

Statistical Note: Ambulance Quality Indicators (AQI)

The latest Systems Indicators for June 2019 for Ambulance Services in England showed that one of the six response standards in the Handbook¹ to the NHS constitution was met.

1. Systems Indicators

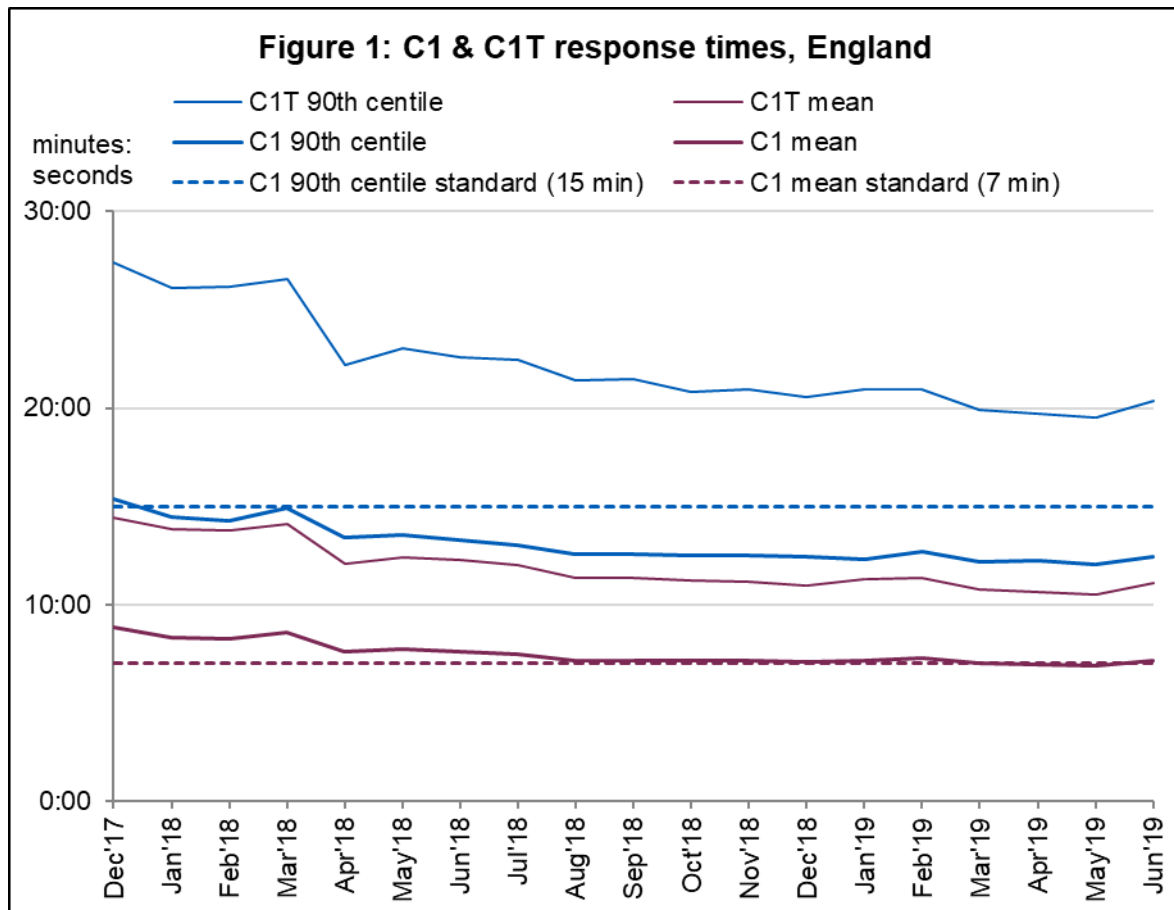
1.1 Response times

In June 2019, for England, the mean and 90th centile response times for all categories were longer than in each of March, April, and May.

The mean average C1 response time across England was 7 minutes 11 seconds in June 2019, just over the standard of 7 minutes.

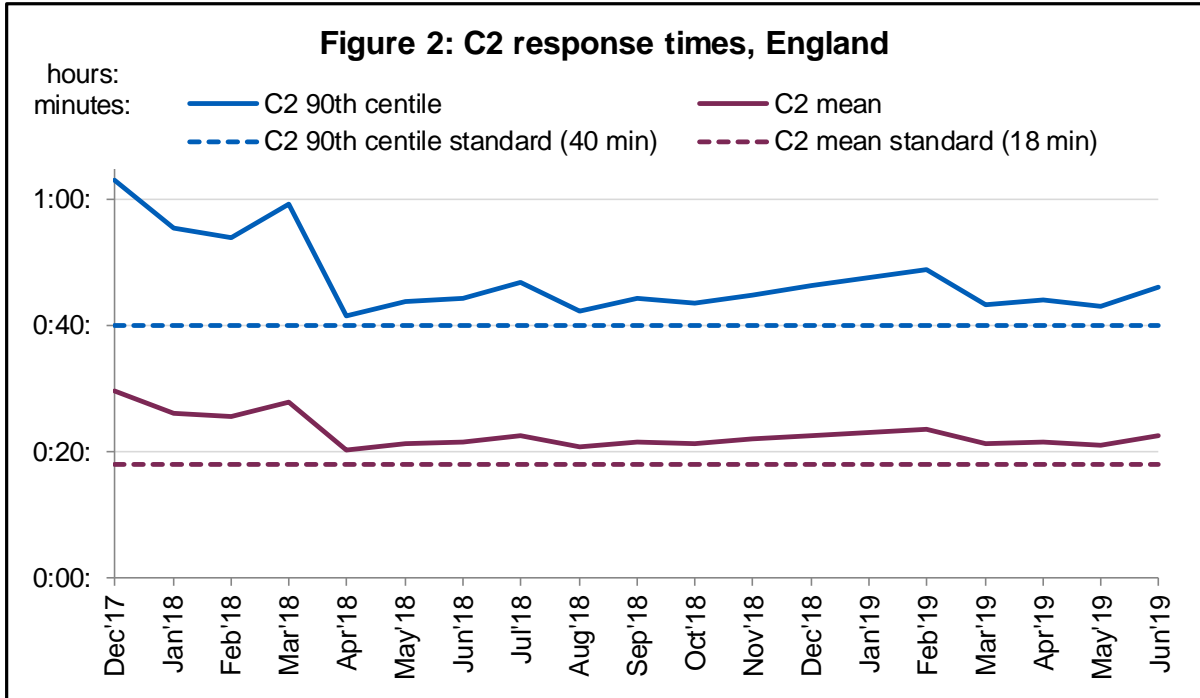
The C1 90th centile response times averaged 12:28 across England in June 2019, shorter than the standard of 15 minutes.

For C1T (arrival of transporting vehicle, for C1 patients transported) the mean and 90th centile response times were 11:07 and 20:20 respectively.



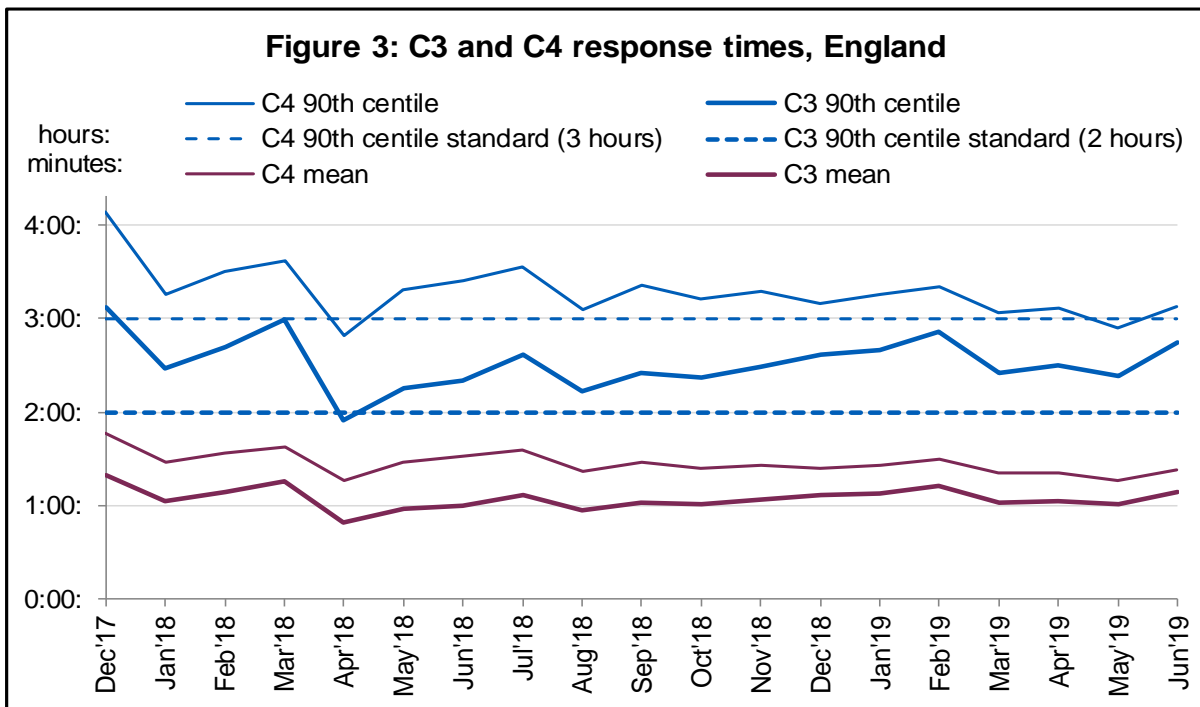
¹ Ambulance standards are in the Handbook to the NHS Constitution: www.gov.uk/government/publications/supplements-to-the-nhs-constitution-for-england

Figure 2 shows the C2 mean average response time for England was 22:26 in June 2019, longer than the standard of 18 minutes. The C2 90th centiles averaged 46:00 across England, also longer than the standard of 40 minutes.



For England in June 2019, the C3 mean average response time was 1:08:54. The C3 90th centile times averaged 2:44:47, longer than the standard of 2 hours. Both increased by more than 10% compared with May 2019.

The C4 mean average response time was 1:22:25 for England in June 2019. The C4 90th centile times averaged 3:08:07, so the 3 hour standard was no longer met.

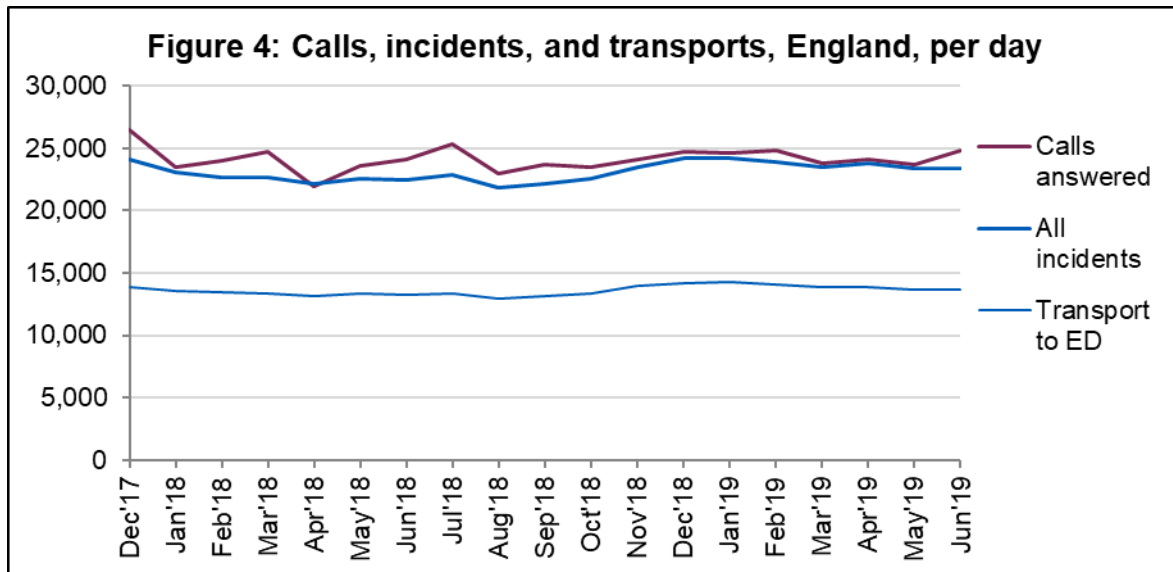


1.2 Other Systems Indicators

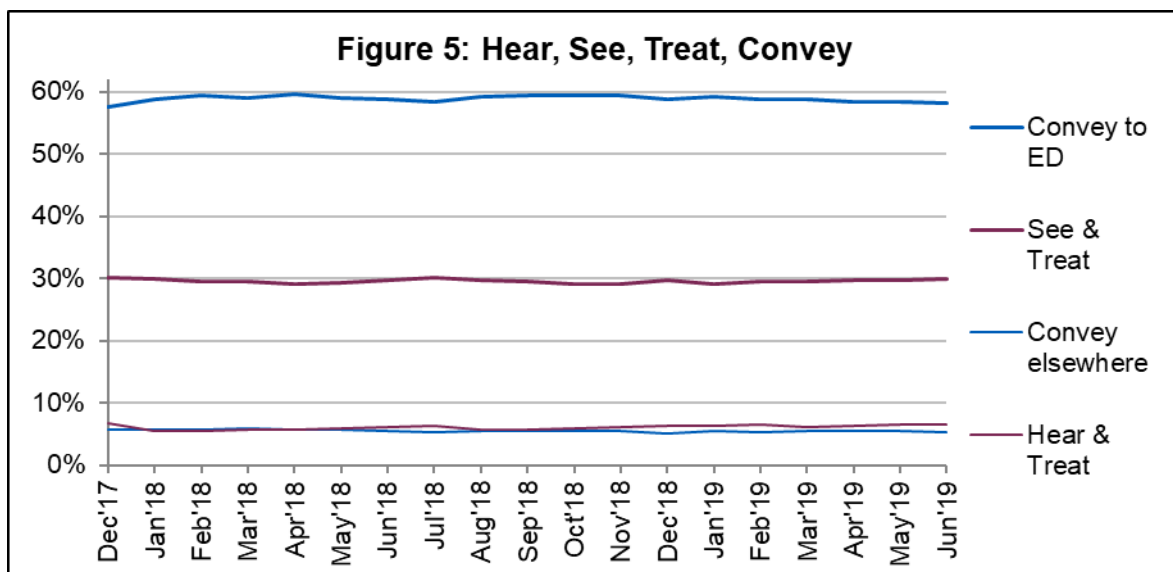
The mean average call answer time across England in June 2019 was 9 seconds. The 95th and 99th centile times averaged 51 and 111 seconds respectively. All were the longest since July 2018.

Per day, there were (Figure 4):

- 24.8 thousand calls to 999 answered in June 2019, a 4.5% increase on May;
- 23.4 thousand incidents that received a response from an Ambulance Service in June, 0.2% more than in May;
- 13.6 thousand incidents where a patient was transported to an Emergency Department (ED) in June, 0.2% less than in May.



The proportion of incidents where a patient was transported to ED was 58.2% in June 2019, the lowest since December 2017; while 6.6% were resolved on the telephone (hear and treat), the highest since December 2017. Other incidents in June 2019 (Figure 5) comprised 5.3% with a patient transported elsewhere, and 30.0% where patients were attended but not transported (see and treat).



2. Clinical Outcomes

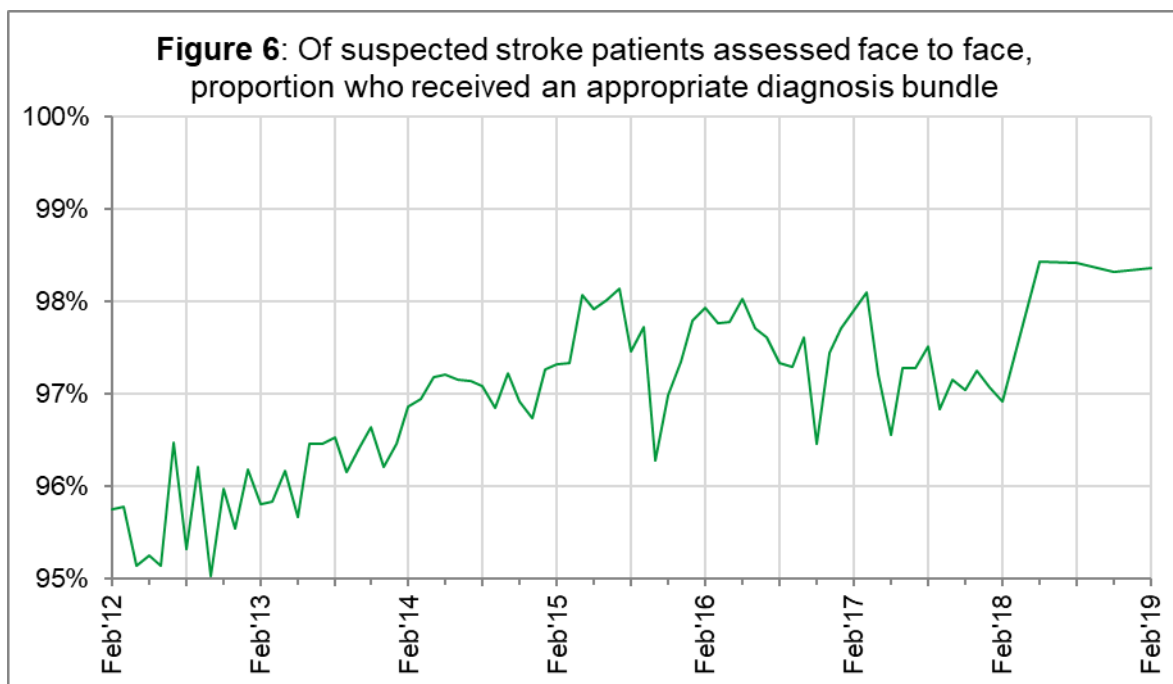
We continue to publish Clinical Outcomes data in spreadsheets each month; and (for England as a whole) discuss data for each topic area in the month when we publish new bundle data for that topic. Today we will describe the stroke data up to February 2019.

2.1 Stroke

The FAST procedure helps assess whether someone has suffered a stroke:

- Facial weakness: can the person smile? Has their mouth or eye drooped?
- Arm weakness: can the person raise both arms?
- Speech problems: can the person speak clearly and understand what you say?
- Time to call 999 for an ambulance if you spot any one of these signs.

Of stroke patients in England assessed face-to-face in February 2019, the proportion that received an appropriate diagnostic bundle was 98.4%. From when it was first collected, until February 2018, this proportion had been between 91.1% and 98.1%, but in the months it has been collected since, it has been at least 98.3%.



For stroke patients across England, the mean average time from call until arrival at hospital was 1 hour 17 minutes in February 2019. The mean, median, and 90th centile measures of this were all longer than in all previous months of 2018-19, but shorter than in February 2018.

The mean average time across England for stroke from arrival at hospital until CT scan averaged 1:23 in February 2019, and the mean average time from arrival at hospital until thrombolysis averaged 57 minutes. In February, the mean, median, and 90th centile measures for both time to CT scan and to thrombolysis were all slightly longer than the 2018-19 year-to-date averages.

3. Further information on AQI

3.1 The AQI landing page and Quality Statement

www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators, or <http://bit.ly/NHSAQI>, is the AQI landing page, and it holds:

- a Quality Statement for these statistics, which includes information on relevance, accuracy, timeliness, coherence, and user engagement;
- the specification guidance documents for those who supply the data;
- timetables for data collection and publication;
- time series spreadsheets and csv files from April 2011 up to the latest month;
- links to individual web pages for each financial year;
- contact details for the responsible statistician (also in 3.4 below).

The web pages for each financial year hold:

- separate spreadsheets of each month's data;
- this Statistical Note, and equivalent versions from previous months;
- the list of people with pre-release access to the data.

Publication dates are also at

www.gov.uk/government/statistics/announcements?keywords=ambulance.

3.2 Related statistics

Ambulance handover delays of over 30 minutes at each Emergency Department were published by NHS England for winter 2012-13, 2013-14, 2014-15, 2017-18, and 2018-19, at www.england.nhs.uk/statistics/statistical-work-areas/winter-daily-sitreps.

The Quality Statement described in section 3.1 includes information on:

- a dashboard with an alternative layout for AQI data up to April 2016;
- the “Ambulance Services” publications² by NHS Digital, with data from before 2000, to 2014-15;
- the comparability of data for other countries of the UK:

Wales: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Performance/Ambulance-Services>

Scotland: See Quality Improvement Indicators (QII) documents at www.scottishambulance.com/TheService/BoardPapers.aspx

Northern Ireland: www.health-ni.gov.uk/articles/emergency-care-and-ambulance-statistics

² <https://digital.nhs.uk/data-and-information/publications/statistical/ambulance-services>



3.3 AQI Scope

The AQI include calls made by dialling either the usual UK-wide number 999 or its international equivalent 112.

As described in the guidance mentioned in section 3.1, incidents resulting from a call to NHS 111 are included in all Systems Indicators except call data items A1 to A6.

3.4 Contact information

Media: NHS England Media team, nhsengland.media@nhs.net, 0113 825 0958.

The person responsible for producing this publication is Ian Kay;
Finance, Performance and Planning Directorate
NHS England and NHS Improvement
Room 5E24, Quarry House, Leeds, LS2 7UE; 0113 825 4606; i.kay@nhs.net

3.5 National Statistics

The UK Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods; and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.