

Statistical Note: Ambulance Quality Indicators (AQI)

For Categories 2, 3 and 4, the average response time in England in March 2025 was the shortest since August 2024. For Category 1, the response time was the shortest since May 2021.

In November 2024, survival following cardiac arrest for ambulance service patients in England was the lowest in 2024-25 so far.

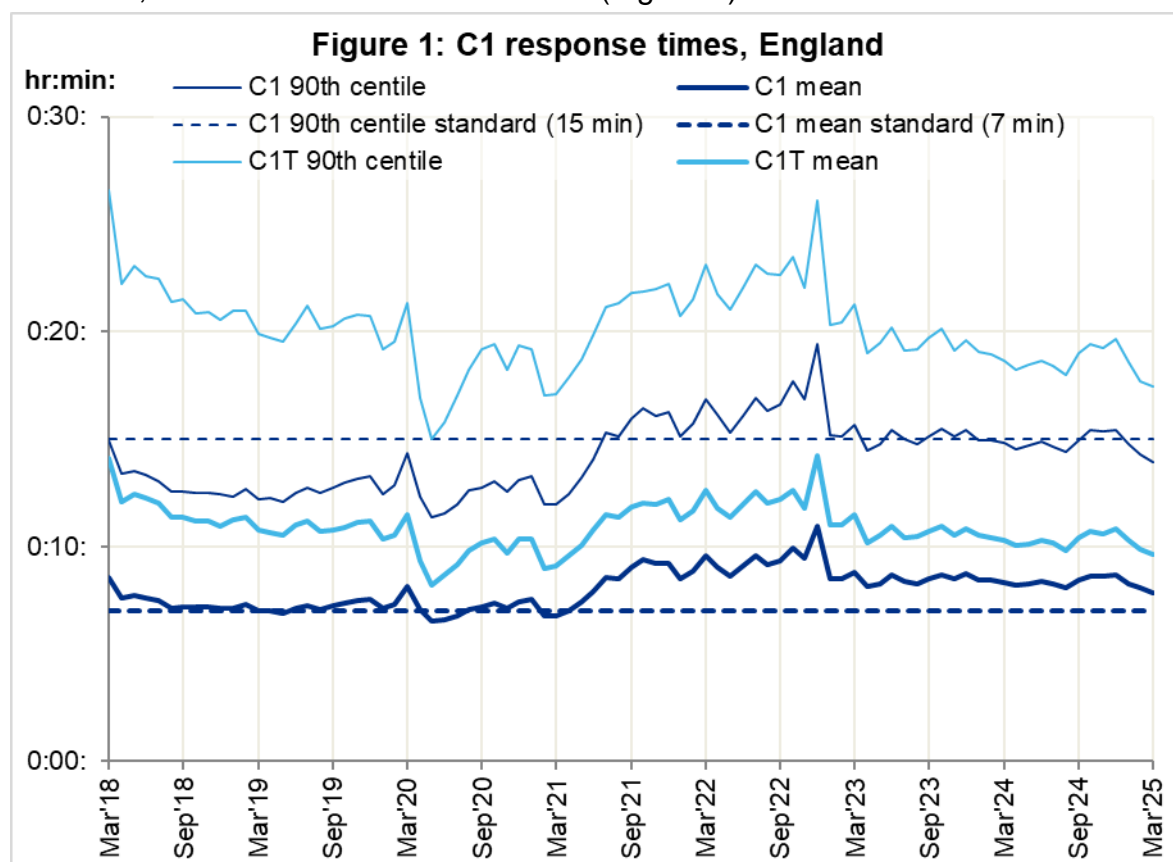
1. Ambulance Systems Indicators (AmbSYS)

1.1 Response times

March's C1 and C2 mean response times were shorter than in every month of 2022, but longer than in every month of 2019.

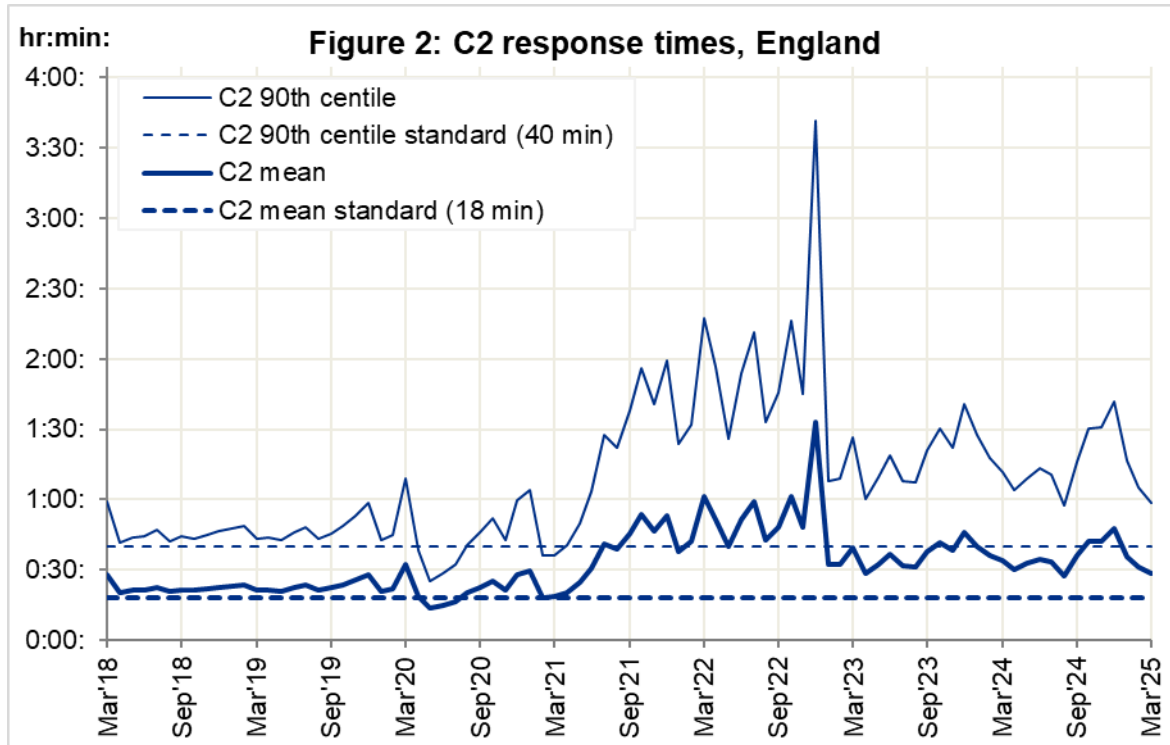
For C1 for England, the mean response time in March 2025 was 7 minutes 52 seconds and the 90th centile was 13:56. The C1 mean response time was the shortest time since May 2021 and the first time below 8 minutes since June 2021. The average standard¹ of 7 minutes was not met but the 90th centile standard of 15 minutes was met for the third month in a row.

For C1T (time to the arrival of the transporting vehicle for C1 incidents), the average was 9:39, and the 90th centile was 17:28 (Figure 1).

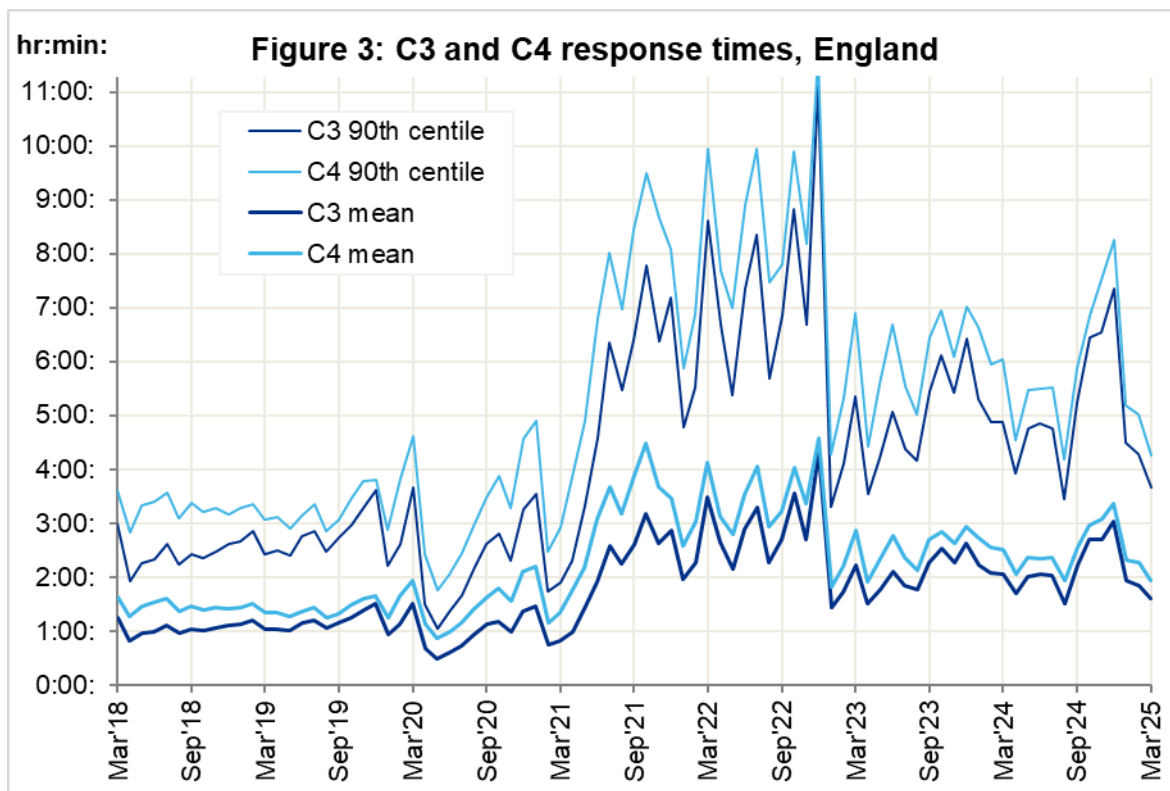


¹ Standards in the NHS Constitution Handbook: www.gov.uk/government/publications/supplements-to-the-nhs-constitution-for-england/the-handbook-to-the-nhs-constitution-for-england

The March 2025 England C2 average was 28:34, and the 90th centile 58:28, both the shortest since August 2024 (Figure 2).

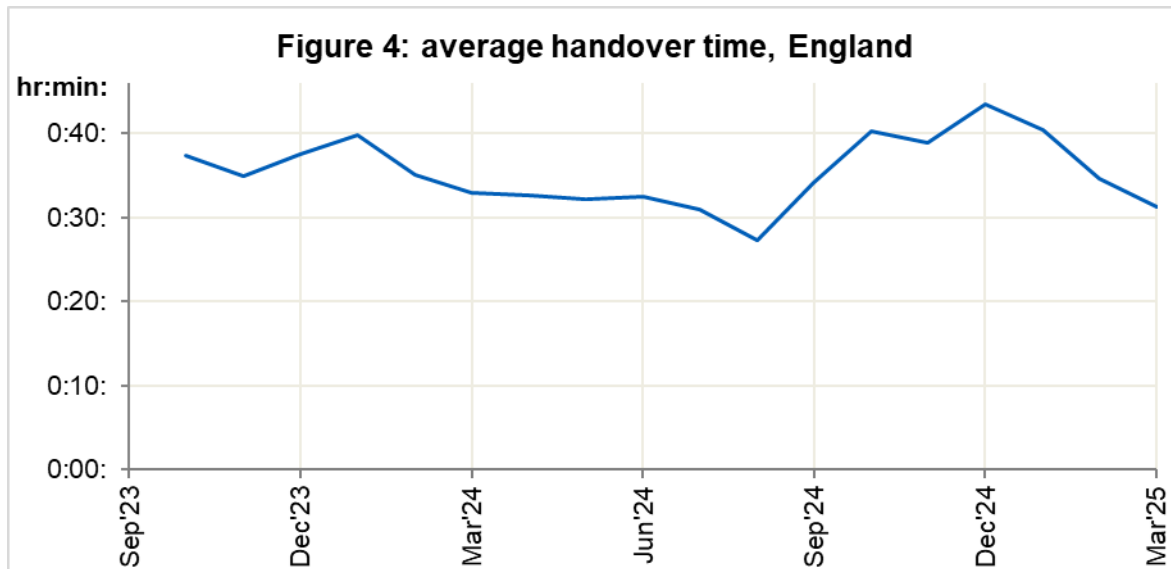


For England in March 2025, the C3 average was 1:36:17, and the 90th centile 3:39:17, both shorter than every March figure since March 2021. The latest England C4 mean was 1:56:43, with a 90th centile of 4:15:23 (Figure 3).

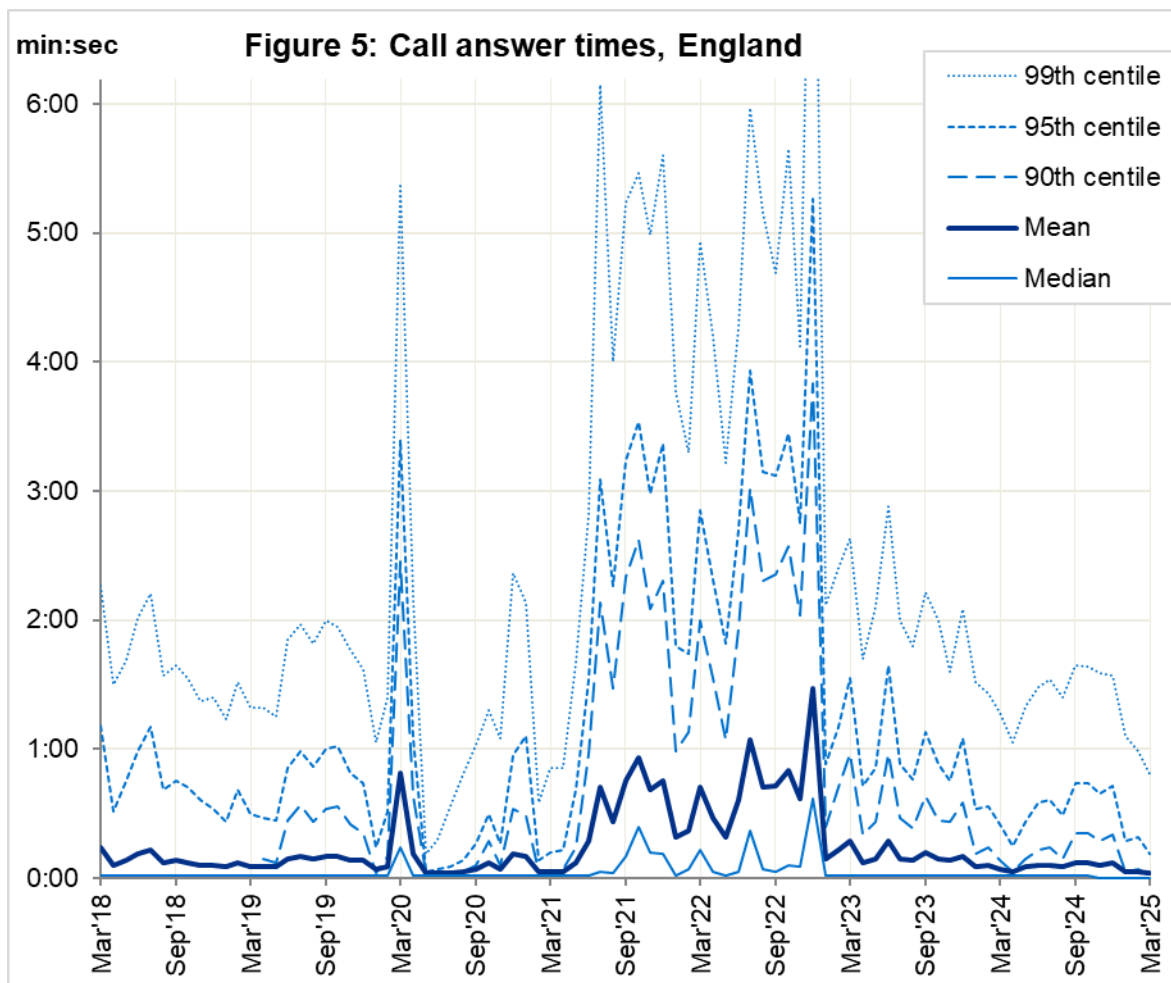


1.2 Other Systems Indicators

The mean handover time in March 2025 was 31:18, the shortest since August 2024 (Figure 4).

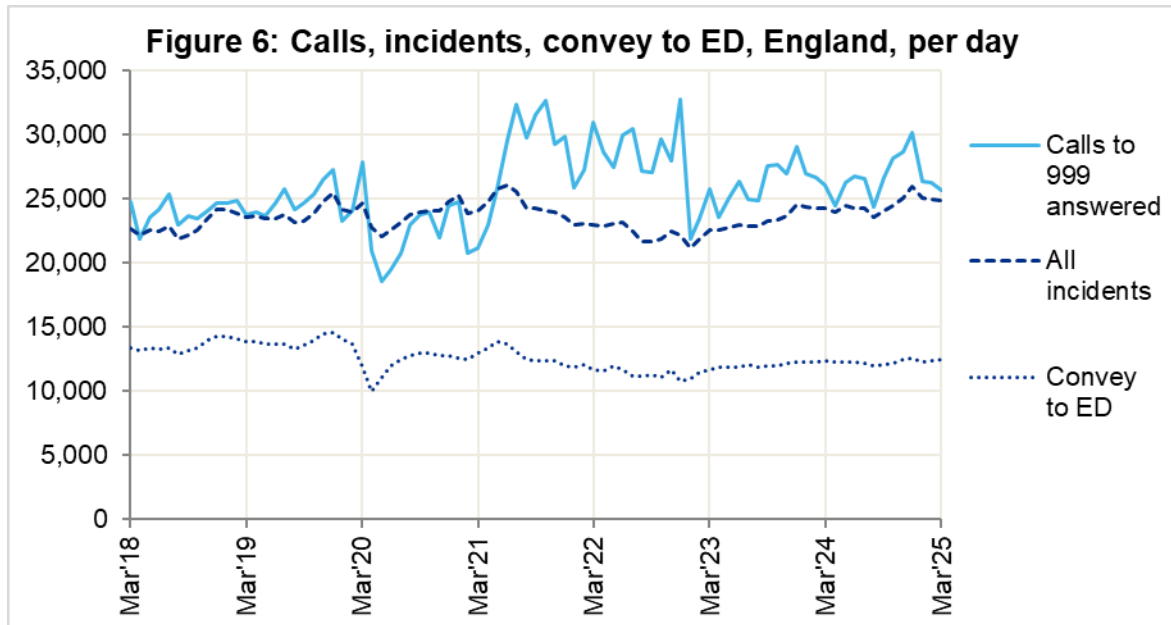


The mean 999 call answer time in March 2025 was 2 seconds, the shortest since July 2020 (Figure 5).

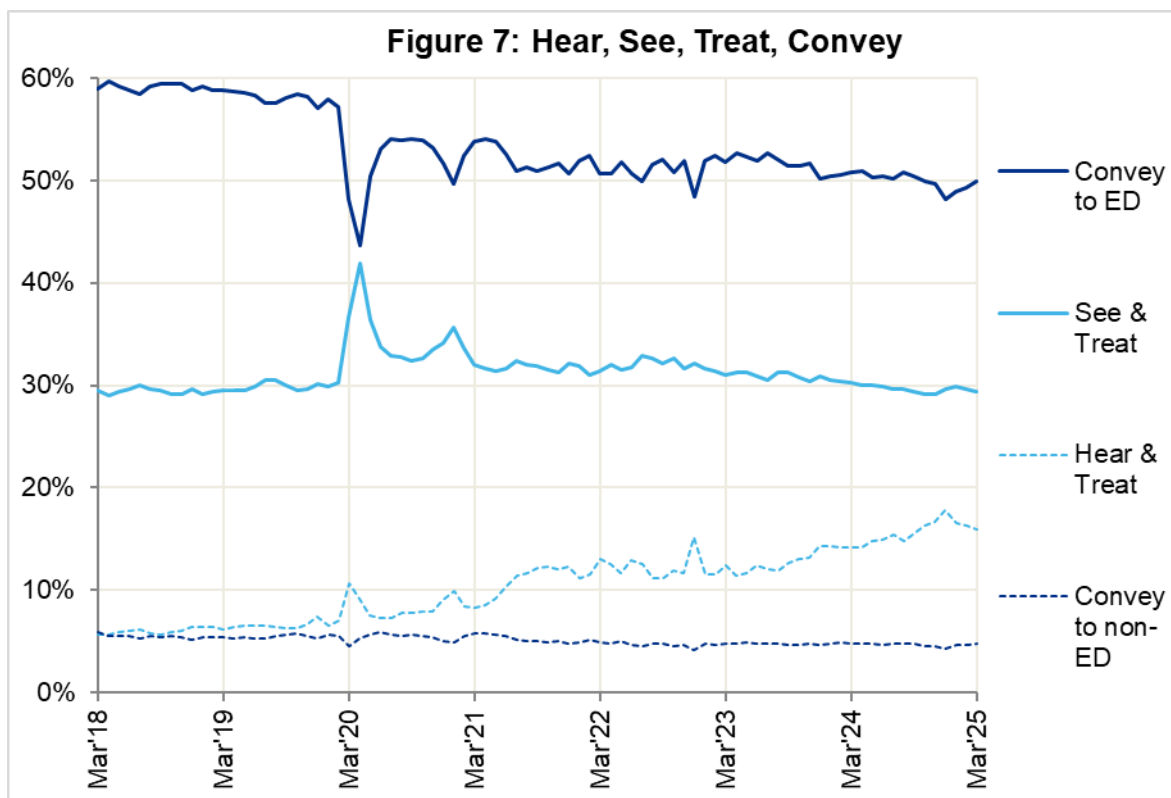


In March 2025, 795,279 calls to 999 were answered, or 25.7 thousand per day.

There were 772,322 incidents in England in March 2025, which is 24.9 thousand per day, the fewest per day since October 2024. Of these, 385,841 had conveyance to ED, or 12.4 thousand per day (Figure 6).



In England in March 2025, 16.0% of incidents were resolved on the telephone (Hear & Treat), the lowest since September 2024. Other incidents comprised 29.3% closed on scene (See & Treat), 50.0% with conveyance to an Emergency Department (ED), and 4.8% with conveyance to non-ED (Figure 7).



2. Ambulance Clinical Outcomes (AmbCO)

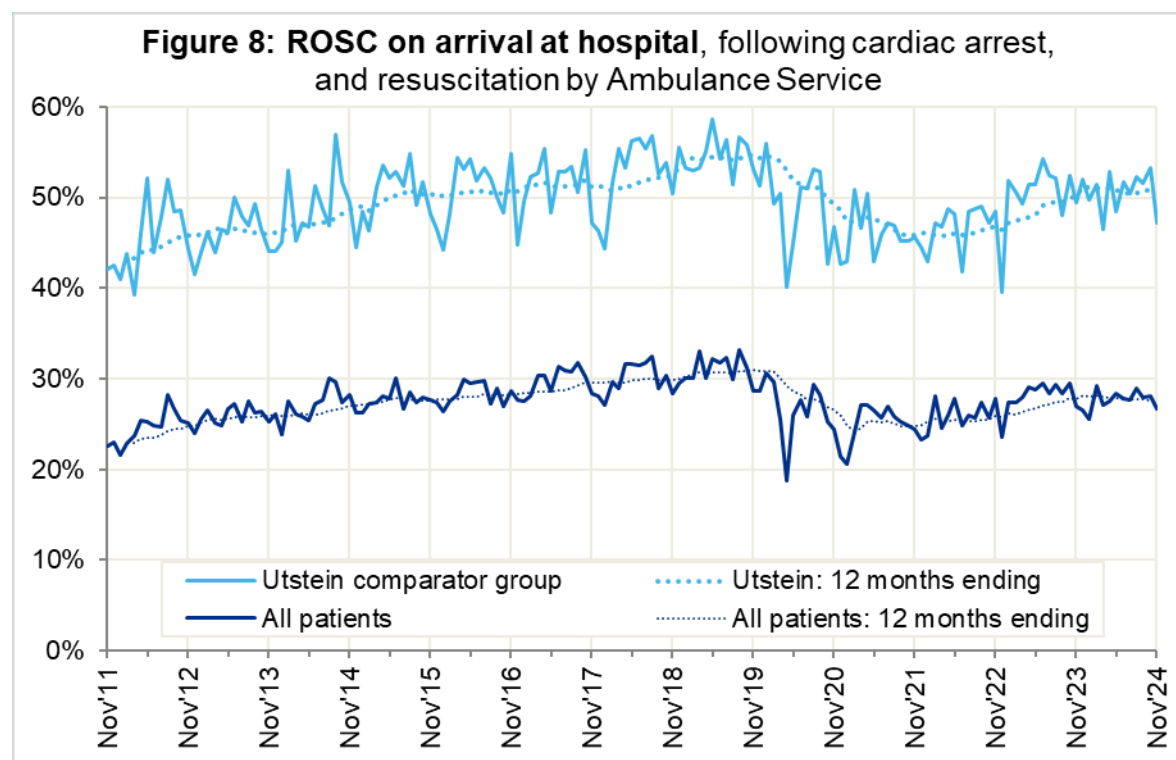
We summarise data in this Statistical Note for topics when we publish care bundle data for that topic. This commentary is on cardiac arrest data, because we collect and publish the post-ROSC (Return of Spontaneous Circulation) bundle data for cardiac arrest patients for every May, August, November, and February.

2.1 Cardiac arrest: ROSC on arrival at hospital (Figure 8)

In England, 2,771 patients had resuscitation by an ambulance service with a known outcome after cardiac arrest in November 2024, of which 740 (27%) had ROSC on arrival at hospital, slightly less than the 2023-24 average (28%).

The Utstein comparator group comprises patients with an out-of-hospital cardiac arrest of presumed cardiac origin, where the initial rhythm was Ventricular Fibrillation or Ventricular Tachycardia, and the arrest was bystander witnessed. This group therefore have a better chance of survival.

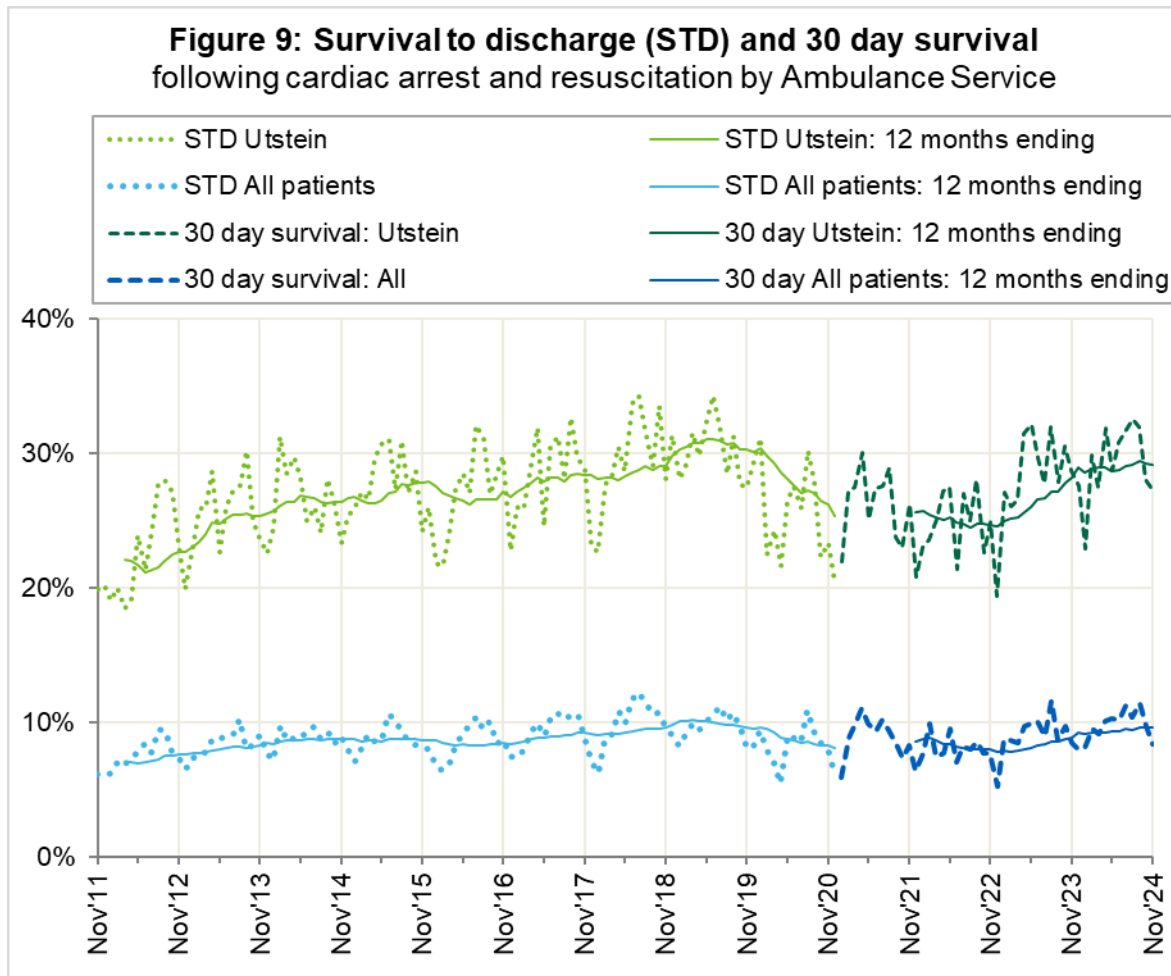
In November 2024, of the 2,771 cardiac arrest patients, 409 met these criteria, of which 193 (47%) had ROSC on arrival at hospital, less than the 2023-24 average (51%).



2.2 Survival following cardiac arrest (Figure 9)

For the 2,753 resuscitated cardiac arrest patients in England in November 2024 where survival at 30 days is known, 8% (230) survived, similar to the 9% for 2023-24. For the Utstein group, 27% (110 of 405) survived for 30 days, 2 percentage points less than the 2023-24 average.

Figure 9 shows survival rates in November are usually similar to or below the annual average.

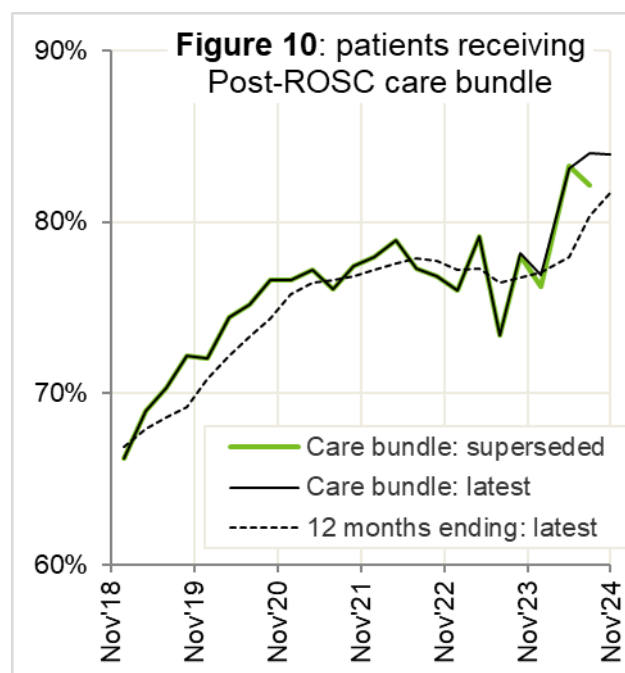


2.3 Cardiac arrest care bundle

In November 2024, there were 933 cardiac arrest patients resuscitated by an ambulance service in England who had ROSC on scene (not necessarily on arrival at hospital).

Of these, data show that 84% (783) received the appropriate care bundle, greater than the 2023-24 average of 77%. (Figure 10).

Figure 10 also shows the impact of the revisions for May 2023 to September 2024 that we published last month, including a 2 percentage point revision for England data for August 2024.



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 section 3.5 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 Related statistics

NHS England publishes C2 response times for each Integrated Care Board (ICB) from April 2023 monthly at www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/ambulance-management-information, and ambulance handover data by acute trust from October 2023 on the same page.

Data on patients handed over to each Acute Trust are available for whole months from October 2023 at that same webpage, and also for individual days during winter from 2017-18 at www.england.nhs.uk/statistics/statistical-work-areas/uec-sitrep.

The Quality Statement described in section 3.1 includes information on:

- the “Ambulance Services” publications <https://digital.nhs.uk/data-and-information/publications/statistical/ambulance-services> by NHS Digital and predecessor organisations 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:

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

Wales: <https://jcc.nhs.wales/insighthub/asi>

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

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 specification guidance in section 3.1, incidents resulting from a call to NHS 111 are included in all AmbSYS indicators, except the counts of 999 calls (indicators A1, A124, and A125) and call answer times (A2 to A6 and A114).

3.4 Centiles

The centile data for England in this publication are not precise centiles calculated from national record-level data, but from each individual trust's record-level data, weighted by their incident count, and averaged across England. So, if England only had two trusts, with centiles of 7:10 and 7:40, and the former had twice as many incidents as the latter, the England centile would be 7:20.

3.5 Contact information

For media enquiries: nhsengland.media@nhs.net, 0113 825 0958.

The person responsible for this publication is Ian Kay, england.999iucdata@nhs.net, Operational Insights, Transformation Directorate, NHS England, 07918 336050.

3.6 Accredited official statistics

These official statistics were independently reviewed by the Office for Statistics Regulation in May 2015. They comply with the standards of trustworthiness, quality and value in the Code of Practice for Statistics and should be labelled "accredited official statistics".