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PRIMARY COLOUR

Helen Salisbury: Doubts about a database

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The NHS is in crisis. Delays are getting longer, meaning that patients are waiting for ambulances, assessments in emergency departments, transfers to wards after a decision to admit, and then, eventually, discharge if ongoing care is needed. Waits for elective treatment are also at a record high, and cancer treatment targets are being missed by an ever widening margin.[1] All of these have contributed to the excess deaths seen in 2022, which were far greater in number than can be attributed to acute covid-19.[2]

The core problem is staffing. More than one in 10 nursing posts are unfilled, there are gaps in hospital doctor rotas, and GP vacancies have very few applicants.[3][4] Staff unhappy with pay and conditions are taking industrial action, while others are voting with their feet and moving to work abroad or are leaving their profession altogether.

Against this background—and while we're told that there's no money to stop nurses needing to use food banks—it was interesting to read that NHS England is proposing to spend nearly half a billion pounds on a federated data platform.[5] I've had difficulty finding out exactly what this is, and the Department of Health and Social Care's website is not entirely helpful, defining it as "an ecosystem of technologies and services to be implemented across the NHS in England."[6] It seems that the idea is to collect all information held in GP, hospital, and social care records, giving access to central officials to monitor and plan services and also for third party research. We're told that it will drive innovation across the life sciences and reduce waiting lists.

The contract has been put out to tender but, with procurement anticipated to end in summer 2023, the odds are that it will be awarded to Palantir, the analytics company that got its feet firmly under the NHS table by offering its services to NHS England for nothing (then for £23m) during the covid pandemic.[7] Not everyone is happy about this, and many questions are unanswered. Patients will need to be reassured about where their information is going, what exactly it will be used for, and how they can opt out. Many patients expect their GP record to be shared with local hospitals, but they may be less comfortable with its use for other purposes.

Will it work? The NHS has a history of ambitious IT projects that have cost a fortune but delivered little.[8] Is this one needed? Will it offer value for money? These are questions outside my expertise, but some tech commentators are dubious.[9]

Doubts have also been voiced about Palantir. This company started out in the US working for the Defense Department and immigration enforcement, where its activities drew criticism from Amnesty International.[8] Palantir's cofounder, Peter Thiel, criticises the NHS, comparing the public's relationship with the service to Stockholm syndrome and arguing that the government should "rip the whole thing from the ground and start over."[10][11] We need to be very sure that such a major project will be entrusted to the right people, will actually work, and will be the right use of our money.

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