



Statistical Note: Ambulance Quality Indicators (AQI)

For Category 1, the average response time in England in May 2025 was the second fastest since May 2021, after April 2025.

For a certain type of heart attack, the proportion of patients receiving a recommended bundle of care was the highest since April 2014.

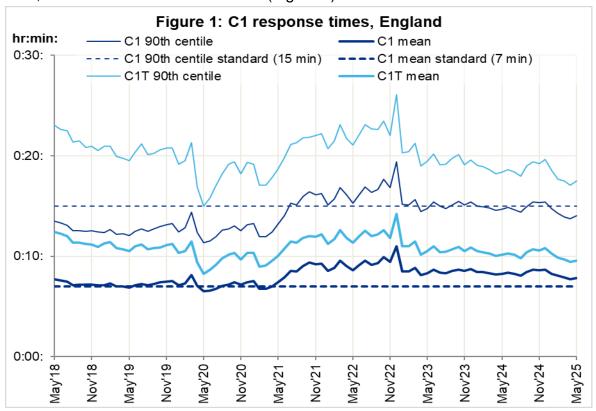
Today we publish revisions for Ambulance Systems Indicators from November 2023 to April 2025.

1. Ambulance Systems Indicators (AmbSYS)

1.1 Response times

May's C1 mean response time was faster than every month since May 2021 except April 2025, but both of these were slower than every month of 2019.

For C1 for England, the mean response time in May 2025 was 7 minutes 51 seconds and the 90th centile was 14:01. The C1 mean response time was below 8 minutes for the third month in a row. The average standard¹ of 7 minutes was not met but the 90th centile standard of 15 minutes was met for the fifth month in a row. For C1T (time to the arrival of the transporting vehicle for C1 incidents), the average was 9:35, and the 90th centile was 17:29 (Figure 1).



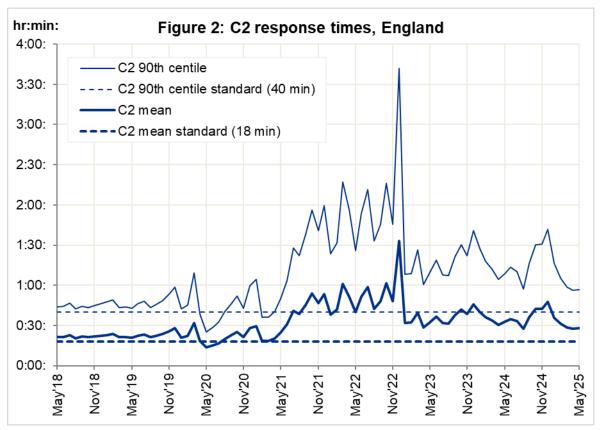
Revisions to the England C1 and C2 response times are all 2 seconds or less.

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

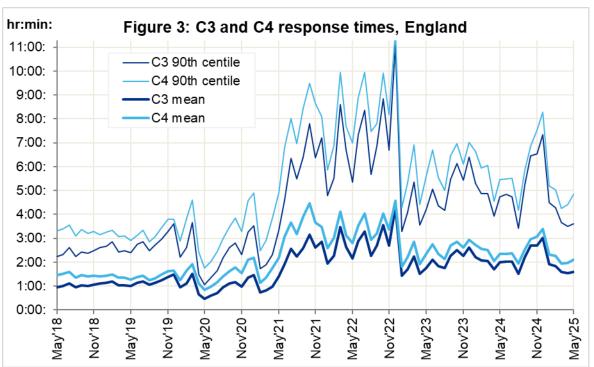




The May 2025 England C2 average was 27:54 and the 90th centile was 56:54, the third and second fastest respectively since May 2021 (Figure 2).



For England in May 2025, the C3 average was 1:35:00, and the 90th centile 3:36:55, both faster than every in month since August 2024 except for April 2025. The latest England C4 mean was 2:06:51, with a 90th centile of 4:50:01 (Figure 3).





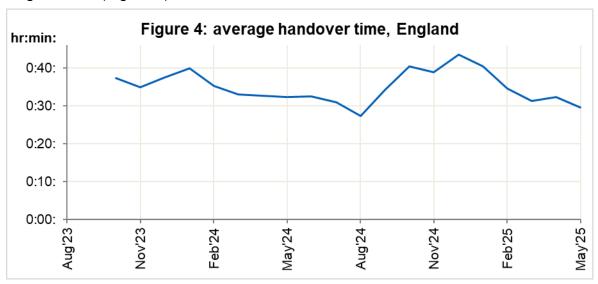


1.2 Other Systems Indicators

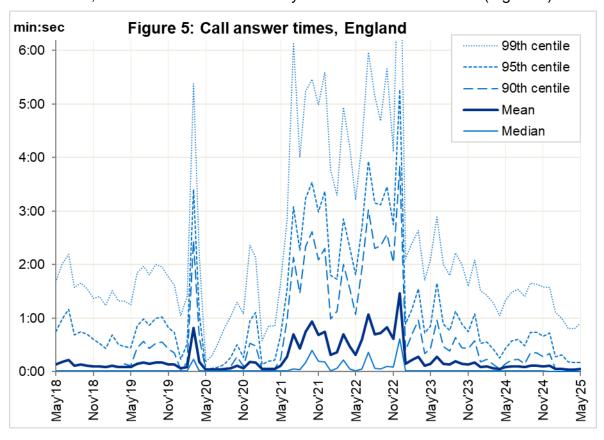
There are no revisions for Isle of Wight or South Central Ambulance Services.

However, all indicators have been revised for at least one trust for at least one month from November 2023 to April 2025. The largest revisions are for clinical validation, particularly for East Midlands Ambulance Service.

The mean handover time in England in May 2025 was 29:30, the fastest since August 2024 (Figure 4).



The mean 999 call answer time in May 2025 was 3 seconds. The 95th centile was 10 seconds; it has been more than four years since this was faster (Figure 5).

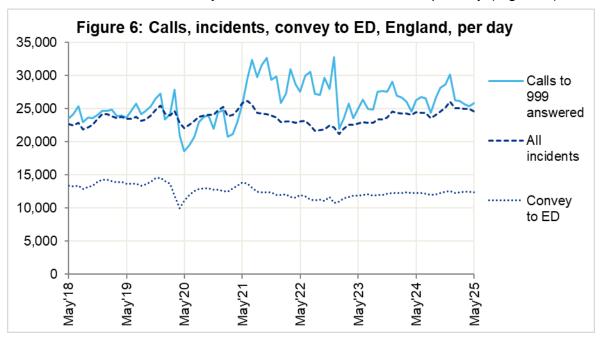




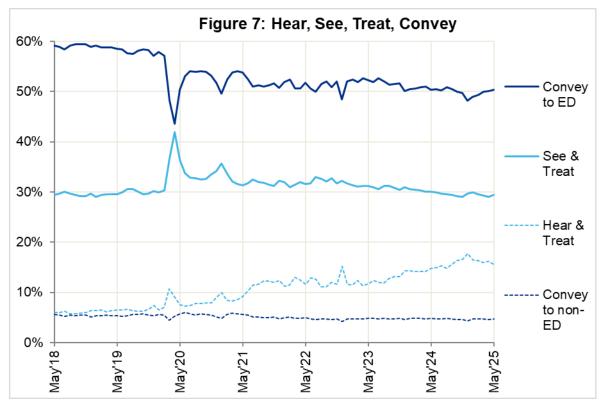


In May 2025, 800,660 calls to 999 were answered in England, or 25.8 thousand per day. There were 761,322 incidents, although the count of incidents resolved on the telephone (Hear & Treat) for Yorkshire, usually around 11,000, is not available.

383,664 incidents had conveyance to ED, or 12.4 thousand per day (Figure 6).



In England in May 2025, 29% of incidents were closed on scene (See & Treat), 50% had conveyance to an Emergency Department (ED), and 5% had conveyance to non-ED, with Hear & Treat the remainder (Figure 7).







2. Ambulance Clinical Outcomes (AmbCO)

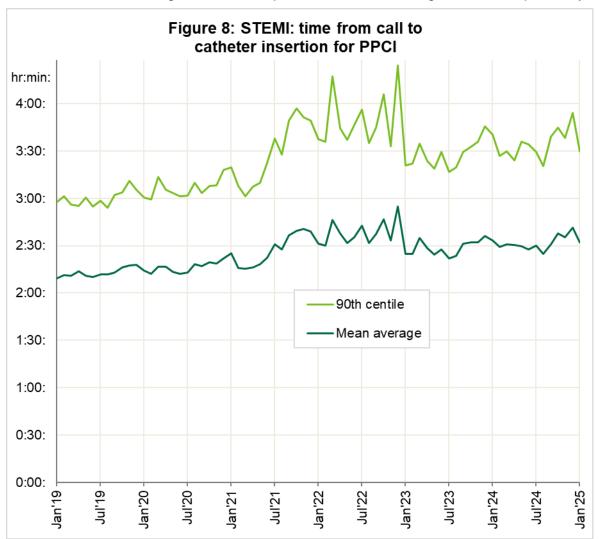
We summarise data for topics in this Statistical Note when we publish care bundle data for that topic, which this month is for STEMI.

2.1 ST-segment elevation myocardial infarction (STEMI)

STEMI is a type of heart attack, determined by an electrocardiogram (ECG) test. Early access to reperfusion, where blocked arteries are opened to re-establish blood flow, and other assessment and care interventions, are associated with reductions in STEMI mortality and morbidity.

For STEMI patients, the Myocardial Ischaemia National Audit Project (MINAP) collects the time from ambulance call to insertion of a catheter for primary percutaneous coronary intervention (PPCI): inflation of a balloon inside a blood vessel to restore blood flow to the heart.

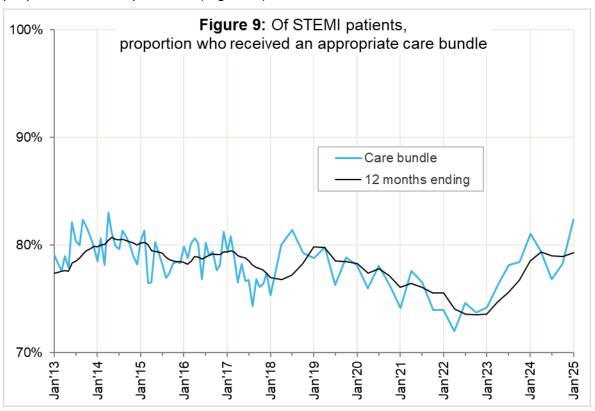
In England in January 2025, the mean time from 999 call to catheter insertion was 2 hours 32 minutes, and the 90th centile time was 3 hours 29 minutes (Figure 8). These are the lowest figures since September 2024 and August 2024 respectively.







Ambulance Services also report on a recommended bundle of care for patients with an acute STEMI that they convey. There were 1,777 such patients in England in January 2025, of which 1,464 (82.4%) received the appropriate bundle, the highest proportion since April 2014 (Figure 9).



3. Further information on AQI

3.1 The AQI landing page and Quality Statement

<u>www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators</u>, or <u>http://bit.ly/NHSAQI</u>, 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".