FFFAP data burden reduction strategy

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1. Purpose

This strategy outlines how the Falls and Fragility Fracture Audit Programme (FFFAP) reduces the impact of data burden for providers who participate in the programme.

Data burden refers to the time, effort and costs required for a provider to participate in our audits by collecting and submitting data.

This strategy has been produced in response to the [HQIP guidance for data burden reduction](#), published in October 2024. Any updates to the HQIP guidance will be reflected in future iterations of this strategy.

2. Strategy for reducing data burden

FFFAP consists of three audit workstreams and each have their own dataset for continuous clinical audit: the National Hip Fracture Database (NHFD), the National Audit of Inpatient Falls (NAIF) and the Fracture Liaison Service Database (FLS-DB).

Three additional datasets may be used for snapshot facilities audit for each workstream.

Each dataset is streamlined to include only the data fields necessary to measure key metrics. Any demographic questions included within datasets align with NHS standard demographic questions, enabling integration with NHS systems.

Clinical datasets:

The three clinical datasets are proactively reviewed each year with the FFFAP advisory groups, which includes patient and carer panel representation. Ongoing feedback is also obtained through regular helpdesk and inbox queries and quarterly webinars, as well as dedicated groups such as the sub-group in NAIF. Datasets are kept consistent wherever possible to ensure updates are kept to a minimum. However, changes are made to align with the following:

- Ensuring every metric is clearly mapped to evidence-based standards and guidance, and are updated in line with any annual changes to guidance
- Where new questions are added, wherever possible other questions are removed
- Metrics (and associated data fields) that consistently perform at a high level or show minimal unwarranted variation are considered for removal from the datasets.

- Data fields that no longer contribute to a metric are also removed to maintain dataset relevance and efficiency.

Facilities datasets:

The three workstream facilities audits are scheduled to ensure they cause minimal disruption and burden, having been reduced from annually to a maximum of once per contract period.

A similar process exists for reviewing the facilities audit datasets. They are reviewed internally before being discussed with the relevant Advisory Group, taking into consideration any changes to guidance and questions from services.

Process to support services:

The FFFAP team have implemented processes and actions to support services and reduce data burden:

- **Annual datasets updates:** Following each annual review, clinical datasets go live on 1 January. Providers receive at least four weeks' notice, with prior communications advising them to expect dataset changes, before new datasets are implemented to allow services to adapt data collection.
- **FLS-DB lite dataset:** The FLS-DB dataset is mapped to international key performance indicators that require data that is not extractable from routine clinical data. However, in 2024 FLS-DB introduced a 'lite' dataset, designed to help services identify the key data fields they need to complete by separating them into different sections (such as mandatory, required for KPIs and non-mandatory). The aim of this dataset is to speed up data entry, improve the overall user experience and increase case ascertainment.
- **Reduction in clinical datasets:** NAIF's 2025 dataset for expansion of injury sites was reduced by 13 questions compared to the previous year's dataset for hip fracture cases. The overall core questions within the NHFD were similarly reduced by 13. These changes were made to improve efficiency and minimise data burden.
- **Helpdesk support:** A helpdesk is available Monday to Friday, 9 AM–5 PM, via phone and email to assist providers with dataset data entry in the webtool, and interpretation of outputs queries.
- **Quarterly new user sessions:** We have recently introduced quarterly virtual sessions for new users, which are also open to anyone with prior experience of taking part in a FFFAP audit. These sessions cover topics such as registration process and entering and accessing data.

Linkage of the NHFD with external data maximised the value of the data the NHFD collects. Linking audit data with external mortality data every quarter ensures data is collected once and used for both reporting and quarterly outlier analysis to directly improve the quality of care for those affected by hip and femoral fractures.

Webtool:

Crown Informatics provide the webtool for the inputting of clinical audit data for FFFAP. Working closely with Crown, the following considerations have been made:
- **Smart webtool logic:** The webtool features in-built logic for completing records, ensuring unrequired questions are hidden from users.

- **Bulk data import:** Providers in NHFD and FLS-DB have the option to import patient-level data directly into the webtool, eliminating the need for manual entry of individual records.
- **Online support resources:** Frequently asked questions (FAQ) documents and technical guidance are available online for each audit to support the webtool import function.
- **Helpdesk assistance:** The Crown helpdesk is available to support users with technical issues.

3. Future ambition

Looking forward, we want to reduce the burden on providers by encouraging and supporting technical developments. In particular, we are exploring the ability to export data from the NHFD into an FLS-DB record where providers are otherwise entering the same patient data twice. We are also actively engaging with HQIP on opportunities to integrate audit measures into electronic patient record systems.

4. Conclusion

FFFAP is committed to reducing data burden for providers, and we have implemented the steps outlined above to streamline data collection and submission processes.

This plan will be reviewed annually in line with the review of audit metrics and datasets and agreed with the commissioner.

We welcome feedback and suggestions for other steps FFFAP can take to reduce data burden. Please reach out to us on: FFFAP@rcp.ac.uk.