#### National Falls & Fragility Fracture Audit Programme

**UPCARE: 0.01** 

National Falls & Fragility Fracture Audit Programme

Programme name - please do not change this

field.\*

0.02 Workstream name (if applicable) - please do not change this field.\*

National Audit of Inpatient Falls

0.1 Contract status

Ongoing

0.2 Audit or non-audit

Audit

0.3 HQIP commissioned\*

Yes

0.41 HQIP AD

PS

0.42 HQIP PM

SB

1.0 Included in current NHS Quality Accounts\*

Yes

1 1a Goographica

1.1a Geographical coverage - HQIP agreement\*

England; Wales; Jersey

1.2a Topic - please select

Falls

which ONE of the following best describes the topic area for the programme or workstream. If more than

workstream. If more than one apply, please select 'Other' and add comment

to the next question.\*

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1.2b If you selected 'Other' above, please provide details.\* Falls, older people

1.3a Healthcare setting\*

NHS secondary or tertiary care; NHS mental healthcare; NHS community care

1.4 Inclusion and exclusion criteria\*

Inclusion: NHS patients living in England and Wales aged 50 and over who have

sustained fragility fracture.

Exclusion: Fractures of the face, skull, scaphoid and digits.

1.5 Methods of data submission\*

Bespoke data submission by healthcare provider; Extraction from existing data source(s)

1.6a 2023/24 data submission closes please indicate date, series of dates or 09/04/2024

frequency.\*

1.6b 2024/25 data

Data for 1 Jan to 31 Dec 2024 was due 31/03/2025.

submission closes please indicate date, series of dates or frequency.\*

Data are collected annually on 31st of March the following year for the annual report which are scheduled to be published in October.

1.6c 2025/26 data submission closes please indicate date, series of dates or frequency.\* Data for 1 Jan to 31 Dec 2025 will be due 31/03/2026.

1.7 Data flow diagram

https://www.rcplondon.ac.uk/projects/outputs/fffap-data-processing-statements

1.8 Data quality & analysis plan

The audit is completed by clinical teams using the online webtool.

Crown Informatics complete internal data value and range checks, date/time checks and dataset logic checks. The webtool validates data at the point of entry by rejecting invalid responses. Data are reviewed by Crown post extract for validity and dataset consistency.

NAIF analysis plan: <u>National Audit of Inpatient Falls (NAIF) | RCP London</u> (available within each annual report)

1.9a Link to the outlier policy\*

An outlier policy was not relevant to this audit until the changes in Jan 2024, further clarification sought from HQIP on cause for concern to be able to discuss with the subgroup/Advisory group. There are also additional queries on small numbers, which are being collated and then NAIF team will review how to align with the HQIP guidance.

2.1 Outcome measures

Occupied bed days

Analgesia prescribed

2.2 Process measures

Fall risks assessment:

- Documentation of multi-factorial assessment to optimise safe activity (MASA) 6 assessments:
  - 1. Vision assessment
  - 2. Lying/Standing blood pressure
  - 3. Medication review
  - 4. Delirium assessment
  - 5. Mobility assessment
  - 6. Continence assessment

Post-fall management:

- · Checked for injury and injury suspected
- Safe method of moving from the floor for hip fractures
- · Medical examination within 30 minutes of the fall

### 2.3 Organisational measures

- · Use of falls screening tools
- · Processes for assessing the gap between actual and reported falls
- · Audit on the clinical appropriateness of bedrails
- · Availability of flat lifting equipment
- · Access to written information about fall prevention
- · Regular fall prevention training for staff made mandatory
- Executive and non-executive director with specific roles/responsibilities for falls prevention
- Multi-disciplinary working group for falls prevention
- · Policy on the availability of walking aids for newly admitted patients
- · Occupied bed days for patients aged 16 and over
- · Age profile of occupied bed days for patients aged 16 and over
- · Sex profile of occupied bed days for patients aged 16 and over
- Total number of reported falls in inpatients aged 16 and over in all specialties excluding maternity
- Total number of falls leading to severe harm/death in inpatients aged 16 and over in all specialties excluding maternity
- · Number of falls that resulted in severe harm or death that included hip fractures

#### 2.4 Patient reported outcome measures

Not currently collected

## 2.5 Patient reported experience measures

Not currently collected

#### 2.6a Do measures align with any of the following sources of evidence (select all that apply)

NICE clinical guideline; NICE quality standard; Professional society

# 2.6b Evidence supplemental information

NICE Quality Standard 86 statements 2, 4, 5 and 6

NICE Clinical Guideline 249

NICE Clinical Guideline 124

NHS Consultation on guidance on the safe use of bed rails

RCP FallSafe measurement of under-reporting grid

NHS England Essential care after an inpatient fall

NHS England, Patient Safety First – <u>Implementing human factors in healthcare</u>

#### 3.1 Results visualisation

Annual report; Patient report; Interactive online portal (run charts available)

#### 3.2a Levels of reporting\*

National; Trust or health board; Hospital or specialist unit; Integrated care system (ICS)

### 3.3 Timeliness of results feedback

Within 24 hours; Within 3 months; Within 1 year

## 3.4 Link to dynamic reporting\*

https://www.fffap.org.uk/fffap/naifrep.nsf/charts/KPIsDashboard

4.01 2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)\*

4.02 2024/25 Dataset covers the period FROM/TO (within

4.03 2025/26 Dataset 01/01/2025 - 31/12/2025 covers the period FROM/TO (within financial year 01/04 to 31/03)\*

4.10 Dataset #1 name National Audit of Inpatient Falls

4.11 Dataset #1 type Clinical audit

31/03)\*

**4.12 Dataset #1** All eligible patients **population coverage\*** 

4.13 Dataset #1 items 42 collected (n)

financial year 01/04 to

4.14 Dataset #1 items 0 from existing national datasets (n)

**4.15 Dataset #1 use of** Other; Hospital episode statistics (HES); Office for National Statistics (ONS) **existing national datasets** 

**4.16 Dataset #1** V6 dataset (2025 data) is available <a href="here.">here.</a>
<a href="here.">y6a dataset (for 2026 data) is available <a href="here.">here.</a>

4.20 Dataset #2 name Not applicable

4.30 Dataset #3 name Not applicable

4.40 Dataset #4 name Not applicable

5.00 When was your healthcare quality improvement plan (referred to as a QI Plan) last reviewed? Please upload under 'Files' below using the HQIP naming convention (click on response to see popup help text).

**5.10 When were your** 13/10/2025 clinical performance

indicators (referred to as metrics) signed off by funders? Please upload under 'Files' below using the HQIP template and naming convention (click on response to see popup help text).

5.11 Please add the hyperlink to where your clinical performance indicators (referred to as metrics) are published on https://www.fffap.org.uk/fffap/naifrep.nsf/charts/KPIsDashboard

5.20 National report

your project website.\*

publication date (within calendar year 01/01 -

31/12/2023)\*

November 2023

5.21 Published/planned

national report publication date (within calendar year 01/01 -31/12/2024)\* October 2024

5.22 Planned national report publication date (within calendar year 01/01 - 31/12/2025)\* October 2025

5.23 Planned national report publication date (within calendar year 01/01 - 31/12/2026)\* October 2026

6.0 Please add the most recent date that you have reviewed and updated an online version of UPCARE Workstream section(s) on your project's website (click into the response to see

pop-up guidance).

17/11/2025

6.1 Please add a hyperlink to UPCARE Workstream section(s) on your website (click into the response to see pop-

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

up guidance).\*

Files 20240322 Metrics FFFAP NAIF.xlsx

FFFAP healthcare improvement strategy 2023-26v FINAL.docx