



National Falls & Fragility Fracture Audit Programme

UPCARE: 0.01 Programme name - please do not change this field.*	National Falls & Fragility Fracture Audit Programme
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 Geographical coverage - HQIP agreement*	England; Wales; Jersey
1.2a Topic - please select which ONE of the following best describes the topic area for the programme or workstream. If more than one apply, please select 'Other' and add comment to the next question.*	Falls
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
1.4a Does your patient cohort include the following?*	Adults (18 and older)

1.4b Inclusion and exclusion criteria*	<p>Inclusion: NHS patients living in England and Wales aged 50 and over who have sustained fragility fracture.</p> <p>Exclusion: Fractures of the face, skull, scaphoid and digits.</p>
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 frequency.*	09/04/2024
1.6b 2024/25 data submission closes - please indicate date, series of dates or frequency.*	<p>Data for 1 Jan to 31 Dec 2024 was due 31/03/2025.</p> <p>Data are collected annually on 31st of March the following year for the annual report which are scheduled to be published in October.</p>
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.
1.6d 2026/27 data submission closes - please indicate date, series of dates or frequency.*	31/03/2027
1.7 Data flow diagram	https://www.rcplondon.ac.uk/projects/outputs/fffap-data-processing-statements
1.8 Data quality & analysis plan	<p>The audit is completed by clinical teams using the online webtool.</p> <p>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.</p> <p>NAIF analysis plan: National Audit of Inpatient Falls (NAIF) RCP London (available within each annual report)</p>
1.9a Link to the outlier policy*	Outlier policy in development in 2026

1.9b Link to the cause for concern policy*	Development will follow on from outlier policy
2.1 Outcome measures	Occupied bed days Analgesia prescribed
2.2 Process measures	Fall risks assessment: <ul style="list-style-type: none"> • Documentation of multi-factorial assessment to optimise safe activity (MASA) - 6 assessments: <ol style="list-style-type: none"> 1. Vision assessment 2. Lying/Standing blood pressure 3. Medication review 4. Delirium assessment 5. Mobility assessment 6. Continence assessment Post-fall management: <ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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	NICE clinical guideline; NICE quality standard; Professional society

following sources of evidence (select all that apply)

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 – [Implementing human factors in healthcare](#)

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)*

01/01/2023 - 31/12/2023

4.02 2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*

01/01/2024 - 31/12/2024

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

01/01/2025 - 31/12/2025

4.04 2026/27 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*

01/01/2026 - 31/12/2026

4.10 Dataset #1 name

National Audit of Inpatient Falls

4.11 Dataset #1 type	Clinical audit
4.12 Dataset #1 population coverage*	All eligible patients
4.13 Dataset #1 items collected (n)	42
4.14 Dataset #1 items from existing national datasets (n)	0
4.15 Dataset #1 use of existing national datasets	Other; Hospital episode statistics (HES); Office for National Statistics (ONS)
4.16 Dataset #1 specification	V6 dataset (2025 data) is available here . V7 dataset (for 2026 data) is available here .
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 pop-up help text).	15/01/2024
5.10 When were your 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 pop-up help text).	13/10/2025
5.11 Please add the hyperlink to where your clinical	https://www.fffap.org.uk/fffap/naifrep.nsf/charts/KPIsDashboard

performance indicators
(referred to as metrics)
are published on your
project website.*

**5.20 National report
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

**5.24 Planned national
report publication date
(within calendar year
01/01 - 31/12/2027)***

October 2027

**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-up guidance).***

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

Files 20251112 Metrics FFFAP NAIF.xlsx

FFFAP healthcare improvement strategy 2023-26v FINAL.docx

20251112 Metric ID lists for Podio v1 - NAIF.xlsx

