

18th September 2026

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Further to your recent request for information made under the Freedom of Information Act (FOIA) 2000, I now set out our answers to your specific questions, and any clarifications sought and provided, as follows:

Under the Freedom of Information Act 2000, I would like to access information regarding the local rollout and implementation of the Federated Data Platform (FDP), provided by Palantir Technologies.

An existing FOI (26/071) shows that as of 20th February 2026, East Sussex Healthcare Trust (ESHT) were in the process of implementing the FDP: “No FDP instances/apps/products are currently in use, but we are in the process of rolling out for Inpatient and Referral to Treat.”

Please provide all available information regarding the following:

1. Are any FDP instances/apps/products now in use across ESHT?

Yes, East Sussex Healthcare NHS Trust (ESHT) are using FDP for Inpatients and RTT Validation.

- a. **If yes, please provide information on the implementation of any and all of these - this might include, but is not limited to, whether and how the FDP is used to manage wait lists, manage bed allocations, and screen and/or prioritise referrals.**

FDP Theatres is used to support 6:4:2 meetings, identify on offer lists, scheduling and tracks actions/communications regarding list changes.

FDP for preoperative assessment we use to identify which patients have been pre-assessed per speciality, per surgeon to support monitoring and creation of pre-assessed patients.

At ESHT the RTT FDP module is used as a key operational tool to improve oversight, management and performance of elective patient pathways. The platform provides a single, consistent view of RTT data, enabling teams to identify pathway issues earlier and take timely action to support patients within the 18-week standard. The RTT FDP has become a critical enabler of elective performance management at ESHT, providing a single source of truth for RTT pathways. By improving visibility, validation, patient tracking and risk identification,

the platform supports proactive management of elective waiting lists, reduces long waits and helps drive sustained improvement in RTT performance.

Key uses include:

- RTT PTL Management
 - Provides a comprehensive view of the RTT Patient Tracking List (PTL).
 - Enables operational and clinical teams to monitor long waiters, pathway breaches and patients approaching key RTT milestones.
 - Supports prioritisation of patients requiring intervention.
- Validation and Data Quality
 - Helps identify pathways requiring validation.
 - Supports RTT teams in correcting pathway inaccuracies and ensuring compliance with national RTT rules.
 - Improves confidence in reported RTT performance.
- Long Wait Reduction
 - Facilitates targeted review of patients waiting over 52 and 65 weeks.
 - Allows teams to identify barriers to treatment and coordinate actions to reduce long waits.
- Operational Oversight
 - Provides real-time visibility of pathway status across specialties.
 - Supports daily, weekly and monthly performance reviews.
 - Enables leaders to identify emerging risks before they impact performance.
- Demand and Capacity Planning
 - Helps operational teams align clinic, diagnostic and theatre capacity with RTT recovery priorities.
- Escalation and Risk Management
 - Highlights patients at risk of breaching RTT standards.
 - Enables earlier escalation to clinical and operational teams where intervention is required.
 - Supports assurance processes and executive reporting.

- Performance Improvement
 - Provides consistent data for specialty improvement discussions.
 - Supports recovery plans, backlog reduction programmes and elective care transformation initiatives.

The implementation of the RTT FDP module has contributed to:

- A >4.5% improvement in RTT performance.
- A reduction of more than 2,100 pathways from the RTT PTL since implementation.
- Improved visibility of pathway risks and opportunities.
- More efficient validation processes.
- Better-informed operational decision-making and accountability across services.

- b. If not, please provide information regarding which instances/apps/products are planned to be rolled out.**

No formal plans to roll any optional products at this stage.

- 2. Do ESHT patients have any means by which to opt-out of Palantir accessing their data?**

No opt-outs are applied to data feeds to local FDP tenant, or to national feeds for Healthcare Operational Data Flow (HODF) and virtual wards Minimum Data Set (MDS).

- 3. What steps has ESHT taken to protect confidential patient data?**

- a. As NHS England states, “access to data must have an explicit aim to benefit patients and/or the NHS in England”**
(<https://www.england.nhs.uk/digitaltechnology/nhs-federated-data-platform/fdp-faqs/#is-identifiable-data-in-the-platform>) - does ESHT have policies in place regarding when identifiable patient data would be able to be accessed by Palantir staff?

- b. If yes, please provide these.**

We limit the cohort of patient data that is supplied to relevant patients only (for elective theatre bookings and for RTT validation) rather than providing direct access to source systems.

ESHT has implemented a range of technical and organisational security measures and processes to protect confidential patient information from unauthorised access, loss, disclosure or cyber-attack. ESHT continually reviews and improves its security controls in line with NHS cyber security requirements and emerging threats to help maintain the confidentiality, integrity and availability of patient information.

4. What steps has ESHT taken in considering damage to public trust and reputational damage to the Trust of using systems provided by Palantir?

As part of implementing NHS Federated Data Platform applications, ESHT undertook appropriate governance and data protection reviews in line with NHS requirements. Consideration was given to patient confidentiality, data security, transparency and public confidence. The Trust utilises nationally approved FDP services underpinned by associated national assurance, legal and information governance frameworks. No additional actions relating specifically to reputational damage or loss of public trust have been required or identified locally.

5. Please provide any correspondence and/or complaints made by ESHT staff to Jane Black, ESHT CEO, and/or Andy Bissenden, acting as ESHT CIO, regarding Palantir and/or FDP implementation in the period 20/02/2026 to date.

No correspondence and/or complaints have been received by Jayne Black or Andy Bissenden, as requested above.

I trust this information is helpful in its detail or explanation however, if you are dissatisfied with the response, then you have the right to request an internal review. If you wish to seek an internal review, please write to the Freedom of Information Team at esh-tr.foi@nhs.net quoting the above FOI reference number, within 40 working days. Please note the Trust is not obliged to accept a request for an internal review after this time period.

Yours faithfully

Freedom of Information (FOI) Team
East Sussex Healthcare NHS Trust
0300 131 4716
Core Hours of Business: Monday to Friday 9.00am to 4.00pm