



National Falls & Fragility Fracture Audit Programme

UPCARE: Programme name - please do not change this field.*

National Falls & Fragility Fracture Audit Programme

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

National Audit of Inpatient Falls

Contract status

Ongoing

Audit or non-audit

Audit

HQIP commissioned*

Yes

HQIP AD

PS

HQIP PM

SB

1.0 Included in current NHS Quality Accounts*

Yes

1.1a Geographical coverage - HQIP agreement*

England; Wales

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

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,

31/03/2025

**series of dates or
frequency.***

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: <https://www.rcplondon.ac.uk/projects/national-audit-inpatient-falls-naif> (available within each annual report)

1.9 Outlier policy N/A

2.1 Outcome measures Occupied bed days

Analgesia prescribed

2.2 Process measures

- Documentation of multi-factorial risk assessment
- Medication review
- Delirium assessment
- Mobility assessment
- Continence assessment
- Medical assessment post fall
- Lying/Standing blood pressure

**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	<p>NICE Quality Standard 86 statements 2, 4, 5 and 6</p> <p>NICE Clinical Guideline 124</p> <p>NHS Consultation on guidance on the safe use of bed rails</p> <p>RCP FallSafe measurement of under-reporting grid</p> <p>NHS England Essential care after an inpatient fall</p> <p>NHS England, Patient Safety First – Implementing human factors in healthcare</p>
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
3.3 Timeliness of results feedback	Within 24 hours; Within 3 months; Within 1 year
2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	01/01/2023 - 31/12/2023
2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	01/01/2024 - 31/12/2024
Dataset #1 name	National Audit of Inpatient Falls
Dataset #1 type*	Clinical audit
Dataset #1 population	All eligible patients

coverage*

Dataset #1 items collected (n)	34
Dataset #1 items from existing national datasets (n)	3
Dataset #1 use of existing national datasets	Other
Dataset #1 specification	3 existing national dataset items from NHFD Patient name Patient NHS number Trust where fall occurred
Dataset #2 name	Not applicable
Dataset #3 name	Not applicable
Dataset #4 name	Not applicable
National report publication date (within calendar year 01/01 - 31/12/2023)*	November 2023
Published/planned national report publication date (within calendar year 01/01 - 31/12/2024)*	October 2024
Planned national report publication date (within calendar year 01/01 - 31/12/2025)*	November 2025
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).	03/01/2024

**Please add a hyperlink
to UPCARE
Workstream section(s)
on your website (click
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<https://www.rcplondon.ac.uk/projects/outputs/fffap-data-processing-statements>