

The NHS Health Action Resource Platform (HARP)

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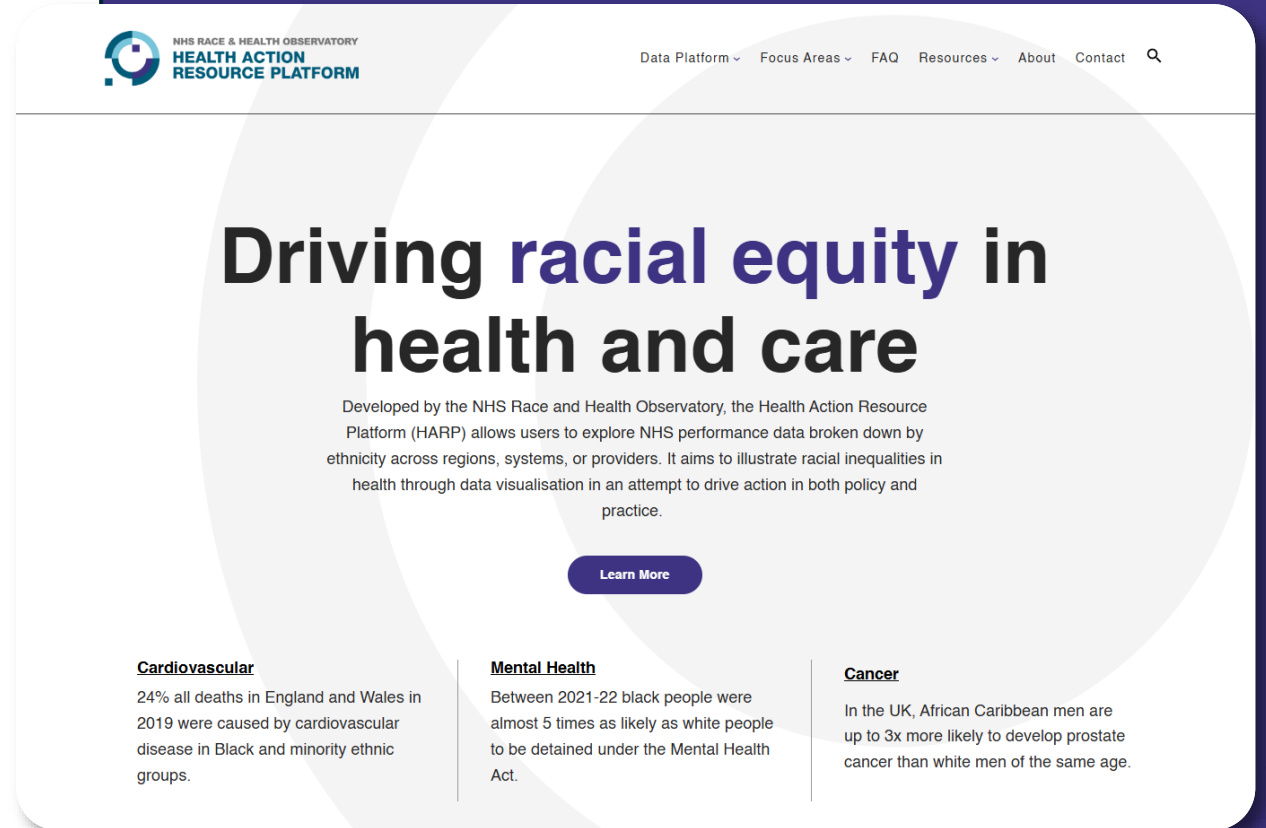


**NHS
RACE & HEALTH
OBSERVATORY**

#RHORoadshows

Agenda

- What is the Health Action Resource Platform (HARP)?
- Current progress and achievements
- Focus areas and metrics
- About the data
- Next steps



NHS RACE & HEALTH OBSERVATORY
HEALTH ACTION RESOURCE PLATFORM

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Driving racial equity in health and care

Developed by the NHS Race and Health Observatory, the Health Action Resource Platform (HARP) allows users to explore NHS performance data broken down by ethnicity across regions, systems, or providers. It aims to illustrate racial inequalities in health through data visualisation in an attempt to drive action in both policy and practice.

[Learn More](#)

Cardiovascular
24% all deaths in England and Wales in 2019 were caused by cardiovascular disease in Black and minority ethnic groups.

Mental Health
Between 2021-22 black people were almost 5 times as likely as white people to be detained under the Mental Health Act.

Cancer
In the UK, African Caribbean men are up to 3x more likely to develop prostate cancer than white men of the same age.

HARP at a glance



- HARP is our new digital tool designed to address racial health disparities within the NHS
- We launched HARP on 11 June 2025.
- Our aim: To be the definitive source for data, replicable practice, and resources on ethnic and racial inequalities in health.



Current progress and achievements

- 10 focus areas: The RHO prioritised focus areas for the HARP based on known health disparities – where data highlight stark inequalities
- Initial focus areas: Maternal and neonatal health, and mental health data and case studies
- Geographic data: Metrics available at national, regional, and integrated care board levels.

Key Features:

- I. Access to case study summaries.
- II. Insightful data visualisation.
- III. Option to download raw data.
- IV. Dedicated learning resources section.
- V. Newsletter sign-up for updates.



The focus areas

Initial launch focus areas with more coming soon

- Cancer
- Cardiovascular Disease
- Covid-19
- Diabetes
- Maternal and Neonatal Health
- Mental Health
- Respiratory Disease
- Sickle Cell Disease
- Surgery
- Workforce (coming soon)



Metrics types

Each focus areas as up to three kinds of metrics:

- Admission and attendance: Measures activity for a given condition, with an age-standardised rate per 100,000 population.
- Re-admission: Tracks readmissions within 30 days of discharge, shown as a rate of readmissions compared to total admissions.
- Length of Stay: Provides an average length of stay in hospital, calculated as total days in hospital divided by the number of admissions. This metric is broad and does not account for differences in patient severity.



Focus area metrics

- There are between two and 13 hand picked metrics for each focus area.

Example maternal and neonatal health, cardiovascular and respiratory disease metrics:

- Gestation under 20 weeks A&E Attendances
- Elective C-Section Admission
- Elective C-Section Re-Admission
- Elective C-Section Length Of Stay
- Cardiac Arrest A&E Attendances
- Chest Pain A&E Attendances
- Cardiovascular Disease Admissions
- Cardiovascular Disease Re-Admissions
- Cardiovascular Disease Length Of Stays
- COPD Admissions
- COPD Re-Admissions
- COPD Length Of Stays



The data

Updates and source

- Data from NHS England
- Quality control by Arden and Gem to ensure data accuracy
- Data is updated twice a year
- New metrics can be added every three months
- Standardised by age, and deprivation coming soon



The data

Caveats

- Ethnicity data: The HARP uses the most frequently or most recently recorded ethnicity from each patient contact.
- Data limitations: Ethnicity recording in national datasets is variable, with significant gaps and inaccurate information that can impact analysis.
- Continuous improvement: A continued focus on improving data quality is essential to fully understand and respond to health inequalities.

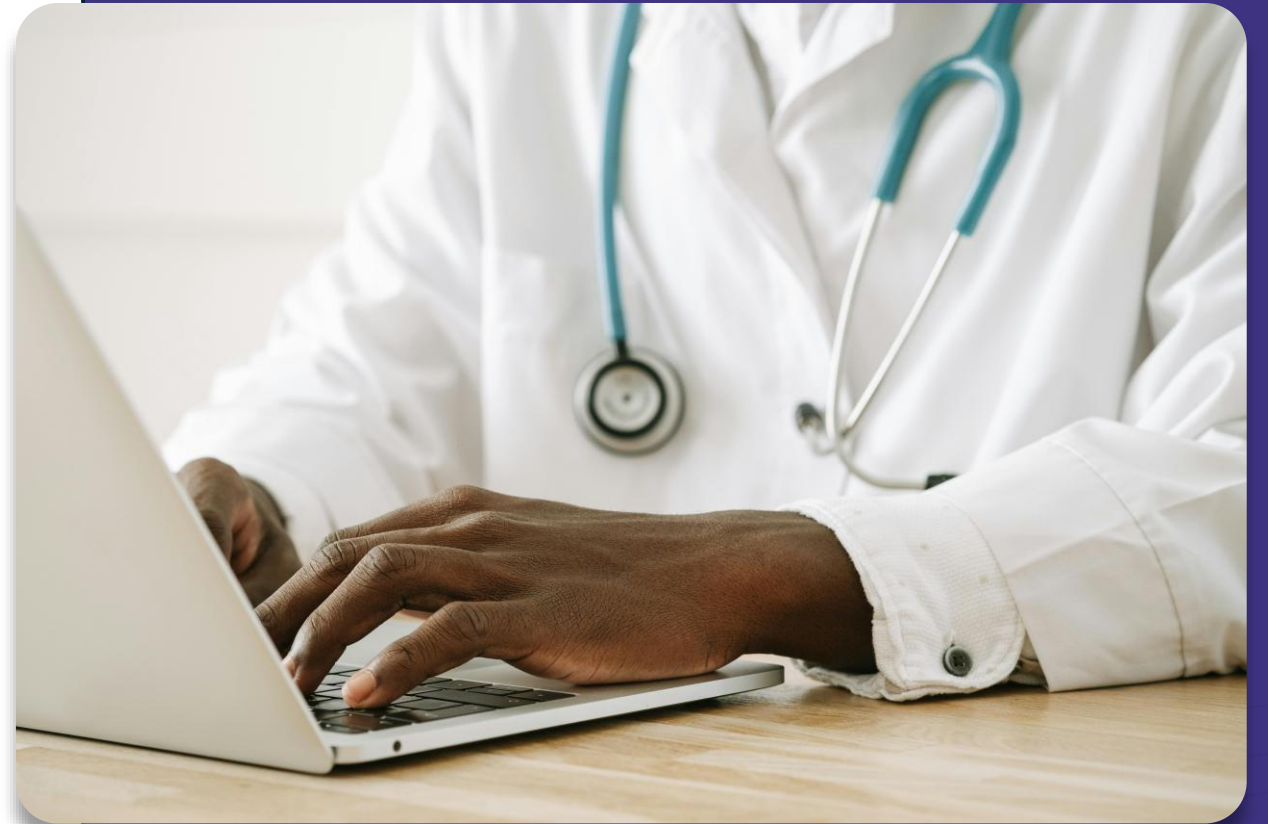


The data

How to use it

HARP uses a pictorial display to show available datasets. The data does not explain the reasons behind the results. It should be used for:

- A catalyst for discussion
- Viewing local context
- Reducing inequalities.



A look through the HARP

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[Learn More](#)

Cardiovascular

In 2023, 26% of all deaths in the UK were caused by cardiovascular disease in Black, Asian and minority ethnic groups.

Mental Health

Between 2021 and 2022 Black people were almost 5 times more likely than White people to be detained under the Mental Health Act.

Cancer

In the UK, African and Caribbean men are up to 3x more likely to develop prostate cancer than White men of the same age.



What's next

Roadmap and next steps

