

Scottish party manifesto analysis: Health

SNP

Key policies:

- Invest £10 billion in NHS capital over ten years, including new Community Health and Care Hubs across Scotland.
- Recruit more family doctors, backed by £530 million for a new GP deal and expanded GP walk in clinics nationwide.
- Cut waiting times by investing £200 million per year to grow elective capacity and increase operations.
- End the 8am rush for GP appointments through walk in access and a national online booking system.
- Shift care into communities, expanding Hospital at Home, diagnostics closer to home, and new lung/heart health “one stop shops.”
- Expand 24/7 mental health support, including Mental Health Triage Cars and five new drop-in mental health hubs.
- Prioritise women’s health, with a national maternity review, improved postnatal support, menstrual health research and an urgent IVF review.

Summary and analysis:

The SNP’s health commitments focus on expanding capacity, modernising delivery and shifting more care into communities. The manifesto promises a capacity led NHS recovery, major capital investment, and a national plan for hospital flow to reduce delayed discharge, alongside £530 million to recruit more family doctors and targeted support for rural and island areas. It also commits to expanding GP walk in clinics, rolling out community “one stop shops” for heart and lung health checks, and strengthening early intervention and prevention. However, the feasibility of this expansion depends on workforce availability, training pipelines and the ability to staff new community services at scale, issues the manifesto acknowledges only indirectly through broad recruitment commitments.

The manifesto also emphasises rebalancing care away from acute settings through expanding the pre-existing Hospital at Home programme, expanded diagnostics, and new mental health triage and drop in hubs. It links health inequalities to wider cost of living pressures and aims to address this by including capped prices for essential foods and continued protection of free prescriptions, eye tests and dental checks in the manifesto. Delivering this shift requires sustained capacity in community teams, faster integration across health and social care, and reductions in delayed discharge, all

areas where structural pressures, social care workforce shortages and local variation in provision could limit progress. The overall approach aims to protect NHS principles while reforming delivery, but its success relies on system wide coordination and implementation detail that the manifesto sets out only at a high level.

Scottish Labour

Key policies:

- Drive down NHS waiting lists, using all available capacity across Scotland, the UK and (short-term) the independent sector, with funding following the patient.
- End the 8am rush for GP appointments and bring back the family doctor, guaranteeing a GP appointment within 48 hours.
- Create neighbourhood health hubs combining GP, pharmacy, dentistry, community health, physio, social care and diagnostics in one place.
- Introduce a new emergency mental health response service, staffed by trained NHS professionals rather than police.
- Invest in modern technology, including a faster NHS app, e prescribing, a single patient record, and new AI enabled MRI/CT scanners.
- Cut NHS bureaucracy by reducing territorial health boards to three and streamlining special boards to no more than five.
- Deliver a 10-year NHS workforce plan, linking university places to training posts and introducing a “train here, stay here” requirement for new medical, dental and nursing graduates.

Summary and analysis:

Scottish Labour frame health policy around fixing the mess made by the SNP, reducing inequalities, strengthening primary and community care, and modernising the NHS through digitisation including an NHS app, e-prescriptions and wearable tech. They commit to expanding GP and community provision, improving integration with social care, investing in children and young people’s mental health, and targeted early intervention measures. Workforce expansion, fair pay, and better working conditions sit alongside pledges to cut waiting times and reinforce public health. Overall, Labour position health as part of a broader strategy to improve social and economic wellbeing.

Labour’s plans combine improved access with service recovery, but the manifesto gives limited detail on how these aims would be balanced within tight fiscal and workforce constraints. Expanding primary and community care depends on significant workforce growth, yet while the manifesto discussed a 10-year workforce plan, there is little discussion on costing of the plan, retention or exploring more complex workforce needs (e.g. multidisciplinary teams). There is also a ‘train here, stay here’ plan in which students who are funded to train in Scotland must work for at least five years in Scotland’s NHS or pay back their bursaries.

There is a lack of consideration on deeper consideration of social determinants of health, despite consideration of prevention as a mechanism of their health approach. There is also little discussion of integration across health, social care, housing, and

local services, while there is a mention of governance reforms of the health boards, there is a lack of practical detail, and approaches to managing local variation are not specified. Commitments to reduce waiting times and strengthen acute care sit alongside ambitions for prevention, but the manifesto does not set out how these competing demands would be sequenced or funded.

Reform UK (Scotland)

Key policies:

- A workforce plan to train more doctors and nurses in Scotland.
- Creative delayed discharge solutions to increase hospital efficiency.
- Long term funding and optimisation of the integration of adult social care.
- A shift to a prevention strategy in persistent health inequalities.
- Expansion of frontline services in the community and in GP surgeries.
- Embracing tech including AI and the NHS England App.

Summary and analysis:

Reform UK focus on NHS efficiency, reducing bureaucracy, and expanding patient choice, with an emphasis on increasing the role of independent providers, improving access to diagnostics and treatment, and cutting waiting times. Their commitments include restructuring NHS management, expanding capacity through private sector partnerships, and introducing performance driven reforms. They also highlight the need to improve rural access and reduce administrative burdens on clinicians.

Reform's health commitments prioritise efficiency, deregulation, and expanded use of independent providers, but the manifesto provides limited detail on how key risks would be managed. Their proposals assume that greater private sector involvement will reduce waiting times and improve access, yet the manifesto does not address how equity, cost control, or long-term sustainability would be safeguarded. The emphasis on reducing management structures raises questions about governance capacity, given the complexity of commissioning, regulation, and quality assurance in mixed provider systems. Their focus on patient choice and streamlined services places less weight on prevention despite a reference to it in the manifesto there are no further details or actionable points made. Therefore, there is less focus or detail on public health, and social determinants, which may constrain the system's ability to respond to chronic illness and demographic pressures. The approach also relies heavily on local authorities and health boards to deliver change, without specifying how these bodies would be supported to take on new responsibilities.

Scottish Conservatives

Key policies:

- Guarantee faster GP appointments, including a commitment to deliver quicker access across Scotland.
- Cut NHS waiting lists through targeted investment and a focus on frontline delivery.

- Increase the number of frontline NHS staff, with a focus on doctors, nurses and key clinical roles.
- Improve access to mental health support, expanding provision and reducing long waits.
- Invest in modern NHS infrastructure, including upgrades to hospitals, equipment, and digital systems.
- Strengthen community care, improving local access to health and wellbeing services.
- Reform health governance and reduce bureaucracy, ensuring more resources reach frontline care.

Summary and analysis:

The Scottish Conservatives set out a health agenda focused on improving NHS performance, reducing waiting times, and expanding overall system capacity. Their commitments include increasing diagnostic and surgical capacity, making greater use of independent providers to help clear backlogs, and improving access to GP appointments. They also highlight the need to strengthen rural and island healthcare, expand mental health support, and invest in digital technologies to streamline care. The overall framing is centred on service recovery and performance improvement.

The manifesto's approach prioritises acute sector capacity and faster treatment but provides limited detail on how the practical delivery challenges would be managed. Increased reliance on independent providers assumes that sufficient external capacity exists and that contracting arrangements can be sustained, but the manifesto does not set out how quality, equity, or long-term costs would be monitored. Similarly, commitments to improve GP access and frontline staffing imply the need for workforce growth, yet there is little information on how recruitment pipelines, training places, or incentives for doctors in rural locations would be expanded. The emphasis on accountability and performance management suggests a stronger central role in overseeing NHS delivery, though the manifesto does not explain how this would interact with existing governance structures or integration authorities. Prevention is framed mainly around lifestyle change, screening, and early diagnosis, with less focus on wider determinants of health, which may limit the long-term impact on demand.

Scottish Liberal Democrats

Key policies:

- Increase GP capacity with additional clinical staff
- Rejuvenate local healthcare facilities
- Introduce a national lung cancer screening programme
- Recruit and retain more NHS dentists
- Create walk in mental health services
- Implement a 10 year NHS workforce plan
- Fair Deal for Rural Healthcare

Summary and analysis:

The Scottish Liberal Democrats set out a health agenda centred on restoring timely access, expanding local capacity, and reducing the pressures that drive long waits across primary, community and acute care. Their proposals focus on early diagnosis and strengthened local provision, including giving every GP practice “the benefit of an additional member of clinical staff,” rejuvenating local healthcare facilities, and introducing a new Fair Deal for Rural Healthcare to stabilise access in remote areas. They commit to a national lung cancer screening programme, expanded NHS dentistry recruitment, and walk in mental health services to reduce bottlenecks in community care. A 10-year NHS and care workforce plan is positioned as the long-term structural fix to staffing shortages, aiming to shift demand earlier in the care pathway and reduce the burden on acute services.

The party explicitly links NHS pressures to the condition of the social care system, arguing that delayed discharge, e.g. “2,000 people a night stuck in hospital”, is a major driver of inefficiency and cost. Their proposals include a new career ladder for care workers, a commitment to halve delayed discharge by the end of the decade, and increased financial support for unpaid carers, alongside dedicated support for young carers. The manifesto also recognises the recruitment challenges facing rural and island communities, committing to expand key worker housing so that staff can take up posts in areas with acute shortages. While the programme emphasises access, workforce expansion and earlier intervention, it provides less detail on how the scale of workforce growth will be delivered or how local systems will be supported to implement these changes. The strategy prioritises operational improvements and community-based capacity, but leaves open questions about long term funding, integration with public health, and the system wide infrastructure needed to sustain prevention focused care.

Scottish Greens

Key policies:

- Increase investment to general practice to reflect the fact that GPs deliver over 90% of patient contact within the NHS.
- Invest in the recruitment of GPs with the aim that there will be one GP for every 1,000 patients and, once those GPs are in place, offer 15-minute appointments.
- Embed community links workers who can help patients with issues such as poverty, housing and isolation
- Introduce a “Right to Rehabilitation” whereby everyone is assessed for rehabilitation needs on diagnosis or discharge from hospital.
- Reduce inequalities through targeted condition-specific support for deprived and high-risk communities.

Summary and analysis

The Scottish Greens set out a health agenda centred on prevention, public health, and the structural determinants of wellbeing, with a strong emphasis on mental health, climate related health risks, and reducing inequalities. Their commitments include

expanding community-based services, increasing investment in mental health support, strengthening public health interventions, and shifting resources toward early intervention. They position health within a wider wellbeing economy framework, highlighting links with environment, transport, and housing. The Greens also support reducing reliance on acute services by expanding primary care capacity and improving access to multidisciplinary teams.

The Greens' commitments represent a structural shift toward prevention and social determinants, but the manifesto provides limited detail on how this rebalancing would be delivered within an NHS already under acute pressure. Their approach assumes resources can be redirected from acute to community settings, yet this depends on workforce capacity and strong local authority capability, both of which face significant constraints. The emphasis on environmental and social determinants requires deep integration across health, housing, transport, and climate policy, but the manifesto does not specify how cross sectoral governance would be coordinated. Their preventative agenda also relies on long term public acceptability and behavioural change, without detailing how communities would be supported through transitions or how short-term service pressures would be managed while shifting resources upstream.

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