Healthy High Streets

Stronger health, stronger high streets

A study into how high street healthcare can power healthier communities, and stronger local economic growth

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01 | Foreword

High streets have changed and will keep changing in future. The ones that thrive will adapt to new consumer habits and offer social connections and in-person experiences.

The pressures are well known: online shopping, rising costs, empty shops, anti-social behaviour. Add to that the struggle to get a GP appointment or see an NHS dentist.

But customers tell us their high street matters - to their health, local economy, and community pride.

Boots has a proud history and high street presence, with 1,800 stores including pharmacies, opticians, and hearing care. Our purpose hasn't changed since our founder Jesse Boot outlined it over a century ago: keep people healthy through convenient access to medicines, healthcare products and services.

High streets are the beating heart of local communities, and this report shows that more convenient and accessible healthcare provision can drive their renewal.

Public First's research is clear: people want more healthcare services on their high street and providing it would deliver real benefits - for public health and local economies. Better provision would support a healthier, more productive workforce. The footfall and spend generated would keep high streets healthy in turn.

Pharmacies are highly valued and trusted. Boots has delivered 1.8 million Pharmacy First appointments in England since January 2024, and a new wave of Independent Prescribing pharmacists means we're ready to do more - meeting the public's appetite for more clinical services like vaccinations, weight management, screening and diagnostics, enhanced eye and hearing tests, and managing conditions such as diabetes and cardiovascular disease.

The upside to this vision is better health outcomes, reduced pressure on the NHS, and stronger local economies. 94% of people say expanded healthcare provision would bring them to their high street more often, unlocking a potential £13bn boost for local businesses.

This is a win-win opportunity for Government as it develops its High Streets strategy and implements the NHS 10 Year Plan, and at Boots, we stand ready to play our part in helping to realise these ambitions and build healthier communities.

Anthony Hemmerdinger
Senior Vice President & Managing Director, Boots UK and Ireland

02 Executive summary

Expanding healthcare on the high streets could help address two of the country's biggest challenges at once: access to care and the future of local high streets.

Research for this report tests that proposition through public polling and new economic modelling to quantify the potential benefits of more healthcare being provided on the high street. It finds that both issues matter deeply to the public. Nearly half (49%) say their local high street is getting worse, while access to healthcare is seen as one of the most important challenges facing the country.[1]

The research also shows there is strong public demand for more healthcare to be delivered locally, and that doing so could deliver significant health and economic benefits. This would improve patient outcomes, reduce pressure on the NHS and increase footfall and spending on high streets.

The direction of policy supports this shift. The NHS 10 Year Health Plan is focused on delivering more care in the community in England via the neighbourhood health programme, while the Government is developing a new High Streets Strategy to restore vibrancy and pride in town centres.

Taken together, this creates a clear opportunity to expand healthcare on the high street – through community pharmacies, opticians, hearing care providers and other in-person services – in ways that benefit both patients and places.

There is strong demand for more healthcare on high streets

Healthcare has long been part of the high street, with services such as prescriptions, dental care and optometry delivered locally for decades. It is already one of the most frequently used services on the high street. Its role is now evolving, with the potential to support a broader range of health needs:

- Our polling finds that the public places importance on a wide range of healthcare services being available on their local high street. This includes not only core services such as GP surgeries and dental care, but also services such as diagnostics, vaccinations, management of long-term conditions and mental health support.
- Community pharmacies are already central to this shift towards more accessible, community-based care. People visit community pharmacies an average of 30 times a year (around 2.5 times a month), and 54% of adults regularly collect prescriptions from them.
- High street healthcare providers are trusted and widely used, with 74% of the public seeing pharmacies as an essential feature of the high street, rising to 81% among those aged 65 and over.

[1] Public First conducted an anonymous, online survey of 2,015 adults across the UK from 16th - 30th January 2026. All results are weighted using iterative proportional fitting, or 'raking'. Results are weighted by interlocking age and gender, region, and social grade to nationally representative proportions.

There is significant unmet demand for a broader range of services

While some healthcare services are already widely available, our research finds significant unmet demand for a broader range of care to be delivered locally. Expanding the range of healthcare services available on local high streets would drive significant increases in service use:

- 62% would be more likely to use dental care if made more available on the high street.
- 57% would use health screening and diagnostic services more often.
- 56% would be more likely to use support for minor conditions, and 52% vaccination services.
- Demand also extends to managing long-term conditions (43%), eye care (53%), hearing care (40%) and weight management and healthy living support services (38%).

These findings point to the potential for high streets to support a broader model of community-based care.

Expanding healthcare on the high street would improve health outcomes and drive economic productivity

Economic modelling conducted for this report finds that meeting this demand would deliver substantial benefits for patients and the wider population:

- Expanding access to flu vaccination through high streets could prevent 192 deaths, save 15 million working days and generate £3 billion in economic value each year.
- Increased uptake of weight loss medication could save 12 million sick days and protect £4 billion in economic output each year.
- Better management of chronic conditions could prevent a further 1.6 million sick days and save £1 billion annually.

Many of these services are preventative or support earlier diagnosis and treatment, reducing the likelihood that conditions worsen and require more intensive intervention later.

£4 billion

could be saved in economic output annually from lower worker absenteeism due to obesity-related sickness

12 million

sick days could be saved annually from greater provision, and uptake, of weight loss medication to workers considered clinically obese or very obese

It would also reduce pressure on the NHS and primary care

Expanding community-based care would reduce pressure on primary care and make better use of the clinical workforce:

- An expansion of the Pharmacy First programme could deliver 14.6 million fewer GP appointments.
- This would save the NHS £314 million annually, equivalent to paying the salaries of 8,000 nurses or purchasing 425 new MRI machines for NHS hospitals.

Healthcare can help revitalise high streets

Crucially, expanding the provision of healthcare would help to drive high street renewal by increasing footfall and supporting surrounding businesses:

94%

of UK adults are likely to visit other shops with more accessible healthcare services

£15

would be spent per person in local shops as a result of each additional trip caused by more accessible healthcare services

£13 billion

could be added annually to the UK high street economy as a result of more frequent visits for healthcare services

A pathway to healthier high streets

To realise these benefits, the Government, local authorities and healthcare leaders should take a series of practical steps to expand local healthcare provision and support thriving high streets, including:

- Expanding community-based healthcare provision by encouraging neighbourhood health leaders to work closely with high-street providers to deliver a broader range of services, integrating them into local care pathways.
- Recognising the role of healthcare in driving footfall and supporting local economies in the High Streets Strategy and encouraging local areas to integrate healthcare provision into local strategies.
- Creating the right conditions for healthcare-led high street renewal by addressing the high cost of operating premises, tackling levels of crime and anti-social behaviour, and ensuring planning, transport and business policy support accessible, mixed-use destinations and diverse and accessible town centres.

These steps would build on a clear alignment between public demand, government policy and the priorities of the community pharmacy sector, all of which point towards a greater role for community-based healthcare on the high street. They would also deliver on a clear public priority, with four in five adults (80%) believing the Government should do more to expand access to in-person healthcare services in their local community.

03 The connection between healthcare and high streets

Two of the issues that matter most to people across the country are access to healthcare and the state of their local high street. Both shape everyday life in immediate and visible ways. Whether it is waiting weeks for a doctor's appointment or seeing familiar shops disappear from the local town centre, the effects of poor access to healthcare and visible high street decline are felt directly in the communities that people live in.

49%

of the public believe their local high street is getting worse.

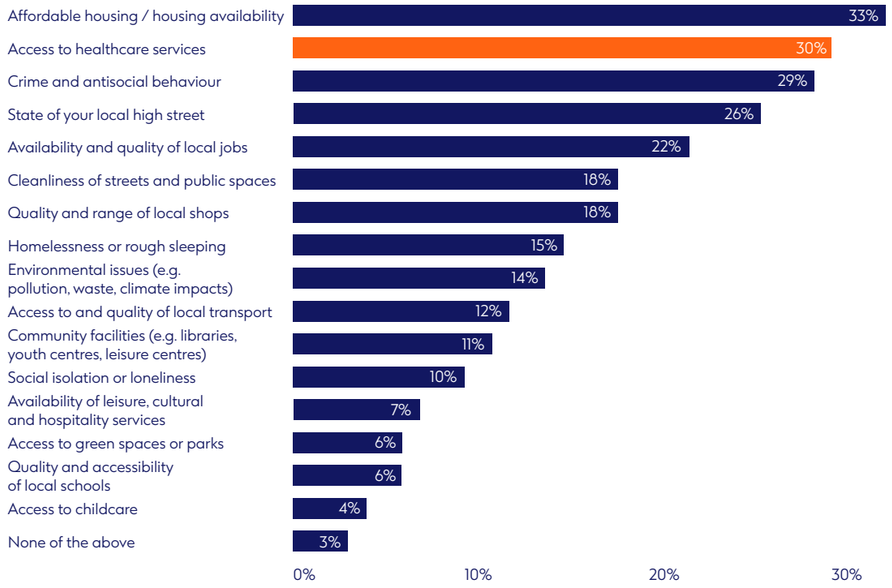
30%

of the public view access to healthcare services as one of the top three most important issues locally.

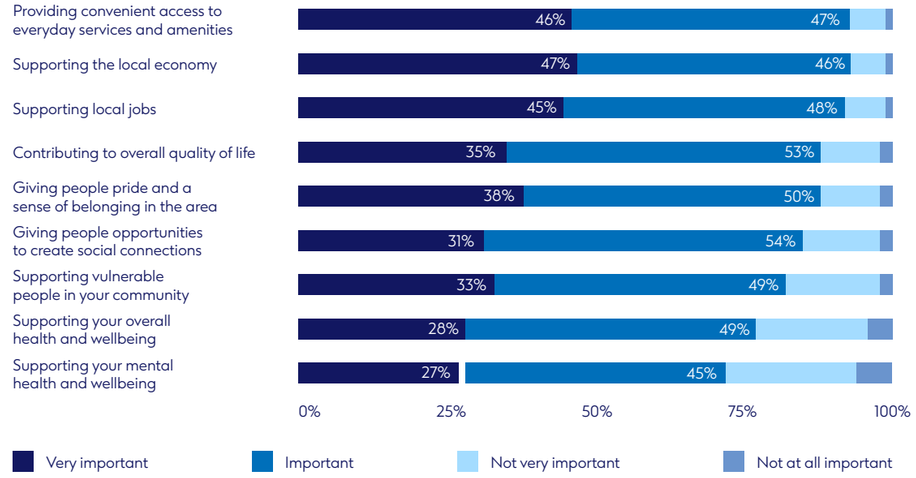
Our research shows that both rank among the public's top priorities. Access to, and quality of, healthcare are seen as two of the most important challenges facing the country, behind only cost of living, immigration and the economy. Access to healthcare is seen as the second most important issue locally behind only housing, which is in itself a fundamental social determinant of health.[2]

[2] https://www.health.org.uk/reports-and-analysis/briefings/moving-to-healthy-homes

Which do you think are the most important issues facing your local area at this time? Select up to three.



How important would you say your local high street is with regard to the following?



At the same time, high streets remain central to community life, even as many people feel they are no longer what they once were. This is especially true for older generations. Among those aged 65 and over, access to healthcare and the condition of the local high street are the two most important local issues. This likely reflects the importance of healthcare services to this age group and the higher frequency with which they visit high streets than younger generations.

High streets are seen by the public as essential for a variety of reasons. They support jobs and local economies, give people access to important services and help them lead more enriching lives. They also play an important social function, giving people somewhere to meet and connect, supporting physical and mental health, while fostering local pride. Thriving high streets depend on a diverse mix of retail, services and public amenities that reinforce each other and attract both customers and investment.

High streets are seen to be struggling

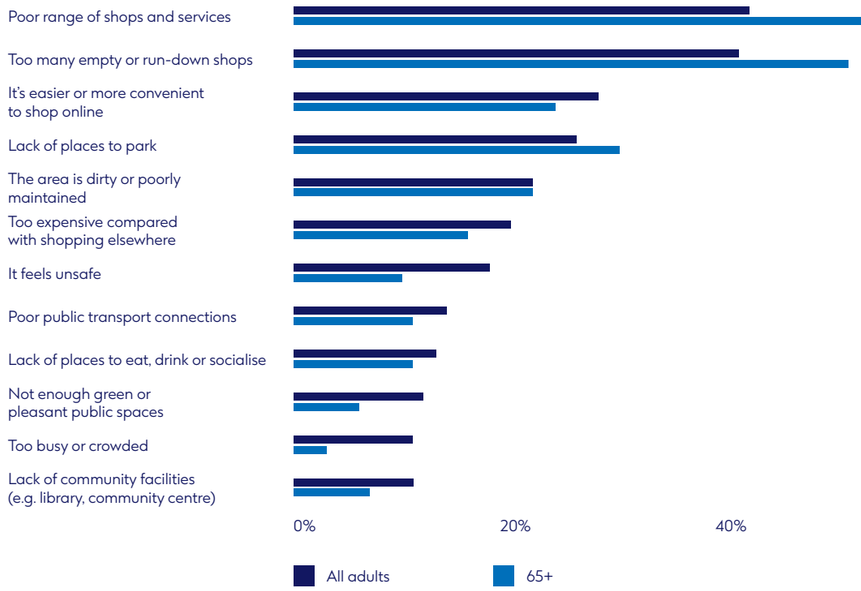
Despite their importance to everyday life, almost half of people feel their high street is getting worse (49%). High street decline has been recognised by policymakers for some time and has been the focus of multiple reviews, strategies and interventions in recent years.

However, our research shows that these concerns remain widespread. Perceptions of decline persist across the political spectrum – 44% of those intending to vote Labour, 51% Conservative, 47% Liberal Democrats, 65% Reform UK and 40% Green. Despite sustained policy attention, many people do not feel conditions on their high street are improving.

High street decline is most often attributed to two core issues: a poor range of shops and services and there being too many empty or run-down shops. These views are held particularly commonly by people aged 65 and over. The rise of online shopping, difficulties parking, safety and cleanliness are also seen as important reasons why people don't use high streets more regularly.

The public's perception that high streets are struggling is borne out by wider data, which shows high streets facing continued structural and behavioural pressures.

Which of the following, if any, do you see as barriers to using your local high street more often? Select all that apply.



While vacancy rates have fallen in recent years – reaching 13.4% in Q4 2025[3] – this still represents a significant level of empty units, with around one in eight high street properties vacant. Many areas, particularly those outside of major cities where property demand is weaker, experience much higher vacancy rates. For example, recent analysis by the Centre for Cities found that city centre shop vacancy rates in Newport and Bradford are more than double those in London and Cambridge, driven by weaker local spending power and an oversupply of retail space relative to population.[4]

This reflects a systemic imbalance in the supply and use of high street space. Recent data from the British Retail Consortium shows there is around 30.7 million square feet of retail space available across Great Britain, equivalent to more than 500 football pitches, of which 77% is general retail, 5% is in retail parks and 18% is in shopping centres.[5]

At the same time, recent footfall data points to continued pressure on high streets. Visits to UK high streets fell by 5.4% year-on-year in February 2026, reflecting cautious consumer behaviour and a shift towards fewer, more purposeful trips.[6]

Together, these trends point to a high street that remains widely used and valued, but under increasing pressure and in need of renewal and diversification, highlighting the need to improve the range of services and overall experience of high streets.

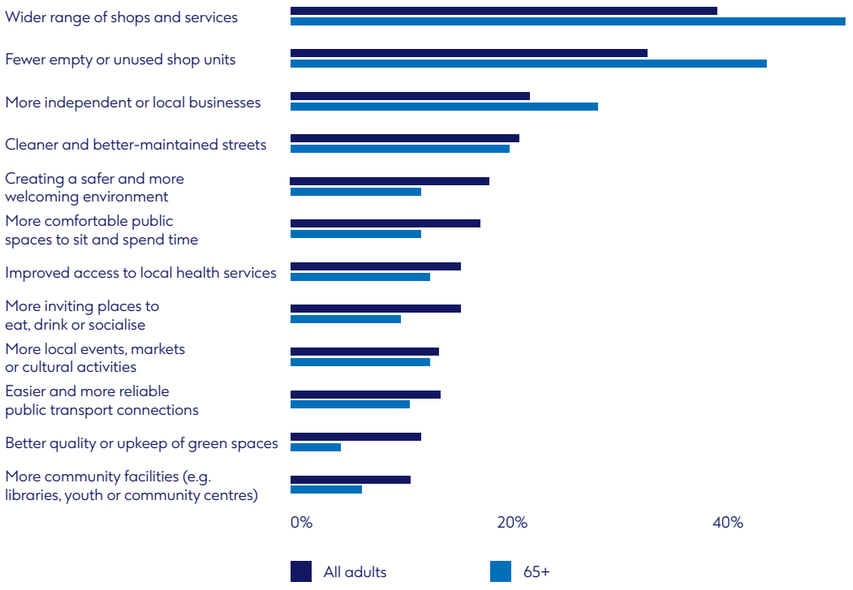
[3] Green Street analysis, accessed via Savills report on UK Retail & Leisure Q4 2025
[4] https://www.centreforcities.org/press/too-many-shops-not-enough-shoppers-empty-shops-indicate-an-oversupply-of-retail-space-in-city-centres/
[5] British Retail Consortium, Property Monitor, Q3 2025
[6] British Retail Consortium, Footfall Monitor, February 2026

What the public wants to see

While fading high streets are one of the most visible elements of local economic decline, they continue to play an important role in everyday life. Their future is an issue the public cares deeply about. People have a strong attachment to their local area, and high streets and town centres are central to that sense of place.

When asked what would make the biggest positive difference to their local high street, the public most often points to a better mix of shops and services (43%), alongside fewer empty units (36%). These priorities are even more pronounced among people aged 65 and over. They mirror the reasons why people say they do not visit their local high street more often.

Which of the following would make the most significant positive change to your local high street? Select up to three.



Together, the findings suggest that people want high streets to be places where they can access the services and amenities they use in everyday life. While factors such as cleanliness and green space also matter, the public ultimately wants high streets to be practical, useful and enjoyable places – somewhere they can shop, eat, meet others and access essential services that encourage people to spend time locally.

The opportunity

For years, improving healthcare access and the health of local high streets have been priorities for policymakers. Yet they are rarely considered together in practice. One is typically treated as a health policy issue and the other as an economic, regeneration and local government challenge.

Our research suggests people do not see the same divide. The public strongly links health outcomes to the places they live in, including their local high street, and place similar importance on the quality of their local area and proximity to healthcare services.

71%

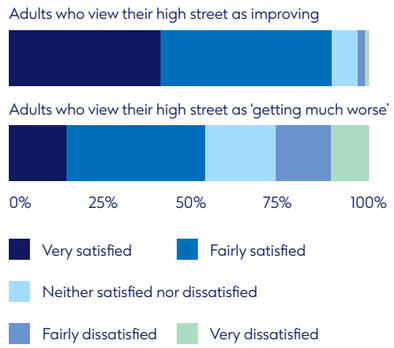
of UK adults who believe an individual's local area and nearest high street has a moderate or significant impact on their overall health.

77%

of UK adults who believe an individual's distance from their closest healthcare provider has a moderate or significant impact on their overall health.

Those who think their local high street is worsening are also significantly more likely to be dissatisfied with the availability of healthcare services on their high street – at roughly twice the rate of the general population, and eight times those who think their high street is improving. They are also less likely to report being satisfied overall. In other words, where people feel their high street is in decline, they are also more likely to feel that healthcare provision on it is not meeting their needs.

How satisfied are you with the availability of healthcare services on your local high street?



This points to an opportunity. If high streets and healthcare are linked in people's lives, they can be strengthened together by expanding the role of healthcare on the high street. Providing more healthcare services on high streets would help revitalise town centres by boosting footfall and supporting other high street businesses.

This opportunity reflects both the importance the public places on the future of their local high street and the direction of policy. The Government's NHS 10 Year Health Plan is built around a shift from hospital to community settings like high streets via the neighbourhood health agenda[7] while ministers are working on a new High Streets Strategy to restore pride in town centres. Together, these create the conditions to improve healthcare access and the health of high streets at the same time. Doing so could not only help people get the care they need but also play a role in bringing new life to local high streets.

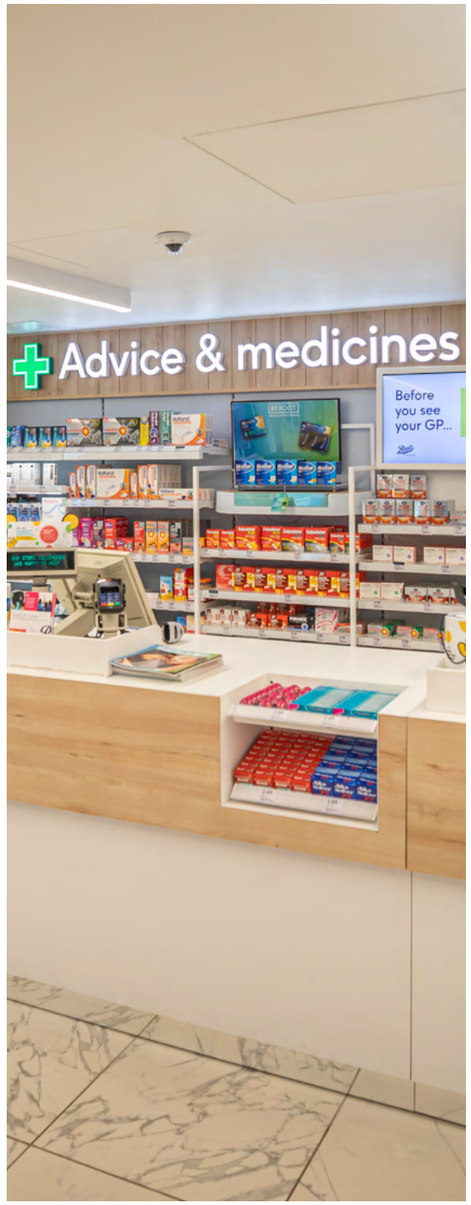
> *This Government recognises the incredible impact of the services provided by pharmacy teams and the vital role you play in communities across the country. That is why we have placed community pharmacy at the heart of our ambition for a Neighbourhood Health Service.*
>
> **Rt Hon Sir Keir Starmer MP, Prime Minister**

[7] https://www.gov.uk/government/publications/10-year-health-plan-for-england-fit-for-the-future

04 People want more healthcare on their high street

Healthcare has long been a fixture of the high street. Community pharmacies have been part of town centres for over a century, while services such as optometry and dentistry have traditionally been delivered through community-based providers, often located on or near high streets. Since the founding of the NHS in 1948, millions of people have accessed services such as prescriptions, eye tests and dental care close to where they live.

Today, high streets continue to play a central role in supporting people with their everyday health needs. Community pharmacies serve the vast majority of the population, with around 90% of people in England living within a 20 minute walk of one.[8] This accessibility, combined with their longstanding presence, has helped to build high levels of trust and familiarity with high street healthcare providers. As our research shows, the public strongly associate the health of their high street with local healthcare outcomes.

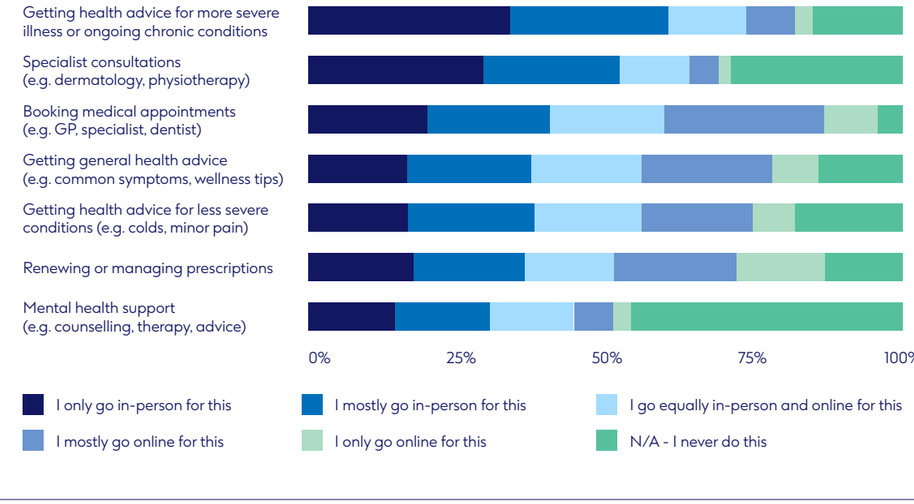


8 https://www.kingsfund.org.uk/insight-and-analysis/long-reads/community-pharmacy-explained

In-person care remains crucial

One of the most important ways high streets support health is by making in-person care accessible. While digital services play an important role, our research shows face-to-face care remains essential across all health services. It is especially important when people are seeking advice for severe or ongoing conditions or accessing more specialist support. Older generations say they are most reliant on in-person services.

Do you tend to go online or in-person for each of the following health services?

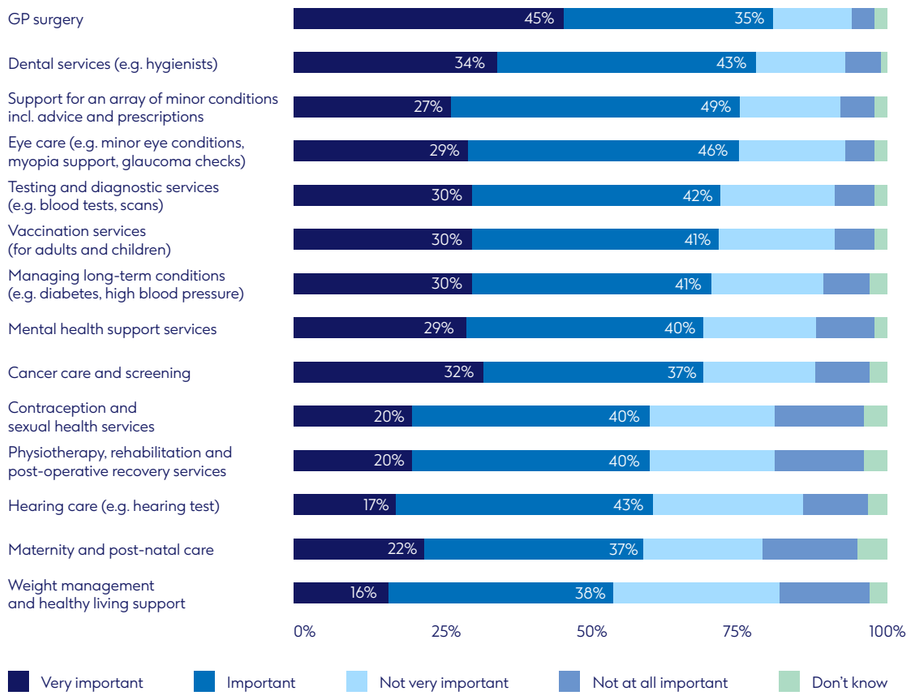


Why it's time to expand healthcare

The range of healthcare services delivered on the high street has expanded significantly in recent years. While services such as prescriptions, eye care and audiology have long been available locally, high streets are increasingly capable of delivering new clinical services such as testing, phlebotomy, and independent prescribing.

Our research shows that the public places importance on a wide range of healthcare services being available on their local high street. This includes not only core services such as GP surgeries and dental care, but also services such as vaccinations, diagnostics, the management of long-term conditions and mental health support. Across every healthcare service we asked about, a majority of the public said it was important for it to be available on their local high street.

Thinking specifically about healthcare services, how important is it for you to have the following services on your local high street?



While many of these services are already delivered in community settings – and in some cases on high streets, such as eye care and hearing services – they are not consistently available across all locations. This points to a clear opportunity to expand provision, building on an existing model that is already familiar and trusted.

How Boots is making eye care more accessible

46% of people think it's important to have access to eye care on their high street. Boots has been delivering that for decades.

Boots Opticians provides NHS community eye care across all its stores in Scotland, providing routine NHS eye examinations and supplementary urgent care, with patients able to self-present directly to their local practice without referral.

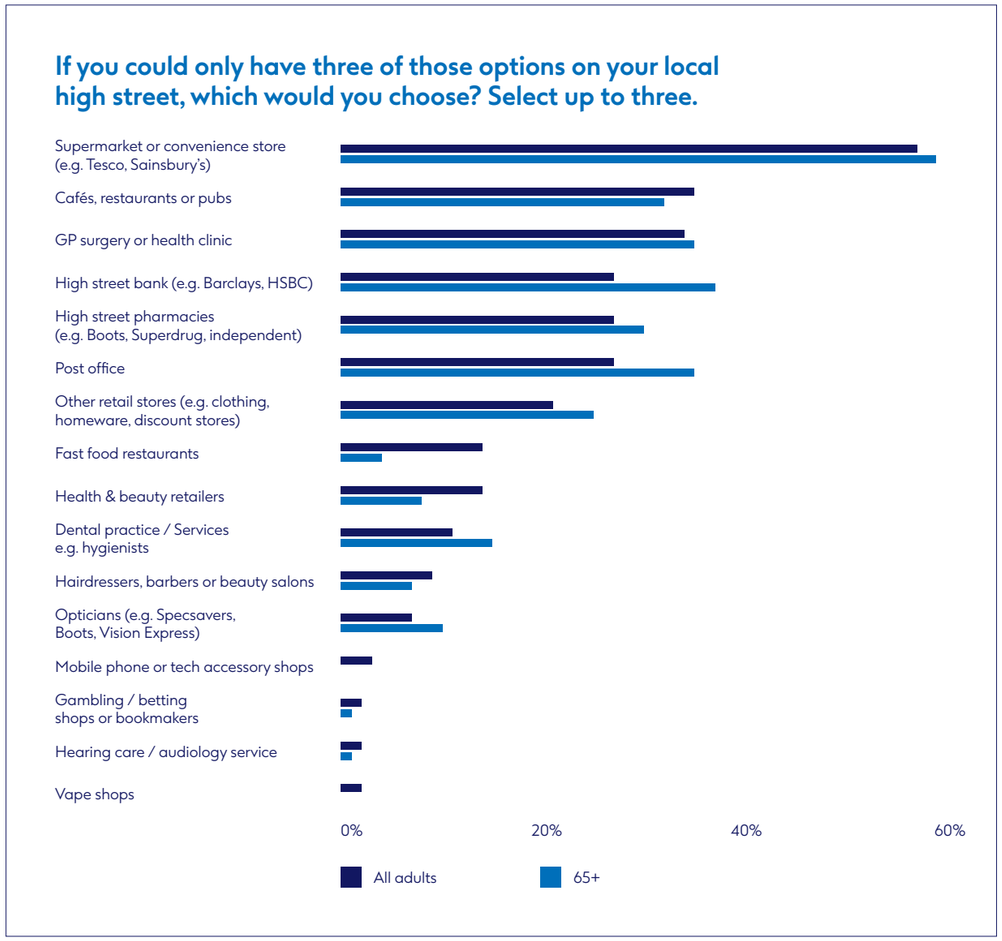
Optometrists act as the first point of contact for concerns such as red eye, pain, sudden vision loss, and flashes or floaters, providing triage, same-day examinations where necessary, and onward referral to hospital eye services when required.

Since August 2025, selected practices have offered Specialist Supplementary Examinations, enabling optometrists to manage 10 acute anterior eye conditions in the community. This enhanced service improves access to timely care and is expected to release approximately 40,000 hospital appointments annually.9

[9] https://www.aop.org.uk/ot/news/2025/04/03/specialist-supplementary-exam-to-beintroduced-under-gos-in-scotland-from-august

There's a strong demand for more access to healthcare

When asked to prioritise what they would most want on their local high street, healthcare services rank highly alongside core amenities such as supermarkets and convenience stores.



While supermarkets and convenience stores are the most selected option, GP surgeries or health clinics and high street pharmacies are seen as just as important as other essential services such as banks and post offices. This underlines the extent to which healthcare is now seen as a fundamental part of what a high street should offer.

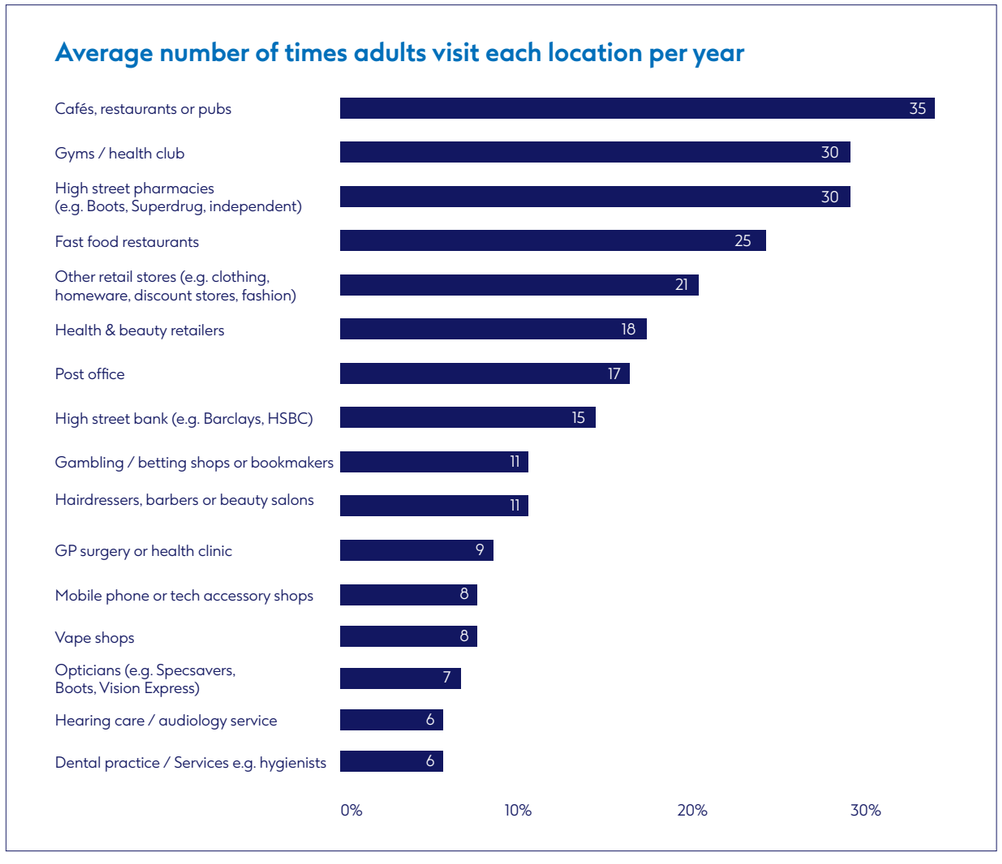
Community pharmacies have broad appeal across age groups. They rank especially highly among people aged 35-44 when compared to other high street options, while continuing to attract strong levels of support among older people.

Taken together, these findings point to a clear conclusion: the public want more healthcare delivered locally, and they see the high street as the natural place for it. Furthermore, healthcare providers such as community pharmacies and opticians have access to a skilled workforce with the capabilities required to deliver these additional services. Public services such as healthcare can act as anchor uses on the high street, driving footfall and supporting surrounding businesses to breathe new life into local high streets.

05 The importance of pharmacies - and how they can grow

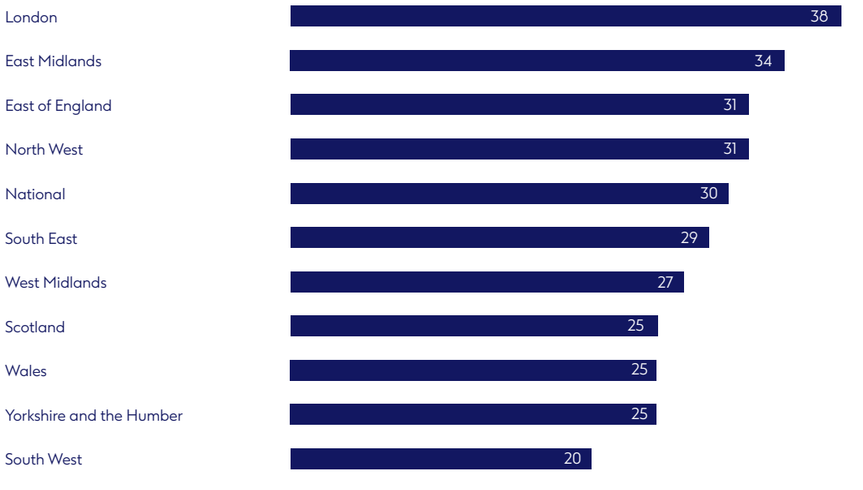
Community pharmacies already play an important twin role on the high street. They are both a valued local service and a significant driver of footfall, which is essential to sustaining local shops and services.

Our research shows pharmacies are the fourth most visited high street location, with adults making an average of 30 visits a year, or 2.5 times a month. Only supermarkets and convenience stores, cafés, restaurants and pubs, and gyms are visited more frequently. The data shows the extent to which community pharmacies are an everyday part of the high street for many people.



Pharmacy usage is consistently high across the country, though the frequency of visits varies by region. People living in London (38 visits a year on average) and the East Midlands (34) visit pharmacies most often, while those in the South West visit them least frequently (20). This variation likely reflects differences in population density, access to services and reliance on local high streets. However, across all regions, community pharmacies remain an everyday service, with even the lowest levels of usage indicating regular and sustained engagement with local healthcare provision.

Average number of pharmacy visits per year by region



Pharmacies are essential, trusted and widely used

Nearly three quarters of the public (74%) say pharmacies are an essential feature of local high streets, rising to 81% for those 65 and over. This reflects the central role community pharmacies already play in meeting day-to-day health needs.

Community pharmacies play a practical and vital role on local high streets. More than half of UK adults (54%) regularly collect a prescription from a pharmacy. Community pharmacies are also an important first port of call when people feel unwell. Among those who say they have been ill in the past year, almost half (48%) say they have bought over the counter remedies, while three-in-ten (30%) say they have sought help from a pharmacist. The survey results underline the importance of community pharmacies in providing access to medicines and providing accessible, community-based care and advice.

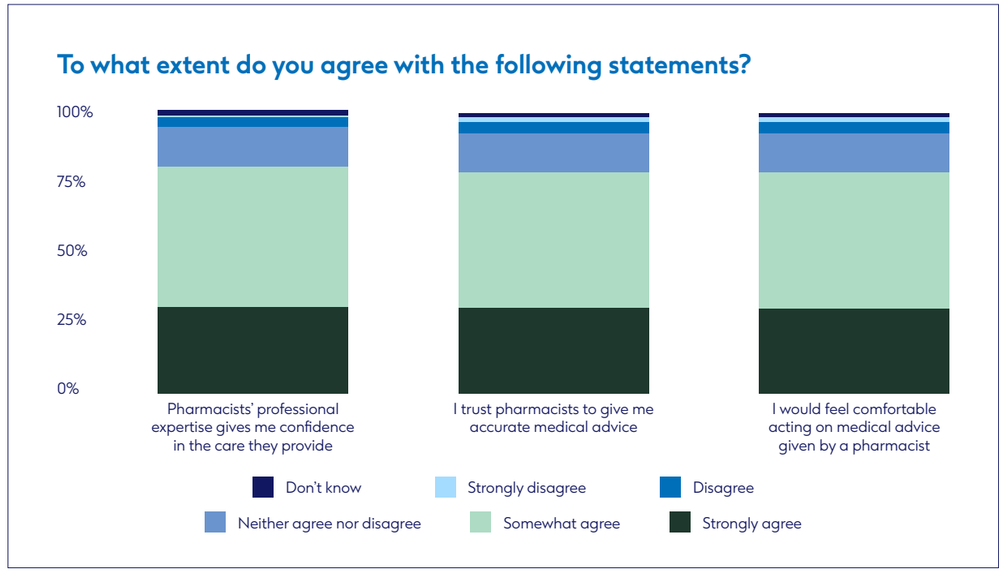
As well as being widely used, community pharmacies are highly trusted. Large majorities of the public say they trust pharmacists to provide accurate medical advice and that they would feel comfortable acting on what a pharmacist tells them. As a service that is accessible, routinely used and trusted, community pharmacies are uniquely well placed to play a bigger role in community healthcare as part of efforts to reduce pressure on the NHS.

54%

of UK adults have a prescription they regularly pick up from a pharmacy.

74%

of the general public see pharmacies as an essential feature of local high streets – rising to 81% for over 65s.



This reflects a growing recognition that community pharmacies are an underutilised clinical resource, with the potential to deliver more care in community settings and help manage demand across primary care and reduce pressure on GPs and urgent care services – a direction also set out in an independent vision for the sector developed by the Nuffield Trust and The King's Fund.[10]

This matters because trust and familiarity are essential to how people choose to access care. Pharmacies are already embedded in communities, used regularly and understood by the public. That makes them well placed to expand access to more convenient, community-based healthcare.

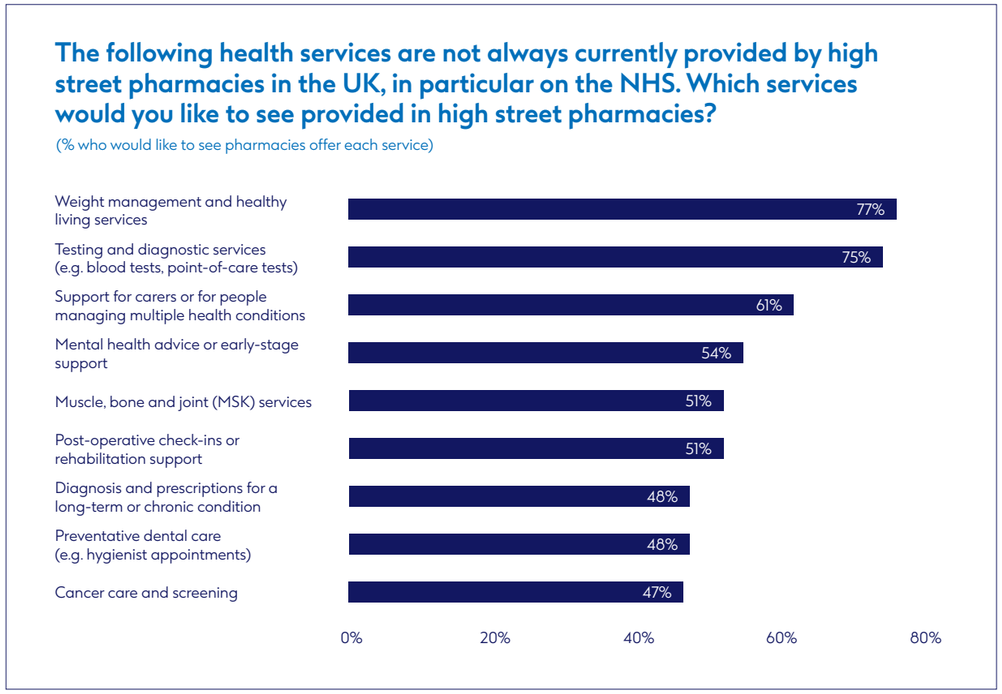
[10] https://www.nuffieldtrust.org.uk/sites/default/files/2023-09/Nuffield%20Trust%20and%20The%20King%27s%20Fund%20-%20A%20vision%20for%20community%20pharmacy_WEB_FINAL.pdf

The public wants community pharmacies to do more

There is strong public support for expanding the role of pharmacies on the high street. When asked what additional services they would like pharmacies to provide, people prioritise weight management and healthy living support, alongside testing and diagnostic services.

The public also backs community pharmacies playing a greater role in areas such as mental health services, rehabilitative support and post-operative check-ins.

Notably, support is not limited to a small number of services. Across every option tested, a significant proportion of the public said they would like to see community pharmacies provide that service on the high street.



This aligns with recent policy reforms, including Pharmacy First, along with the Government's 10 Year Health Plan and Neighbourhood Health Framework, which both encourage a larger clinical role for community pharmacy in improving access and relieving pressure elsewhere in primary care.

It also reflects the priorities of the sector itself, with Community Pharmacy England highlighting the potential for pharmacies to play a central role in neighbourhood health services and deliver more care closer to home.[11]

> *Pharmacies are a massive untapped resource. The NHS that we are building puts them front and centre of care in every community.*
>
> **Stephen Kinnock MP, Minister of State for Care**

There is an opportunity for community pharmacies to further evolve building on their clinical capabilities. Community pharmacies are increasingly recognised – both by the public and within the health system – as accessible clinical settings that can deliver a broader range of advice, support and treatment closer to home.

[11] www.cpe.org.uk/our-news/new-report-sets-out-opportunity-to-make-community-pharmacies-cornerstone-of-neighbourhood-health/

This includes playing a greater role in areas such as the management of long-term conditions, vaccination and preventative services, and the treatment of minor illnesses to build on programmes such as Pharmacy First. The continued rollout of independent prescribing will further expand the range of services pharmacies can deliver, enabling them to act as a first point of contact for a wider set of health needs.

Experience from other parts of the UK, including Scotland and Wales, demonstrates how expanding the clinical role of community pharmacy can improve access to care and reduce pressure elsewhere in the system. Community pharmacies have delivered a wider range of clinical services and operated with greater prescribing autonomy, providing a clear model for how similar approaches could be scaled further in England.

This reflects a wider vision for the sector, which positions community pharmacy as a cornerstone of neighbourhood health services, delivering more integrated, preventative and accessible care in local communities.[12]

How Boots is bringing clinical research to the high street

Community pharmacies and opticians can play a much bigger role in supporting UK life sciences - reaching a broader and more diverse population than traditional research settings.

Together with Civia Health, Boots has opened clinical research sites in five stores since January 2026, including Nottingham, Brighton and Peterborough, encouraging people to take part in locations that are on their doorstep.

In 2025, Boots partnered with the University of Oxford's Primary Care Clinical Trials Unit on the DURATION trial, with its Durham store recruiting women with UTI symptoms. Drawing on Boots' reach across 1,800 stores, the NIHR-funded trial aims to get 1,650 women involved.[13] These partnerships build on Boots' involvement in the NHS's largest ever health research programme - Our Future Health - which has reached more than one million participants.[14]

[12] https://cpe.org.uk/wp-content/uploads/2025/11/A-Prescription-for-Success-report.pdf
[13] https://www.boots-uk.com/newsroom/news/oxford-university-and-boots-test-pharmacy-trial-recruitment-following-pharmacy-first-rollout/
[14] https://ourfuturehealth.org.uk/news/our-future-health-becomes-worlds-largest-research-programme-of-its-kind/

06 Why the UK needs healthier high streets

Access to healthcare and the health of local high streets are among the public's top priorities. As this report has shown, there is also growing demand – from the public, policymakers and the sector itself – for a greater role for healthcare on the high street. Expanding healthcare provision on the high street offers a clear opportunity to address both together.

Our research shows that bringing more healthcare onto high streets would improve health outcomes, reduce pressure on the NHS and drive renewed footfall and spending on high streets. These benefits are closely linked. Making care easier to access locally encourages greater use of services, supports earlier intervention and brings more people into high streets. In doing so, it strengthens both public health and the sustainability of town centres.

Better outcomes from expanded community-based care

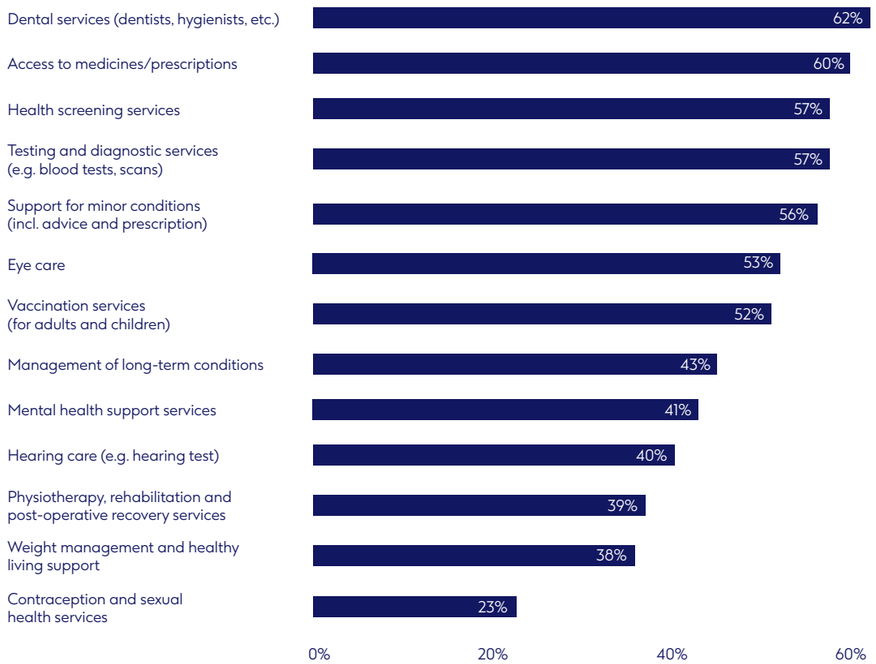
Expanding the range of healthcare services available on local high streets would drive significant increases in service use and enable earlier intervention. Our research shows that majorities of the public would be more likely to use a wide range of services – including dental care (62%), health screening (57%) and diagnostic services (57%) – if they were more readily available on the high street.

Demand also extends well beyond traditional services. People also report being more likely to use support for minor conditions (56%), vaccination services (52%) and support for managing long-term conditions (43%) if they were available on or near the high street. This highlights the gap between current provision and public expectations, with high street healthcare providers ready and keen to expand delivery of these services in local settings.

This is also evident for services already delivered through physical high street locations. For example, 53% say they would be more likely to use eye care services and 40% say they would be more likely to use hearing care services if they were more available on or near the high street.

You said the following health services are not available on or near your shopping area. Would you be more likely to use those health services if they became available?

(% who said they would be more likely)



These findings point to the potential for high streets to support a broader model of community-based care. While some healthcare services are already widely available, **there is significant unmet demand for a broader range of care to be delivered locally on the high street.**

Many of these services are preventative or support earlier diagnosis and treatment, reducing the likelihood that conditions worsen and require more intensive intervention later. Delivered on local high streets – through a mix of providers including pharmacies, opticians and other community-based services – they could help people access care more easily as part of their everyday lives.

To assess the potential impacts of meeting this demand, we modelled the impact of expanding three forms of preventative provision in particular: flu vaccination, access to weight loss medication and managing long-term chronic conditions.

Why the UK needs more access to flu vaccinations

Seasonal flu remains a significant public health challenge, placing pressure on the NHS each winter and leading to avoidable illness, hospitalisation and lost productivity. Increasing vaccination uptake is widely recognised by health experts and the NHS as one of the most effective ways to reduce this burden, particularly among vulnerable groups and working-age populations.[15]

Our research finds that over half of UK adults (52%) would use vaccination services more often if they were more readily available on their local high street. An expanded flu vaccination programme, made possible by increased access to local vaccination services, would have significant benefits for both health and the economy. By preventing deaths and worker absenteeism and presenteeism, we estimate that an expanded flu vaccination programme could **boost the economy by £3bn annually and save 15m working days annually**.[16]

	Health impact	Economic impact
Deaths prevented	192	£17m (in QALYs)
Absenteeism prevented	6.5m	£2.2bn
Presenteeism prevented	8.9m	£800m

£3 billion
annual boost to the economy from an expanded flu vaccination programme

15 million
annual working days saved by an expanded flu vaccination

[15] https://www.gov.uk/government/news/flu-vaccine-prevented-around-100000-hospital-admissions
[16] Annual calculation comparing to the baseline year with flu absences.

The benefits of greater access to weight loss medication

Obesity is a major public health challenge in the UK, driving poorer health outcomes and placing significant pressure on both the NHS and the wider economy.

Recent analysis from the Tony Blair Institute highlights its impact on workforce participation and productivity, with obesity-related illness contributing to higher levels of absenteeism and economic inactivity.[17]

Their analysis also warns that, without intervention, the economic costs of obesity are set to rise significantly over the coming decades, underlining the importance of expanding access to effective treatment.[18]

Against this backdrop, new weight loss medications are increasingly seen as a step change in how obesity can be managed, with the potential to deliver significant health and economic benefits if access is expanded. Expanding access through local, community-based settings such as the high street could play an important role in enabling wider uptake.

Our research finds that four-in-ten adults (38%) say they would be more likely to use weight management and healthy living services if they were more available on their local high street. Greater provision and uptake of weight loss medication among workers considered clinically obese or very obese would have significant economic benefits.

Our modelling suggests this could prevent 12 million sick days annually and save £4bn in annual economic output by reducing worker absenteeism linked to obesity-related sickness.

38%

of adults would be more likely to use weight management and healthy living support services, if they became available on their local high street.

12 million

sick days could be saved annually from greater provision, and uptake, of weight loss medication to workers considered clinically obese or very obese.

£4 billion

could be saved in economic output annually from lower worker absenteeism due to obesity-related sickness.

[17] https://institute.global/insights/public-services/anti-obesity-medications-faster-broader-access-can-drive-health-and-wealth-in-the-uk
[18] https://institute.global/insights/public-services/unhealthy-numbers-the-rising-cost-of-obesity-in-the-uk

Pharmacist-led weight loss services in local communities

In February 2026, Boots launched a private weight loss treatment pilot across the UK, responding to demand for convenient weight management on the high street.

This in-store service complements the support offered digitally through Boots Online Doctor which gives patients medicated weight loss options alongside expert advice on how to live healthily.

It includes a private consultation with a Pharmacist Independent Prescriber trained to prescribe weight loss medication, who assesses eligibility (including checks for weight, height, and BMI) and, where the criteria are met, prescribes appropriate treatment. Patients also benefit from wrap-around care, including a free 10-week programme promoting lifestyle and behavioural changes.

Due to fast-growing demand, the service was expanded to 61 Boots stores in June 2026, and its success offers a blueprint for an NHS locally commissioned service in the future.

The benefits of better management of long-term conditions

Long-term conditions such as diabetes and hypertension are a major driver of ill health and economic inactivity in the UK. They require ongoing management rather than one-off treatment, and when poorly controlled can lead to complications, increased healthcare use and higher levels of absenteeism. Many of these complications are preventable with effective community-based care, with research showing that a significant proportion of hospital admissions for conditions such as diabetes could be avoided through timely intervention.[19]

Improving access to support for managing these conditions locally could play an important role in addressing this challenge. Our research finds that 43% of adults say they would be more likely to use services to manage long-term conditions if they were more readily available on their local high street. This highlights the role of more accessible, community-based provision to support earlier and more consistent management of chronic conditions.

Greater provision of targeted support for workers with diabetes and hypertension would have significant economic benefits.

Our modelling suggests that through improved management of these conditions, 1.6 million sick days could be prevented annually and £1 billion in lost economic output saved annually.

1.6 million
sick days could be prevented annually through improved management of diabetes and hypertension

£1 billion
could be saved in economic output annually from reduced absenteeism linked to chronic conditions

How expanding community care can reduce pressure on the NHS

Expanding the role of high street pharmacies as part of a wider shift towards community-based healthcare would help reduce pressure on primary care and the wider NHS. This would reflect the broader direction of NHS reform, with a shift of activity and investment from acute settings into neighbourhood and community-based care.

To estimate the effect of this shift, we modelled an expansion of the Pharmacy First programme. Pharmacy First is an NHS initiative that enables patients in England to receive treatment for common conditions directly from community pharmacists, without needing to book a GP appointment in advance.

The programme enables pharmacists to treat a range of common conditions – including sore throats, ear infections and sinusitis – without the need for a GP appointment. Its impact could be further strengthened through the expansion of independent prescribing, allowing pharmacists to manage a broader range of conditions and provide more comprehensive clinical care on the high street.

From autumn 2026, Pharmacy First will be expanded to include independent prescribing as part of the service provided, in addition to its existing portfolio.

Our modelling suggests that expanding the services provided under Pharmacy First would lead to 14.6 million fewer GP appointments. This would save the NHS £314 million annually, while also allowing for better use of the clinical workforce.

14.6 million
fewer GP appointments annually by expanding the Pharmacy First programme

£314 million
saved annually by the NHS by expanding the Pharmacy First programme

[19] https://www.nuffieldtrust.org.uk/resource/potentially-preventable-emergency-hospital-admissions

Stronger high streets mean stronger local economies

Expanding healthcare provision on high streets would benefit more than health outcomes alone. It would also provide a much-needed boost to local retailers, leisure and hospitality businesses by increasing both the number of visits to high streets and the amount of money spent there.

Our research finds that almost all adults (94%) would be likely to visit other shops and businesses if more healthcare services were available on their local high street.

Our modelling shows that this would create significant spillover effects, leading to an additional £15 spent per person in local shops for each extra trip generated by more accessible healthcare services. Across the country, this could add as much as £13 billion a year to the UK high street economy.

Together, the findings show that expanding healthcare on the high street would improve access, support the NHS's shift to community care, and strengthen local high streets. **The challenge now is to unlock this potential through the right national and local policy framework.**

94%

of UK adults are likely to visit other shops with more accessible healthcare services

£15

would be spent per person in local shops as a result of each additional trip caused by more accessible healthcare services

£13 billion

could be added annually to the UK high street economy as a result of more frequent visits for healthcare services

07 The roadmap for healthier high streets

The case for expanding healthcare on the high street is clear. The public wants thriving local high streets and better access to care closer to home, with in-person care remaining essential to many. Pharmacies and other high street providers, like optometrists, hearing care providers and GP-led services, are trusted, accessible and well placed to deliver more healthcare locally. There is also strong support within the sector for expanding community-based care and delivering more services closer to home. The potential benefits to people, the NHS and the economy are substantial.

With the NHS 10 Year Health Plan explicitly committing to shift a greater share of care and spending from hospitals into community settings in England,[18] and the Government also prioritising the regeneration of towns and high streets, there is an opportunity to take a more coordinated approach that realises the benefits of healthy high streets.

[18] https://www.gov.uk/government/publications/10-year-health-plan-for-england-fit-for-the-future

Putting healthcare at the heart of high street renewal

To realise the opportunity, the Government, local authorities and healthcare leaders should take a series of practical steps to expand local healthcare provision and support thriving high streets.

These steps build on a clear alignment between public demand, government policy and the priorities of the community pharmacy sector, all of which point towards a greater role for community-based healthcare on the high street.

Expand community-based healthcare provision

Building on the success of the Pharmacy First programme, community pharmacies – alongside other high street providers such as optometrists, hearing care providers and GP-led services – should be enabled and supported to deliver a broader range of healthcare services on high streets. This reflects a wider vision across the community pharmacy, optometry and audiology sectors for high street healthcare providers to play a greater role in delivering community-based care, prevention and early intervention.[21,22,23]

Expanding community-based healthcare provision will require a change of mindset for the new commissioning framework via ICBs and Neighbourhood Health models to fully consider the capabilities available among high-street healthcare providers. This includes commissioning innovative pathways and ensuring community-based providers are commissioned to deliver a broader range of services, with adequate funding models that incentivise prevention, early intervention and ongoing management of long-term conditions.

Supporting workforce development and training – including the expansion of independent prescribing – and supporting the access to suitable space within existing stores and town centres will be essential to enabling delivery at scale.

By enabling more healthcare services to be delivered on the high street, we can both improve access to care and help revitalise high streets.

[21] https://cpe.org.uk/wp-content/uploads/2025/11/A-Prescription-for-Success-report.pdf
[22] https://www.college-optometrists.org/category-landing-pages/models-of-eye-care/england-manifesto
[23] https://www.the-ncha.com/commissioners/policy/our-campaigns/primary-care-audiology/

Recognise the importance of healthy high streets

In its forthcoming High Streets Strategy, the Government should recognise the role of healthcare services in driving footfall and supporting local economies. This should include encouraging local areas to integrate healthcare provision into local high street strategies.

Delivering this will require a genuinely cross-government approach, bringing together the Ministry of Housing, Communities and Local Government (MHCLG), the Department of Health and Social Care (DHSC), the Department for Business and Trade, and HM Treasury.

Healthier high streets in Barnsley

This approach is already being demonstrated in Barnsley, where a former Wilko store in the Alhambra Shopping Centre has been repurposed into an NHS health and wellbeing hub, bringing outpatient services into the heart of Barnsley town centre. The first services transferred from Barnsley Hospital were ophthalmology, optometry and retinal screening - with more services to follow as the hub becomes fully operational in 2028.

This hub is the second major initiative to revitalise Barnsley's town centre by bringing more healthcare services onto the high street.

An NHS Community Diagnostic Centre, which opened in 2022 in the Glass Works shopping centre, has already shown the benefits of this approach. Early evidence suggests it's delivered over 220,000 appointments for services like blood tests, ultrasounds and x-rays while increasing footfall in the town centre by an additional 50,000 visits each year.

Create the right environment for thriving high streets

High streets are most successful when they support a diverse mix of uses, are easy to access, and operate within a supportive business environment. Ensuring the right conditions – through planning, transport and tax and business policy – will be essential to enabling healthcare provision to grow alongside other high street services.

This includes addressing the high cost of operating physical premises for high street providers, particularly through the business rates system, which places a disproportionate burden on high street providers and can act as a barrier to investment. A more level playing field between bricks-and-mortar and online businesses will be important to supporting sustainable high street activity.

It also requires tackling wider issues such as rising levels of crime and anti-social behaviour, which can deter both people from visiting and working in high street settings, and undermines the viability and attractiveness of town centres.

Taken together, these steps would help unlock the full potential of healthy high streets, delivering better outcomes for the public, stronger and more resilient communities, and enabling vibrant local economies.

A store estate that's future-ready

Boots is upgrading its store estate to bring modern healthcare, wellness and retail services to more customers. At the heart of the offering is improved access to integrated healthcare.

The St Albans and Derby stores are great examples of this in action - offering state-of-the-art healthcare spaces and a range of services including optometry, audiology and in Derby, GP services through Bupa, available on a single floor.

In 2026, Boots is accelerating this transformation, investing in more high street stores to modernise and optimise space, layout and range across healthcare and retail, playing our part to make high streets healthier.

08 Research Methodology

Polling

Public First conducted an anonymous, online survey of 2,015 adults across the UK from 16th - 30th January 2026. All results are weighted using iterative proportional fitting, or 'raking'. Results are weighted by interlocking age and gender, region, and social grade to nationally representative proportions.

Where filtered results (e.g. by income) are shown, subsamples include at least 100 unweighted responses to ensure robustness. Public First is a member of the British Polling Council (BPC) and abides by its rules. For more information, please contact the Public First Polling Team: polling@publicfirst.co.uk.

Economic Modelling

Concentration of health services by high streets

- **Health service location data.**
  A dataset of pharmacy, optician and GP locations was compiled, containing postcode identifiers for each establishment. These postcodes were matched to geographic coordinates (latitude and longitude) using a condensed Office for National Statistics (ONS) postcode lookup file. Records without valid coordinates were excluded to ensure spatial accuracy.
- **Retail centres data.**
  Geospatial data of UK retail centre boundaries (from Ordnance Survey) was imported and filtered to include relevant centre types (e.g. town centres, district centres, and local centres). Both the health provider location data and retail centre boundaries were standardised to a common coordinate reference system to enable accurate spatial analysis.
- **Spatial intersection.**
  A spatial intersection was then performed to identify whether any health provider point fell within each retail centre polygon. Based on this, a binary indicator variable was constructed for each retail centre, equal to 1 if at least one optician was present within its boundary, and 0 otherwise. Concentrations were then estimated to determine the share of health providers within a retail centre in a given region, relative to those outside a retail centre.

Health and economic impact of flu vaccination programme

Figure 1 illustrates the five impact channels that are used to estimate the impact of a wide-ranging flu vaccination programme on the working population, through pharmacies. We estimate three direct effects among the working population:

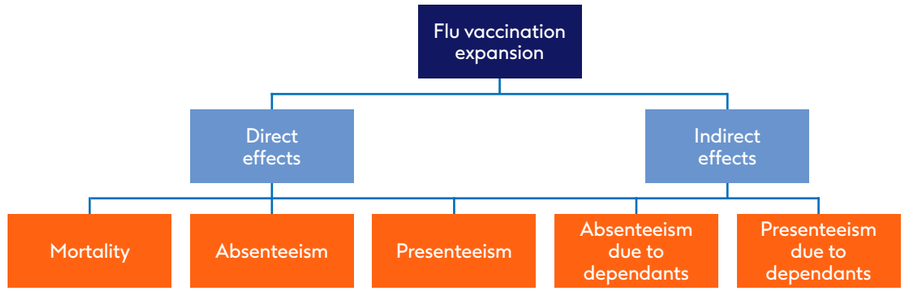
- Reduced mortality among working-age adults;
- Reduced absenteeism caused by flu-related sickness; and
- Reduced presenteeism caused by working while unwell with flu.

We also estimate two indirect effects among working parents and carers:

- Reduced absenteeism caused by dependants becoming ill with flu; and
- Reduced presenteeism caused by combining work with caring responsibilities.

The model assumes full uptake among the currently unvaccinated working population. It therefore estimates the potential effect of moving from current vaccination coverage to universal coverage in the relevant group.

Figure 1: Impact channels of expanded vaccination programme on UK workers



- **Mortality**
  NHS flu data is used to estimate the share of the working population who died of flu in 2025. An assumption is applied on the effectiveness of flu vaccinations in reducing the risk of mortality. To monetise this effect, we apply a value of £70,000 per QALY, based on HM Treasury Green Book values for 2021 to 2022 and adjusted for inflation.

- **Absenteeism**
  NHS data is used to estimate the share of the working population who are vaccinated from flu and the share that contracts flu. The reduction in total sick days is then estimated by applying the one-day difference in absence to the number of flu cases in the newly vaccinated group. The difference between the baseline and counterfactual is the working days saved.

- **Presenteeism**
  NHS data is used to estimate the share of the working population who are vaccinated from flu and the share that contracts flu. An assumption is applied on the share with flu who continue to work with low productivity and the average reduction in productivity this results in. The difference between the baseline and counterfactual is the working days saved.

- **Indirect effects**
  The model also captures the effect of vaccination on working adults who care for dependants. We assume there are around 13.4 million parents and carers in employment across the UK. Two estimates are made on the share of parents/carers who are absent due to caring for a dependent and those who continue to work, at low productivity in their caring roles. Academic literature is used to estimate the number of absences carers take or the reduction in productivity that is caused while caring for a child or elderly with flu. An assumption is added on the share of parents in the working population who are able to work from home. The difference between the baseline and counterfactual is the working days saved.

- **Economic impact**
  The economic value of sick day prevention is multiplied by the daily GVA per worker. A worker's productivity is measured by GVA per worker, which implies lower daily productivity leads to lower GVA output.

Economic impact of reducing NHS waiting list via Pharmacy First

We estimate the potential reduction in the NHS waiting list by combining the following data:

- **Size of the GP waiting list**
  NHS data provides monthly estimates for the length of time taken to obtain a GP appointment from same day to 28 days.

- **Moving GP appointments to pharmacies**
  CCA data is used that states that 40 million GP appointments could be safely moved to community pharmacies, under an expanded Pharmacy First programme.

- **Pharmacy First appointment uptake**
  The polling results are used to estimate the share of the adult population who would be willing to use the pharmacy for medical needs that require GP consultation. This figure is combined with the existing GP waiting list figure and the share of safe to move appointments to deduce the expansion capacity of the programme.

- **Current Pharmacy First appointments.**
  The current number of Pharmacy First appointments are deducted from the combined safe appointments value, to understand the additional savings that could be made.

- **Cost of GP appointments**
  University of Kent research on the 2024 Unit Costs of Health and Social Care services data is used to calculate the value of a single in-person GP appointment. These figures were adjusted to 2025 values. This is a strong assumption, as some appointments may be conducted via telephone. This unit cost is combined with the waiting list reduction figure to estimate the full cost to the NHS.

- **Cost of Pharmacy First appointment**
  NHS Business Services Authority data on the cost of a single Pharmacy First consultation (£17 per appointment) is used to estimate the revised cost of safely transferred GP appointments to community pharmacies. This figure is subtracted from the GP cost (£39 per consultation) to estimate the saving to the NHS.

- **Comparator estimate**
  This figure was estimated by dividing the savings value (£314mn) by the average nurses' salaries in the UK. The saving value was also divided by the average cost of purchasing a new MRI machine to establish how these savings could be used to invest in the NHS.

Health and economic impact of weight loss medication

The health and economic impact of weight loss medication being offered and accessible on the high street was measured using the absenteeism caused by obesity. The analysis was restricted to considering the impact on those who the NHS consider clinically obese or very obese, and in employment. The absenteeism reduction was estimated by:

- **Calculating baseline absences due to obesity.**
  Approximately 30% of the working population is clinically obese, according to NHS data. Polling data is used to estimate the share of this sub-group that would be willing to use weight management medication. Academic literature is used to calculate the additional sick days taken as a result of obesity-related illness.

- **Estimating counterfactual.**
  Experimental data is used on the impact of weight loss medication on a reduction of employee sick days, to estimate the potential economy impact. This reduction in sick days is multiplied by the number of clinically obese employees that use the weight loss medication. The difference between the baseline and counterfactual is the working days saved.

- **Economic impact.**
  The economic value of sick day prevention is multiplied by the daily GVA per worker.

Economic impact of chronic condition management

- **Calculating baseline absences for diabetes and hypertension.**
  NHS data was used to estimate the number of UK workers who are diagnosed with diabetes or untreated or uncontrolled hypertension. Academic literature is used to estimate the additional sick days taken as a result of diabetes or high blood pressure.

- **Estimating counterfactual.**
  Academic literature is used to calculate the impact of diabetes and blood pressure management programmes on a reduction of employee sick days. This reduction in sick days is multiplied by the number of employees with diabetes or hypertension that use the chronic conditions management programme.

This figure is then adjusted by the polling data by the share of individuals who would take up chronic condition management services with the pharmacy. The difference between the baseline and counterfactual is the working days saved.

- **Economic impact.**
  The economic value of sick day prevention is multiplied by the daily GVA per worker.

Economic impact of more healthcare provision on the high street spending

We estimate the impact of additional high street spend by multiplying the following variables:

- **UK adult population.**
  The number of adults (16 and over) in the UK using ONS population estimates.

- **Likelihood of additional spending.**
  The polling results were used to take a weighted average of the likelihood of visiting more shops if visiting a healthcare provider on the high street.

- **Additional trips.**
  The polling results were used to take a weighted average of the number of additional trips respondents stated they would make per month as a result of health services becoming available on the high street.

- **Additional spend per trip.**
  The polling results were used to take a weighted average of the value of additional spending, per trip, respondents stated they would do as a result of visiting the high street.

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