Twitter Thread by The Citizens





Did you catch our thread on the expanding reach of US company Palantir into UK public institutions? £91m+ awarded to the controversial Silicon Valley data-analytics outfit across government. Let's take a closer look at their work with the NHS...

Many of their recent contracts have been awarded by the NHS and DHSC, who\u2019ve spent almost \xa325 million on Palantir products since the start of the pandemic, most recently spending \xa323 million for \u201cdata management platform services\u201d within the NHS over the next two years. pic.twitter.com/tk2Tw5yvay

— The Citizens (@allthecitizens) January 6, 2021

<u>@allthecitizens</u> examined the NHS contracts Palantir won under Covid19, trying to find out what aspects of our health data this private company has been given access to. But we couldn't find out - key parts of the contracts are redacted.

24. Liability

- 24.1 Subject to incorporated Framework clauses 4.2 to 4.7, each Party's Yearly total liability for defaults under or in connection with this Call-Off Contract (whether expressed as an indemnity or otherwise) will be set as follows:
 - Property: for all defaults resulting in direct loss to the property (including technical infrastructure, assets, IPR or equipment but excluding any loss or damage to Buyer Data) of the other Party, will not exceed the amount in the Order Form
 - Buyer Data: for all defaults resulting in direct loss, destruction, corruption, degradation or damage to any Buyer Data caused by the Supplier's default will not exceed the amount in the Order Form.

At least £25.4m in contracts have been awarded to Palantir from UK Health Services. Their latest (Dec 2020) was worth up to £23m for them to continue deploying their Foundry data management platform within the NHS until 2022.

https://t.co/BsdutBO4oZ

Foundry claims it can 'source, connect, and transform' data to 'make operations analytical and analytics operational.' It's a big-data system that, in an NHS context, analyses patient data. More specifically, your data.

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Palantir won their first NHS contract for just £1, supporting the COVID-19 datastore (Mar-June 2020); then a £1m, 4 month extension for the same work; then £908k for aiding the Test & Trace system (June-Sep 2020).

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The £1 contract was awarded under the emergency procurement legislation brought in under Covid, circumventing the tender process. Palantir provided 45 engineers, costing c.£88,000. Initially it was meant to be a short term agreement.

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The £1m extension was also not tendered. NHSX even released a statement Palantir would be required to "package up the work they've been doing so the service can go out to tender". That never happened.

https://t.co/9e5V6kqQ8a

The NHS is currently using Palantir, a private technology firm, to support the work of the NHS COVID-19 datastore. The NHS has signed a new four month contract with Palantir, which includes requirements to package up the work they've been doing so the service can go out to tender in an open procurement process.

The £23m contract wasn't tendered either, and despite early assurances Palantir's involvement with the NHS was only an "emergency" response, it seems a much longer-term relationship between Palantir and UK Health Services is now on the cards.

https://t.co/dtjbxvx5MQ

During months of ensuing legal correspondence, the government assured us that this 'COVID datastore' would be unwound at the end of the pandemic and the data destroyed. They also assured us that any extension would go out to public tender, in which taxpayers could see and debate the issues at stake.

All of that has now turned out to be false. Today we can reveal that right as health secretary Matt Hancock was heralding the new vaccine and telling Britons life would be getting "back to normal" by Easter, his government was quietly sealing a lucrative deal with Palantir, worth up to £23 million, to run its massive health datastore for two years. The contract, awarded on 11 December, paves the way for Palantir to play a major, long-term role in the NHS beyond COVID – now, even by the government's own admission.

It's still not clear what precisely Palantir has been given access to: the list of NHS datasets that the firm will draw on have been redacted from the contract. What is clear, though, is that the government deliberately struck this deal on the quiet – knowing it would be controversial.

The new contract stipulates the health data gathered by Palantir will extend to Cabinet Office,UK Gov branches, GPs, and local councils - "integrated or collaborating formally with a Local System". It's big data across government.

2.1.1 Ongoing Capability Licence Only

Description: The Data Integration and Analytics Capability for Self-Service provides functionality for integrating activity data sources, modelling activity data in an object-based data model (ontology), and performing analytics and reporting tasks to support operational decision-making. It includes the provision of three configured tools: Strategic Decision Makers Dashboard, Recovery of Critical Services tool, and Early Warning System tool (each a "**Tool**", and as further described below). The Capability enables the independent use of NHS Foundry by the Buyer's employees for self-service data integrations and analytics within NHS Foundry's core applications.

Benefits: The Data Integration and Analytics Capability enables the following on NHS Foundry:

- The ability to ingest structured and unstructured activity data sources and perform data cleaning and transformation tasks in a range of technical and non-technical data management applications in core NHS Foundry;
- The ability to model activity data in the form of common objects, such as (by way of example) regions, hospitals, episodes, and treatments so that it can be used and interpreted via NHS Foundry's analytical and operational applications;
- Data management, access layers, security and data governance capabilities as described in GCloud 11 marketplace service ID 501000199851013;
- The provision of configurable user-facing applications, including flexible dashboards, tools for analysis
 by technical users such as data scientists, and non-technical operational users, forms for data
 collection, and reporting functions; and
- The integration with the activity data in SIP, NCDR and UDAL data sources to provision tools under this Capability including Strategic Decision Makers Dashboard, Recovery of Critical Services tool, and Early Warning System tool (as further described below), and potential to integrate with systems and applicable tools deployed by Local Systems provided such Local Systems and/or Buyer pays and subscribes to the relevant PT-CAP-ON and PT-CAP-ADD licences (as applicable).

Also, it says some data processes will become "general business-as-usual monitoring" post-pandemic, raising concerns Covid19 is being used as a cover for major data handling changes in government.

2.1.1.2 Recovery of Critical Services (RCS)

Description: The Recovery of Critical Services (RCS) Tool supports service recovery planning as a result of the COVID-19 pandemic, with the ability for the Buyer to transition this Tool for general business-as-usual monitoring. The Tool presents live data against Buyer-selected key performance indicators, across critical services (selected by Buyer) and provides the ability to drill down into the data at regional, STP/ICS, and provider levels. It includes visualisation functionalities in two forms: (1) geographical/ organisational views, which allow users to identify metrics of concern for their region or constituent organisations; and (2) metric views which set out information available for a single metric across multiple organisations, allowing users to understand variation across their region and to benchmark their region against others.

Benefits: The RCS Tool enables the following on NHS Foundry:

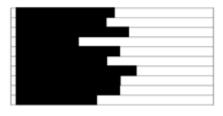
- Users to access an overview dashboard, enabling them to view summary metrics of interest that they
 have selected, and analyse performance across those metrics;
- Access to views of metrics for selected geographic areas, with a range of graph types enabling comparison between areas:
- Transparent metadata, enabling users to understand upcoming metrics (if applicable) and their status, as well as the source and timeliness of the RCS data currently reflected in the dashboards;

Classification

- The ability for users to compile custom reports that can be shared within and exported from NHS Foundry to communicate key issues and actions required in the recovery process with other Authorised Users; and
- Links to NHS Foundry's core analytical applications, allowing users to perform custom analyses based on the data used by the RCS Tool enabling insight driven assurance to senior decision makers in the Authorised User groups.

So what health data will Palantir have access to? Well, we don't know. The details of what data sets Palantir can view were redacted on the contract.

DATA CLASSES



Classification



Older contracts issued under emergency procurement rules showed Palantir were given access to patient genders, nationalities, work IDs, religious/political beliefs, physical & mental health conditions and past criminal offences.

Palantir contract explanation of information possibly included within the data sets:

In the terms of the contract with NHSX, the raw (de-identified) data sets Palantir have access to include the following information:

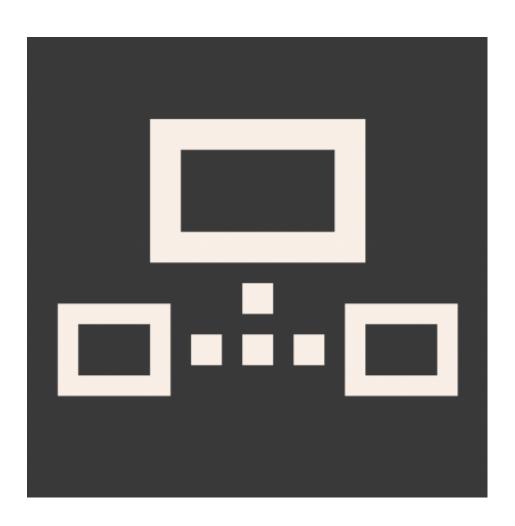
Type of personal data: may include but not limited to:

- (i) Personal Contact Details (including name, personal email address, home address, home telephone numbers, emergency contact details)
- (ii) Personal details (including gender, nationality, place of birth)
- (iii) Work contact details (inc work Email, work department, work telephone numbers, user IDs, work location details
- (iv) employment details (including job title, job duties, manager / sponsor, working hours, employee number)
- (v) any other personal data that may be useful for the nature and purposes of processing contemplated under the <u>agree</u>; and/or Login and usage information required for the provision of software and services.

Further, sensitive Personal data (eg racial or ethnic origin) provided by (or at the direction of the buyer) where such access is lawful and critical in the performance of its obligations under the agreement and the data to be processed may consist of (where applicable)

- (i) racial or ethnic origin where this is legally required / permitted or where the employee and/or contractor has consented eg to comply with equality and diversity requirements
- (ii) political affiliations religious or similar beliefs where this is legally required / permitted or where the employee and/or contractor has consented (eg to allow statutory time off for religious purposes
- (iii) criminal offenses, proceedings and sentences where this is legally required/permitted or where the employee and/or contractor has consented (eg to protect the safety and security of staff and customers, or for insurance purposes)
- (iv) physical or mental health condition where this is legally required/permitted or where the employee and/or contractor has consented (eg to allow statutory time off for sickness, or to enable appropriate pay/employment adjustments to be made) and / or other sensitive personal data provided under the SOW or the appliable DPIA*[fii]

Why a private company needs access to patient religious or political beliefs, or past criminal offences, is uncertain. Concerns are that Covid19 provides private companies a chance for major public data grabs - and what then happens to that data is not clear.



Also - is there a danger that, as with the initial £1 NHS deal, Palantir gets entry into the NHS via a 'loss leader' of discounted software, before becoming enmeshed deep within the NHS's patient data systems - indispensable and immovable?



https://t.co/Bzs2BPImUw

Given No.10's recent plans to introduce a "radical shake-up" of the NHS, should we be concerned about all these medical contracts that have gone to Palantir? After all it is your data that is at stake here.

https://t.co/WLmqacr3EO

UK Government is required under the NHS Act to consult with the public before making major structural changes to the NHS. They have not done so in this case, despite Westminster moving towards mass-data sharing initiatives across government.

https://t.co/HczYNPjPdI

The UK response to the global coronavirus pandemic has powerfully illustrated the potential benefits of data. Our understanding of this disease, our ability to support people and our cooperation across borders have all relied on the responsible and effective use and sharing of data.

But we have a duty to do more – especially with the data that the government itself holds, which can be used and shared for the benefit of society. Individual transactions, from applying for social security benefits to buying a house, are more resilient when personal information can be shared from trusted sources – for example, in the form of a digital identity.

We don't know what role Palantir software will play in this, or how the privacy of your medical data will be impacted by this new drive for data-lead "innovation" in government. But if contracts are issued in the dark, delayed, or redacted, how are we even to know?

