

BRIEFING: CONCERNS REGARDING PALANTIR TECHNOLOGIES IN NHS DATA SYSTEMS

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Medact is a charity that brings together health workers to fight for health justice. We recognise that health injustice is driven by political, social and economic conditions, and we mobilise the health community to take action to change the system.

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Published by Medact, 2026.

Citation: Medact (2026) *Concerns Regarding Palantir Technologies in NHS Data Systems*, London: Medact.

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EXECUTIVE SUMMARY

“Palantir is here to disrupt... and, when it’s necessary, to scare our enemies and, on occasion, kill them.” – Alex Karp, Palantir CEO, 2025^[1]

Palantir is a US-based data analytics firm specialising in artificial intelligence (AI) technologies and software commonly used by states in surveillance, border enforcement, policing and warfare. Palantir’s Federated Data Platform (FDP) aims to sit across NHS Trusts, ICBs and NHS England in order to connect and analyse pre-existing data on a national and local scale.

This report is prepared for NHS Trust Boards, Integrated Care Boards (ICBs), Health Scrutiny Committees, and Health Data Governance Committees to outline key concerns of the authors, endorsers and supporters regarding the involvement of Palantir Technologies in NHS data infrastructure and operations, including via their delivery of the FDP. It is intended to inform and empower Trust decision making about engagement with Palantir. At the time of writing, the FDP is not mandatory, and local health bodies are able to both raise concerns and decline to implement the FDP at the local level. It is the view of the authors, endorsers and supporters that, for the reasons explained in this document, there are many more suitable options for data management solutions for Trusts and ICBs.

NHS England can also choose not to extend the national contract with Palantir beyond the initial 3-year contract. The contract’s review is upcoming in early 2027 at which point it could be terminated. In 2021, the UK’s Department of Health and Social Care terminated a data deal regarding adult social care with Palantir following criticism, and the concerns regarding Palantir’s presence in public services have only grown since then.^[2]

This report covers multiple concerns, with a focus on human rights, public trust, data privacy, and institutional risk. It is divided into three sections: 1) Allegations of Palantir’s complicity in human rights abuses and other unethical practices; 2) The background to the FDP’s procurement and Palantir’s wider UK strategy; and 3) Specific risks to Trusts and ICBs of adopting Palantir’s FDP.

Section 1 examines Palantir’s operations around the world, which are alleged to have contributed to human rights abuses, war crimes, discriminatory policing practices and mass surveillance. In 2020, Amnesty International determined that “there is a high risk that Palantir is contributing to serious human rights violations of migrants and asylum seekers by the US government” and that Palantir was failing in its responsibility to “avoid causing or contributing to human rights abuses”.^[3] In 2025, Palantir was named by the UN Special Rapporteur on the situation of human rights in the Palestinian territories occupied since 1967 as an enabler of “unlawful use of force”.^[4] Amnesty International named Palantir as one of multiple companies enabling or profiteering from genocide, occupation, and apartheid.^[5] It called for states and public institutions to bar them from “trade shows, government meetings, contracts, research grants and activities with public bodies”.^[6] This report argues that adoption of the FDP therefore puts Trusts, ICBs and NHS England at risk of indirectly linking NHS procurement to alleged human rights abuses, and could be in violation of ethical procurement policies.

Section 2 explains that the FDP was awarded to Palantir in the context of the company expanding its UK government contracts. This expansion has been tarnished with concerns around lobbying and flawed procurement practices,^[7] amplified by Palantir’s stated intention to dominate state-level software provision. For example, in a letter to shareholders in 2022, Palantir Chief Executive Officer Alex Karp wrote: “We are working towards a future where all large institutions in the United States and its allies abroad are running significant segments of their operations, if not their operations as a whole, on Palantir.”^[8] The FDP must therefore be analysed alongside Palantir’s contracts with UK police forces and the Ministry of Defence, as well as its proposal for a common government operating system – and, critically, the subsequent impacts on patient trust and data privacy.

In Section 3, this report argues that Palantir's FDP presents serious risks to Trusts and ICBs. This includes the risks of: a) damaging public trust in NHS data systems as a whole, and reputational damage for NHS bodies; b) inadequate data management and privacy protections; c) institutional challenges with the software and technology; and d) staff and union resistance to the FDP. The concerns outlined regarding data management include a lack of clarity on how data will be held and utilised within the FDP and a lack of clarity as to whether there will be sufficient data safeguards. For example, in documents obtained via Freedom of Information request from a private meeting between Wes Streeting and Palantir in June 2025, the Department of Health and Social Care (DHSC) briefing note for the meeting states "Palantir may raise issues with IG [information governance] in the NHS as presenting obstacles" and "we have a long-standing commitment to revisit the regulations relating to confidential patient information, and this is likely to present opportunities". Additionally, we are concerned that pseudonymisation of data within the FDP may be insufficient to protect patient data. We also question Palantir's suitability as a data processor, especially since documents obtained by The Intercept showed that Palantir supported US spy-agency the National Security Agency (NSA) in its infamous mass surveillance project eventually exposed by Edward Snowden. In December 2025, an investigation found that an internal Swiss Army report expressed fears that Palantir would pass on confidential Swiss Army data to the American intelligence agencies the Central Intelligence Agency (CIA) and NSA. Palantir refutes this and states that the report is inaccurate.

The FDP contains highly sensitive health data, which also needs to be protected from the UK government itself. This report raises concerns that the FDP, by bringing together disparate health datasets onto a single platform run by Palantir could enable UK government departments, such as the Home Office and police departments, to more easily access confidential patient information. Palantir's services to other governments, including its contract with ICE, have involved significant cross-department data compiling and analysis, which can be used to enable data driven abuses of state power. Foundry, the basis of the FDP, is highly interoperable with Palantir's other softwares, including the military focussed software Gotham, with 'drag and drop' of data being possible between the two systems. We raise concerns that a current or future government could abuse the data held in the FDP by utilising the interoperability of Foundry and its ability to draw from other government datasets.

We also argue that the highly interoperable nature of Palantir’s products and the potential for Palantir to benefit reputationally from the contract could indirectly result in the NHS contributing to the advancement of militarised technology used to commit alleged human rights abuses. The concern over complicity in Palantir’s other operations was highlighted in a Parliamentary Science and Technology Committee meeting in 2025. Kit Malthouse MP asked: “What protections would you put in place for UK programmes to make sure that they are not complicit in the commission of war crimes?”, which Palantir UK CEO Louis Mosley failed to directly answer.

Palantir’s reputation, its lack of public trust, and a perceived clash with NHS values were raised as potential barriers to successful implementation of data systems by a cross-parliamentary scrutiny committee in July 2025.^[9] Lack of trust in Palantir is already becoming a problem for NHS institutions. In a report confirming its decision not to use the FDP, Greater Manchester ICB noted specific objections to any use of the FDP from some patients and data controllers, as well as concerns from the local branch of trade union Unite. NHS data systems rely on buy-in from both patients and staff, and many of these stakeholders are actively opposed to Palantir’s FDP. For example the British Medical Association passed a motion at its 2025 AGM opposing the roll out of the FDP based on Palantir’s track record,^[10] and tens of thousands of patients have written complaints to Trust leadership regarding the FDP.^[11] In January 2026, The Green Party announced they “will use every means at [their] disposal, including that of [their] many thousands of members to get [Palantir] out of the NHS”^[12]. In February 2026, the BMA announced it will tell doctors to limit engagement with the FDP because of its links with Palantir.^[13]

In addition, the FDP risks locking Trusts and ICBs into a single supplier, with reduced ability to transfer to a different supplier or retain full autonomy over the code behind their data management systems. There are also concerns that the FDP is driving out locally tailored and trusted data solutions. In February 2025, the NHS Chief Data and Analytical Officer Network (CDAON) wrote an open letter to Chief Digital and Information Officer, Ming Tang, detailing objections to the FDP’s roll-out. The letter concluded, “we already have similar tools in use that presently exceed the capability and application of what the FDP is currently trying to develop or roll out at a system level”.

This report recommends that Trusts and ICBs urgently:

1. Decline the implementation of FDP or any other Palantir products in their local data systems
2. Write to NHS England, the Department of Health and Social Care and the Secretary of State for Health and Social Care outlining their reasons for declining
3. Urge NHS England to terminate its contract with Palantir Technologies
4. Communicate clearly to their staff and patients that they will not implement the FDP or any other Palantir products
5. Scrutinise their current contractors to identify potential human rights abuses and review appropriately
6. Investigate the feasibility of in-house and/or open-source software as a first priority for data solutions.

We put the key points we make in this report to Palantir. We have set out Palantir's relevant responses in this report. You can also read Palantir's full response [here](#).

INTRODUCTION TO PALANTIR TECHNOLOGIES

Palantir was founded in 2003 by Peter Thiel, Alex Karp, Joe Lonsdale and other collaborators.^[14] Its development was facilitated by funding from the CIA's venture capital arm, In-Q-Tel, and the company has been closely linked to the operations of the US government since its inception.^[15] Unlike other large technology companies, Palantir does not operate a business model based on 'selling' data. It offers its software to states and corporations, enabling them to compile and analyse data they hold by bringing together data from different sources or government departments to support decision-making.^[16] Its main software offerings are Foundry and Gotham, with further analytics and decision-making offered through Artificial Intelligence Platform, Apollo and Ontology. Palantir often requires its own analysts to spend time within organisations, government departments and corporations to support the implementation of its software.

Palantir has built a controversial reputation through its extensive work with the US Department of Defense, border enforcement agencies and international intelligence services, alongside high profile political engagement, including donations to political actors, both by the company.^[17] and by its co-founders.^[18]

Palantir's senior leadership are explicit about their political beliefs, with the two main founders being unusually outspoken on behalf of the company and its aims. Karp has stated that Palantir's purpose is to be a defender of the "noble, endearing and potentially durable project of the West" against its enemies.^[19] Co-founder and chairman Peter Thiel is a leading figure in the American far-right movement who notably wrote: "I no longer believe that freedom and democracy are compatible".^[20] He has also claimed that the NHS "makes people sick"^[21] and British affection for the health service is akin to "Stockholm syndrome".^[22] There have also been incidents of Palantir employees participating in whistleblowing activities and criticising the company. Former Palantir employees have raised multiple concerns, including that Palantir public statements are "going as far as threatening critics with violence".^[23] This referred to CEO Alex Karp declaring in a talk that he would like to use drones to spray "analysts that tried to screw us" with "fentanyl-laced urine".^[24] Both founders thus exhibit strong ideological justifications for the work that Palantir does.

As outlined by former Palantir employee Juan Sebastian Pinto, Palantir’s extensive software provision to government departments has significant consequences:

“These tools... allow users to track, detain and, in the context of war, kill people at scale with the help of AI... They deliver targets to operators by combining immense amounts of publicly and privately sourced data to detect patterns, and are particularly helpful in projects of mass surveillance, forced migration and urban warfare... they pull us all into a web of invisible tracking mechanisms that we are just beginning to comprehend”.^[25]

The effects of Palantir’s software can be difficult to understand or predict, and once implemented the software may be difficult to move away from. Palantir’s stated long term aim is to have software provision domination over most government departments across the US and its allies, including healthcare.^[26] Karp’s 2022 letter to shareholders makes clear that Palantir is a company that intends to dominate institutions, stating: “Most other companies are targeting small segments of the market. We see and intend to capture the whole.”^[27] Palantir’s business model, in general, is designed to embed itself within an institution and a government as a whole.

SECTION 1: ALLEGATIONS OF COMPLICITY IN HUMAN RIGHTS ABUSES

This section outlines how Palantir’s software is allegedly being used by states to carry out human rights abuses and other controversial or unethical practices. This includes its use by the US government in military, policing and border enforcement operations, as well as by the Israeli Defence Forces in abuses against Palestinians. Palantir’s operations may contravene a Trust or ICB’s ethical procurement practices or procurement law, and indirectly link NHS procurement to alleged human rights abuses. As outlined in Section 3, this may subsequently impact patient and staff trust. Palantir’s background and active participation in these activities has informed the development of its software and conduct as a company, and as such must be taken into consideration when making decisions about software adoption. It could be argued that Trusts and ICBs should not engage with the FDP on ethical principle, on the basis that the provider of the software is allegedly involved in human rights abuses across the world. When the FDP contract was awarded to Palantir in November 2023, Peter Frankental, Amnesty International UK’s Business and Human Rights Director, stated that “Any NHS public procurement tenderers whose activities have been linked to serious human rights abuses – as is the case with Palantir – should be excluded on grounds of ‘grave professional misconduct’ as permitted under procurement law.”^[28]

MILITARY OPERATIONS

Palantir provided software to the US military for wartime operations in Iraq and Afghanistan,^[29] including analysis of surveillance footage.^[30] The US-led invasions of Iraq and Afghanistan had devastating public health consequences (a 2006 Lancet study estimated over 600,000 Iraqi deaths)^[31] and were widely condemned as illegal wars of aggression.^[32] Palantir employees include ex-military and CIA personnel who praise its systems as a “true force multiplier” in Iraq and Afghanistan and its purported ability to “make warfighters stronger”.^[33] In 2019, Palantir was awarded a contract to develop the Pentagon’s Project Maven, which supports the use of AI in the US military for drone and satellite surveillance, identification and decision making.^[34] Prior to this, Google withdrew from Project Maven, after thousands of employees signed an open letter expressing concern over the “potentially lethal outcomes” of the project.^[35]

POLICING

Palantir technologies have been used by multiple police forces in the USA and elsewhere in policing methods commonly termed ‘predictive policing’ and other data-driven policing practices which expand police capacity for surveillance. This term refers to digitally analysing large amounts of data from multiple sources, with the help of algorithmic predictions, in order to help police surveil, profile or target particular persons of interest, in some cases based on perceived likelihood of committing a crime.

Experts argue that these types of policing technologies lead to the entrenchment of systemic bias and over-policing of Black communities.^[36] Researchers at Amnesty International have called for data-driven crime prediction technologies to be banned over severe human rights concerns.^[37]

Following a six-year contract, the City of New Orleans cancelled a Palantir partnership after news website The Verge revealed the firm had been operating a policing programme which members of the council were unaware of.^[38] The revelations showed that Palantir provided software to support analysis of criminal histories, alleged gang membership and personal social media usage to predict the likelihood that individuals would commit violence or become a victim, compiling massive amounts of data on individuals.

In 2023, police forces in Germany were made to review their work with Palantir after a court ruled that data processing laws governing some uses of the company’s software were unconstitutional and significantly expanded police surveillance powers.^[39] Palantir software is currently used by police in sixteen federal states including Bavaria, Hesse, and North Rhine-Westphalia. Human rights group Gesellschaft Für Freiheitsrechte (GFF) has filed multiple constitutional complaints regarding the use of Gotham software in these states, which are pending, claiming that the police are using the software to monitor people “who have never been suspected of committing a crime”.^[40]

In June 2025, the civil liberties watchdog Liberty revealed that Palantir is working with multiple police departments in the UK on diverse collaborations including trialling surveillance technologies.^[41] Documents disclosed by Bedfordshire Police revealed that Palantir’s software is used to combine criminal records with other intelligence sources such as financial information to create profiles of individuals and aid decision making. This will establish a “real-time data-sharing network” that includes the personal details of vulnerable victims, children, and witnesses alongside suspects.^[42] Trade union membership, sexual orientation, health information and race were among the types of personal information being processed.

Palantir disputes the characterisation of its work as predictive policing. It said, “as a matter of company policy, Palantir does not support any predictive policing workflows”, and defined predictive policing as predicting the likelihood that individuals will commit a crime. However, there are multiple notable examples of concerning policing programmes using Palantir software. For example, Palantir has applied for patents for ‘crime risk forecasting’ technologies,^[43] and a research document written by The Bureau of Justice Assistance on ‘Smart Policing’ describes using Palantir technology for area based “predictive policing”.^[44]

BORDER ENFORCEMENT

Palantir has held contracts with US Immigrations, Customs and Enforcement (ICE) for many years. In 2020, the company was accused by Amnesty International of contributing to serious human rights violations by supporting ICE to run its operations.

In its report, *Failing to Do Right: The Urgent Need for Palantir to Respect Human Rights*,^[45] Amnesty International alleged ICE relied on Palantir’s software in operations which included forcibly separating unaccompanied children from their parents, and conducting mass raids leading to prolonged detentions and deportations.^[46]

Palantir has provided ICE’s Investigative Case Management (ICM) system since 2014, and created FALCON (Homeland Security’s custom implementation of Palantir Gotham), enabling ICE to utilise networks of federally and privately owned databases.^[47] FALCON can help ICE search for people’s names, locations, vehicles or passport information against other government department databases, such as the Department for Homeland Security, FBI and Enforcement Integrated Database. This massive data analysis enables users to search and combine data on student visa status, real-time location, place of employment, tattoos, licence plates and more.^[48]

In 2025, The Guardian reported that Palantir also advised ICE on how to gather phone numbers and extract names from phones by unlocking them using an Israeli forensic software called Cellebrite.^[49] Additionally, FALCON has been used for “blueforce tracking” – a military term for tracking someone’s GPS location.^[50] A former Palantir employee told The Guardian that embedding with ICE agents and helping them find new ways to use Palantir products was a big part of certain employees’ jobs.^[51]

In 2020, Palantir admitted it was aware of the human rights risks associated with the Trump administration’s ICE operations.^[52] In 2022, Palantir was awarded 95.9 million dollars to improve ICE’s ICM system.^[53] Federal documents showed that in April 2025, Palantir was awarded a 30 million dollar payment to expand its work for ICE and build an ‘ImmigrationOS’ platform.^[54] An extensive leak of internal Palantir documents revealed that this platform includes location tracking, deportation logistics and targeting, all in the context of the mass deportations program currently being conducted by ICE.^[55] Amnesty International stated that “Immigration OS automates an already deeply flawed and unaccountable process that has a history of disregarding due process and human rights, further obscuring and reinforcing it.”^[56]

Palantir’s internal memos stated that ICE needed the company’s help to “accelerate mission progress across the agency” in line with the “incoming administration’s priorities”.^[57] These “priorities” – a wide variety of practices focussed on expanding detention and deportation of migrants – have been condemned by human rights groups including the UN^[58] and Human Rights Watch,^[59] with Amnesty International accusing ICE of torture and forced disappearances.^[60] In January 2026, a leak of internal ICE documents, alongside procurement contracts and recent sworn testimony from an ICE official, showed that Palantir is likely working on a tool that maps potential deportation targets and can generate leads.^[61] The investigation found that ICE is using the tool to find individuals’ locations, and that the tool is mining addresses from the Department of Health and Human Services (HHS) among other datasets.^[62]

WAR CRIMES AND GENOCIDE

Two reports have outlined Palantir’s alleged involvement in war crimes and genocide. In September 2025, Amnesty International released a report documenting 15 companies it had identified as contributing to Israel’s “unlawful occupation, genocide or other crimes under international law”.^[63] Palantir was named in this report as “supplying AI products and services to the Israeli military and intelligence services and are linked to Israel’s military activities in Gaza presently”.^[64]

The Amnesty International report called for states and public institutions to “bar these companies from trade shows, government meetings, contracts, research grants and activities with public bodies”.^[65] Some public bodies have already taken this action. In 2024, the Norwegian government released a statement advising Norwegian companies “not to engage in business cooperation or trade that serves to perpetuate the illegal Israeli settlements.”^[66]

Storebrand Asset Management, one of the largest asset managers in the Nordic region, then divested its holding in Palantir, with Storebrand stating that their research indicates that Palantir provides services “including AI-based predictive policing systems” that support Israeli surveillance of Palestinians in the West Bank and Gaza.^[67]

In June 2025, the UN Special Rapporteur on the situation of human rights in the Palestinian territories occupied since 1967, Francesca Albanese, released the report *From the Economy of Occupation to the Economy of Genocide*. In this expert report, Albanese identified Palantir as a company likely to be complicit in the “occupation and ongoing genocide in Palestine”. The report found that there are “reasonable grounds to believe Palantir has provided [Israel] automatic predictive policing technology, core defence infrastructure for rapid and scaled-up construction and deployment of military software, and its Artificial Intelligence Platform, which allows real-time battlefield data integration for automated decision-making.”^[68]

Palantir’s collaboration with the Israeli Defence Forces (IDF) has significantly strengthened since the assault on Gaza escalated. In January 2024, a strategic partnership was announced that Palantir would begin supplying the IDF with “advanced technology provision” for use in Gaza.^[69] In a 2024 CNBC interview, Palantir’s CEO stated they are “exceedingly proud” of their “operationally crucial” work in Gaza,^[70] and in 2025 responded to a protestor’s accusations that Palantir’s technology had contributed to the killing of Palestinians in Gaza by saying, “mostly terrorists, that’s true”.^[71] Albanese stated in her report that these actions demonstrate an “executive-level knowledge” about the war crimes committed by Israel and that Palantir’s failure to prevent them, or end its complicity, thus undermines its responsibility under the Geneva Convention.^[72]

SECTION 2: PROCUREMENT AND GOVERNMENT CONTRACTS

This section highlights that Palantir holds multiple contracts with UK government departments, several of which have been tainted with allegations of intensive lobbying^[73] and failure to follow fair procurement processes.^[74] Palantir’s widespread lobbying activities include making MP donations^[75] and hosting cocktail parties^[76] for NHS leadership. Palantir co-founder and chairman Peter Thiel proclaimed in a 2017 interview with the New York Times that “there’s a point where no corruption can be a bad thing. It can mean that things are too boring”.^[77] This has led the public, legal campaigners and health workers to question the validity of the FDP tendering process.^[78]

The wider encroachment of Palantir into the British public sector is relevant to NHS Trusts and ICBs, as it places the FDP within a larger Palantir strategy to maximise the number of UK state operations running on its platform. In a witness statement to the COVID-19 inquiry, Louis Mosley, speaking as CEO of Palantir UK, recommended that the UK government develops a “common operating system” combining healthcare and central government data.^[79] This report argues that Trusts and ICBs should not engage with the FDP on the basis of controversial procurement and lobbying practices surrounding the contract with Palantir. As outlined in Section 3, they should also consider how Palantir’s contracts with other arms of the UK government, such as the Ministry of Defence and police forces, risk expanding the capacity for data-driven abuses of state power, and the impact of this risk, real or perceived, on patient trust in the FDP.

When approached, Palantir did not refute intensive lobbying or a revolving door, instead claiming “the vast majority of companies operating at scale in the UK, Palantir engages with and consults government on policy matters, and vice versa.”

UK LOBBYING AND GOVERNMENT CONTRACTS

Palantir has contracts with multiple UK government bodies including the Cabinet Office, the Ministry of Defence (MoD) and police forces.^[80] In December 2025, the MoD awarded Palantir a £240 million deal for “data analytics capabilities supporting critical strategic, tactical and live operational decision making across classifications”. The contract was given without competitive tender and follows the announcement of a strategic partnership between Palantir and the MoD in September during President Trump’s visit to the UK.^[81] In January 2026, The Nerve published an investigation detailing Palantir’s deals with UK state amounting to at least £670 million, including a previously unknown £15 million contract with UK nuclear weapons agency AWE Nuclear Security Technologies, formerly known as Atomic Weapons Establishment (AWE). The investigation cited concerns from Marietje Schaake, a former MEP and leading technology and national security expert, regarding the US Cloud Act and Foreign Intelligence Service Act, which she said gives “law enforcement and intelligence the right to access data anywhere in the world if held by a US company”. In response to the investigation, Clive Lewis MP stated: “After this week’s geopolitical ruptures, this is a gaping national security vulnerability and, frankly, a scandal”.^[82] Palantir has refuted such concerns.

As No Tech For Tyrants and Privacy International identify, it is difficult to obtain specific information on the details of contracts the MoD and the Cabinet Office hold with Palantir, which data is processed through those contracts, and whether Data Impact Assessments or Equality and Human Rights Impact Assessments are conducted, leading to concerns over transparency and accountability.^[83] In its Cabinet Office contract, Palantir was given permission to combine Home Office, Defra, HMRC, Department of Transport, Driver and Vehicle Standards Agency, Highways England, and Port Health Authority data all under the Cabinet Office.^[84] In 2024, Palantir sought meetings with the Ministry of Justice offering to provide “reoffending risks” calculation services to the UK’s prisons, leading Amnesty International UK to express concern over the risk of discrimination and miscarriages of justice if AI is introduced into the justice system.^[85] In their report, All Roads Lead to Palantir, No Tech For Tyrants and Privacy International state that “Palantir’s growing role in a range of UK government bodies, coupled with the lack of transparency from the government on what this role entails, means Palantir will have increasing access to data about people living in the UK, and the power to shape the processing and analysis of this data, with no accountability to the public.”^[86]

Allegations of intense lobbying and potentially unfair procurement processes are not unique to the FDP. A 2025 investigation by the Financial Times found that Palantir is operating a highly lucrative “revolving door with Washington and Westminster”, particularly utilising current and former civil servants and ministers, as well as lobbying and hospitality events.^[87] Former UK government officials now employed or consulted by Palantir include former Labour deputy leader Lord Tom Watson,^[88] ex-MoD strategy director Polly Scully,^[89] and former MI6 head Sir John Sawers.^[90] Additionally, Palantir’s UK Corporate Affairs Lead is Ben Mascall, a former adviser at the MoD and ex-director of communications for Rishi Sunak’s leadership campaign.^[91] An Open Democracy report revealed that in 2020, Palantir won a £27 million border control contract without competitive tender, shortly after Sir John Sawers introduced the CEO to a contact at the Cabinet Office.^[92]

In August 2025, leaked documents revealed that ex-prime minister Boris Johnson and his former aide Dominic Cummings had secret, non-minuted meetings with Peter Thiel in 2019.^[93] Cummings went on to lobby significantly in Palantir’s favour.^[94] In February 2025, ex-Tory defence minister Leo Docherty joined Palantir as a paid advisor.^[95] Labour MP Rachael Maskell suggested that authorising such an appointment should trigger an inquiry into the company’s operations in the UK, noting: “Such a company will only engage a former Tory minister, if it believes that this buys access and opportunity and leads to greater influence, power or profit.”^[96]

Also in February 2025, prime minister Keir Starmer visited the Palantir office in Washington DC during his trip to see Donald Trump.^[97] At the time, Peter Mandelson was Labour’s ambassador to the United States and his lobbying firm, Global Counsel, also represented Palantir. No minutes or public record was made of this meeting.

NHS CONTRACTS AND FDP PROCUREMENT

Palantir has lobbied extensively for work with the NHS. In 2019, the BBC reported that Palantir’s UK head hosted Lord David Prior, chair of NHS England, the night before the launch of the former NHS technology division, NHSX.^[98] Soon after, in March 2020, Dominic Cummings and Simon Stevens (then NHS CEO) called a meeting on how to tackle COVID-19 with several big tech companies, including Palantir.^[99] The next day, Palantir signed a deal for its Foundry software to be used to create and host a COVID-19 database for just £1 for the first three months.^[100] This contract was given without competitive tender, and then Secretary of State for Health and Social Care Matt Hancock used special ministerial powers to bypass patient confidentiality rules and allow the company to process patient data.^[101]

One of the main figures involved in helping Palantir get contracts during the pandemic was the former British Ambassador to Israel, Matthew Gould, who was CEO of NHSX. As CEO, he recommended to Ministers that they “used emergency powers to award the contract to Palantir”.^[102]

Gould had also had meetings with Palantir in 2019, months before it got its first NHS contract.^[103] Palantir went on to win further multi-million pound extensions, using a no-bid deal at the start of the pandemic to win millions of public funds. As the contract progressed, the contractual details of what specific data would be processed by Palantir grew and blurred, at one point including “any other personal data that may be useful” alongside standard definitions of personal data.^[104] After the COVID-19 contract, Palantir had a significant advantage entering the FDP procurement process. Palantir was referred to as the recipient of NHS funding even before official decisions had been made, as revealed by an email exchange from 2020.^[105]

The strategy described above is in line with the acquisition plan explained by Palantir in its prospectus – offering low-cost pilots as an investment to drive future revenue growth.^[106] In internal emails seen by Bloomberg, Palantir UK Chief Louis Mosley sent a message entitled “buying our way in”, describing the company’s NHS strategy as “hoovering up” small businesses working with the NHS to “take a lot of ground and take down a lot of political resistance.”^[107]

The lobbying of civil servants and “revolving door” described by the *Financial Times* also relates to multiple NHS executives. For example, Ming Tang, who is currently the Chief Data and Analytics Officer for NHS England, was also a ‘guest of honour’ at a Palantir lobbyist dinner.^[108] In addition:

- Dr Indra Joshi was director of AI for NHSX until 2022 when she took a role as director of health, research and AI with Palantir.^[109]

- Harjeet Dhaliwal has been a deployment strategist at Palantir since 2022. She was Deputy Director of Data Services for NHS England from 2019 to 2022, and before that spent the previous 12 years either working with health commissioning in England or working directly with data in NHS roles.^[110]
- Paul Howells was the leader of the National Data Programme between 2018 and 2021 for NHS Wales before joining Palantir to work on health and care.^[111]
- Justin Whatling came to work with Palantir from health information technology company Cerner (now known as Oracle Health) in 2021.^[112] He is currently an advisor to CW+,^[113] the official charity of Chelsea and Westminster Trust, the health trust being lauded as ‘best in show’ when it comes to Palantir’s FDP pilot products.^[114]
- Matthew Swindells, once named the fourth most influential person in the NHS,^[115] was one of the first NHS ‘stars’ to join Global Counsel lobbying firm after leaving his NHS role as Deputy Chief Executive and Director of Operations and Information in 2019 – just two months later, he was working with Palantir in his new position.^[116] He is now joint chair for all four acute Trusts in North West London, including Chelsea and Westminster.^[117]

In conclusion, both the FDP and Palantir’s other UK government contracts raise significant concerns around unfair procurement practices, revolving doors and intense lobbying, calling into question the FDP tendering process and making the legitimacy of the contract vulnerable to public mistrust, as well as potentially open to legal challenge.

SECTION 3: RISKS TO TRUSTS AND ICBS

In this section, this report argues that adopting the FDP presents risks to Trusts and ICBS, as well as to NHS England as a whole. In particular, Trusts and ICBS run the risk of contributing to irrevocable damage to patient trust in NHS data systems and local NHS institutions, in particular for patients most impacted by health inequalities. This is exacerbated by a lack of staff support for the FDP, with significant resistance to the rollout from key unions such as the BMA.

We argue that there remains serious concerns regarding data privacy within the FDP and an unclear scope of data sharing within the FDP, exacerbated by the government's commitment to revisit the regulations relating to confidential patient information. We are concerned that the proposed process of pseudonymisation is insufficient to protect patient data, and there are concerns over Palantir's suitability as a data processor given that investigations have revealed their involvement in mass surveillance operations.

This section also explains the interoperability of Palantir's different platforms, including between Foundry (the basis of the FDP) and their military-focussed software (Gotham), between which users are able to 'drag and drop' data. The FDP brings together disparate and highly sensitive health data into a single platform run by Palantir, which must be protected from other UK government departments. Palantir's current contracts with policing forces and the Ministry of Defence, their extensive work for ICE, and its proposal for a single government operating system raise concerns that a current or future government could utilise the FDP for data driven abuses of state power. Trusts and ICBS must also consider how the interoperability of Palantir's software means that the FDP could ultimately improve the capabilities, user experience and the reputation of Palantir as a company, with implications for complicity in human rights abuses.

In addition, there are institutional risks to Trusts and ICBs such as vendor-lock in and suitability of the technology. Trusts risk becoming dependent on Palantir as a supplier, both for the software itself and the expertise needed to manage the software. Due to Palantir owning the software basis of the FDP (Foundry), NHS analysts and data engineers are not able to fully read or edit the code that shapes the products, making both accountability and transferring away from Palantir challenging. Several Trusts and ICBs have raised concerns that the FDP is pushing out locally tailored and trusted data management solutions, with minimal benefit.

A) PATIENT TRUST, ETHICS AND REPUTATIONAL DAMAGE

The allegations of complicity in human rights abuses, the political views of Palantir leadership, and Palantir's extensive involvement in state surveillance operations pose a serious threat to public trust in the FDP and in NHS data systems as a whole. Public trust is essential for successful health data programs, and Palantir's reputation may also undermine public support for other data initiatives that Trusts are involved in separately to the FDP.

This threat was highlighted by Dr Nicola Byrne, the National Data Guardian, who argued that lessons must be learned from the failures of past data centralisation efforts, such as 'care.data' and General Practice Data for Planning and Research (GPDPR), and emphasised the need for any commercial actor in the FDP to be able to "prove to the public that it is trustworthy".^[118] Care.data, launched in 2013 and cancelled just three years later, was a previous attempt to centralise NHS data from GP surgeries aimed to support resource planning and research, but plans included linking that data to other datasets and external parties such as researchers and private companies. A lack of consultation, poorly designed opt-out and the involvement of private companies caused widespread outrage, resulting in a mass opt-out of 1.2 million patients which forced the NHS to abandon the programme. Similarly, GPDPR failed due to a mass public opt-out over patient data safety concerns.^[119]

The British Medical Association (BMA) wrote to the government regarding Palantir's contract in 2023 stating: "The public and the profession have not been adequately consulted and reassured, and the scope and scale of the programme do not appear to have been sufficiently established".^[120]

The lack of trust over how patient data would be handled gave the BMA concerns that it would fatally undermine the project. Lack of trust in Palantir is already becoming a problem for Trusts. In a report confirming its decision not to use the FDP, Greater Manchester ICB noted specific objections to any use of the FDP from some Greater Manchester patients and data controllers, as well as concerns from the local branch of trade union Unite, which also objected to the implementation of a Palantir-run platform.^[121]

The involvement of Palantir in NHS systems has also triggered widespread concern from civil society organisations and the public. In 2023, Just Treatment and Connected By Data jointly published a report about patients' perspectives on health data, based on a survey of over 2,700 NHS patients alongside a number of in-depth interviews.^[122] The report highlighted that patients are deeply unhappy with the prospect of their health data being handled by Palantir. For some, this concern is centred on Palantir's co-founder and chair, Peter Thiel, who has been openly critical of the NHS. For others, it arises from a broad perception of Palantir as an unethical company. As of February 2026, over 47,000 patients have written to their local trust boards complaining about their involvement in the FDP, urging trusts who have begun using it to withdraw, and those who are still considering it not to sign up.^[123]

Palantir’s involvement in the NHS has also been subject to criticism in the press^[124] and amongst MPs.^[125] Campaigning groups have run mass actions such as petitions opposing the FDP plans.^[126] After significant public backlash, Coventry City Council was forced to review a contract with Palantir to use its tools in social care work.^[127]

Given the concerns raised by a wide range of civil society bodies, and the evident strength of feeling amongst the public about Palantir’s role in the NHS, Trusts that implement the FDP risk inviting significant protest and disruption from patients and the public. This is worsened by the lack of clarity around patient opt-out rules.

Lack of clarity on patient opt-out

There has been confusion and conflicting information over the applicability of patient opt-out. There is significant demand to be able to opt out of the FDP – 48% of adults in England who responded to a YouGov poll commissioned by Foxglove and the Doctors’ Association UK stated that they are likely to opt out should the FDP be introduced and run by a private company.^[128]

NHS England only allows patients to opt out of data processing (which includes data sharing) when it is being used for purposes beyond their direct care e.g. planning or research purposes. The NHS National Data Opt-Out is a legal right in England, established under the NHS Constitution. Health and care organisations must respect and work alongside data protection laws (GDPR, DPA 2018), and are required to check for opt-outs before sharing data for these secondary uses.

NHS England currently states that it will not allow patients to opt out of the FDP because it will either contain “no confidential patient information” or will contain it solely for the purpose of direct care.^[129]

This is contentious for multiple reasons. Firstly, there is no clear definition of what NHS England considers direct care, and it could be argued that multiple instances of the FDP are for planning and research purposes. In addition, 'confidential patient information' is not a concept in data protection law, so it is unclear why NHS England would state a lack of 'confidential' data as a reason why patients should be unable to opt out. It is also unclear whether NHS England is referring to pseudonymised data in this instance, which, as outlined below, is still considered sensitive data by the Information Commissioners Office (ICO).

NHS England later added: “If, in the future, FDP is used for a purpose where the national data opt out does apply, then it will always be respected. This means that the records of patients who have registered a national data opt out will not be processed in the FDP for these purposes.”^[130]

Therefore, the National Data Opt-Out could be used to limit the information shared with Palantir’s FDP in the future, thereby risking its effectiveness.

The opt-out section within the FDP privacy notice is unclear.^[131] Privacy notices should be easily understandable and data subjects should be able to clearly understand how they can exercise their rights. The lack of clarity here could be viewed as a means of preventing opt outs by obfuscating how data subjects can exercise their rights. This could be due to the threat of mass opt-outs, as was seen in 2021 in response to the government's opaque plans to share GP data.^[132] Even if NHS England addresses some of these concerns, it will be nearly impossible for Trusts to reassure patients who are aware of Palantir's operations that their data will be safely handled.

B) DATA MANAGEMENT AND PRIVACY CONCERNS

We argue there are multiple data management concerns within the FDP. As with previous contracts, the nature of the FDP and health data means that Palantir's software will be processing and analysing confidential patient information, even if there are restrictions on what they can do with it.^[133] The FDP brings together disparate and often locally-confined data, providing a huge repository of highly sensitive data that needs to be safeguarded from other government departments as well as external actors.

Firstly, there remains a lack of clarity on which information will be retained in the FDP, what specific protections exist, how data would be processed, and for what purposes, especially as many of the potential future uses of the FDP have yet to be defined. This is especially concerning given the government's eagerness to reform data regulations.

The Labour government manifesto has stated policy goals to "make [NHS] datasets more open to business, researchers, and citizens".^[134] A read out and briefing document from a private meeting between Wes Streeting and Palantir in June 2025 have been obtained via Freedom of Information request.^[135] The Department of Health and Social Care (DHSC) briefing note for the meeting states: "Palantir may raise issues with IG in the NHS as presenting obstacles. Obviously, it is very helpful to hear from a key provider where the challenges are; we do want to consider how we remove unnecessary obstacles; we have a long-standing commitment to revisit the regulations relating to confidential patient information, and this is likely to present opportunities." In the read out, the document states: "the SoS [Secretary of State] said the gov are interested in regulatory reform and how processes can be made more efficient".

Secondly, this report argues that the data privacy protections within the FDP are insufficient. NHS England claims that once FDP data moves from the Trust level to the ICB or national level, it is "de-identified".^[136] However, this process of pseudonymisation is not adequate data protection. As Cori Crider, a lawyer at Foxglove Legal warns: "Slapping a sticker over your NHS number doesn't suddenly mean your health record needs no protection. People are very easy to re-identify from pseudonymised data."^[137] NHS England has hired a separate company, IQVIA, to perform the process of pseudonymisation. However, documents shared with the FDP board show that NHS England had received legal advice showing this vital aspect of the program – its privacy-enhancing technology (PET), to be provided by IQVIA – lacked a legal basis to process data.^[138]

Recent guidance from the ICO highlights that pseudonymised data remains personal data and any processing of it requires a legal basis.^[139] Despite NHS England initially stating that GP data would not be on the FDP, ICBs are being advised to check the data sharing agreements they have with GP practices, and if the agreement does not specifically mention where shared data is to be held the ICBs can transfer the GP data to the FDP without informing the GP practice.^[140]

NHS England states that access to data within the FDP must be authorised with the “explicit aim to benefit patients and/or the NHS in England”.^[141] This does not preclude Palantir staff or other government departments from accessing the data within the FDP (if that authorisation is obtained). For example, private correspondence between data analysts at ICBs in England and the authors revealed that NHS Provider Trusts are receiving multiple requests per week from Palantir staff for access to stored patient identifiable data.^[142]

Although the terms of the contract between NHS England and Palantir are now mostly public, the government initially only released a heavily redacted version of the contract with 417 out of 586 of its pages completely blanked out.^[143] Another contract, awarded to biotech company IQVIA to deal with NHS data to provide ‘Privacy Enhancing Technology’ for the Federated Data Platform was also heavily redacted.^[144] Following a legal challenge from the Good Law Project, the government released substantially unredacted versions of both contracts.^[145]

In legal correspondence with the Good Law Project, NHS England admitted that parts of its contract with Palantir were still being agreed – including a section on the protection of personal data – even after the deal was signed.^[146] We argue this is legally questionable, unfair to other bidders, and involves trying to negotiate key parts of the contract after relinquishing its negotiating power.

Thirdly, we argue that while data controllers (NHS England) have control over how processors (Palantir) operate to a limited extent, we are concerned about whether Palantir can be trusted to keep data secure. In December 2025, an investigation by journalists at the WAV research collective and Republik found that an internal Swiss Army report expressed fear that Palantir would pass on confidential Swiss Army data to the American intelligence agencies CIA and NSA.^[147] Palantir refutes this and states that the report is inaccurate.^[148]

Palantir’s operations have also raised multiple concerns amongst data privacy experts, human rights organisations and surveillance watch dogs such as Corporate Watch,^[149] Liberty Investigates,^[150] and Foxglove.^[151] For example, documents obtained by *The Intercept* showed that Palantir supported the US spy-agency NSA in its infamous mass surveillance project, eventually exposed by Edward Snowden – Palantir was found to facilitate, augment, and accelerate the use of the NSA’s XKEYSCORE tool, which collected private data ranging from people’s emails and voice calls to their social media traffic.^[152]

Despite its own recorded concerns about security, the UK spy-agency GCHQ also employed Palantir in its surveillance work, collaborating with the NSA and intercepting vast amounts of private digital communications.^[153] Palantir's involvement in these projects raises serious concerns over its suitability as a dutiful data processor. Palantir denies conducting or providing surveillance services, or selling software for the purposes of enabling unlawful surveillance. Our concern remains that Palantir's software is used by states to conduct highly intrusive, discriminatory and mass surveillance of people, whether lawful or unlawful.

When we raised these concerns with Palantir, it said that "NHS England has published comprehensive information outlining how data is processed within the FDP" and pointed to the NHS website for the published Information Governance Framework and Data Protection Impact Assessment. We do not consider these documents to be adequate to address the concerns outlined. Palantir stated that the responsibility for data compliance falls on data controllers.

Palantir's potential to benefit from the FDP

In addition to data privacy concerns, we argue that Trusts and ICBs should consider the wider consequences of Palantir's FDP contract, including how it benefits Palantir as a company. NHS England has stated that Palantir will not be able to sell on the data, but this does not mean it will not profit from it in other ways. Beyond the value of the contract itself, the opportunity for Palantir to work with the NHS is a highly valuable asset.

We argue it is likely that Palantir will be able to use their partnership with the NHS to improve its existing software products. Research by [No Tech For Tyrants and Privacy International](#) into rare, unredacted contracts, shows that Palantir seeks to include "improvement clauses" in its agreements with governments, enabling it to improve its algorithms or systems based on its customers' use of its products.^[154] Improvement of Palantir's software is not only about data, but also functionally, workflow and practical experience. The experience gained from working with the NHS, both technical, strategic and political, could enable Palantir to improve the quality and experience of its services and gain further market access across health systems. For example, a recent BMJ investigation found that Chelsea and Westminster are piloting an AI discharge summary tool for Palantir's FDP, which will be improved and refined using data, staff and experience from Chelsea and Westminster.^[155]

Amnesty International has raised concerns that "Even if [Palantir] cannot walk away with direct patient records, they can [...] make themselves indispensable partners for providing software to analyze the data which is the key that unlocks the value of the data."^[156]

Palantir is also likely to benefit reputationally from contracts with the NHS, which could strengthen its ability to win other public contracts. In the investigation by WAV and Republik, it was revealed that Palantir used its NHS contracts as part of lobbying the Swiss health authorities.^[157]

Palantir has also attempted reputational damage control related to the NHS contract. In early 2024, it was investigated by NHS England for a potential breach of contract after it designed an influencer campaign, which Jo Maugham of the Good Law Project described as a “covert smear campaign against a prominent critic”.^[158]

Whilst NHS England states that Palantir is not permitted to explicitly train AI models on NHS data,^[159] data is extremely hard (if not impossible) to extract and remove from AI algorithms once it has been entered. As Palantir’s products are highly interoperable, it is unclear how NHS England will prevent data from being used to further improve Palantir’s AI models once they are part of the FDP. In response to these concerns, Palantir claimed it does not use any customer data for product development. In a 2025 Guardian interview discussing Palantir’s FDP, Dr David Wrigley, the deputy chair of the BMA’s general practitioners committee, argued that fears over what their data may be used for may lead to patients not wanting to provide data to their doctors.^[160]

This is not the only concern regarding AI elements of the FDP. A recent piece by the Chief Data and Analytics officers across the NHS, raised concerns about AI models that sit as part of the FDP, stating they were left with questions about: “Whether any component of processing leaves the platform boundary; Which organisations act as processors or sub-processors; Where infrastructure is geographically located; How long information is retained; Whether data contributes to model logging or improvement processes”.^[161]

We argue that NHS England’s contract with Palantir is likely to strengthen Palantir’s software and reputation as a company. Given the highly interoperable nature of Palantir’s different civil and military products, this could indirectly result in the NHS contributing to the advancement of militarised technology used to commit alleged human rights abuses. The concern over complicity in Palantir’s other operations was highlighted in a Parliamentary Science and Technology Committee meeting. Kit Malthouse MP asked “What protections would you put in place for UK programmes to make sure that they are not complicit in the commission of war crimes?”, which Palantir UK CEO Louis Mosley failed to directly answer.^[162]

Cross-departmental data sharing

In addition to the concerns outlined above, this report is concerned that the FDP, by bringing together disparate health datasets onto a single platform run by Palantir, could enable UK government departments, such as the Home Office and police departments, to more easily access patient data. With the upcoming merger of NHS England and DHSC, it remains unclear who will be the data controller and how that will impact data protections. As highlighted in previous sections, Palantir’s services to other governments, including their contract with ICE, have involved significant cross-departmental data compiling and analysis. We therefore believe there is a risk that a current or future government could utilise a Palantir-run FDP for data-driven state abuses of power in ways which they could not with current NHS data systems.

Karp said in a 2023 BBC interview that it is up to the UK government to decide whether or not to sell NHS data, as "That data belongs to the government of the United Kingdom."^[163] This demonstrates a misunderstanding or disregard for data protection principles – health data is sensitive information to be protected in compliance with data protection laws, including protection from the UK government itself. Other government departments attempting to access NHS data is already an issue in NHS data systems. For example, in 2017 the former head of NHS Digital, Kingsley Manning, revealed that the Home Office was repeatedly demanding migrants' confidential health data without proper legal frameworks.^[164]

In Palantir's Parliamentary Science and Technology Committee meeting, concern regarding "drag and drop" of data between Palantir's health (Foundry) and military systems (Gotham) was raised. Kit Malthouse MP asked: "If I have a large pool of data about a set of individuals and, in a defensive or offensive capability, I wish to target particular individuals with particular characteristics, your AI would allow me to do that." Mosley's answer confirmed: "On drag and drop, Foundry is used in military contexts alongside Gotham. That is why those two platforms are interoperable, so that moving data and other applications between the two is seamless." He emphasised that such a decision would be very grave. This answer implies that interoperability of data with defence systems is certainly possible with Foundry, the software being used to build the FDP. Kit Malthouse replied "That sounds like a yes" and this was not disputed.^[165]

This is especially significant given Palantir's recent deal with the UK Ministry of Defence and multiple contracts with UK police forces.

In January 2025, Louis Mosley, Executive Vice President, UK and Europe at Palantir, argued that the UK should adopt a "common operating system", linking data from the NHS, Department of Work and Pensions and other public sources on its systems – using a Palantir programme, Foundry, as an example.^[166] In May 2025, the Business and Human Rights Centre reported on the Trump administration's drive to cross-compile government departmental data for profiling and surveillance purposes. Government officials said "widely adopting Foundry, which organizes and analyzes data, paves the way for Mr. Trump to easily merge information from different agencies". At the time, Palantir already held contracts with ICE, the Department for Homeland Security, the Department of Defense, and the Health and Human Services Department.^[167]

As well as the potential risk for a current or future UK government to attempt to emulate US-style cross-governmental data sharing, there is a serious risk of Palantir's contract alienating patients most affected by health inequalities due to this perceived risk. The report Migrants' Access to Healthcare During the Coronavirus Crisis was released by the migrant health advocacy group Patients not Passports in June 2020.^[168] It found that 57% of migrant organisations responding to the research reported that migrants had avoided seeking healthcare because of fears of being charged for NHS care, data sharing and other migration enforcement concerns.

The respondents “frequently highlight associated fears of being reported to, or identified by, immigration authorities as a result of accessing NHS care”, highlighting the lack of public trust in data confidentiality in healthcare services, impacting both individuals’ health and public health during a pandemic.^[169] Palantir’s high profile work with ICE, alongside the existing data sharing agreements between the Home Office and the NHS, is likely to worsen this.

C) INSTITUTIONAL RISKS

Beyond ethical and data privacy considerations, we argue the use of Palantir software in NHS Trusts, ICBs and NHS England carries broader institutional risks. Currently, there are concerns from multiple sources regarding the quality and suitability of the software. Even if these were resolved, we argue that vendor-lock in and dependency on Palantir as a supplier (of both software and expertise) is a significant risk that also undermines local decision making.

Suitability and cost

There are ample alternative products to the FDP that provide similar operational and analytical capabilities to Trusts and ICBs, some of which are outlined by [Foxglove](#) in their report on the Federated Data Platform,^[170] and others highlighted in [a 2025 report by Corporate Watch which interviewed NHS England staff](#).^[171] This report also revealed through Freedom of Information requests that multiple trusts had raised concerns that FDP was pushing out local, trusted and high quality systems.

In late 2024, Leeds Teaching Hospitals NHS Trust replied to a Freedom of Information request stating: “From the descriptions we have of these FDP products we believe we would lose functionality rather than gain it by adopting them”.^[172] Several other trusts – including in Warwickshire, Essex, and London – refused to use the FDP since they were already implementing a new digital system. Similarly, South Warwickshire NHS Foundation Trust decided not to adopt the FDP at this point because it is focusing on implementing a new Electronic Patient Record system.^[173]

In February 2025, the NHS Chief Data and Analytical Officer Network (CDAON) wrote an [open letter](#) to Chief Digital and Information Officer, Ming Tang, detailing objections to the FDP’s roll-out.^[174] The letter cited unclear adoption and maintenance costs and “programme drift”, i.e. imposing a single software platform rather than integrating the existing data. The letter concluded, “we already have similar tools in use that presently exceed the capability and application of what the FDP is currently trying to develop or roll out at a system level” Two months later, the CDAON again warned of “[patient safety risks](#)” due to systems being closed down before FDP functionality is fully activated.

In early 2025, Greater Manchester (GM) ICB reported that “[Palantir’s platform] does not currently have any system-level products that offer the same or better functionality, compared to the custom-built system already in use for NHS GM”.^[175]

The GM ICB board were also informed that “adoption of (the) FDP may represent a time-consuming and possibly retrograde step”, adding that its own data system also had a “hard won foundation of trust”, and that choosing Palantir “has caused some public consternation in relation to data security and the decision not to invest in the domestic market”.^[176] In November 2025, GM ICB reaffirmed its decision not to adopt the FDP, stating they lacked evidence it was in the best interests of the local population.^[177]

Some health workers in trusts already using the FDP, as well as staff working for NHS England in data and analytics, expressed frustration and dismay at the platform as part of a Corporate Watch investigation:

- “We’re being forced to use a convoluted system that makes even the simplest tasks feel like pulling teeth. It’s demoralising, and honestly, it’s a waste of everyone’s time and public money” – NHS Worker
- “Not only could similar functionality have been delivered at a fraction of the cost, but the existing tools are already better integrated, more intuitive, and more conducive to collaboration” – NHS Data Analyst^[178]

In addition, there are concerns that trusts will incur additional costs through adoption. A freedom of information request to Imperial College NHS Trust revealed that it alone had to spend nearly £500,000 of its own budget implementing the FDP.^[179]

NHS England is arguably underestimating the staff time needed to implement a new tech system, in the middle of an NHS funding and staffing crisis, and widespread recruitment freezes and layoffs in ICBs. A government procurement website published further evidence showing that Northumbria Healthcare NHS Foundation Trust paid Palantir an additional £412,500 for FDP support.^[180] At the national level, a recent Health Service Journal article highlighted that the true cost of FDP implementation is likely to be over £1 billion.^[181]

When approached for comment, Palantir pointed to NHS data which claims that 79 NHS Trusts are active on the FDP and reporting patient benefits, and that the programme has delivered 100,000 additional operations while reducing discharge delays by 12 per cent, and removed more than 675,000 patients from the waiting list. The data behind these claims is not publicly available. Palantir also stated that the UK government’s National Infrastructure & Services Transformation Authority has rated the NHS FDP programme “green” and pointed to a number of NHS staff who have had positive experiences of the FDP.

Vendor lock-in

For Trusts and ICBs, adopting the FDP risks locking their operations into a single monopoly supplier. These concerns are amplified by Palantir’s stated intention to monopolise government contracts with its technology.^[182] We argue that NHS institutions should not be dependent on one supplier, should be easily able to transfer between suppliers, and should also invest in in-house data and analytics software and personnel capacity.

Whilst Palantir may not have intellectual property rights to NHS data itself, we understand Palantir will retain the intellectual property rights to the products developed for FDP itself, as it is based on Palantir's Foundry software, despite using the domain expertise of the NHS to create these products. Section 16.1 of the contract between Palantir and NHS England outlines that the Authority (NHS England) will not acquire any right, title or interest in or to the Intellectual Property Rights of the Supplier or its licensors including the "the Specially Written Software".^[183] When the FDP contract is over, it seems that NHS England's integrated data system will then be stuck within Palantir's software or will need to be rebuilt from scratch, giving Palantir a significant market advantage.

Interoperability of code is also essential to preventing vendor-lock in. Private correspondence between authors and analysts highlights these issues within the FDP, with one analyst reporting that they are "being forced to write code that is basically only compatible with Foundry".^[184] Whilst they can edit key elements of the software to suit local needs, one analyst raised that "the fundamental code of Foundry and the analytical tools, calculations and algorithms are not readable to us, meaning that key issues such as racial bias in operating systems cannot be fully interrogated by non-Palantir data engineers and analysts".^[185] This limits the ability of local staff to migrate code, restricts handling of nuance and obscures accountability for the outcomes of analysis or decision-making. In 2017, BuzzFeed News reported on an alleged dispute between the New York Police Department at the end of their contract with Palantir.

The New York Police Department sources in the article claimed that Palantir refused to provide a translatable version of the analytics, and only provided the raw data, arguing it would expose their intellectual property.^[186] Palantir stated that "users interact with the platform entirely through open-source frameworks" and "only minor changes" would be required to export it, but analysts interviewed for this report explained that the work still remains on Palantir's FDP platform (which is not open-source). They stated that work is not easily shareable outside of the FDP platform and it "feels like the intention is to create a closed loop that relies on Foundry".

Foundry also creates a reliance on Palantir personnel. For data analysts within the NHS, organisations cannot fully see the code that shapes their data products. Control of the platform is heavily centralised, as Palantir supplies the data engineers and manages the data infrastructure and logic.^[187] There is little to no ability to tweak products independently and reflect local variations in service delivery without Palantir engineers. In the current context, there is an even higher risk of reliance on Palantir as a provider, and Palantir staff as technical support, given the planned cuts to ICB and NHS England staff whose in-house technical expertise could be used to develop and manage alternatives to the FDP.

It is therefore likely that any attempt to transfer from Palantir software to another company or back to NHS systems would be challenging once Palantir is embedded in the NHS. This is neither democratic nor competitive, and could result in one private provider dominating the data management systems of the NHS.

Safeguarding local decision making

Since the contract was awarded to Palantir, Trusts and ICBs have been under intense pressure from NHS England to adopt the FDP, sparking concern of attempts to override local decision making processes.^[188] In April 2024, NHS England hired the consultancy firm KPMG, in an £8.5 million contract, to “promote the adoption” of the programme.^[189] In summer 2024, Dame Emily Lawson (Chief Operating Officer of NHS England) and Vin Diwakar (NHS national transformation director) wrote to all Trusts requiring them to confirm their plans by 5 August 2024 to adopt the FDP within the following two years, creating the impression that adoption was mandatory.^[190] However, an NHS England spokesperson later confirmed that “implementation is still not being mandated”.^[191] In response to concerns, NHS England reassured the South Warwickshire Trust that signing the MOU didn’t commit them to any timeframe, and other trusts, as outlined above, have since declined the implementation of the FDP.^[192]

Since then, NHS England and the central government have increasingly promoted the FDP. In NHS England’s October 2025 medium term planning framework there were further instructions to adopt, prioritise and embed the FDP, in particular the “core products”.^[193] According to Mark Farr, chair of the Chief Data and Analytical Officer’s Network, this contradicts previous guidance, which stated that “you have to consider the FDP but if you already have data and tools in place then you can proceed and not use it”.^[194]

Although strong directional words are used around adoption, NHS England falls short of stating that adoption of the FDP is mandated, citing its role as reinforcing planning guidance and on boarding, but not legally obliging any body to adopt.^[195] Dr Vin Diwaker, National Director of Transformation in NHS England, confirmed “We would never force it on people if they do not want it”.^[196]

D) STAFF CONCERNS AND UNION OPPOSITION

A further risk to Trusts and ICBs is that attempts to use FDP products will be delayed or stopped by internal opposition from staff, including both clinical staff and data analysts. The BMA, following its AGM in June 2025, is officially opposed to the rollout of the Federated Data Platform and investigating how doctors can refuse to use the FDP.^[197] Given the widespread outrage amongst health workers over the FDP, there is a high likelihood that trusts attempting to implement the FDP will face significant opposition from clinicians. Rather than addressing concerns, Louis Mosley, Palantir UK Executive Vice President accused the BMA of choosing “ideology over patient interest”.^[198]

The BMA has committed to:

1. lobby at a national level against the continued introduction of Palantir's software into health data systems, and to terminate all existing contracts that the NHS holds with Palantir
2. write to all relevant parties outlining these concerns
3. encourage local, and regional BMA bodies to lobby their local trusts and ICBs to terminate existing contracts they may hold with Palantir
4. call on the Department of Health and Social Care to create a full, publicly available audit detailing the progress of the uptake, and the efficacy of these systems throughout the NHS
5. support members in taking actions against Palantir by creating guidance regarding rights to refuse to use data products supplied by companies associated with warfare and human rights violations, such as Palantir
6. raise support for suitable, publicly-owned alternatives to Palantir's FDP.

In addition to clinical staff, the NHS London branch of UNISON, who represents a significant number of NHS England workers, has also passed a motion related to the FDP requesting that Unison:

- write to the Health Secretary and NHS England outlining concerns and objections to the ongoing implementation of the Federated Data Platform
- encourage all health branches to support wider campaigning efforts to bring the Federated Data Platform in-house
- for solidarity with NHS England workers in our membership campaigning for an in-house Federated Data Platform.^[199]

Trusts and ICBs are likely to experience particular concern from staff and patient bodies focussing on diversity, equity and inclusion, given the nature of Palantir's operations and corresponding allegations of human rights abuses. For example, the NHS Confederation [BME \(Black and Minority Ethnic\) Leadership Network](#) pulled out of NHS ConfedExpo (an independent membership group for organisations that commission and provide NHS services) raising ethical concerns about Palantir's sponsorship of its 2025 Expo in Manchester.

^[200]

RECOMMENDATIONS

This report has presented the extensive allegations of Palantir's involvement in human rights abuses and other unethical practices, questioning its suitability as an NHS provider. It has also detailed Palantir's lobbying activities across the UK government and the corresponding concerns for fairness in the procurement process. This report has outlined, therefore, how the Federated Data Platform, with Palantir as its provider, poses a number of risks to Trusts and ICBs considering adoption. In particular, this report outlines the risks of:

- Damaging patient trust not only in the FDP, but in NHS data systems as a whole
- Insufficient data management and privacy practices within the FDP, both current and future, putting NHS data at risk
- NHS data and knowledge being used to indirectly strengthen the software and reputation of a company whose other operations are allegedly linked to human rights abuses
- Expanding the capacity for cross-governmental data sharing in relation to health and other personal data
- Locking-in local NHS institutions into a single-supplier dominance, preventing competitive procurement and the development of locally specific and/or in-house data management systems
- Generating significant opposition from staff, making implementation challenging.

The Federated Data Platform is not fully operational at this time, and is rarely essential to patient care or Trust or ICB operations. The current moment is therefore critical for highlighting concerns and urging decision makers to reconsider the contract with Palantir. NHS England can withdraw from the contract with Palantir, and a review of the contract is upcoming in early 2027.

Given the serious risk to patient trust in NHS services this report recommends that Trusts and ICBs urgently:

1. Decline the implementation of FDP or any other Palantir products in their local data systems
2. Write to NHS England, the Department of Health and Social Care and the Secretary of State for Health and Social Care outlining their reasons for declining
3. Urge NHS England to terminate its contract with Palantir Technologies
4. Communicate clearly to their staff and patients that they will not implement the FDP or any other Palantir products
5. Scrutinise their current contractors to identify potential human rights abuses and review appropriately
6. Investigate the feasibility of in-house and/or open source software as a first priority for data solutions.

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