



# National Audit of Inpatient Falls (NAIF)

## Information for Patients

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### What information is included in this document?

What is the National Audit of Inpatient Falls? .....	2
What is a clinical audit? .....	2
Who runs the National Audit of Inpatient Falls? .....	2
What information do we collect? .....	2
Keeping your information safe .....	3
How do we process your information?.....	3
Data for research and non-research purposes .....	4
How the NHS and care services use your information .....	4
What to do if you don't want to be involved.....	5
Right to complain to a supervisory body .....	5
Legal basis for collecting and processing your information .....	6
Need to know more? .....	6
Further information and contact details.....	6

## What is the National Audit of Inpatient Falls?

The National Audit of Inpatient Falls (NAIF) audits the delivery and quality of care for patients over 65 who fall and sustain any fracture, spinal or head injury as a result of an inpatient fall in acute, mental health, community and specialist NHS trusts/health boards in England and Wales.

NAIF reviews the care the patient has received before their fall as well as the post-fall care. The audit also looks for evidence of examination for other injuries for patients who are found to have an injury after a fall, which is recommended by the National Institute for Health and Care Excellence's (NICE) clinical guideline [NG249](#) - and [quality standard QS86](#).

## What is a clinical audit?

A clinical audit is an excellent way of improving patient care. Audits monitor the standard of care received by patients and record information on treatment. NAIF is a national clinical audit which measures trust performance against national and professional standards and identifies areas where they can make improvements to patient care.

## Who runs the National Audit of Inpatient Falls?

NAIF is managed by the Royal College of Physicians (RCP) on behalf of the Healthcare Quality Improvement Partnership (HQIP) as part of the Falls and Fragility Fracture audit Programme (FFFAP). This is a multidisciplinary national clinical audit which is being carried out in partnership with a number of organisations:

- > British Geriatrics Society (BGS)
- > British Orthopaedic Association (BOA)
- > Royal Osteoporosis Society (ROS)
- > National Falls Prevention Coordination Group (NFPCG)

## What information do we collect?

NAIF collects information about the incidents of falls resulting **any fracture, spinal or head injury** for every patient over 65 in acute, mental health, community and specialist NHS trusts/health boards in England and Wales. This includes detailed information on fall risk reduction activities prior to the fall, the circumstances surrounding the fall and post-fall care. Performance of each trust/health board is measured and reviewed against [NICE guideline \(NG249\)](#) and reported annually.

In order to monitor standards of care, the audit will collect the following personal data items:  
*NHS number, full name, sex, date of birth, gender and postcode*

Other information we collect about your care includes:

- > The type of fracture sustained
- > Assessments recorded before the fall
- > Post-fall management and review

The information collected will help to:

- > Identify differences in quality of care and provision of services throughout England and Wales
- > Make recommendations to healthcare providers on the provision of services and best practice
- > Identify if hospitals are following national and professional guidelines.

## Keeping your information safe

It is of the utmost importance that we take good care of your data. There are two organisations that will have access to your data while it is 'identifiable'. These are Crown Informatics, the webtool provider, and University of Bristol, the data analyst.

Both Crown Informatics and University of Bristol are up to date in data protection and security policies and procedures in line with government requirements. They follow strict confidentiality rules and are not allowed to share your data with us (the RCP) until all patient-identifiable details are removed, such as your name and date of birth.

Patient-identifiable data are held safely on secure servers by Crown Informatics for the duration of the audit, which follows best practice in data protection and security<sup>1</sup>. Crown Informatics securely store the personal information they receive and use appropriate security features to prevent any unauthorised access.

The FFFAP team and University of Bristol only have access to pseudo-anonymised data.

Data will be held for the duration of the audit. Crown Informatics holds all identifiable information on behalf of FFFAP. Should the audit come to an end, information will be held for a further five years before being erased from all databases.

## How do we process your information?

The data controllers, who have overall responsibility for the collection, storage and processing of personal identifiable information are joint across HQIP, NHS England (NHSE) and Digital Health and Care Wales (DHCW). However, HQIP and DHCW do not process any of the data.

The hospital trust providing your care will send your information to Crown Informatics electronically using secure data transfer methods.

It is the responsibility of the hospital trust and health board to ensure data is entered correctly on the Crown Informatics webtool and that no patient records are mis-assigned to hospitals when they are entered on the database. Every effort has been made by the RCP and Crown Informatics to provide clear guidance to enable sites to enter data accurately.

Crown Informatics will act as guardians for your data and will store it securely. They may link NAIF data to other NHS databases held by NHS England. Your name, date of birth and NHS number will be used to link NAIF to the NHS databases. The linked information will help us to check whether NAIF data is accurate. Data linkage will also provide information that will help us to improve our understanding about falls prevention and post-fall care.

When personal identifiers are no longer needed for patient tracking they will be permanently removed from a record.

Once a year, patient data is sent to the University of Bristol to be analysed for reports, but no individual patient can be identified. Reports produced by the audit never contain NHS numbers or any information that could be used to identify anyone.

Anonymous data is also occasionally sent by Crown Informatics to our team at the RCP so we can review the quality of the data, support hospital teams who are finding it difficult and manage the 'day to day' running of the work. This is never patient-level or identifiable data.

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<sup>1</sup> The data collected are subject to strict rules about confidentiality including those of the General Data Protection Regulation (2018), the Health and Social Care (Safety and Quality) Act (2015) and to the recommendations of the Caldicott Report (1997).

## Data for research and non-research purposes

We sometimes get requests from hospitals, universities and academic or healthcare organisations who want to carry out secondary uses on the data we collect, for audit/service evaluation/research. Data can be shared for research and non-research purposes subject to appropriate approvals.

We always ensure that the organisations that we agree to share data with have appropriate legal approvals and security arrangements in place before we share data. Whilst we always ensure the least identifiable data possible is made available, sometimes these organisations require identifiable data to be shared with the applicant or to be used for linkage to other datasets, for example Hospital Episode Statistics (HES), Civil Registration data and/or Digital Health and Care Wales (DHCW). Sometimes research can be achieved using data that has already been anonymised, in which case we may rely on HQIP's Overarching Research Database support for the National Clinical Audit and Patient Outcomes Programme which permits this re-use under S.251 of the NHS Act 2006 (Reference 24/CAG/0108). For more information on data sharing for uses outside of NAIF, please see: [NCAPOP Privacy Notice – HQIP](#).

## How the NHS and care services use your information

The Royal College of Physicians is one of many organisations working in the health and care system to improve care for patients and the public.

Whenever you use a health or care service, such as attending Accident & Emergency or using Community Care services, important information about you is collected in a patient record for that service. Collecting this information helps to ensure you get the best possible care and treatment.

The information collected about you when you use these services can also be used and provided to other organisations for purposes beyond your individual care, for instance to help with:

- > improving the quality and standards of care provided
- > research into the development of new treatments
- > preventing illness and diseases
- > monitoring safety
- > planning services

This may only take place when there is a clear legal basis to use this information. All these uses help to provide better health and care for you, your family and future generations. Confidential patient information about your health and care is **only used** like this where allowed by law.

Most of the time, anonymised data is used for research and planning so that you cannot be identified in which case your confidential patient information isn't needed.

You have a choice about whether you want your confidential patient information to be used in this way. If you are happy with this use of information you do not need to do anything. If you do choose to opt out your confidential patient information will still be used to support your individual care.

To find out more or to register your choice to opt out, please visit [www.nhs.uk/your-nhs-data-matters](http://www.nhs.uk/your-nhs-data-matters). On this web page you will:

- > See what is meant by confidential patient information
- > Find examples of when confidential patient information is used for individual care and examples of when it is used for purposes beyond individual care
- > Find out more about the benefits of sharing data
- > Understand more about who uses the data
- > Find out how your data is protected

- > Be able to access the system to view, set or change your opt-out setting
- > Find the contact telephone number if you want to know any more or to set/change your opt-out by phone
- > See the situations where the opt-out will not apply

You can also find out more about how patient information is used at:

<https://www.hra.nhs.uk/information-about-patients/> (which covers health and care research); and <https://understandingpatientdata.org.uk/what-you-need-know> (which covers how and why patient information is used, the safeguards and how decisions are made)

You can change your mind about your choice at any time.

Data being used or shared for purposes beyond individual care does not include your data being shared with insurance companies or used for marketing purposes and data would only be used in this way with your specific agreement.

## What to do if you don't want to be involved

NAIF believes that national clinical audit works best when it includes information about as many patients as possible in order to get an accurate picture of inpatient care being provided. NAIF is therefore exempt from the [National Data Opt-out \(NDO\)](#). Patients who have chosen to opt-out of having their data used for anything other than their care will be included in NAIF unless they specifically request not to be included. Scotland and Wales do not operate a national opt-out programme but patients are still able to object to being included in individual audits, such as this one, under GDPR.

National clinical audit works best when it includes information about as many patients as possible. However, if a patient does not want their information to be included they are advised to speak to a member of their clinical team, or contact us on [fffap@rcp.ac.uk](mailto:fffap@rcp.ac.uk). Saying this will not affect the care or treatment they receive in any way. The clinical team will ensure that the patient's information is not included in the audit.

NAIF data will be collected under section 251 of the NHS Act 2006. This provides a temporary break in the legal requirements so that for these clearly stated purposes, the audit can collect data on patients without a consent form, which is the usual legal requirement.

If a patient does not want their information to be included in the audit they are advised to speak to a member of their clinical team. The clinical team will ensure that the patient's information is not included in the audit. By not participating in the NAIF patient's care and treatment will not be affected.

If you are happy for your data to be used for the audit, but not to be shared with researchers, when appropriate legal supports have been met, you can specifically opt out of your data being used by researchers by contacting us: [fffap@rcp.ac.uk](mailto:fffap@rcp.ac.uk).

## Right to complain to a supervisory body

If you think information about you has been submitted to the National Audit of Inpatient Falls and you want to have it removed, please contact the hospital that treated you or our team at [falls@rcp.ac.uk](mailto:falls@rcp.ac.uk).

Alternatively, if you think that your information is being used inappropriately, you have the right to complain to the Information Commissioners Office (ICO): [ico.org.uk/make-a-complaint](https://ico.org.uk/make-a-complaint)

## Legal basis for collecting and processing your information

Information is processed lawfully and fairly according to the General Data Protection Regulation (GDPR) 2018 articles below:

- > Article 6 (1) (e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller. This is justified through commissioning arrangements which link back to NHS England, Welsh Government, and other national bodies with statutory responsibilities to improve quality of health care services.
- > Article 9 (2) (i) processing is necessary for reasons of public interest in the area of public health, such as protecting against serious cross-border threats to health or ensuring high standards of quality and safety of health care and of medicinal products or medical devices, on the basis of Union or Member State law which provides for suitable and specific measures to safeguard the rights and freedoms of the data subject, in particular professional secrecy.

This is justified as NAIF aims to drive improvements in the quality and safety of care and to improve outcomes for patients.

Information is processed lawfully and fairly according to the Data Protection Act (DPA) 2018 Schedule 1, part 1, point 3 (public health): This condition is met if the processing—

- (a) is necessary for reasons of public interest in the area of public health, and
- (b) is carried out—
  - (i) by or under the responsibility of a health professional

The NAIF has Section 251 support (reference 23/CAG/0038) to collect patient data without needing to obtain individual patient consent to do so.

## Need to know more?

If you would like more information about NAIF or would like to see copies of the audit reports, please visit our [website](#) or contact us using the details below:

Email: [falls@rcp.ac.uk](mailto:falls@rcp.ac.uk)

Telephone: 020 3075 1511

## Further information and contact details

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