All figures referring to the number of life sciences sites, employees or value of turnover relate to the period 2021/22 and are taken from the Bioscience and Health Technology Sector Statistics (BaHTSS) 2021/22 publication. All statements referring to regions that are the 'fastest growing' in terms of employment or turnover are also taken from the BaHTSS 2021/22 publication, and relate to the period 2016/17-2021/22.
- 2 All other statements in the map are insights gathered from central government engagement with the nations and regions as part of the development of the Life Sciences Sector Plan.



4. Creating an enduring partnership with business

4.1 We have worked with industry to develop this Plan

This Sector Plan has been co-created with input from over 400 individuals across 250 organisations. A series of Task and Finish Groups, involving 120 experts, tackled major challenges facing the sector, co-developing the ambitious solutions that underpin this Plan with government.

The Plan's content was stress-tested through a wide variety of roundtables with Trade Associations and their members, MSAs, and devolved governments. The entire policy development process was overseen by the Life Sciences Sector Plan Advisory Board, chaired by the Government's Life Sciences Champions, and including senior representatives from industry, the NHS, UK science, and philanthropy.

4.2 How we will work with industry over the next 10 years

Deep partnership with the Sector will be continued as this Plan is implemented via:

- Life Sciences Council A refreshed and bolstered Life Sciences Council will continue as our most senior industry-government forum, working with the Industrial Strategy Council.
- **Industry Champions** It will be crucial that we work closely with industry in delivering the Plan.
- Life Sciences Investment Envoy Reflecting the criticality of this aspect of the Plan, the Envoy will continue to work with and support the Government on its ambitions in this area.
- **Engagement with trade associations and companies** The Government will continue to work in partnership with Life Sciences Trade Associations, across domestic and international policy, to ensure industry-wide perspectives are embedded in the Plan's delivery through dedicated governance structures that will be developed as an immediate priority in partnership with industry. This will be complemented with deep partnership and engagement with individual firms, with a particular expansion of relations with UK growth firms.
- Industrial secondees The OLS will seek to maintain and grow the role that industrial secondees, appointed with regard to the Civil Service Code and, where appropriate, with the approval of the Civil Service Commission, can play in supporting delivery of the Plan. Critically, these secondees will deepen government's understanding of the Sector.
- Life Sciences Competitiveness Indicators and annual Sector Plan implementation updates – The Government will continue to publish the Life Sciences Competitiveness Indicators on an annual basis, providing an objective assessment of the UK's performance in the Sector. Alongside this, the Government will publish an annual Implementation Update, summarising the progress in delivering the Plan and performance against the listed metrics.
- Clinical engagement and joint work with the royal colleges and professional bodies Effective clinical engagement is crucial for the successful uptake and implementation of new technologies and treatments.
- The Life Sciences Large Investment Portfolio The new, bespoke approach, will be instrumental in supercharging government's efforts to make the UK internationally competitive and will support investments over £250 million.

4.3 Implementation

The Sector Plan's potential hinges on strong execution. While previous governments have published a variety of plans relating to the sector, industry feedback has demonstrated that implementation has been variable and progress opaque.

To address this, each action in this Plan is clearly articulated and includes metrics through which performance can be measured, as well as the lead official accountable for delivery, known as the Senior Responsible Officer (SRO). These are summarised in Annex A. All SROs will be accountable to the Life Sciences Delivery Board, chaired by the Minister for Science, DSIT; the Parliamentary Under-Secretary of State, DHSC; and the Minister for Investment, DBT.

While we acknowledge that there are ongoing challenges within the sector, we have solid foundations from existing initiatives to guide our approach. The insights from the O'Shaughnessy Review, which identified key challenges and provided 27 recommendations for transforming the UK commercial clinical trials environment, will be instrumental in guiding our actions. The Sudlow Review will be equally crucial in guiding our approach to health data. Furthermore, the Science and Technology Framework outlines a holistic approach to leveraging critical technologies and driving growth through science and technology. The Technology Adoption Review, which aims to identify and remove barriers to the adoption of transformative technologies, has informed our strategy. These examples illustrate the breadth of efforts already underway. This Sector Plan will build on these foundations.

4.4 How we will measure success

This Plan transparently sets out both the Government's overarching targets for this Plan - summarised in the Vision section of this document - as well as the individual metrics through which each action will be judged.

As noted above, an annual Implementation Update will transparently summarise progress against both the overarching targets the Government has set for the growth of the sector, as well as on an action-by-action basis.

The Government has established a ministerially chaired Life Sciences Delivery Board, bringing together public sector leaders, to assess progress and drive delivery. This Board will report on a six-monthly basis to the Life Sciences Council, which will serve as the senior government/industry forum through which delivery of this Plan is assured.

As part of a centralised Monitoring and Evaluation process, six core metrics will be used to monitor the impact of all Industrial Strategy Sector Plans. These metrics will measure; exports, business investment, GVA, productivity growth, labour market outcomes, and the number of new, large 'home grown' businesses.

4.5 How we will update this Plan

The Government has attempted to future-proof the Plan by focusing on fundamental activity that can support the long-term growth of the sector. Where technological advancements or global issues impact the appropriateness of some actions, or their delivery, government will engage in a transparent manner with industry to agree a revised approach.

The Government will plan to formally review this Plan, and its delivery, in 2030, unless there is a fundamental reason to do so at an earlier stage – in order to provide stability and certainty of future action.

We envision a world in 2035 where the UK is at the forefront of innovation, health, and prosperity. A world where groundbreaking discoveries become life-saving treatments, and our Life Sciences sector fuels economic growth and enhances healthcare outcomes across the nation. The delivery of this vision starts today.



PLAN THROUGH TO 2035

2025

(Medtech) By July 2025: MHRA Publication
 of Medical Devices Statement of Policy Intent
 on Early Access and Innovation.

 (Pharma and MedTech) By September 2025: MHRA will be providing easily accessible scientific advice and will publish specific, published performance metrics.

• (Pharma and MedTech) Summer 2025: The Global Talent Taskforce will be established, which will help attract talent from the IS-8, including Life Sciences.

• (Pharma and MedTech) Autumn 2025: Turing AI Pioneer Fellowship applications open which Life Sciences Talent can apply to.

 (Pharma and MedTech) By Autumn 2025:
 Government will publish a 10 Year UK Research Workforce Strategy and a 3 year implementation plan for England.

• (Pharma and MedTech) By Autumn 2025: Government will publish a 10 Year UK Research Workforce Strategy and a 3 year implementation plan for England.

• (Pharma and MedTech) By October 2025: Publication of NIHR's improving health and economic growth delivery plan.

- (Pharma) By December 2025: Publication of "Replacing animals in science: A strategy to support the development, validation and uptake of alternative methods".
 - (Medtech) By end 2025: Value Based Procurement Pilot Launch.

• (Pharma and MedTech) By end 2025: The OLS will work with the Futures Group on a series of skills-focused industry workshops.

 (Pharma and MedTech) By the end of 2025: The Department for Education will develop a new Post-16 Education and Skills Strategy, fulfilling a key government manifesto commitment.

2026

- (Pharma and MedTech) By March 2026: Commercial Clinical Trial approval and set up time will be 150 days or less.
- (Pharma and MedTech) By March 2026: UKRI will have delivered improved coordination with NIHR activity and be working to support SMEs.
- (Pharma and MedTech) By March 2026: UKRI will have identified game-changing technologies for IUK Biomedical Catalyst support.
- (MedTech) By April 2026: RBP will be launched, including referrals to the NICE Technology Appraisal process.
- (Pharma and MedTech) By end Q1 26/27: The BBB will begin deploying new Industrial Strategy capital.
- (Pharma and MedTech) By end Q1 26/27: The BBB will enhance monitoring and reporting functions to track investments into IS sectors.
- (Pharma and MedTech) By June 2026: DHSC will have created a single searchable database of clinical trial activity.
- (Pharma and MedTech) Spring 2026: Complete implementation of 7 healthcare Centres of Excellence in Regulatory Science and Innovation.
- (Pharma and MedTech) By September 2026: MRC will support the development of OSCHR-led UK-wide research portfolio database and management tool.
- (Pharma and MedTech) By September 2026: Launch of the minimum viable product for the HDRS.
- (MedTech) By Summer 2026: MHRA will publish a new framework for Medical Devices, including Al.
- (MedTech) By Autumn 2026: For Medical Devices, DHSC will introduce a pre-market statutory instrument, including an International Reliance Framework, to Parliament.
- (Pharma and MedTech) From December 2026: New data assets will be brought into scope for the HDRS on a prioritised basis.
- (Pharma and MedTech) By end 2026: NIHR will launch an Al Research Screening Platform.
- (Pharma and MedTech) By end 2026: In relation to data access, use and sharing, and Parliament permitting, the Government will pass regulations reforming the current Health Service (Control of Patient Information, COPI) Regulations of 2002.
- (Pharma and MedTech) By 2026: MHRA will have delivered digital transformation to better support industry applications and enquiries.

2027

• (Pharma and MedTech) By end Q4 26/27: The BBB will begin publishing VC investment return data.

• (Pharma and MedTech) By April 2027: The innovative Device Access Pathway (IDAP) will be rolled out as a permanent programme and complete the refresh of the Innovative Licensing and Access Pathway (ILAP).

• (Pharma and MedTech) From April 2027: HDRS will begin creating UK-wide service.

 (Pharma and MedTech) By the end of 2027: Industry engagement will launchas part of a review of priority skills needs of the Life Sciences sector.

2028

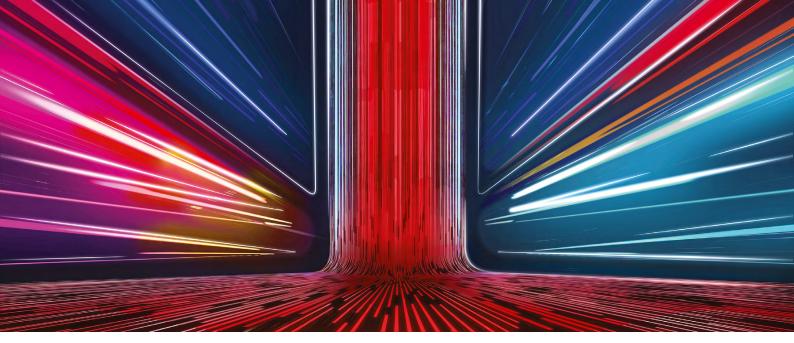
 (Pharma and MedTech) By 2028: MRC will establish a further two translational research networks.

2026

- (Pharma and MedTech) By end 2026: As part of our pre-clinical translational infrastructure, MRC will
 - Establish a Pre-Clinical Translational Hub.
 - Establish at least one Translational Network.
 - Track industrial co-investment leveraged by Network(s).
- (Pharma and MedTech) By end 2026: Implementation of reform to the wider NHS research data access approvals and governance system in relation to data access, use and sharing, and, subject to legislative progress.
- (Pharma and MedTech) By end 2026: Launch the NIHR Innovation Catalyst.
- (MedTech) By end 2026: NICE will ensure 60% of Technology Appraisals started in 2025/26 are published within 240 working days of NICE's Invitation to Participate.
- (MedTech) By end 2026: The NHS will introduce an Innovator Passport.

2030

- (Pharma and MedTech) By 2030: The NIHR Innovation Catalyst will ensure at least 2 innovations supported by going through regulatory approvals and being considered for adoption.
- (Pharma and MedTech) By 2030: Our Future Health will be the largest longitudinal health research and clinical trials resource globally, with samples, genomic and linked health data from up to five million participants, with 50,000 taking part in commercial clinical trials per year.
- (Pharma and MedTech) By 2030: UK Biobank will expand its biomedical research resource with enhanced participant characterisation.
- (Pharma and MedTech) By 2030: Genomics England will host one of the largest genomic research databases globally, with over 500,000 genomes.
- (Pharma and MedTech) By the end of 2030: Realised the ambitions of the Healthcare Goals by meeting the programme's Key Performance Indicators.
- (Pharma and MedTech) By the end of 2030: There will have been a sustained increase in R&D funding towards prevention and Multiple Long-Term Conditions – tracked via 'UK Health Research Analysis' data.
- (Pharma and MedTech) By the end of 2030: The OLS, Department of Education and Department for Business and Trade to review activity across all skills actions and set priorities.



Annex A – metrics and accountability table

Devolution

Where actions in the Sector Plan affect or involve devolved competencies, the UK Government will work in close partnership with the devolved governments to ensure effective coordination, agreement of appropriate SROs, and respect for different policy contexts. Delivery will be adapted where appropriate to align with the priorities, institutions, and regulatory frameworks of each nation. The OLS and delivery partners will maintain regular engagement with counterparts in the Scottish Government, Welsh Government, and Northern Ireland Executive to support joint working, avoid duplication, and maximise the impact of the UK-wide Life Sciences ecosystem.

Pillar 1 – Enabling World Class R&D

Action	Action Title	Metric	SRO
1	The Government will continue to invest at scale in discovery science.	 Levels of funding for discovery research through UKRI budgets. 	Executive Chair, Medical Research Council
2	(a) The Government will establish pre- clinical translational infrastructure to drive development of pre- clinical models as an alternative to animals and will develop up to three fully integrated translational networks in key disease areas. (b) The Government will, by the end of 2025, publish a strategy to support the development, validation, and uptake of alternative models to reduce, and where possible, eliminate the use of animals, ensuring that that the full suite of policy levers is deployed in addition to further investment in R&D.	 By December 2025, government to publish Alternative Methods Strategy. By 2026, establishment of Pre-Clinical Translational Hub. By 2026, the establishment of at least one Translational Network. Track industrial co-investment leveraged by Network(s). By 2026, establishment of Pre-Clinical Translational Hub. 	Executive Chair, Medical Research Council
3	The Government will cut bureaucracy and standardise contracts to reduce the set-up time for commercial interventional clinical trials to <150 days by March 2026.	 By March 2026, 95% of commercial interventional trial in England to deliver set up within 150 days (from IRAS submission to recruitment of first participant). Number of patients recruited to commercial interventional clinical trials per year. Number of commercial interventional clinical clinical trial starts per year. 	Chief Scientific Adviser, Department of Health and Social Care

Action	Action Title	Metric	SRO
4	Significantly expand commercial clinical trials capacity via funding from the Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) Investment Programme. UK-wide collaboration	• Impact metrics for the VPAG Investment Programme have been agreed via the VPAG Investment Programme Board, the governance structure responsible for the oversight of the Programme. Clinical trial impact metrics will be reported to the Board annually at the end of each financial year from March 2026 onwards.	Chief Scientific Adviser, Department of Health and Social Care
5	Substantially enhance the UKRI offer to Biotech and MedTech SMEs. UK	 By March 2026, improve coordination with NIHR activity. By March 2026, work with system partners to identify game changing technologies for IUK Biomedical Catalyst support. 	Executive Director, Healthy Living and Agriculture, Innovate UK
6	Substantially enhance the NIHR offer to Biotech and MedTech SMEs to develop and evaluate high value innovation, including new digital connectivity to increase the speed and scale of real-world evaluations of Al.	 By 2026, launch the NIHR Innovation Catalyst. By 2030, at least 2 innovations supported by the NIHR innovation catalyst going through regulatory approvals and being considered for adoption by the health and care system. By end 2026, Al Research Screening Platform stood up. 	Director, Science, Research and Evidence, Department of Health and Social Care
	England		

Action	Action Title	Metric	SRO
7	Establish the national HDRS.	• By Autumn 2025, the CEO and Chair for HDRS will be appointed.	CEO, HDRS
	England and > UK- wide collaboration	• By 2026, go live with minimum viable product for HDRS.	
		 From December 2026, new data will be made available in HDRS on an iterative basis. 	
		• By 2027 the service will measure user satisfaction with the service's capacity and capabilities through regular surveys, delivering continuously improving level of user feedback.	
		• By 2030, the HDRS will provide timely access and a single point of entry to the UK's breadth of general practice, hospital episodes, prescribing/ dispensing and death registration data covering the whole population, with Al-ready datasets including linked pathology, radiology and genomic data.	
		 Service design will be in collaboration with partners in the devolved governments. 	
		• HDRS will increase the number of data- enabled research projects, evidenced through an increase in the proportion of data access compared to data sharing and the number of data-enabled clinical trials conducted.	

Action Action Title

8

Government will use a combination of policy and legislative change to speed up access to health data for research and other secondary purposes, streamlining governance processes to maintain core safeguards while operating in a more efficient way.

UK

Metric

- By the end of 2026, parliament permitting, pass regulations reforming the current Health Service (Control of Patient Information, COPI) Regulations of 2002 to provide a clearer, more flexible rules-based legal basis for health and care organisations (and their data processors), to access, use and share de-identified information for secondary purposes.
- Subject to sufficient progress on legislative change, by the end of 2026, reform the wider NHS research data access approvals and governance system to better reflect risk and safeguards in the context of privacy protecting Secure Data Environments and move towards consolidating multiple research applications across different organisations into more streamlined processes, supporting delivery of the HDRS.
- By the end of 2027, build on public • engagement and work with the system, including clinical staff, to move towards national and regional models of decision making for access to all NHS data for secondary uses. GPs, other health professionals and the public will continue to have a critical role in decision making for research uses in any future system. Working collaboratively with the devolved governments and their respective approaches to accessing health data, seek to establish a common framework for UK-wide data access.

SRO

Director, Joint Digital Policy Unit

Action Action Title

- Metric
- 9 i Expand and enhance the UK's consented health research datasets and develop the cuttingedge infrastructure needed to deliver a comprehensive genomics ecosystem, maximising patient benefit, with the potential for genomics to contribute to half of all healthcare interventions by 2035 – Our Future Health.

UK

9 ii Expand and enhance the UK's consented health research datasets and develop the cuttingedge infrastructure needed to deliver a comprehensive genomics ecosystem, maximising patient benefit, with the potential for genomics to contribute to half of all healthcare interventions by 2035 – UK BioBank.

UK

9 iii Expand and enhance the UK's consented health research datasets and develop the cuttingedge infrastructure needed to deliver a comprehensive genomics ecosystem, maximising patient benefit, with the potential for genomics to contribute to half of all healthcare interventions by 2035 – Genomics England.

England

- By 2030, **Our Future Health** will have become the largest longitudinal health research cohort and clinical trials resource in the world, with up to five million consented participants with linked primary and secondary care health data, genomic data and biobanked samples, and 10,000 incident cases for more than 100 diseases occurring in the following 2.5 years. Our Future Health will also facilitate 50,000 participants in commercial clinical trials per year by 2030 (1% of consented participants).
- By 2030, **UK Biobank** will have expanded the impact of its pre-eminent biomedical research resource with enhanced characterisation of participants. This will include proteomic analyses of all 500,000 participants alongside other multiomic data, and their health outcomes via linked primary and secondary care health records available within the UK Biobank Research Analysis Platform, maximising the value of this data.
- By 2030, **Genomics England** will host one of the largest genomic research databases globally, with over 500,000 genomes, including those from the NHS Whole Genome Sequencing service, the Generation Study, and the Adult Population Genomics Programme. These programmes will return results to participants, while building evidence and digital infrastructure to position the UK as the leader in genomics-enabled prevention, diagnostics and clinical trials and the testing and use of genomic innovations and Al.

Director, Office for Life Sciences

Director, Office for Life Sciences

Executive

Chair,

Medical

Council

Research

SRO

Action	Action Title	Me	etric	SRO
9 iv	Expand and enhance the UK's consented health research datasets and develop the cutting- edge infrastructure needed to deliver a comprehensive genomics ecosystem, maximising patient benefit, with the potential for genomics to contribute to half of all healthcare interventions by 2035 – NHS Genomic Medicine Service.	•	The NHS Genomic Medicine Service will work with industry and academia through the NHS Genomic Networks of Excellence to assess the latest genomic innovations in specific priority areas, such as pharmacogenomics. This will ensure that the most effective tests are accessible to patients across England via the National Genomic Test Directory. Additionally, the GMS will work with industry to streamline testing processes, reducing turnaround times so that patients receive timely results.	Chief Scientific Officer, NHS England
10	The Government will shift investment in	•	Over the next five years, we will see a sustained increase in government health	Chief Scientific
	health R&D with a focus on primary and secondary prevention and Multiple Long-Term Conditions (MLTCs).		and biomedical R&D funding focused on this area, utilising UK Health Research Analysis to monitor this. There is potential to supplement this with more frequent reporting and monitoring of	Adviser, Department of Health and Social Care
	UK		health research funding to create a regular view of expenditure.	
11 i	The Government will promote closer coordination and collaboration across the UK health and Life Sciences research funders – creation of a UK-wide research portfolio database and management tool .	•	By September 2026, an OSCHR-led, UK-wide research portfolio database and management tool will have been created.	Executive Chair, Medical Research Council
11 ii	UK Government will promote		By June 2026, design and create a	Chief
	closer coordination and collaboration across the UK health and Life Sciences research funders – single searchable database of clinical trial activity .		single searchable database of clinical trial activity.	Scientific Adviser, Department of Health and Social Care
	UK			

Action	Action Title	Metric	SRO
12	The Government will update NIHR's governance model and require the NIHR to work to a dual health and growth mandate, driving focus on activity which is growth- maximising alongside improving health outcomes, building a strong foundation for future research.	 By October 2025, set out a delivery plan and metrics for maximising economic growth paired with improving health. 	Chief Scientific Adviser, Department of Health and Social Care
	England		

Pillar 2 – Making the UK an Outstanding Place in which to Start, Grow, Scale, and Invest

Action	Action Title	Metric	SRO
13	The Life Sciences sector will benefit as the BBB commits an additional £4 billion of Industrial Strategy Growth Capital to support investment and growth in the IS-8.	 Total, and global share of, equity finance raised by private Life Sciences companies headquartered in the UK. 	CEO, British Business Bank
	UK		
14	Crowd-in additional global investment into UK Life Sciences by publishing the BBB's VC investment return data.	BBB VC to start publishing investment return data.	CEO, British Business Bank
15	Develop dedicated support for Life Sciences SMEs to export.	 Value of UK Life Sciences exports, split by pharmaceuticals and medical technologies. 	Director, Office for Life Sciences
	UK	 Tracking of sector sentiment and capability to export. 	
16	Build a training and skills system that delivers a diverse and highly skilled Life Sciences workforce England	 Tracking of sector sentiment on the strength of the UK Life Sciences training and skills system. 	Director for Skills, Department for Education
	Eligialia		

Action	Action Title	Metric	SRO
17	Maximise the use of existing programmes and deliver specific new programmes to improve sector-specific skills in identified high priority areas.	 Volume of individuals receiving training through initiatives; and individual and business feedback on the quality of these. 	Director, Office for Life Sciences
10			
18	Promote UK strengths to exceptional international Life Sciences talent through the Government's Global Talent Taskforce initiatives and ensure the visa system enables the movement of world class talent.	 Tracking of sector sentiment on the ease of recruiting globally mobile talent to the UK. 	Director for Global Talent, Department for Business and Trade
	UK		
19	Deliver the £520 million Life Sciences Innovative Manufacturing Fund (LSIMF). UK	 Number of LSIMF investments supported. Amount of private investment leveraged though the LSIMF. Number of jobs created and safeguarded by the LSIMF. Value of R&D spillovers delivered by LSIMF investments. 	Director, Office for Life Sciences
20	Continue to invest at scale in Life Sciences manufacturing innovation. UK	 Industrial investment leveraged through government funding for manufacturing process innovation. Overall impact through tracking Life Sciences manufacturing productivity. 	Executive Director, Healthy Living and Agriculture, Innovate UK
21	Continue to refine the implementation of the NHS Net Zero Roadmap. England	• The implementation of an agreed standard to measure progress towards net zero ambitions, supported by the health system and industry, for the Life Sciences sector.	Chief Commercial Officer, NHS England

Action	Action Title	Metric	SRO
22	Land at least one major strategic partnership per year over the spending review period. UK	• The number of, and value of, investments achieved from new strategic partnerships secured across the health system.	Director, Office for Life Sciences
23	Establish a dedicated service to support 10-20 high-potential UK companies to successfully scale, invest and remain domiciled in the UK.	 Number of Life Sciences companies listed on FTSE 350. Number of IPOs by UK Life Sciences companies on the LSE and on overseas markets and amount raised overall. Number of people employed by UK Life Sciences SMEs. 	Director, Office for Life Sciences
24	Empower the Health Innovation Network to drive innovation and investment at scale by strengthening support. England	 At least £400 million of investment leveraged through Health Innovation Network support per year. At least 1,000 jobs safeguarded or created through Health Innovation Network support per year. At least one million patients benefitting a year from Health Innovation Network national programmes. 	Director, Office for Life Sciences

Pillar 3: Driving Health Innovation and NHS Reform

Action	Action Title	Metric	SRO
25	Reduce unwarranted barriers to market entry, through faster, risk-proportionate and predictable routes to regulatory approval. UK	 Delivery against the MHRA's statutory performance standards for the licensure of new medicines. Completion of the current medical devices regulatory reform programme, including: Publication of policy intent for early access and innovation by July 2025. Introduction of the pre-market statutory instrument, including International Reliance Framework, to Parliament by Autumn 2026. MHRA digital transformation for processing enquiries and applications, using Al where appropriate by 2026. 	CEO, MHRA
26	Streamline market entry and ensure patients receive the most effective care, by ensuring NICE processes are timely, agile and transparent. England	 60% of Technology Appraisals started in 2025/26 to be published within 240 working days of NICE's Invitation to Participate. EFPIA WAIT statistics on medicines access. 	CEO, NICE
27	Streamline market entry, though enhanced coordination between the MHRA and NICE. UK/England	 By April 2026, provide easily accessible provision of high-quality integrated scientific advice, with specific, published performance metrics on timelines to respond to requests for scientific advice and timelines to meetings occurring. The Innovative Device Access Pathway (IDAP) to be rolled out as a permanent programme by April 2027, and the refresh of the Innovative Licensing and Access Pathway (ILAP) will continue. Both pathways will have published KPIs on the number of companies and variety of products supported through each route. 	CEO, MHRA

Action	Action Title	Metric	SRO
28	Reduce friction in the system to optimise access and uptake of new medicines so the most clinically and cost-effective can reach patients faster. England	 Medicines uptake reported within the Life Sciences Competitiveness Indicators and Innovation Scorecard. IQVIA reporting on biosimilars uptake. 	Director, Medicines Value and Access, NHS England
29	Streamline access and adoption of MedTech by reducing duplication and introducing low- friction procurement and contracting mechanisms.	 The number of MedTech HTAs. The number of products receiving reimbursement through the RBP and Value Based Procurement mechanisms, and their consequent level of uptake. 	Director, Medical Technologies, Department of Health and Social Care
30	England	The properties of procurements	Chief
30	The Government will place a Growth Mandate on NHS commercial activity including NHS Supply Chain and within the Medicines Procurement	 The proportion of procurements completed using the Value Based Procurement methodology, and their consequent level of uptake, measured across companies of all sizes to enable comparison between large organisations and SMEs. 	Chief Commercial Officer, NHS England
	and Supply Chain Frameworks.	 The proportion of tenders using the Value Based Procurement 	
	England	methodology, and their consequent level of uptake, measured across companies.	
31	Strengthen innovation metrics for medicines and MedTech through an updated and	• Number of products/groupings for which an estimate of expected uptake is published in the Innovation Scorecard.	Director, Office for Life Sciences
	expanded Innovation Scorecard.	 Number of MedTech products with published uptake data. 	
	England		

Action	Action Title	Metric	SRO
32	Deliver the ambitions of the Government's Healthcare Goals programme, across Addiction, Cancer, Dementia, Mental Health, and Obesity, with continued significant government funding.	 Each Goals programme is focused on the delivery of quantifiable and timebound KPIs. These will be published on the <u>Healthcare Goals</u> <u>Webpage</u> following the outcome of Phase 2 of the Spending Review 2025. 	Director, Office for Life Sciences
33	Establish Regional Health Innovation Zones for large scale development and implementation of innovation, for scale- up across the health and care system. England	 Number of alternative delivery pathways trialled and ready to be scaled nationally. Number of patients benefitting from new care delivery pathways. Investment leveraged through industry co-partnership. 	National Director of Transformation, NHS England

Endnotes

¹ Where responsibility for delivery of a particular actions sits with NHS England, the relevant member of NHS England staff is listed as the Action SRO. It is expected that, as part of the upcoming closure of NHS England, the SRO responsibility for the relevant actions will transition to the appropriate member of the Department of Health and Social Care's executive team.

