



# Statistical Note: Ambulance Quality Indicators (AQI)

In England, as the COVID-19 pandemic continued, the number of ambulance incidents per day increased for the fifth consecutive month in October 2020, but remained less than in March 2020. Response times, in all categories, also increased for the fifth consecutive month but remained less than in March 2020.

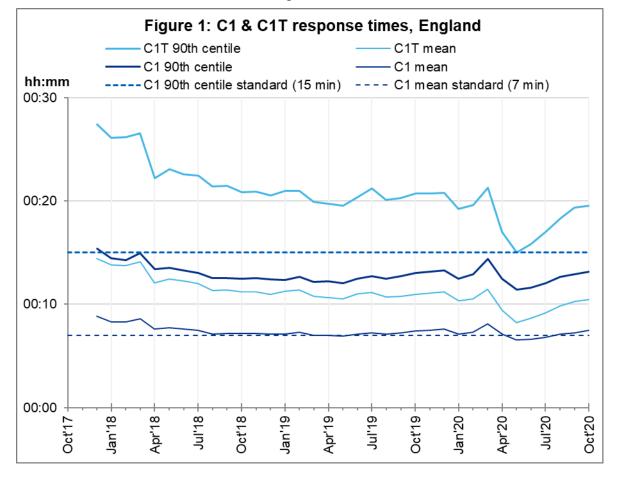
NHS Ambulance Services delivered the appropriate care bundle to a higher proportion of sepsis patients in June 2020 than in previous years.

# 1. Systems Indicators

### **1.1 Response times**

In October 2020, the mean average C1 response time England was 7 minutes 29 seconds, so the 7-minute standard was not met; but the C1 90th centile response times averaged 13:11 across England, so the 15-minute standard was met.<sup>1</sup>

For C1T (response times for arrival of transporting vehicle, for C1 patients transported), the mean was 10:28, and the 90th centiles averaged 19:32.



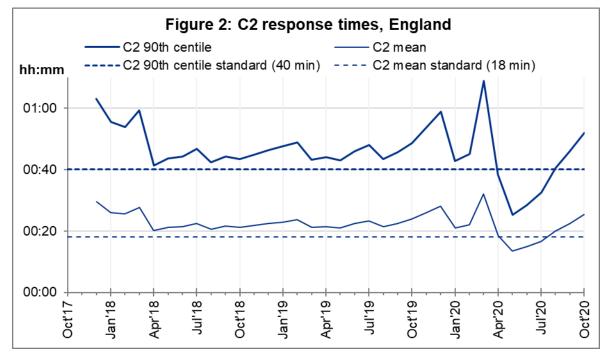
All four of these measures were the highest since March 2020.

<sup>&</sup>lt;sup>1</sup> Standards for Ambulance Services: <u>www.gov.uk/government/publications/supplements-to-the-nhs-constitution-for-england/the-handbook-to-the-nhs-constitution-for-england</u>





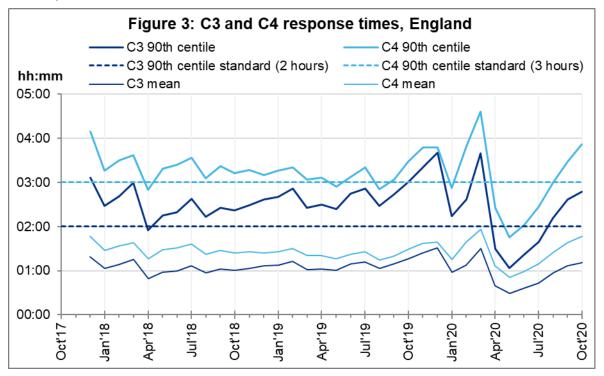
For C2 in October 2020, the mean average response time was 25:21 for England, and the 90th centiles averaged 52:06 across England (Figure 2).



For C3 in October, the mean average response time was 1:10:35. The C3 90th centile times averaged 2:47:38, so the two-hour standard was not met (Figure 3).

For C4 in October, the mean average response time was 1:46:58. The C4 90th centile times averaged 3:52:00, so the three-hour standard was not met (Figure 3).

C3 response times in October 2020 were less than in October 2019, but C1, C2, and C4 response times were not.







# **1.2 Other Systems Indicators**

The 95th and 99th centile call answer times across England averaged 30 and 78 seconds respectively in October 2020, both increasing for the fifth consecutive month, but remaining less than the averages for 2018-19 and 2019-20.

In October 2020, per day, there were (Figure 4):

- 24.0 thousand calls to 999 answered, 0.8% more than in September;
- 24.0 thousand incidents that received a response (whether on the telephone or on the scene) from an ambulance service, 0.4% more than in September;
- 13.0 thousand incidents where a patient was transported to an Emergency Department (ED), 0.3% more than in September.

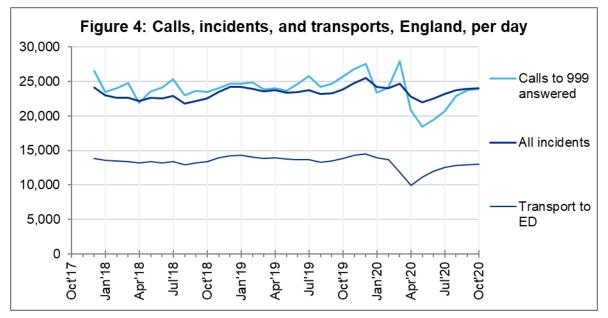
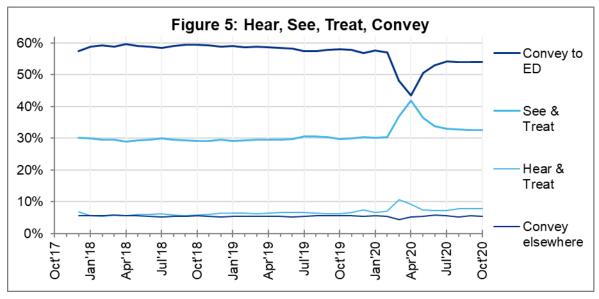


Figure 5 shows that in October 2020, 7.9% of incidents were resolved on the telephone (Hear & Treat), 32.7% were closed at the scene (See & Treat), 54.0% featured conveyance to ED, and 5.4% featured conveyance to non-ED. All these proportions changed by less than 0.2 percentage points from September.







# 2. Ambulance Clinical Outcomes

On 9 April 2020, we published Ambulance Clinical Outcomes (AmbCO) data for November 2019, but we wrote in the Statistical Note that we would pause collection and publication of AmbCO data. This was to release capacity across the NHS to support the response to COVID-19.

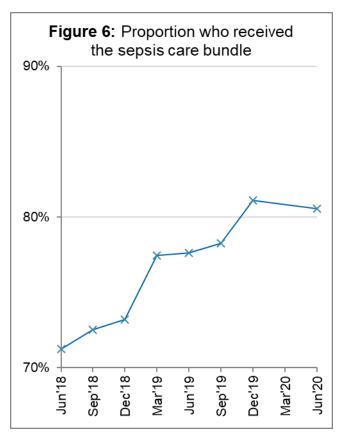
As announced at <u>www.england.nhs.uk/statistics/covid-19-and-the-production-of-</u> <u>statistics</u> and in our 9 July Statistical Note, we restarted publication of AmbCO in August, with data for December 2019. We then published Clinical Outcomes for January and February 2020 on 10 September and 8 October respectively.

This month, we have returned to the pre-COVID schedule by publishing data for June 2020. Later in 2020-21, we will publish the data that we are able to collect for March, April, and May 2020.

# 2.1 Sepsis

Sepsis is a time-critical condition. Early recognition and management of sepsis in the pre-hospital setting can reduce mortality and improve the health and well-being of patients. Making a diagnosis quickly and ensuring early transport of a patient to an appropriate Emergency Department capable of providing further tests, treatment and care (including appropriate antibiotics for those who are eligible) represents a standard of ambulance care.

In June 2020, of patients with suspected sepsis and a NEWS2 (National Early Warning Score 2) of 7 or more, the proportion who received the sepsis care bundle was 80.6%, significantly<sup>2</sup> more than for the year ending September 2019 (76.5%).



<sup>&</sup>lt;sup>2</sup> Calculated using Student's t-test with 95% significance.





# 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 <a href="http://bit.ly/NHSAQI">http://bit.ly/NHSAQI</a>, 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 section 3.4 below).

#### Publication dates are also at

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

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.

### 3.2 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 specification guidance mentioned in section 3.1, incidents resulting from a call to NHS 111 are included in all Systems Indicators the except call data items, A1 to A6 and A114.

#### 3.3 Related statistics

Ambulance handover delays of over 30 minutes at each Emergency Department are published by NHSEI during winter 2012-13, 2013-14, 2014-15, 2017-18, 2018-19, and 2019-20, at <u>www.england.nhs.uk/statistics/statistical-work-areas/winter-daily-sitreps</u>.

The Quality Statement described in section 3.1 includes information on:

- the "Ambulance Services" publications by NHS Digital <u>https://digital.nhs.uk/data-and-information/publications/statistical/ambulance-services</u>, with data from before 2000, to 2014-15;
- a dashboard with an alternative layout for AQI data up to April 2016;
- 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 <u>www.health-ni.gov.uk/articles/emergency-care-and-ambulance-</u> Ireland: <u>statistics</u>





### 3.4 Contact information

Media: NHSEI Media team, <u>nhsengland.media@nhs.net</u>, 0113 825 0958.

The person responsible for producing this publication is Ian Kay; Performance Analysis Team; Finance, Performance and Planning Directorate; NHS England and NHS Improvement; england.nhsdata@nhs.net; 0113 825 4606.

#### 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.