⛓ National Falls & Fragility Fracture Audit Programme

UPCARE: 1.00 Programme name - please do not change this field.*	National Falls & Fragility Fracture Audit Programme
1.01 Abbreviation	FFFAP
1.1 Contract status	Ongoing
1.2 Audit or non-audit	Audit
1.3 HQIP commissioned*	Yes
1.40 Programme unique identifier*	HQIP108
1.41 HQIP AD	PS
1.42 HQIP PM	SB
1.5 Lead organisation*	Royal College of Physicians of London
1.6 Programme homepage*	http://www.fffap.org.uk/; https://www.rcp.ac.uk/improving-care/national-clinical-audits/falls-and-fragility-fracture-audit-programme-fffap/
1.7 Programme summary	[Falls and Fragility Fracture Audit Programme (FFFAP)	RCP London](#)

2.2 Organisations involved in delivering the programme

The RCP holds sub-contracts for the delivery of a number of projects. A standard sub-contractor contract template is used, which clearly outlines the terms and conditions required to align with the headline contract held by HQIP. The sub-contracts are held with:

- University of Bristol, THS ([bristol.ac.uk/translational-health-sciences/](#)) for statistical and methodological support across the programme
- Crown Informatics ([crowninformatics.com](#)) for the provision of the bespoke web-tool required for all clinical audits;

The RCP ensures sub-contractor accountability by holding regular contract review meetings, as well as requesting reports, outlining progress against the contract deliverables, on a quarterly basis.

The following external organisations are represented on the FFFAP Board:

- National Quality Improvement and Clinical Audit Network (NQICAN)
- Royal Osteoporosis Society
- Healthcare Quality Improvement Partnership
- British Geriatric Society
- British Orthopaedic Association
- North West London CLAHRC
- Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Science, (NDORMS) University of Oxford
- Public Health England
- Welsh Government
- The following external organisations are represented on the National Hip Fracture Database Advisory Group:
- British Orthopaedic Association
- Association of Anaesthetists of Great Britain and Ireland (AAGBI)
- The Chartered Society of Physiotherapy
- Royal Osteoporosis Society
- British Geriatric Society
- The National Joint Registry
- The following external organisations are represented on the Fracture Liaison Service Database Advisory Group:
- Society for Endocrinology
- British Orthopaedic Association
- Royal College of General Practitioners
- Royal College of Nursing
- The British Society for Rheumatology
- British Geriatric Society
- University of Oxford
- University of Bristol
- Royal Osteoporosis Society
- AGILE - The Chartered Society of Physiotherapy

The following external organisations are represented on the National Audit of Inpatients Advisory Group:

- Royal College of Nursing
- Care Quality Commission

- NHS Wales
- National Hip Fracture Database Clinical Lead
- NDORMS
- AGILE – The Chartered Society of Physiotherapy
- Royal College of Psychiatrists
- British Geriatric Society
- Public Health England
- Kent Community Trust
- Royal College of Emergency Medicine
- Imperial College of Healthcare NHS Trust
- Independent researcher/consultant
- College of Occupational Therapy, Specialist Section Older People
- NHS Improvement

2.3 Governance arrangements

A 'Programme executive' oversees the delivery of FFFAP, ensuring the programme meets contract deliverables and manages risk. This is composed of RCP Audit and Accreditation operations and clinical director, FFFAP programme management and the FFFAP senior clinical lead.

A 'Board', chaired by the clinical director of the RCP Audit and Accreditation department meets biannually, to provide challenge to the Executive team, have oversight of risks and issues and ensures alignment of strategic direction. The membership is made up of the following organisations:

- British Orthopaedic Association: boa.ac.uk
- British Geriatrics Society: bgs.org.uk
- Royal Osteoporosis Society: theros.org.uk
- RCP QI hub: rcplondon.ac.uk/projects/rcp-quality-improvement-rcpqi
- RCP operational and business management leads
- University of Bristol, Bristol Medical School (THS) - University of Bristol
- FFFAP patient panel
- North West London CLAHRC: http://clahrc-northwestlondon.nihr.ac.uk/
- National Quality Improvement and Clinical Audit Network (NQICAN): www.nqican.org.uk

The Board has an agreed Terms of Reference and decisions are only taken at meetings where meetings are quorate. There is a process for reviewing membership to ensure an active Board, quorate meetings and which leads the direction of the programme.

The National Falls Prevention Coordination Group, hosted by Public Health England acts as a partnership board. It provides input and expertise into the programme's strategic direction. The consensus statement can be found here: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/586382/falls_and_fractures_consensus_statement.pdf

In addition, there are three advisory groups (NHFD, FLS-DB and NAIF), which assist in the operational delivery of each aspect of the programme. More specifically, they provide advice on the planned work and support its implementation and dissemination. These groups are clinically led, and include selected individuals from disciplines and agencies relevant to that particular area. These groups meet biannually, plus via virtual contact modes as required to ensure timely input to the delivery of the programme.

A Scientific and Publications committee to review research applications for FFFAP data meet biannually.

Advisory groups include a range of health care professionals from the following disciplines to ensure breadth of expertise:

- Geriatric medicine
- Orthopaedic surgery
- Anaesthetics and perioperative medicine
- Rheumatology
- Endocrinology
- Acute and emergency medicine
- Primary care
- Rehabilitation
- Trauma and orthopaedic nursing
- Falls prevention and patient safety
- Fracture liaison and osteoporosis nursing
- Pharmacy
- Public health
- Allied health professionals
- Research

An advisory Patient Panel composed of patients and carers with experience of fragility fracture, osteoporosis and falls, is hosted by FFFAP, in line with HQIP guidance. This group will meet twice a year and will nominate and maintain representation of all governance groups throughout the programme including the FFFAP board.

2.4 Stakeholder engagement

Patients and carers are involved in FFFAP by:

- The FFFAP Board has a patient and carer representative member
- The FFFAP Board has representation from the ROS
- Patient panel members are members of the advisory groups
- When patient information resources are developed, we ensure patient and carers' input into the content and design. An example includes: https://www.rcplondon.ac.uk/projects/outputs/falls-prevention-hospital-guide-patients-their-families-and-carers

Clinicians are involved by:

- Leading and designing the programme in the role as appointed clinical leads
- Contributing to data analysis and interpretation
- Disseminating feedback and communications, including annual reports
- Selecting quality metrics
- Presenting key findings from the audit at the professional annual conference.

The Patient and Carer Panel | RCP London

2.5 Conflict of interest policy	The RCP has a standard declaration of interest (DOI) form and this is used for the programme. All DOI are requested for members of the boards and advisory groups. They are collected in advance of meetings and decisions regarding whether a conflict of interest exists and appropriate actions are made by the RCP clinical director. All DOI and COI forms are comprehensively documented by the FFFAP team.

3.1 Quality improvement goals

FFFAP has delivered major successes across the range of acute hip fracture care, secondary fracture prevention and primary prevention of falls among hospital inpatients. There remain key areas of variation and poor quality care that we continue to address. The team are currently in the process of finalising a quality improvement strategy which includes the following overarching objectives:

Data collection and feedback

- Providing clinically relevant data to participants
- Providing timely data to participants in a format that is relevant to user's needs
- Providing appropriate regional and national data
- Engaging with national promoters of audit involvement

QI support to local teams

- To support local teams to deliver effective methodologically sound, and successful QI projects though workshop and collboratives.

QI support to trainees

- To support trainees to understand the use of FFFAP data and how to deliver successful QI projects.

Use of high-level change levers

- To influence national bodies to support the health and care system to deliver better falls and fractures care

Patient and public engagement

- To ensure that the views of patients and the public are integrated into the design and delivery of the audit and that they receive information and updates in a way that suits their needs and requirements.

3.3a Methods for stimulating quality improvement*

Best practice tariff (BPT); On-line Quality Improvement guides; Improvement collaboratives; Sharing good practice repository; Workshops; National Clinical Audit Benchmarking (NCAB) tool (via CQC); Getting It Right First Time (GIRFT)

3.3b Quality improvement supplemental information

https://www.rcplondon.ac.uk/projects/falls-and-fragility-fracture-audit-programme-quality-improvement-collaborative

4a. Please add the most recent date that you have reviewed and updated an online version of UPCARE Programme section on your project's website (click into the response to see pop-up guidance).

17/11/2025

4b. Please add a hyperlink to UPCARE Programme section on your website (click into the response to see pop-up guidance).*

https://www.rcp.ac.uk/improving-care/national-clinical-audits/falls-and-fragility-fracture-audit-programme-fffap/fffap-data-processing-statements/