

# AI as the NHS Front Door

Independent safety, accountability and trust safeguards for AI triage in the NHS App

**Sitora supports responsible AI adoption in healthcare.** But if AI becomes a first point of contact for NHS patients, it must be clinically safe, independently audited, transparent, accessible and clearly accountable before it is scaled nationally.

## 1. The decision point

NHS England says a new AI triage tool in the NHS App will help direct patients to the most appropriate service, alongside wider AI notetaking and digital upgrades supported by a £10bn technology and data investment. The rollout is expected to start with hundreds of thousands of patients and expand nationally. [1]

## 2. Why this matters

- **Triage is clinical risk, not just admin.** Routing patients to GP, pharmacy, A&E or home recovery can affect care timing and safety.
- **The accountability chain is unclear.** Patients, clinicians and suppliers need clarity on who is responsible when AI-assisted routing contributes to harm.
- **Digital access can widen inequality.** Older patients, disabled people, non-English speakers and digitally excluded groups may be disadvantaged if safeguards are weak.
- **Health data is sensitive.** AI triage must meet strong data protection, transparency and security expectations.

## 3. Existing rules help, but are not enough on their own

UK regulators already provide important building blocks: MHRA guidance on software and AI as medical devices, NICE evidence standards for digital health technologies, NHS clinical safety standards requiring safety cases and hazard logs, and ICO guidance on AI and data protection. [2] [3][4][5] The gap is a visible, mandatory and AI-specific assurance test for NHS triage at scale.

## 4. Sitora's NHS AI Trust Test

- 1 Clinical safety validation:** Test against urgent, ambiguous, complex and high-risk patient scenarios.
- 2 Independent AI audit:** Do not rely only on vendor self-certification; audit safety, bias, accuracy, explainability, accessibility and security.
- 3 Human escalation:** Patients must be able to reach human review, especially where symptoms are serious, worsening, unclear or disputed.
- 4 Clear accountability:** Define NHS, supplier, commissioner and clinical responsibility before rollout.
- 5 Patient transparency:** Tell patients when AI is used, what it does, what it does not do, and how to challenge or escalate.
- 6 Ongoing monitoring:** Track incidents, near misses, model drift, complaints and demographic disparities after deployment.

## 5. Policy asks

- ✓ Make AI impact assessments mandatory before NHS triage deployment.
- ✓ Require independent pre-deployment audit and post-deployment monitoring.
- ✓ Publish a plain-English safety and accountability statement for patients.
- ✓ Guarantee human escalation and non-digital access routes.
- ✓ Create national AI-related patient safety incident and near-miss reporting.
- ✓ Build supplier audit rights, liability and cooperation duties into NHS procurement.

**Core recommendation: The NHS should adopt a mandatory AI Trust Test before AI triage becomes a national front door to care.**

**References:** [1] NHS England, "NHS accelerates artificial intelligence rollout..." 4 July 2026. [2] MHRA, Software and AI as a Medical Device guidance. [3] NICE, Evidence Standards Framework for Digital Health Technologies. [4] NHS England, Digital clinical safety assurance: DCB0129/DCB0160 hazard log and safety case. [5] ICO, Guidance on AI and data protection. [6] WHO, Ethics and governance guidance for AI in health.