

National Ambulance Data – Final

Data period to end February 2022

Date of Report: March 16, 2022

2. Summary and Contents

- **Almost all of the metrics reported here saw a month-on-month decrease in February. However, this was because of the shorter month and there was an uplift in the daily average for many key measures.** Notable for this was volume of contacts, 999 calls answered, volume of C1 and C2 incidents, and incidents with transport to ED - as well as continued increases in the volume of handover delays and subsequent hours lost.
- **Mean call-answer time, and response times for all categories, also increased in February.** Although none of these measures returned to the series-highs seen last year, they do remain significantly higher than February 2021 with response times for all categories continuing to exceed national standards by some margin.
- **Demand on the Urgent and Emergency Care system saw the volume of longest hospital handover delays continues to increase.** The daily average increased for all measures reported here, while delays exceeding 120 minutes (new to this report) hit a series-high of over 15,000 - with 28,000 hours lost as a result of those delays. Meanwhile the longest individual delay continues to increase, reaching 23 hours in February 2022 compared with 7 hours in April 2021 when the uplift began.
- **Once again, the potential harm incurred as a result of handovers taking over 60 minutes could be impacting thousands of patients.** Extrapolation of AACE's clinical assessment of the impact of handover delays suggest that in February 2022 as many as 29,424 patients could have experienced potential harm as a result of delays over 60 minutes, with over 3,000 of these experiencing severe harm.

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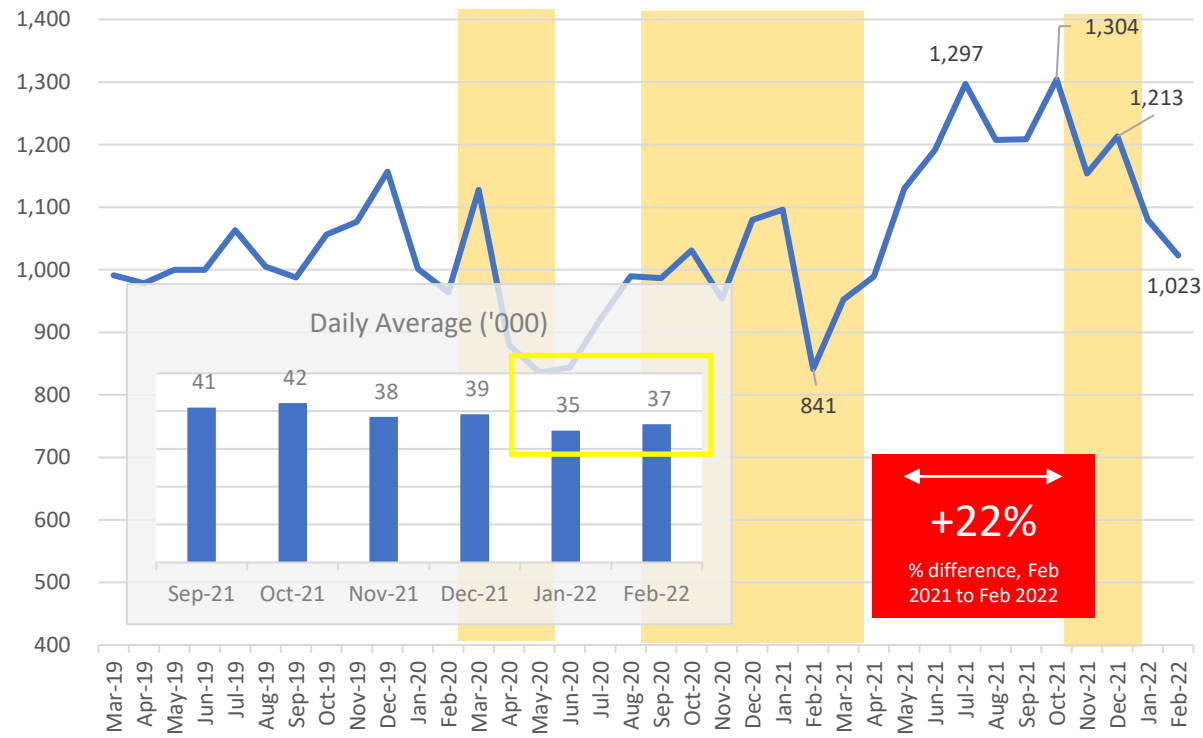
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3. Demand: Volume of Contacts (Measure A0)

At a monthly level, volume of contacts dropped for the second consecutive month to reach 1,023k – the lowest since April 2021. The daily average, however, shows the number of overall contacts increased by 2k. Over the 12 months to February 2022 there were 13.8 million contacts, over 2 million more than the same period to February 2021.

1. Monthly

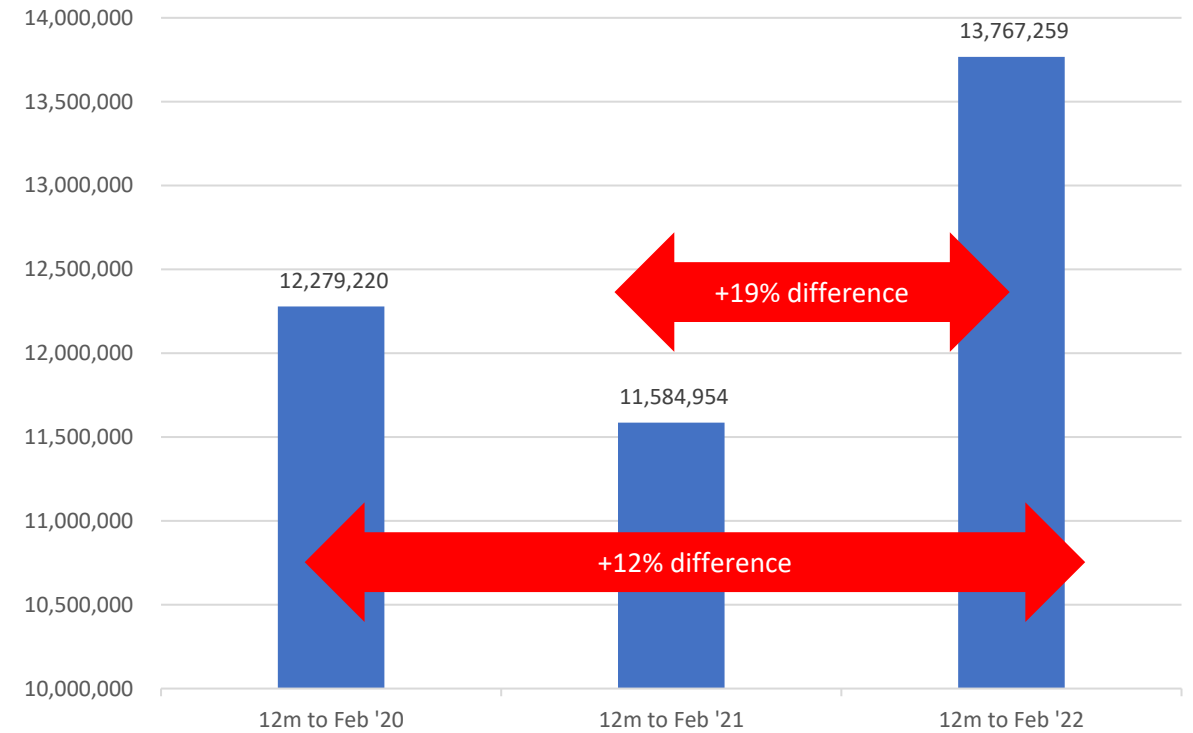
Volume of Contacts ('000, A0)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

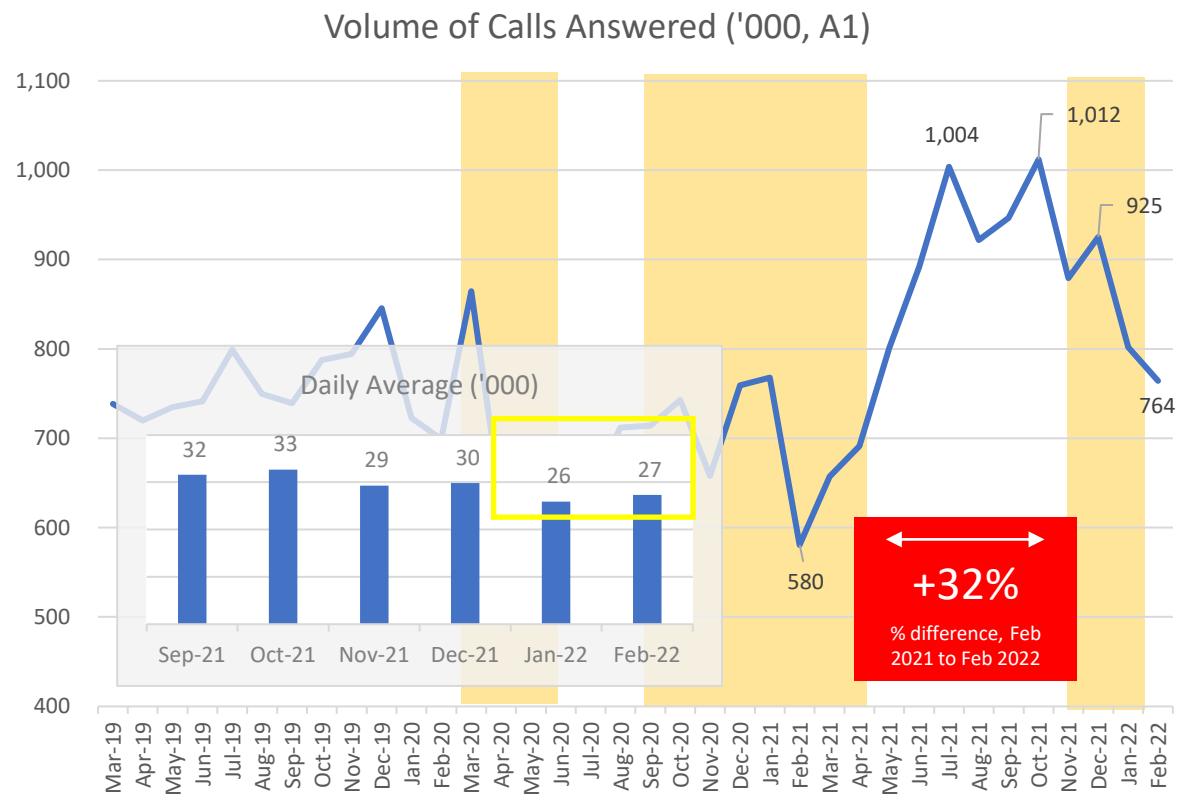
Volume of contacts in the 12 months to Feb (A0)



4. Demand: Volume of 999 Calls-Answered (Measure A1)

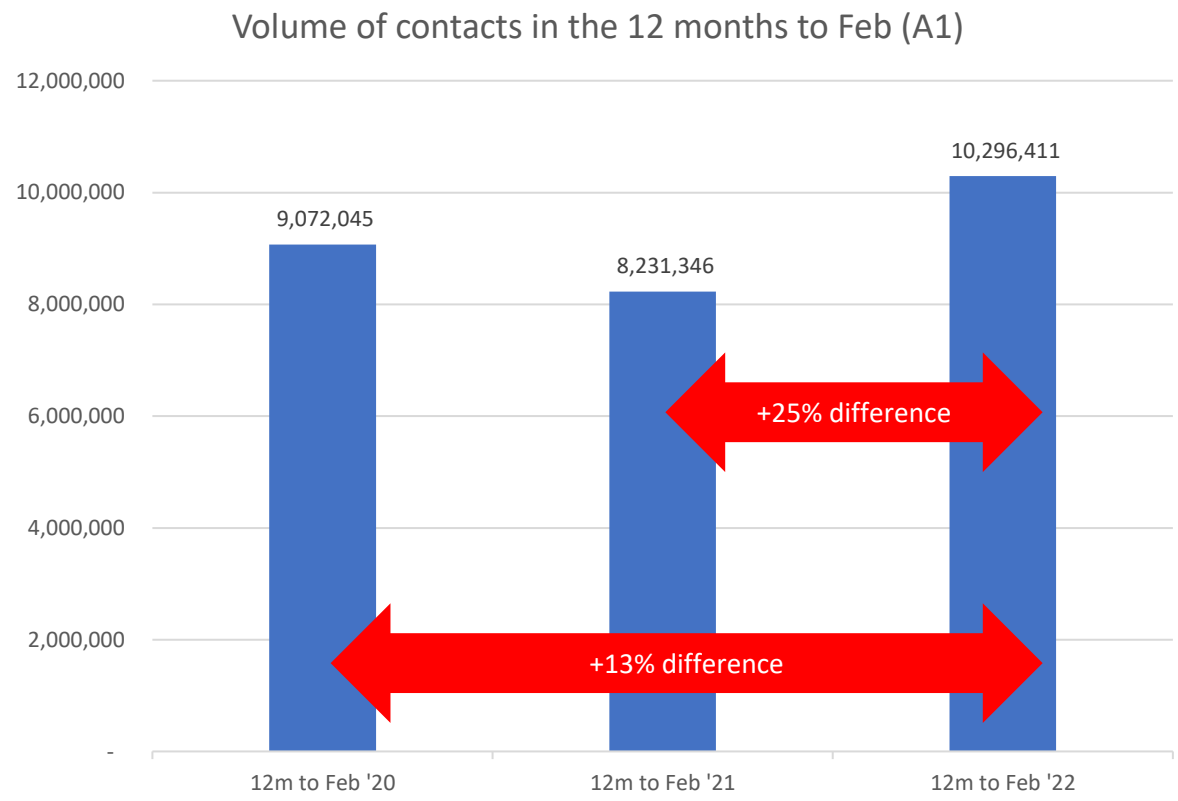
The daily average number of 999 calls-answered increased by 1k between January and February. The monthly volume stood at 764k, a month-on-month drop of 38k, but a difference of +32% (or 184k more calls) compared with February 2021.

1. Monthly



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

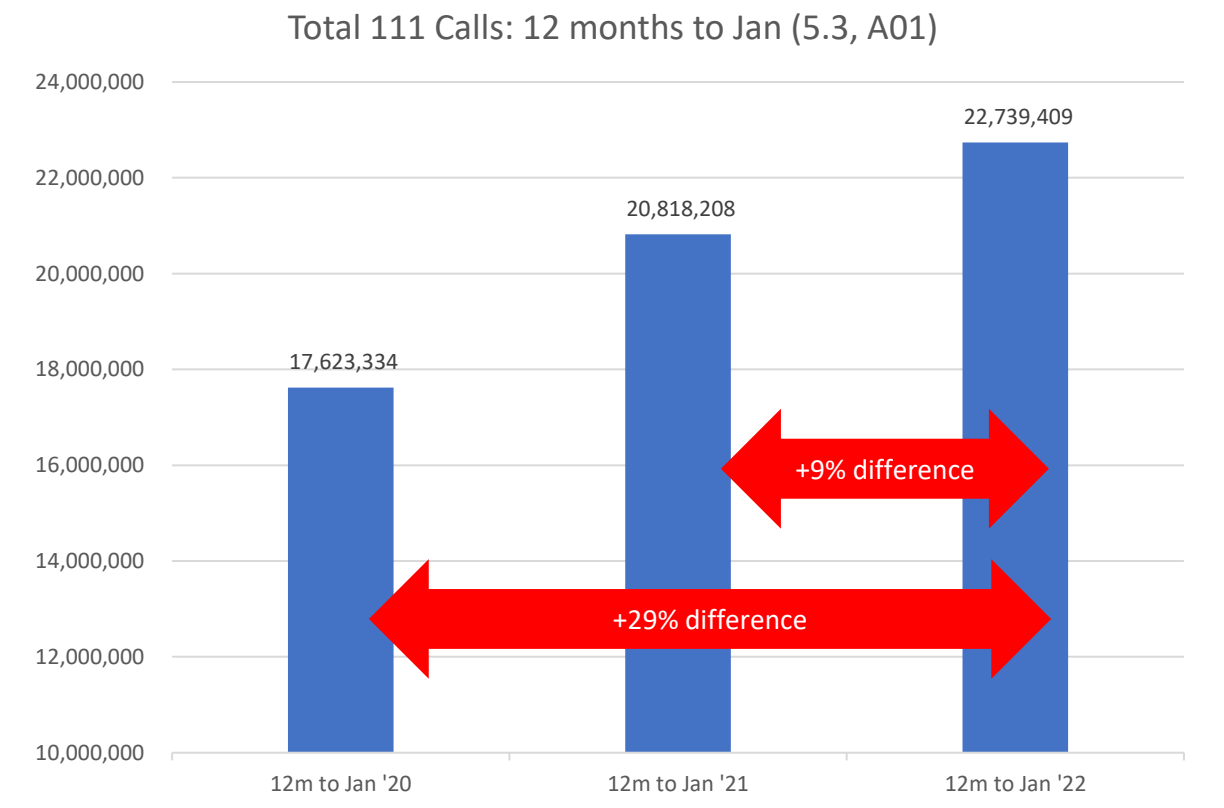
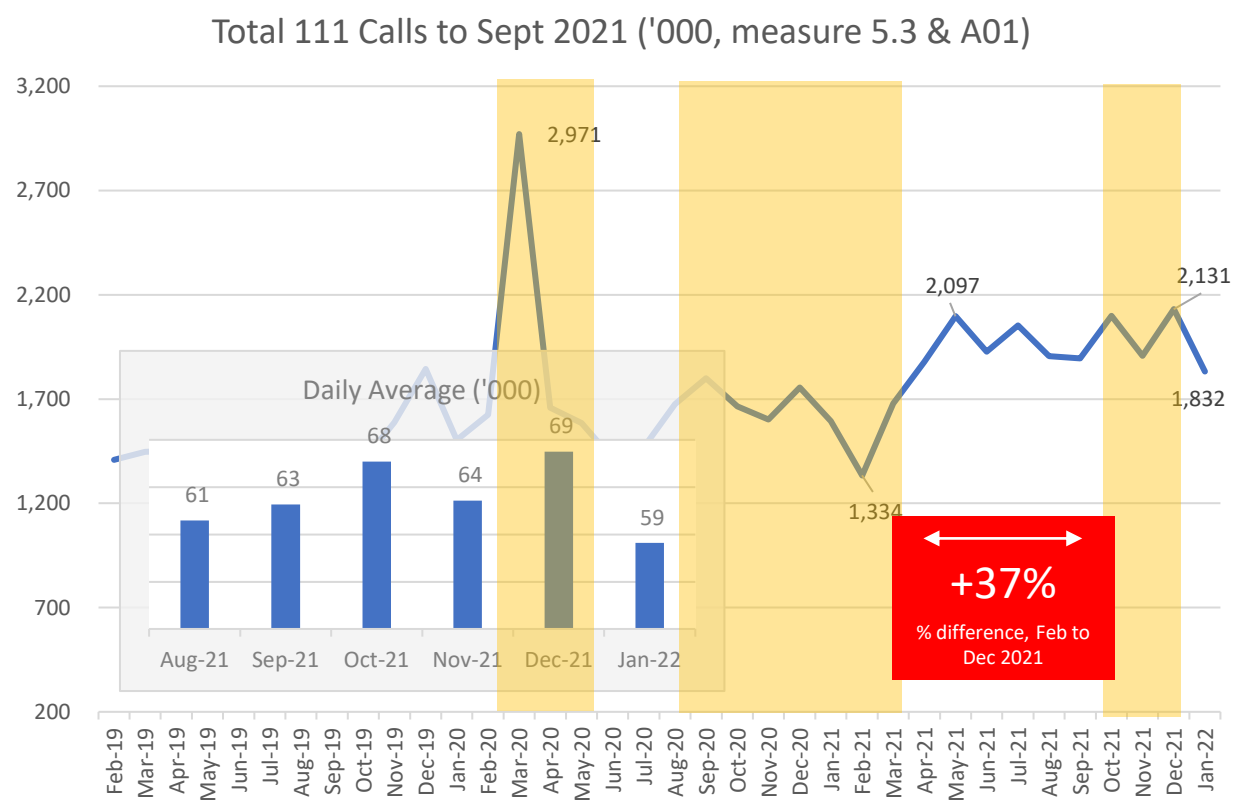


5. Demand: 111 Call Volumes (sources NHS 111 Min Data Set to March 2021 (5.3) then IUCADC to August 2021 (A0))

Running a month behind the AQI numbers, 111 data show an decrease in January (reflected by the AQI statistics). There were 299k fewer calls in the month, with the daily average dropping by 10k, to 59k. However, there was a +37% difference (or around 499k more calls) compared with February 2021.

1. Monthly

2. Summary: 12 months to January



Yellow areas denote COVID waves in the UK: source ONS.

Note: IUCADC data runs a month behind AQI.



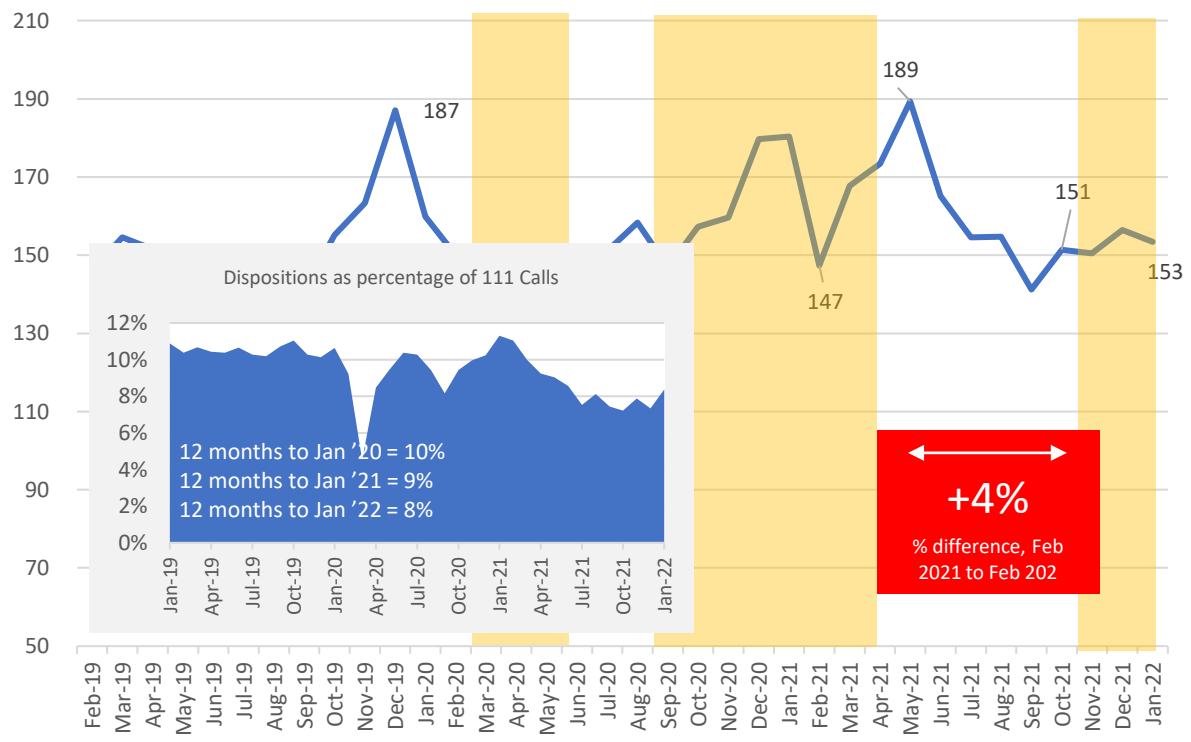
6. Ambulance Dispositions (sources NHS 111 Min Data Set to March 2021 (measure 5.23) then IUCADC to Aug 2021 (measure E02))

Volume of ambulance dispositions dipped from 156k to 153k between December and January, and reflected 8% of 111 calls (from 7% in December). Annualised volumes remain steady, but high: in the 12 months to January 2022 there were just over 1.9 million calls, compared with just under 1.9 million for the previous year and 1.8 million the year before.

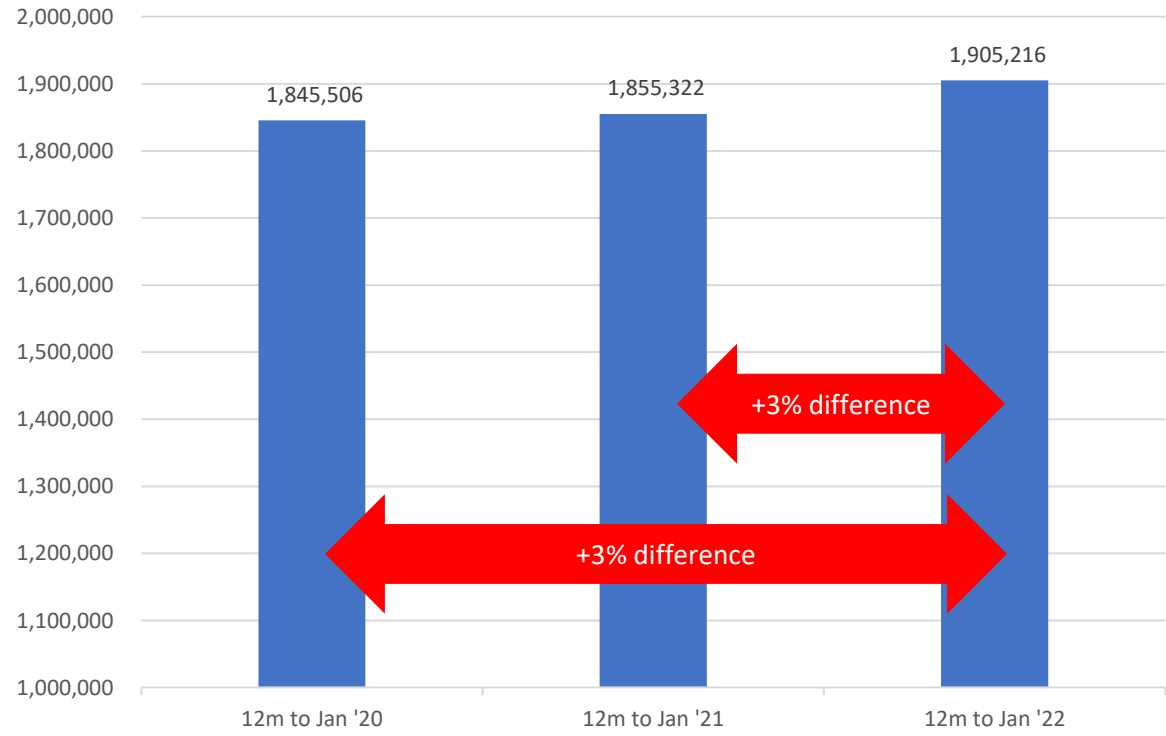
1. Monthly

2. Summary: 12 months to January

Ambulance Dispositions ('000, measures 5.23 & E02)



Ambulance Dispositions: 12 months to Jan



Yellow areas denote COVID waves in the UK: source ONS.

Note: IUCADC data runs a month behind AQL.

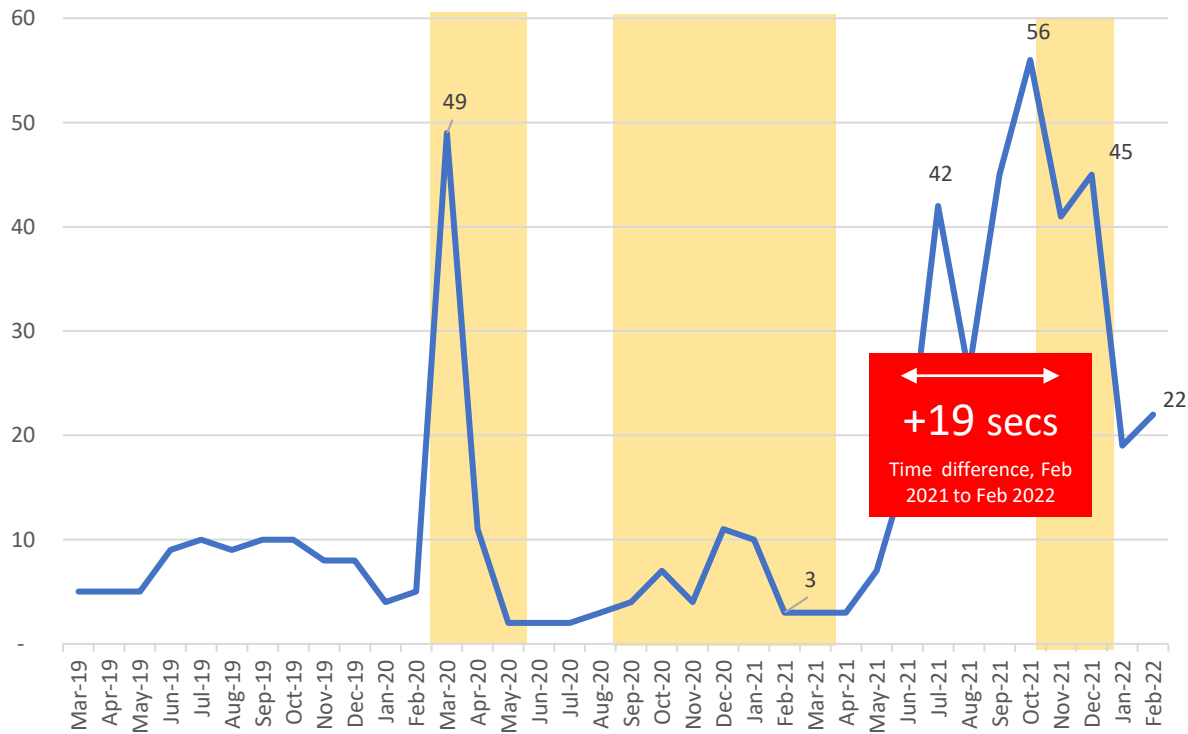


7. Demand: Call Answer Time (Measures A3 and A5)

Although significantly faster than 6 months ago, the mean call-answer time remains 19 seconds slower than the same time last year (at 22 seconds) and increased from 19 seconds in January 2022. The 95th centile answer-time dropped slightly to 104 seconds, but remains 96 seconds slower than in February 2021.

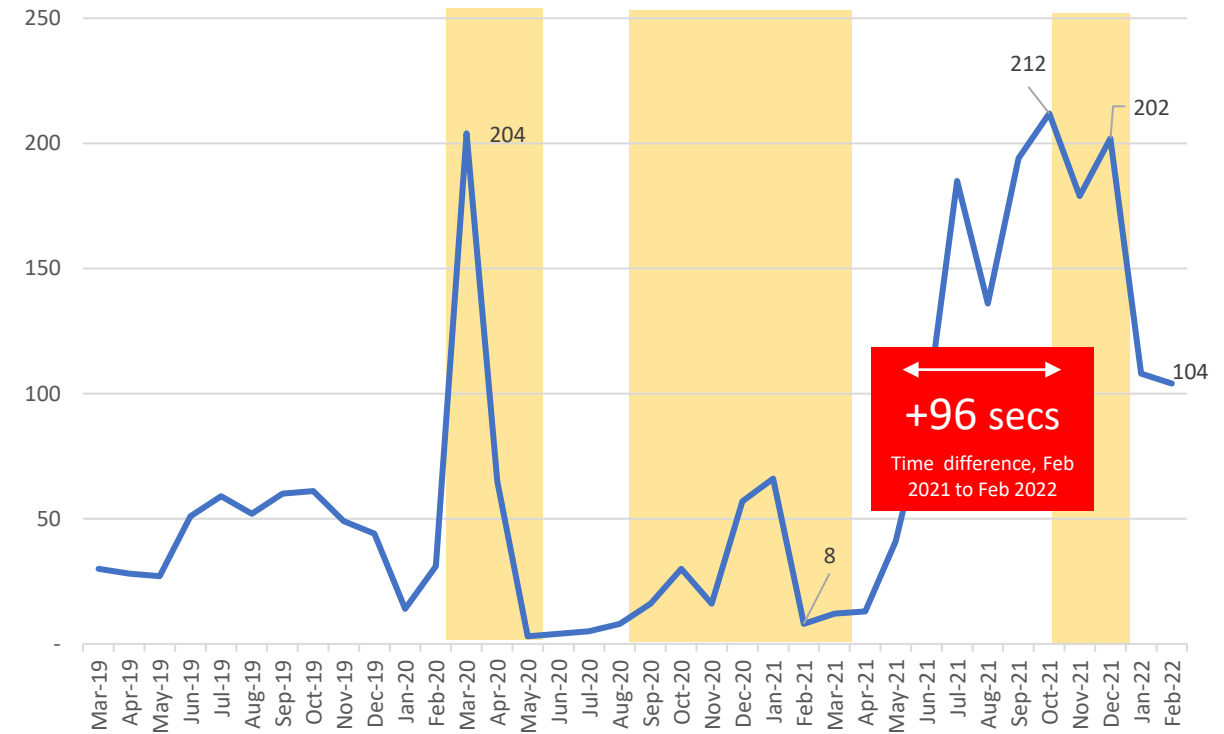
1. Mean

Mean Call Answer Time (A3)



2. 95th Centile

95th Centile Call Answer Time (A5)



Yellow areas denote COVID waves in the UK: source ONS.



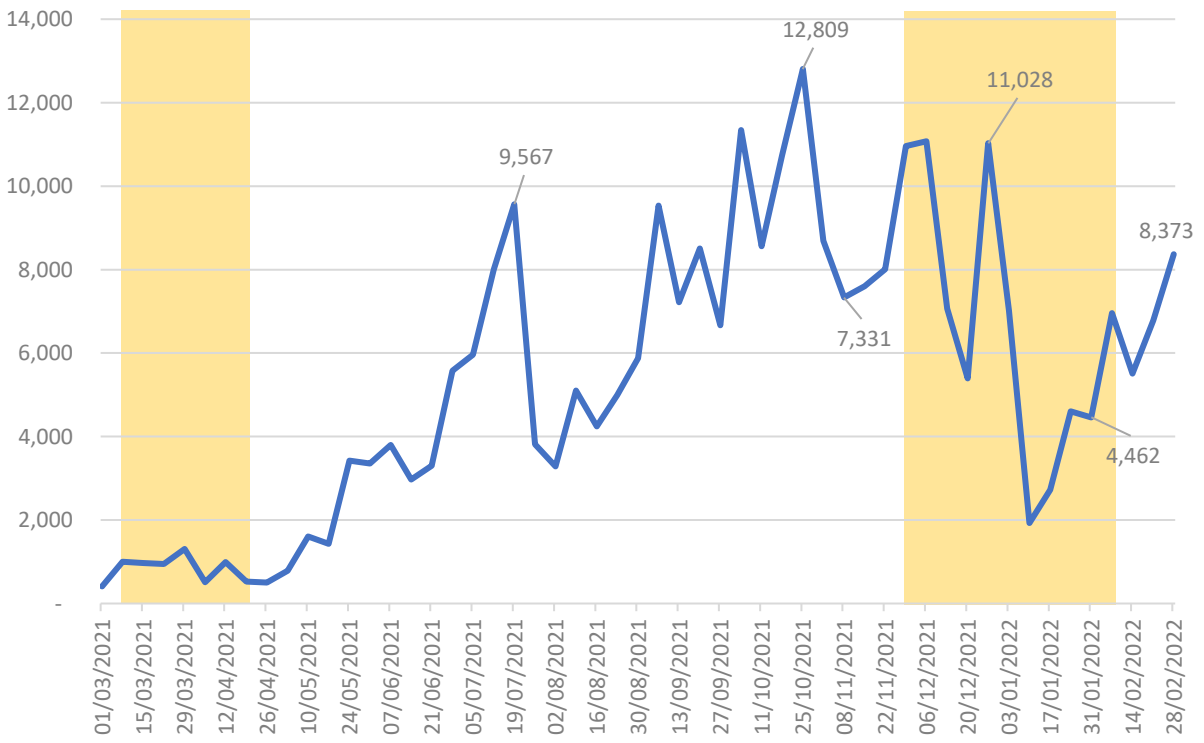
8. Call Delays over 2 minutes and Network Partner Connections (weekly data)

Call delays of >2 minutes dropped to 1,928 in early January, but have since increased to over 8k at the end of February. Network partner connections followed a similar pattern, increasing again in the most recent week to over 1k.

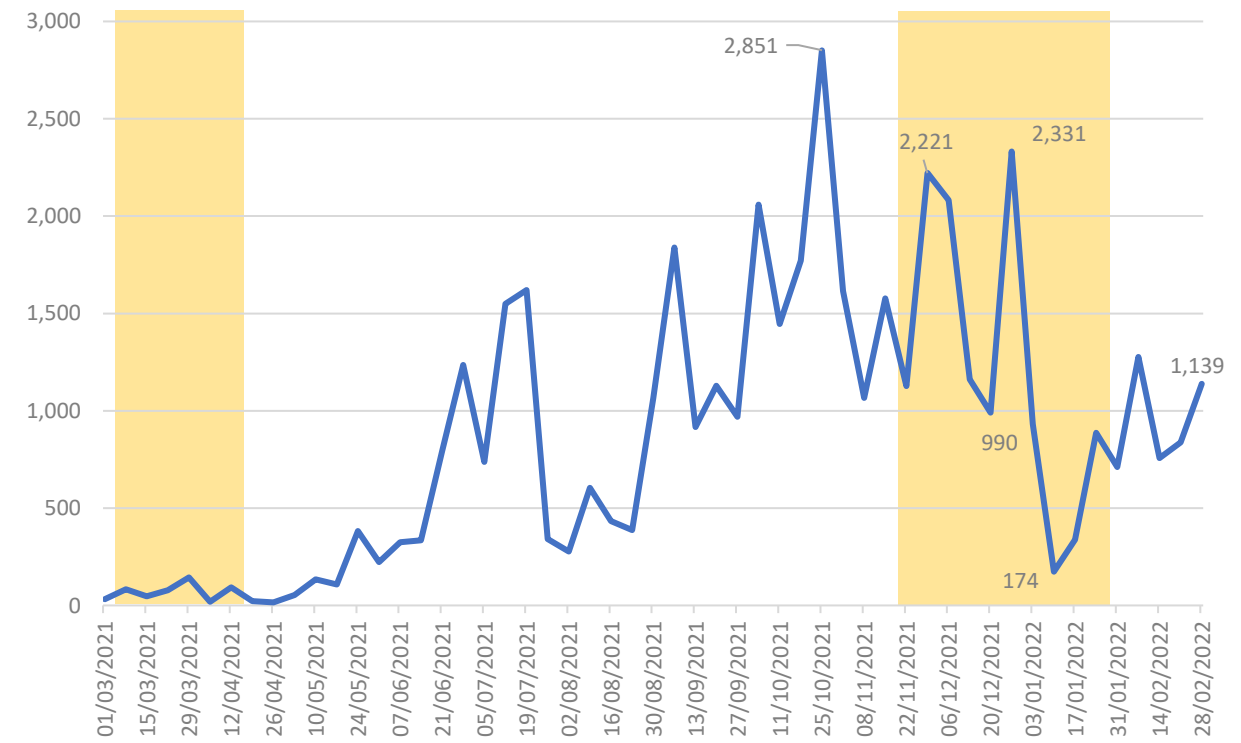
1. Call Answer Delays (2 mins+): Weekly Data

2. Network Partner Connections: Weekly Data

Volume of 2 min Call Delays from March 1 2021



Total Connections from March 1 2021



Yellow areas denote COVID waves in the UK: source ONS.

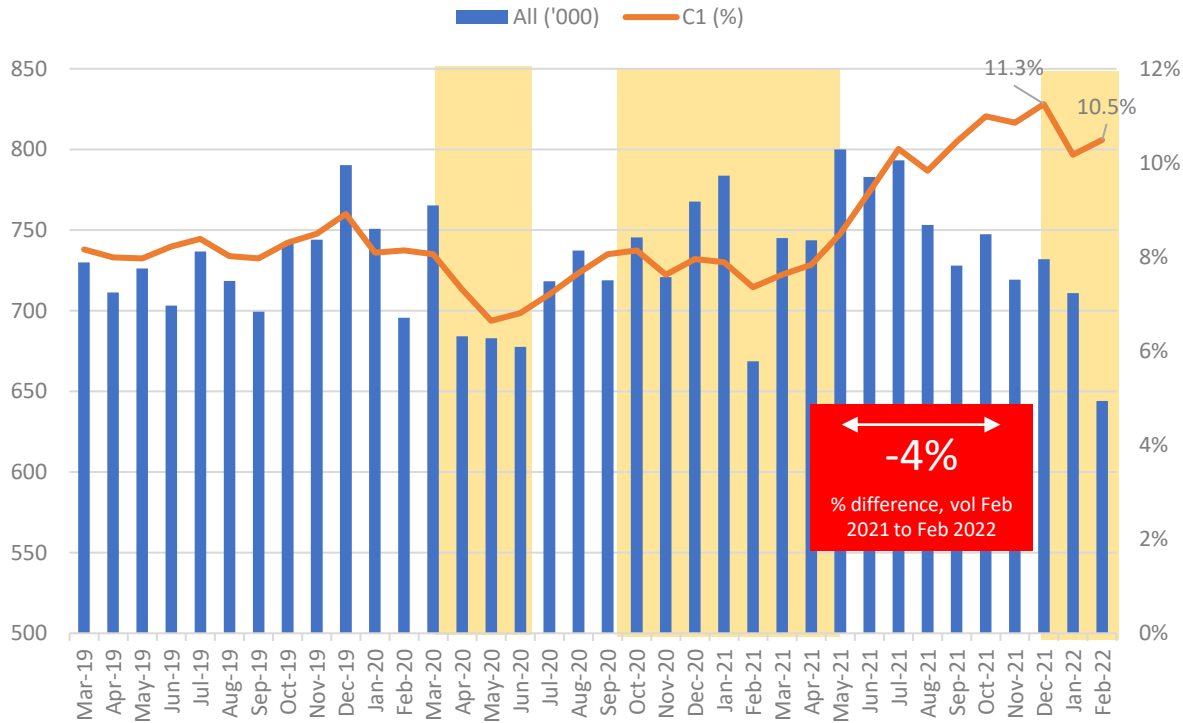


9. Demand: All Incidents (A7) and Proportion C1 (A8)

There were 67k fewer incidents in February compared with January (although this masks an increase in the daily average – see next slide). The proportion of that volume accounted for by C1 incidents remains above 10%.

1. Monthly volume of Incidents and Proportion that are C1

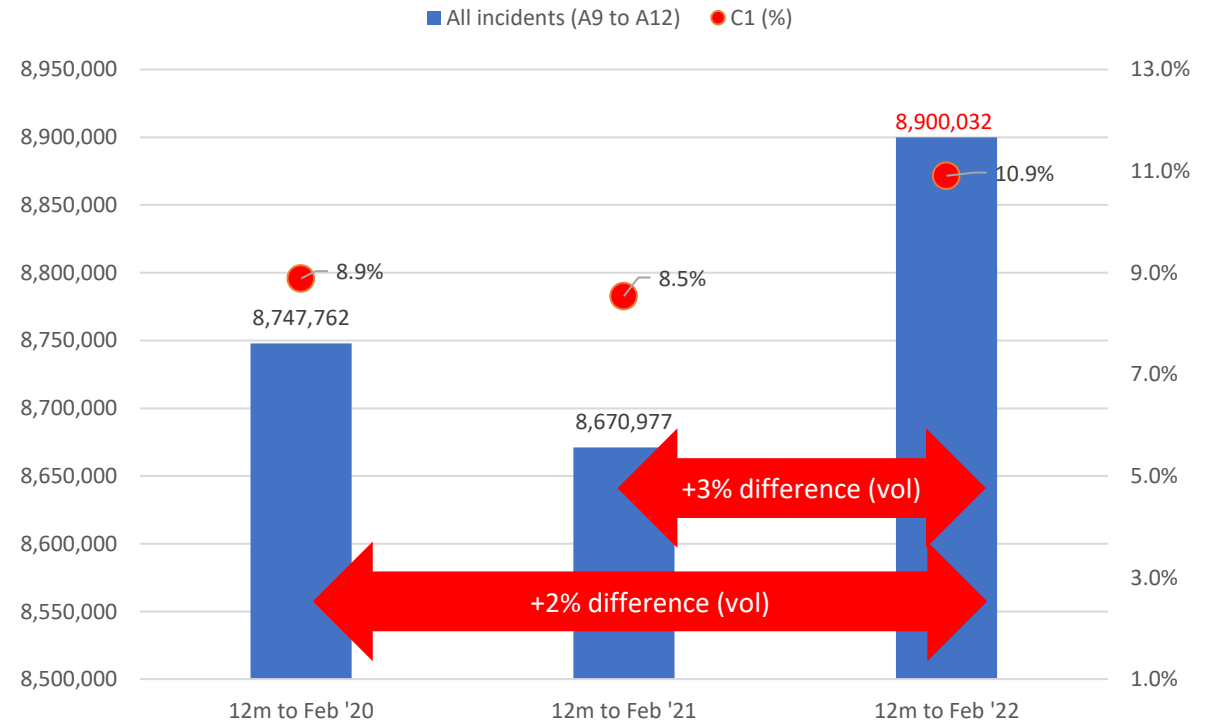
Volume of Incidents ('000, A7) and % C1 (A8)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of Incidents and % C1: 12 months to Feb (A7,A8)



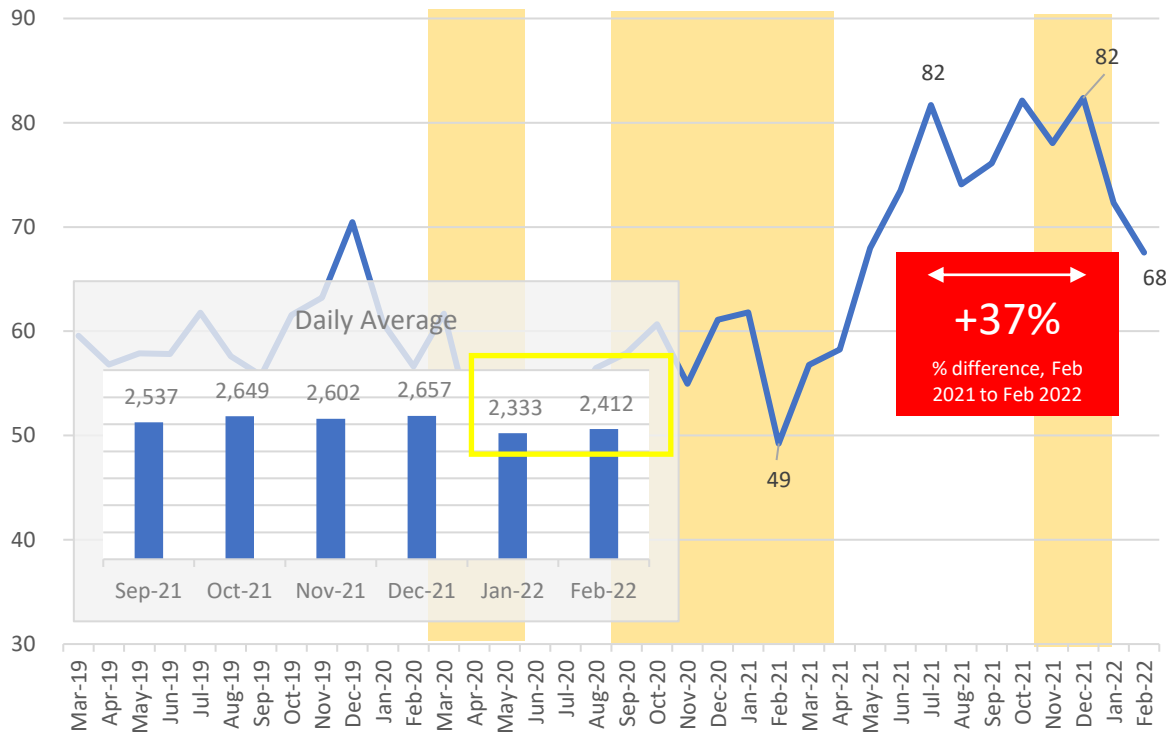
10. Demand: C1 Incidents (A8)

The daily average volume of C1 incidents increased in February, and although the monthly figure dropped by around 5k (to 68k) it remains 18k higher than in February 2021, a difference of +37%. Annualised data show 214k more incidents in the 12 months to February 2022 compared with the equivalent period to February 2021.

1. Monthly

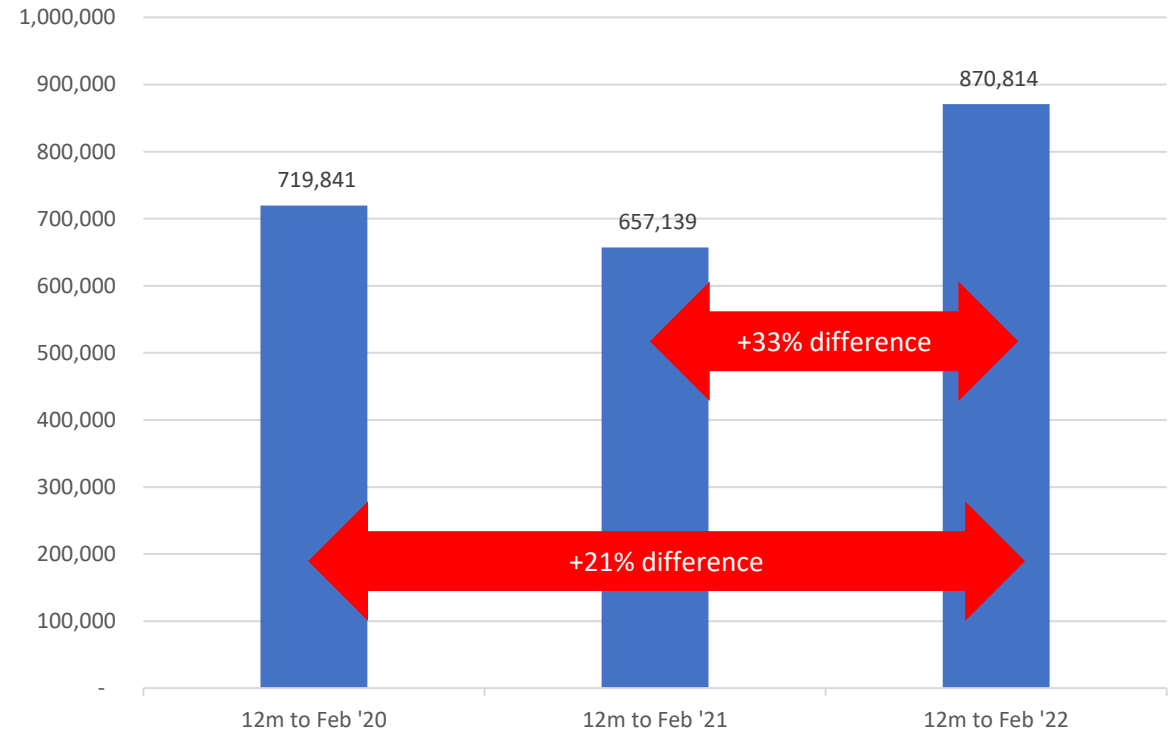
2. Summary: 12 months to February

Volume of C1 Incidents ('000, A8)



Yellow areas denote COVID waves in the UK: source ONS.

Volume of contacts in the 12 months to Feb (A8)

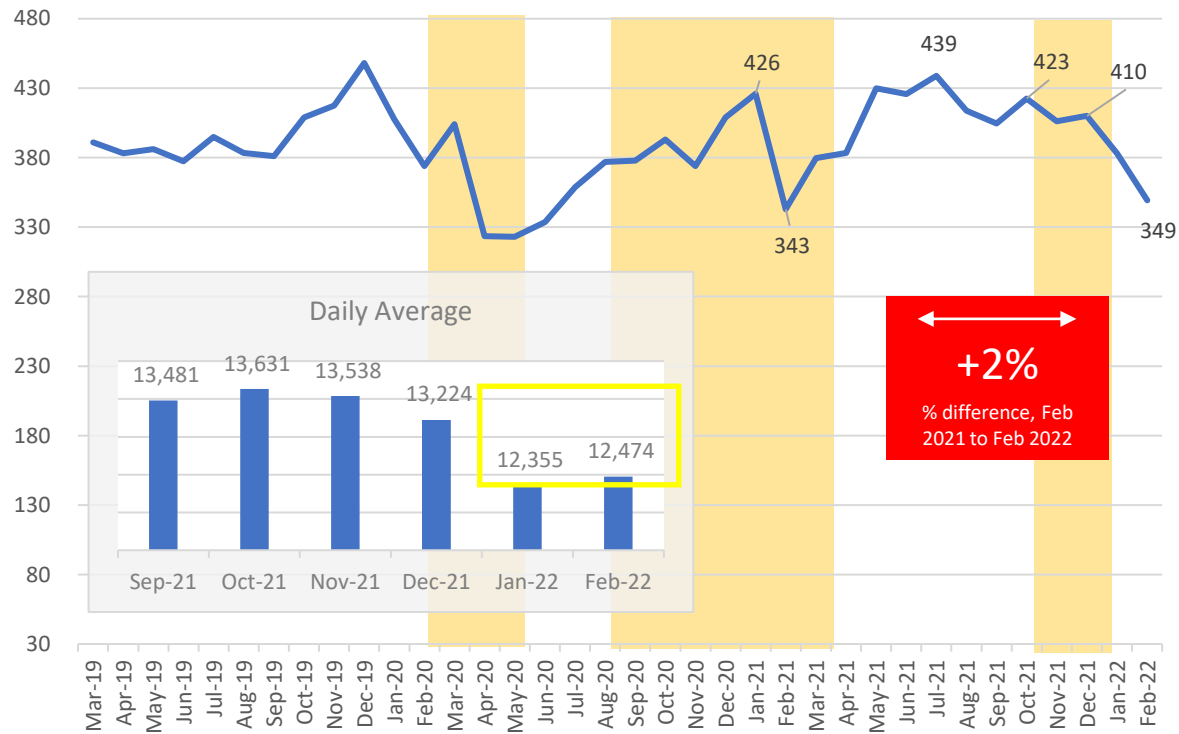


11. Demand: C2 Incidents (A10)

As with C1 incidents, C2 saw the daily average increase in February while the overall monthly volume decreased. The monthly figure is 2% greater than the same time last year having steadily decreased from a recent high of 439k incidents in July 2021. This peak is reflected in the 12-month data, which shows there was a 7% difference between the volume of C2 incidents when comparing the current and previous periods.

1. Monthly

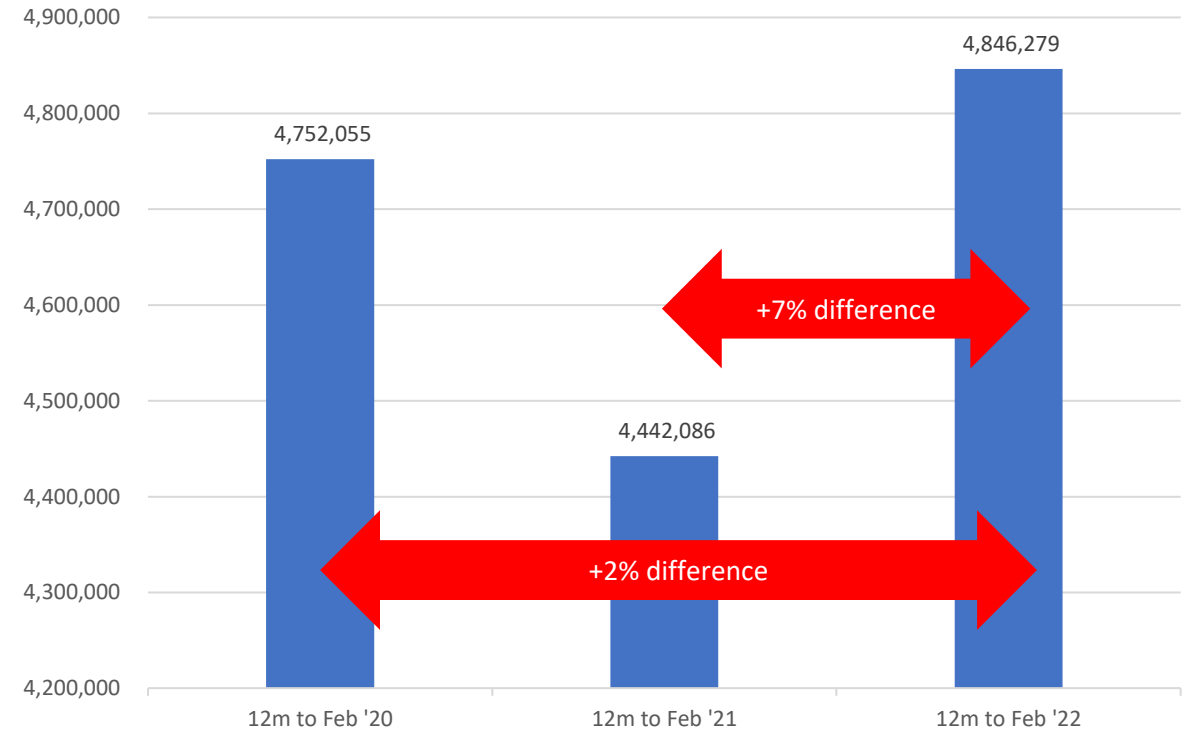
Volume of C2 Incidents ('000, A10)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A10)

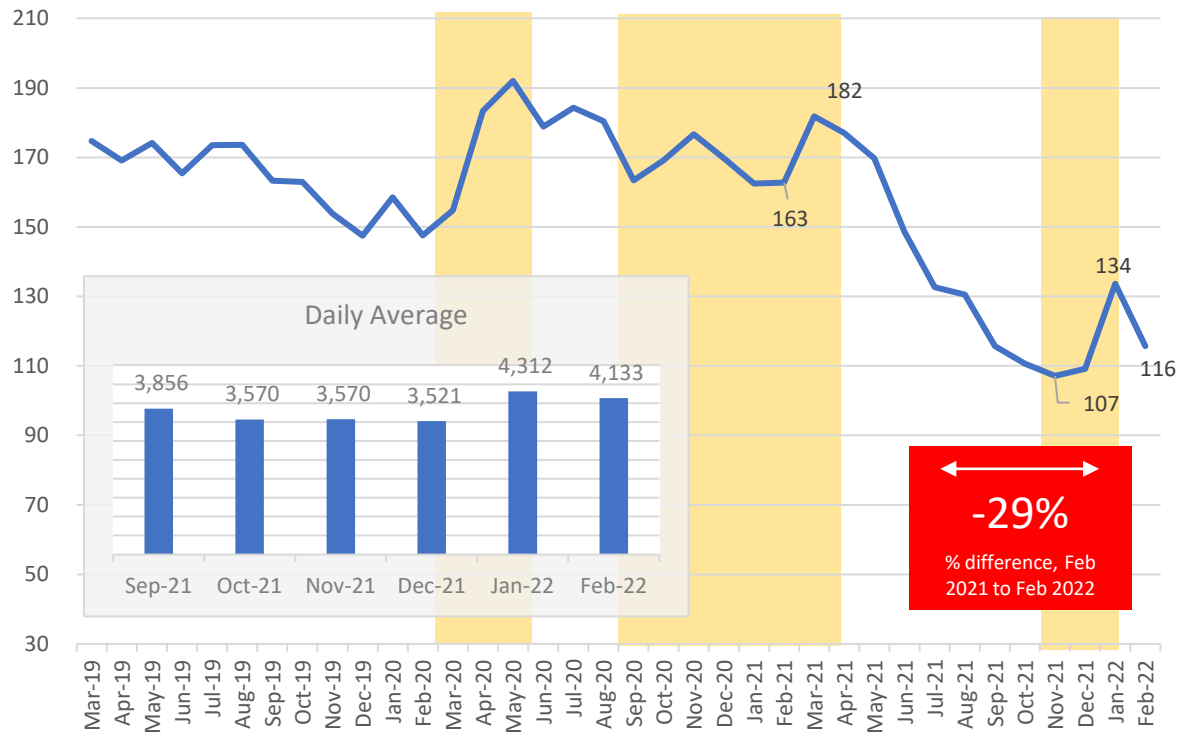


12. Demand: C3 Incidents (A11)

C3 incidents decreased in February on both monthly and daily measures with 18k fewer incidents in February compared with January 2022. There were around 4 million fewer incidents in the 21 months to February 2022 compared with the previous year, a difference of -21%.

1. Monthly

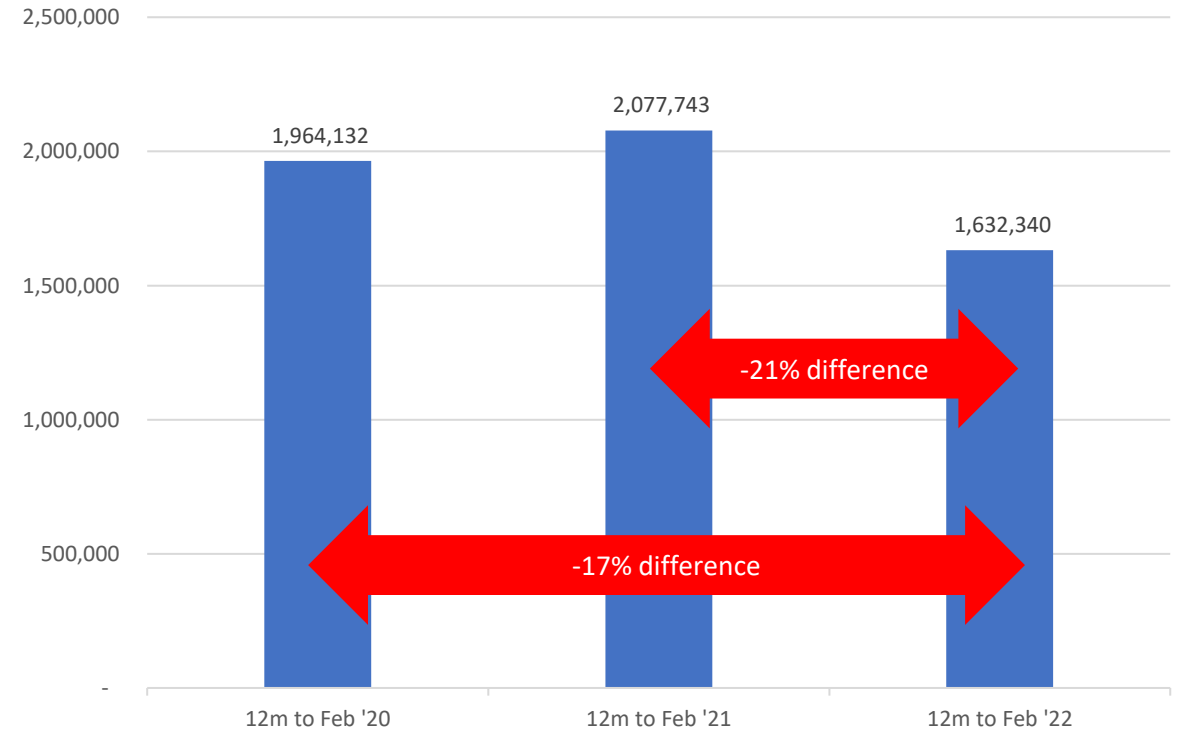
Volume of C3 Incidents ('000, A11)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A11)

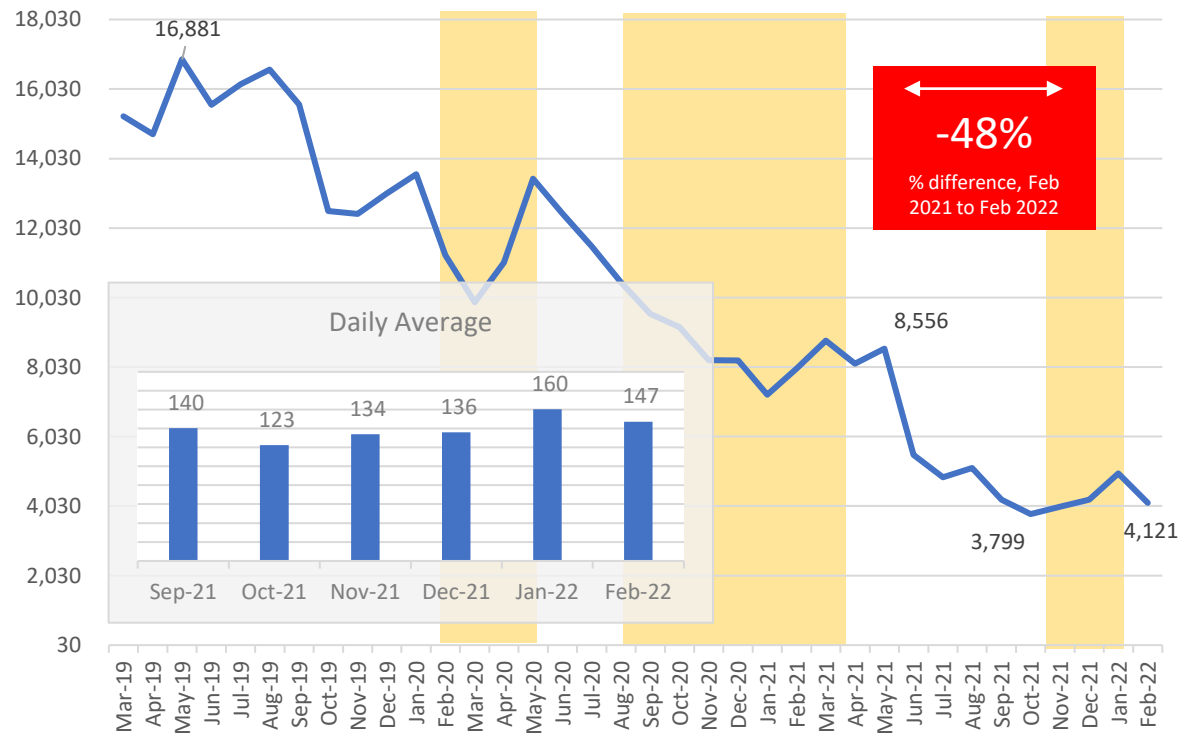


13. Demand: C4 Incidents (A12)

The trend for C4 incidents reflects that seen for C3, with a decrease in volume at both monthly and daily levels in February. There were 3.9k fewer incidents in February 2022 compared with the same time last year, a difference of -48%.

1. Monthly

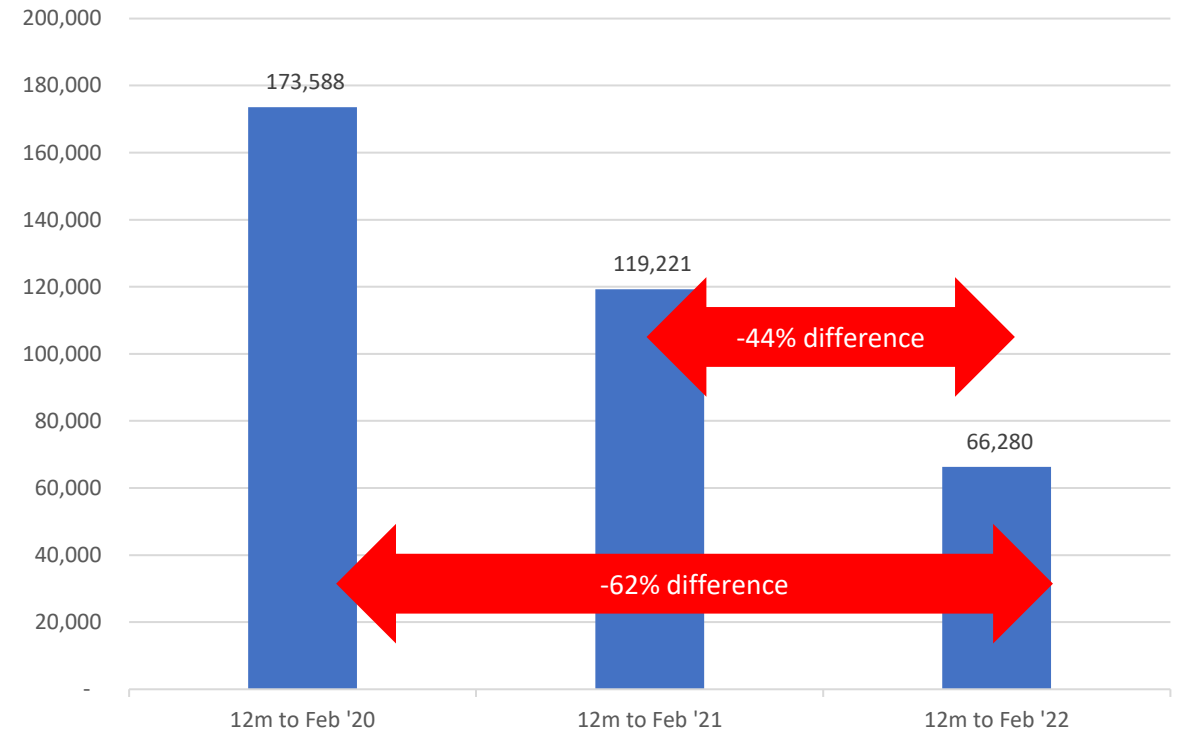
Volume of C4 Incidents (A12)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A12)

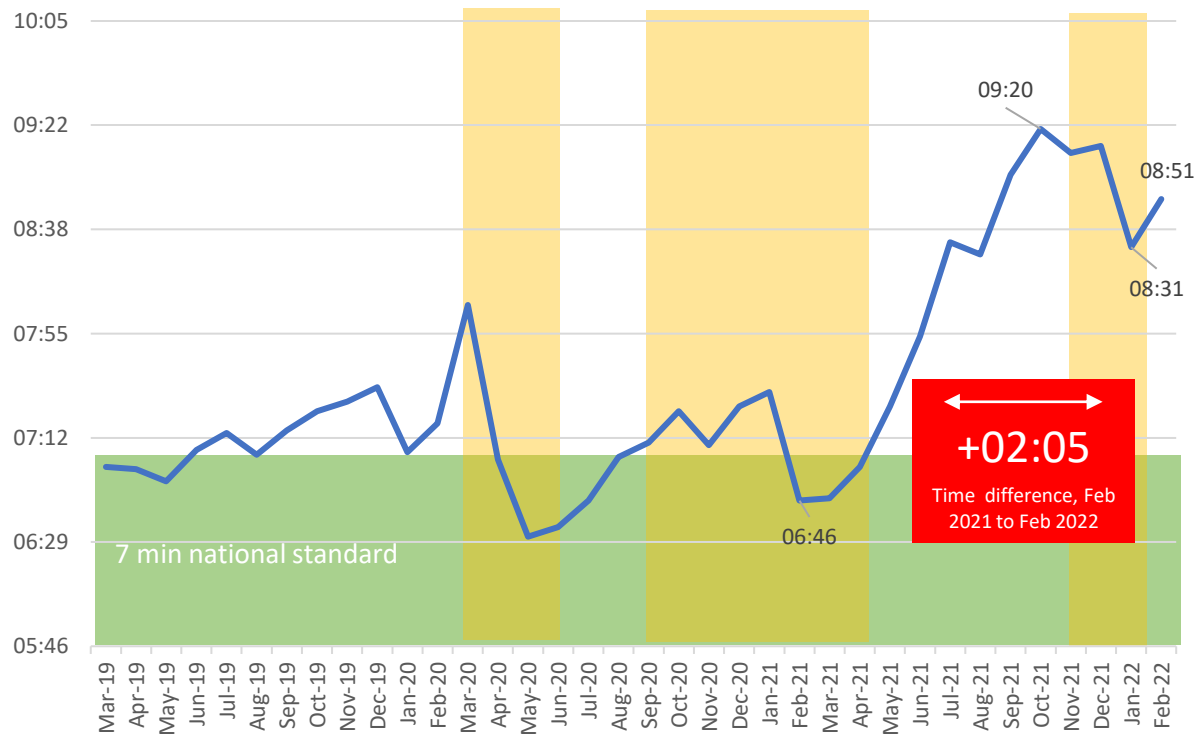


14. Demand: C1 Response Times (Measures A25 and A26)

Following a drop in C1 response time in January, February saw the measure increase again for both the mean and 90th centile metrics. The mean response time increased by 20 seconds (to 8 minutes 51 seconds) month-on-month, and is over 2 minutes slower than the same time last year.

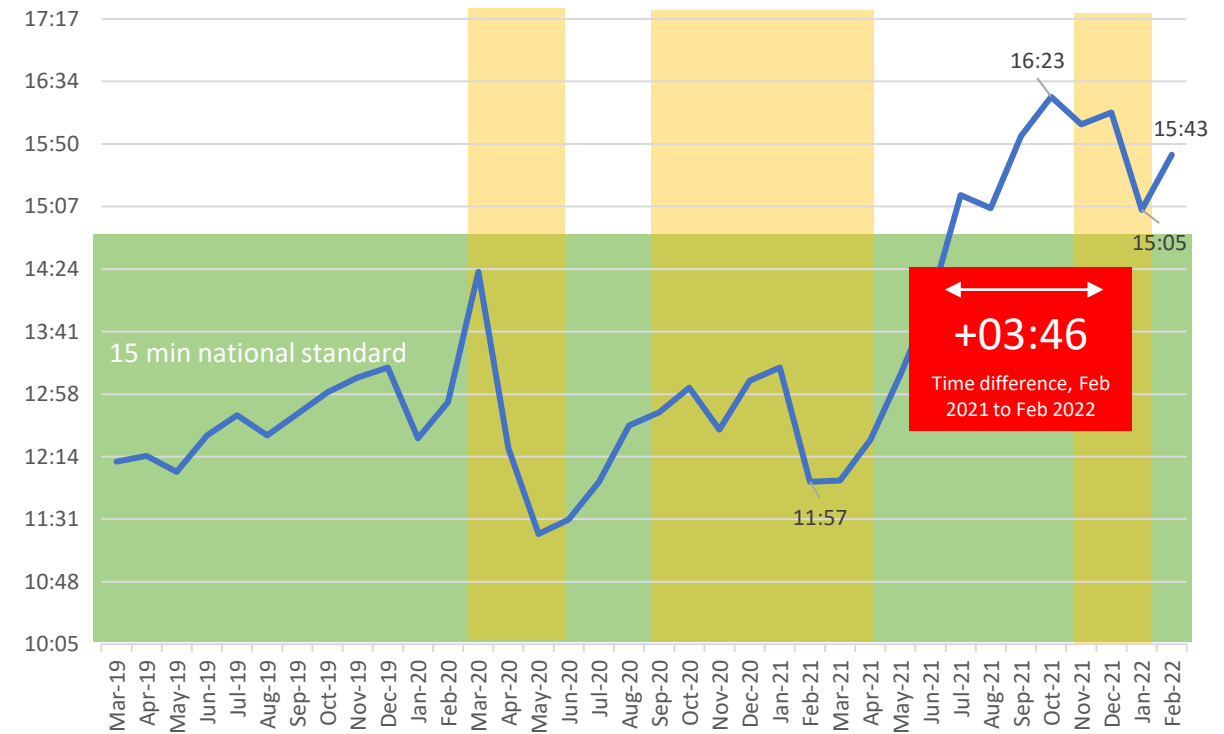
1. Mean

Mean C1 Response Time (mm:ss, A25)



2. 90th Centile

90th Centile C1 Response Time (mm:ss, A26)



Yellow areas denote COVID waves in the UK: source ONS.

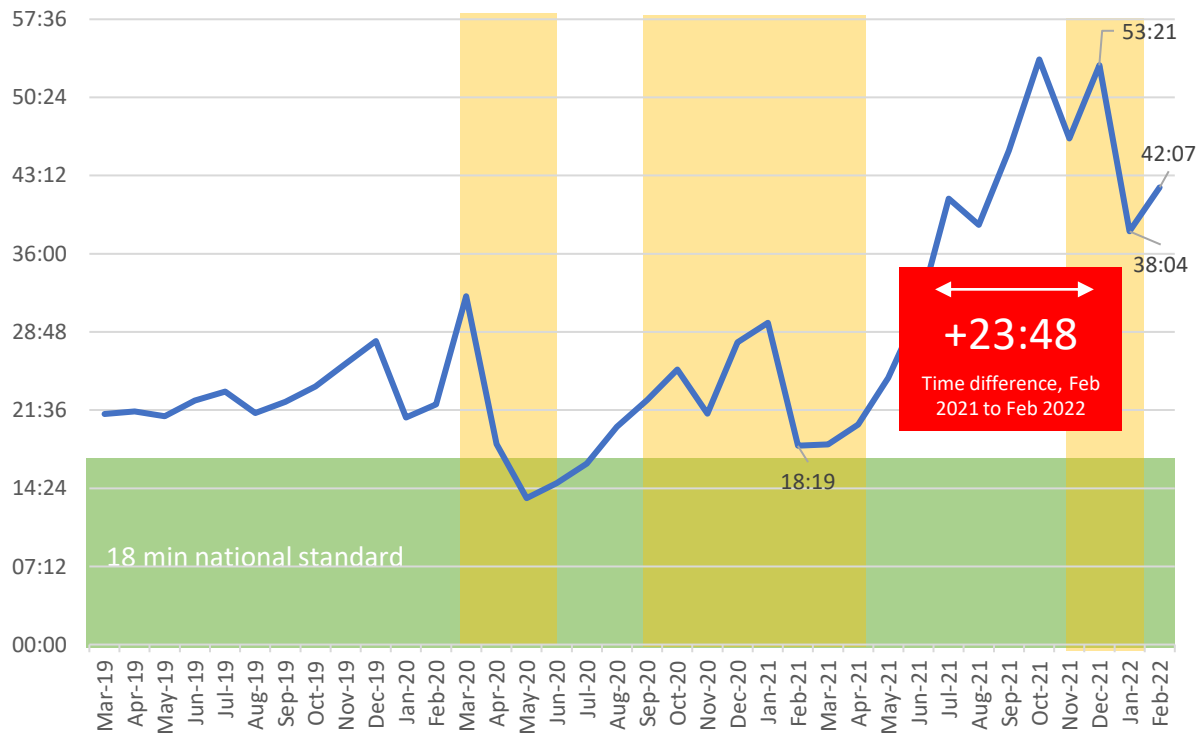


15. Demand: C2 Response Times (Measures A31 and A32)

C2 response times also increased in February: here the mean time increased by 4 seconds, but is 23 minutes slower than February 2021, and exceeds the national standard by around the same time. The 90th centile measure increased by 8 seconds month-on-month and is 55 minutes slower than February 2021.

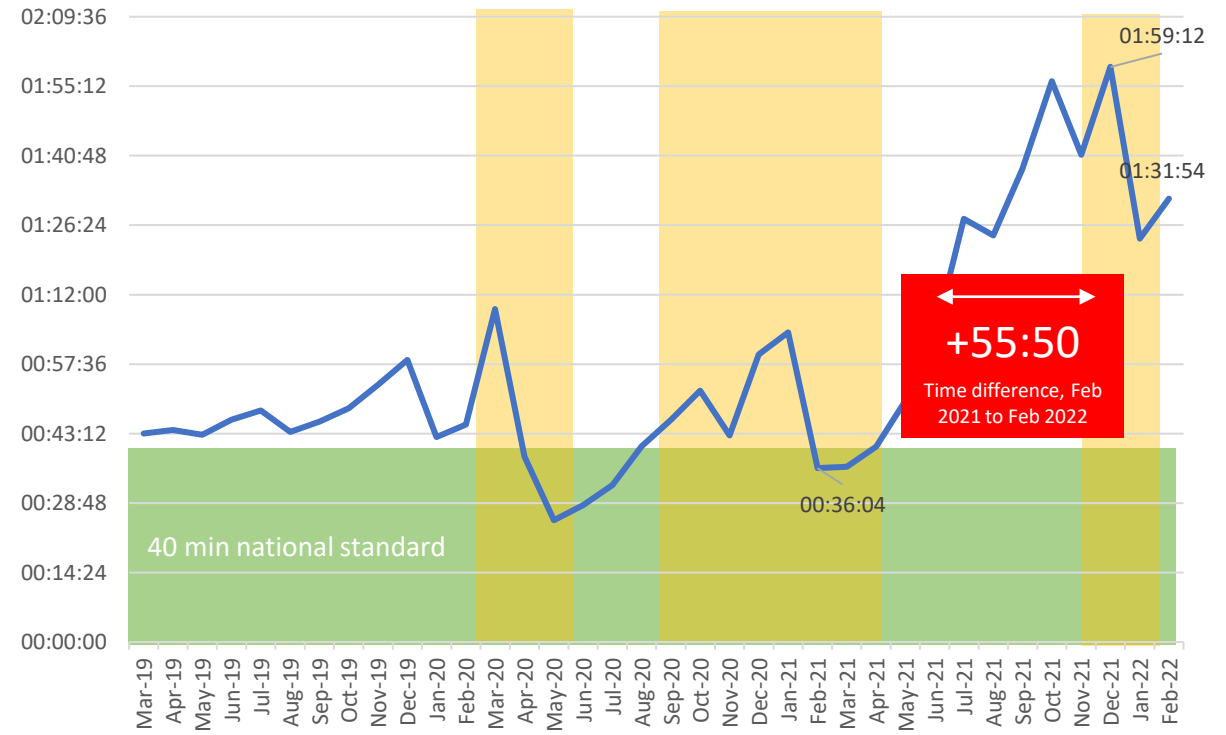
1. Mean

Mean C2 Response Time (mm:ss, A31)



2. 90th Centile

90th Centile C2 Response Time (hh:mm:ss, A32)



Yellow areas denote COVID waves in the UK: source ONS.

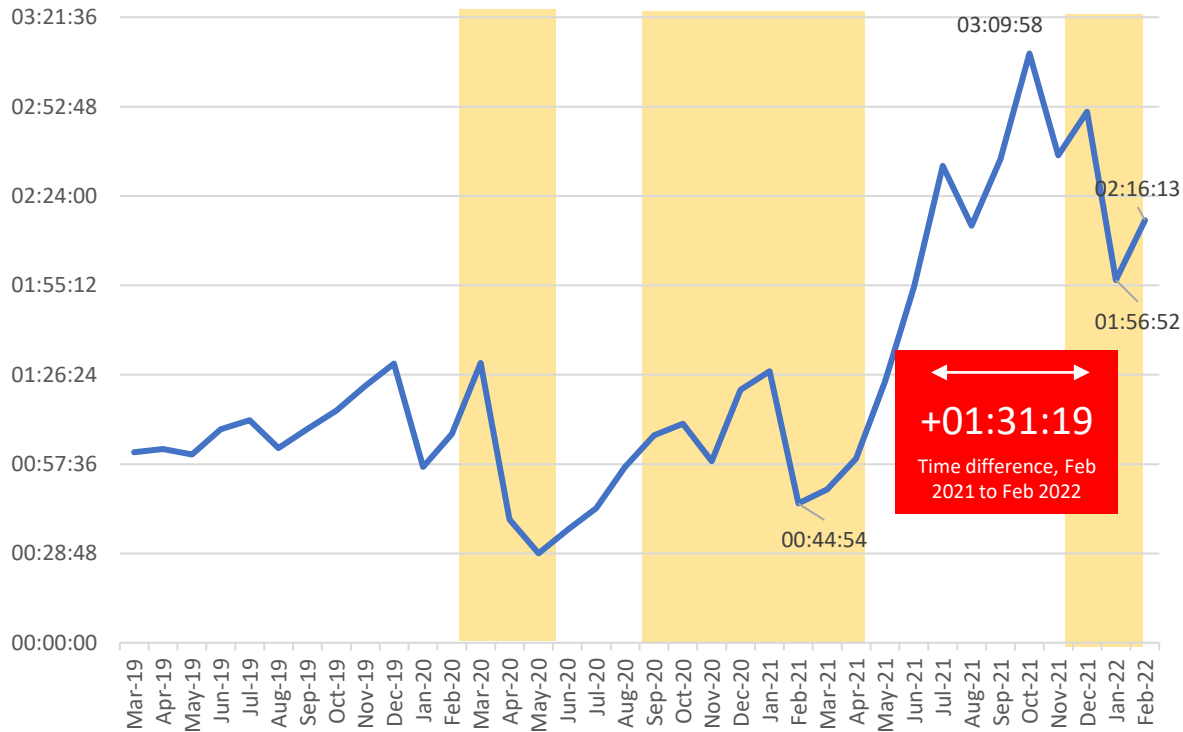


16. Demand: C3 Response Times (Measures A34 and A35)

The mean C3 response time increased by 10 minutes to over 2 hours in February, a difference of over 1-and-a-half hours compared with February 2021. The 90th centile measure increased by over 40 minutes to exceed 5-and-a half hours, a difference of over 3 hours and 45 minutes from last February.

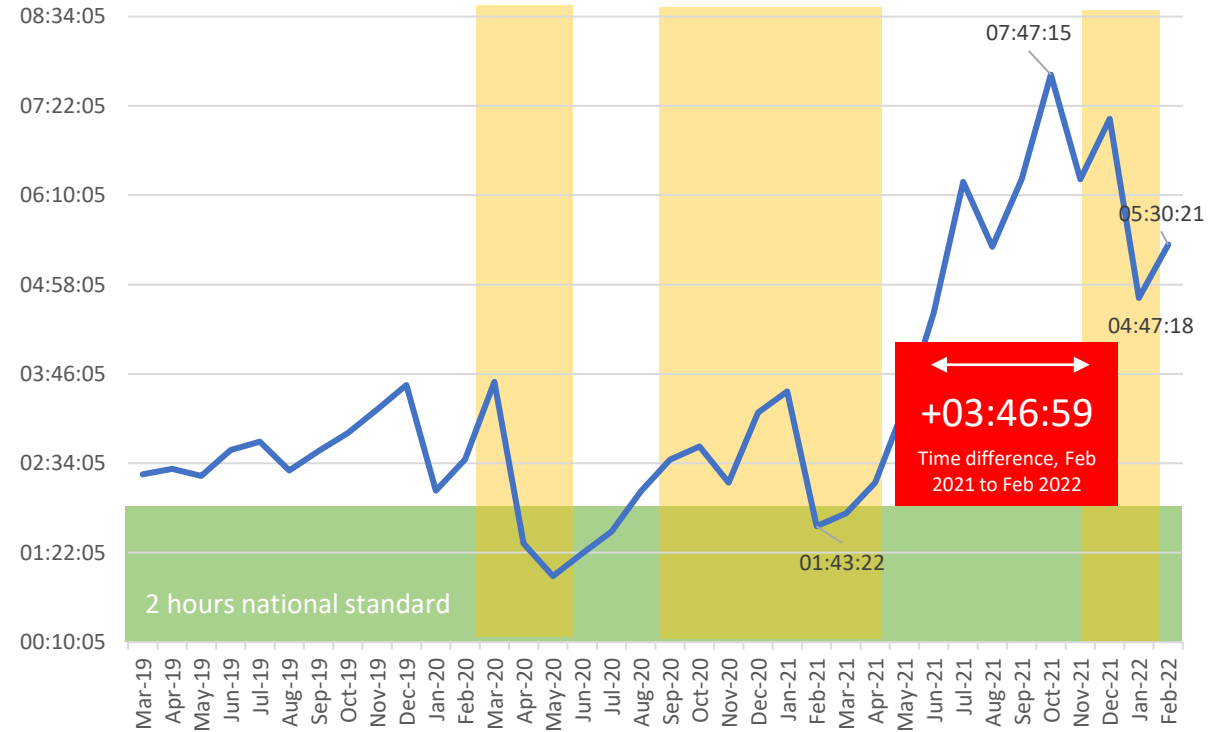
1. Mean

Mean C3 Response Time (hh:mm:ss, A34)



2. 90th Centile

90th Centile C3 Response Time (hh:mm:ss, A35)



Yellow areas denote COVID waves in the UK: source ONS.

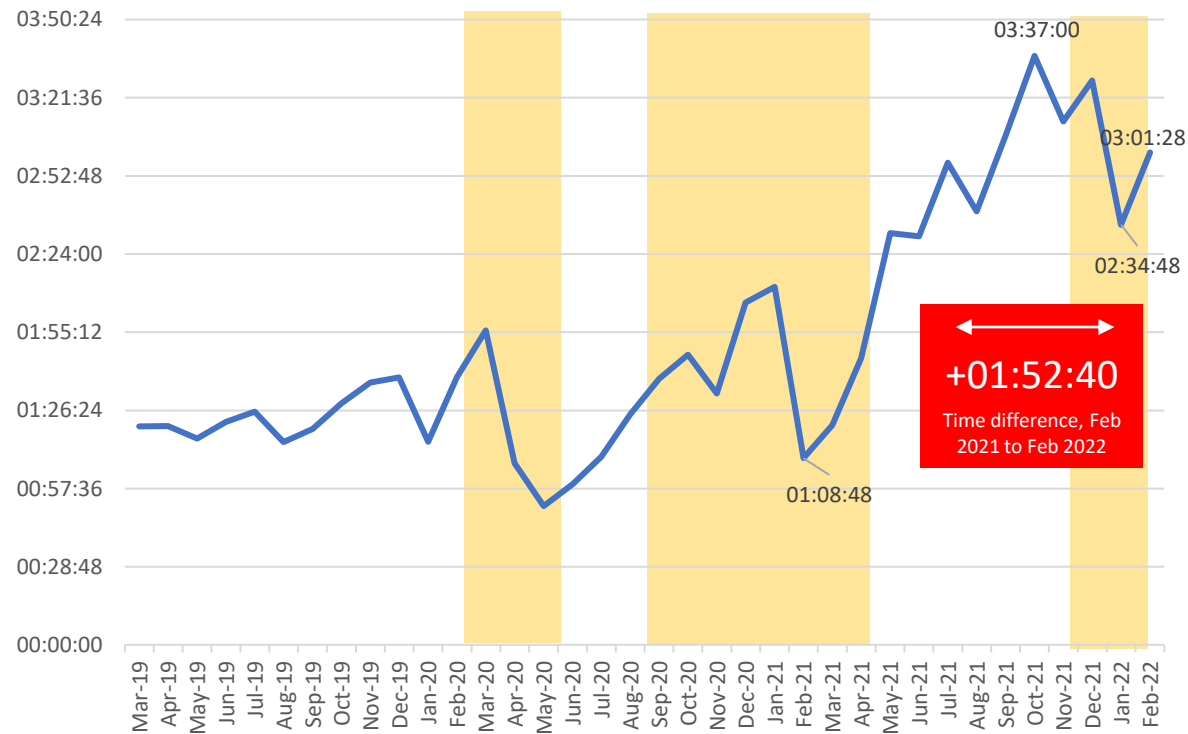


17. Demand: C4 Response Times (Measures A37 and A38)

Mean and 90th centile response times also increased for C4 incidents: both now record times well over twice that for the same time last year.

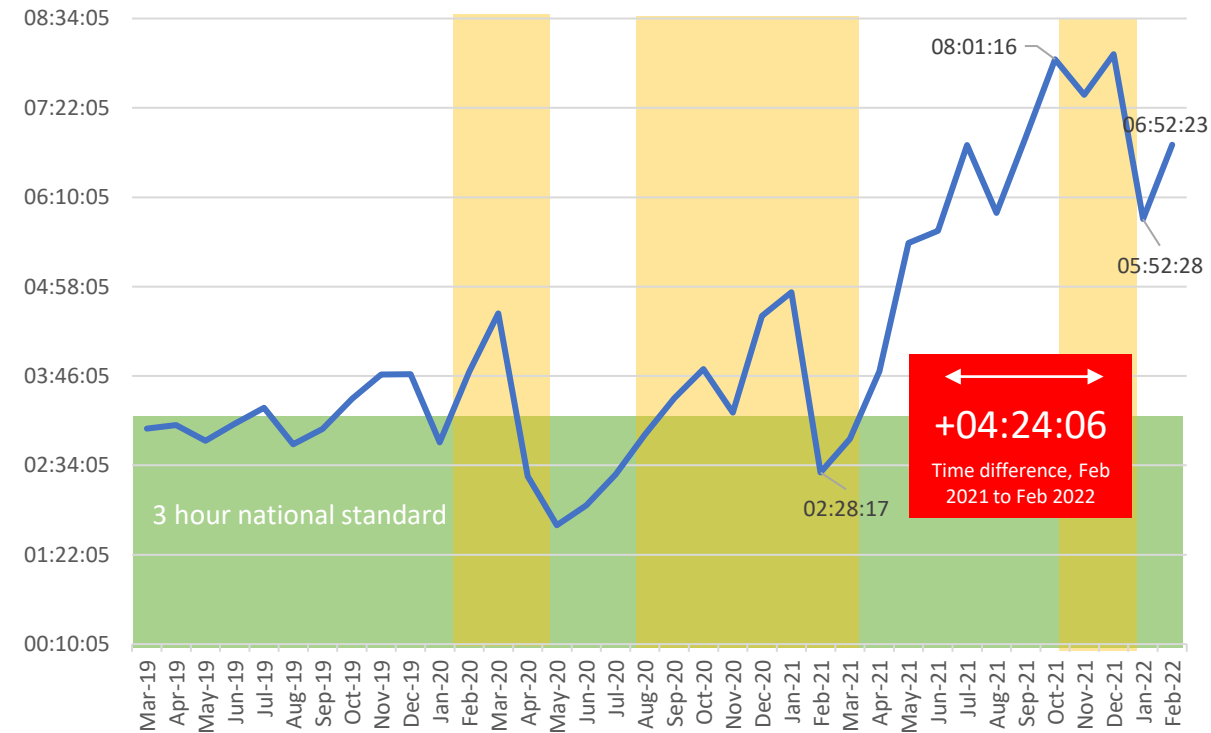
1. Mean

Mean C4 Response Time (hh:mm:ss, A37)



2. 90th Centile

90th Centile C4 Response Time (hh:mm:ss, A38)



Yellow areas denote COVID waves in the UK: source ONS.

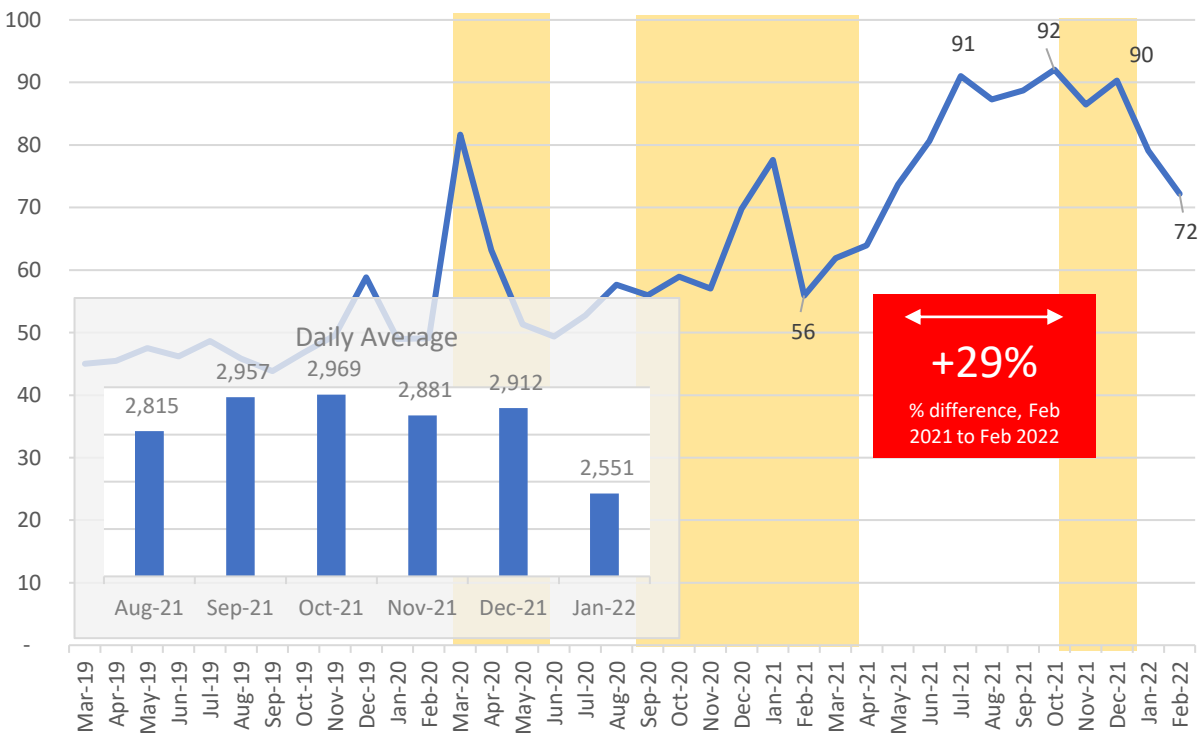


18. Hear and Treat (measure A17)

Volume of hear-and-treat incidents dropped in February, with 7k fewer across the month when compared with January 2022. Comparing the annualised data, there were 236k more hear-and-treat incidents in the 12 months to February 2022, a difference of 32%.

1. Monthly

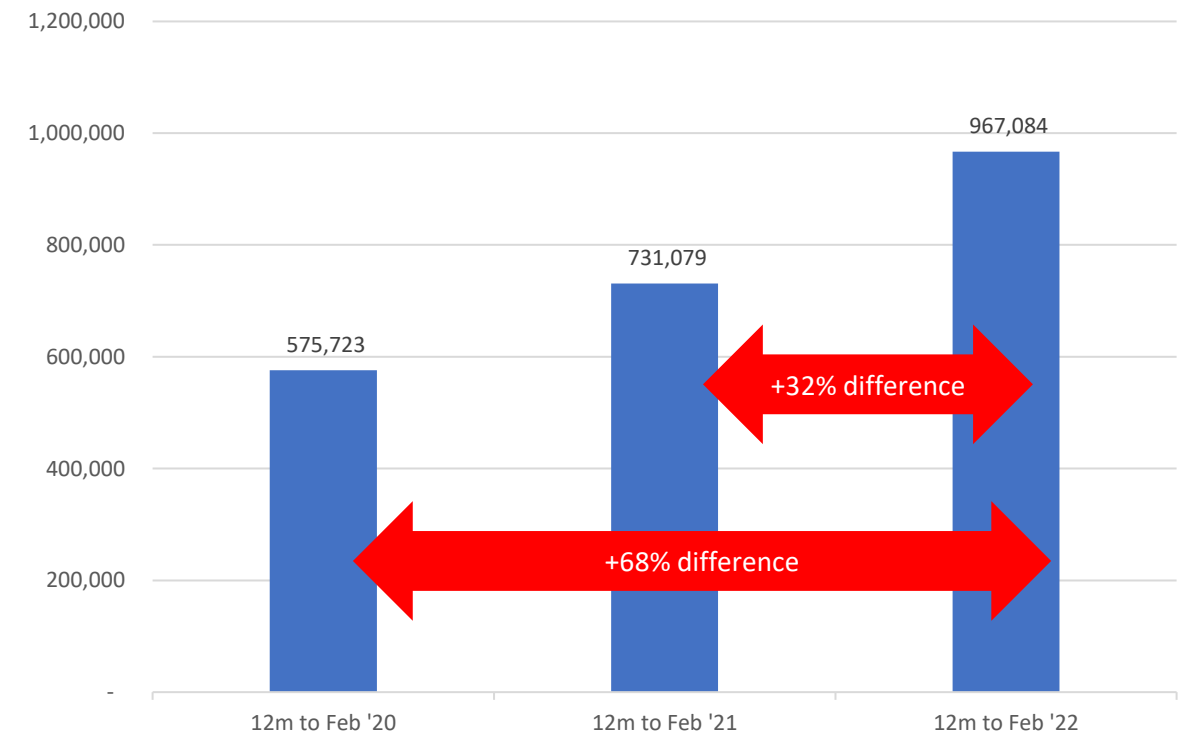
Volume of Hear and Treat ('000, A17)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A17)

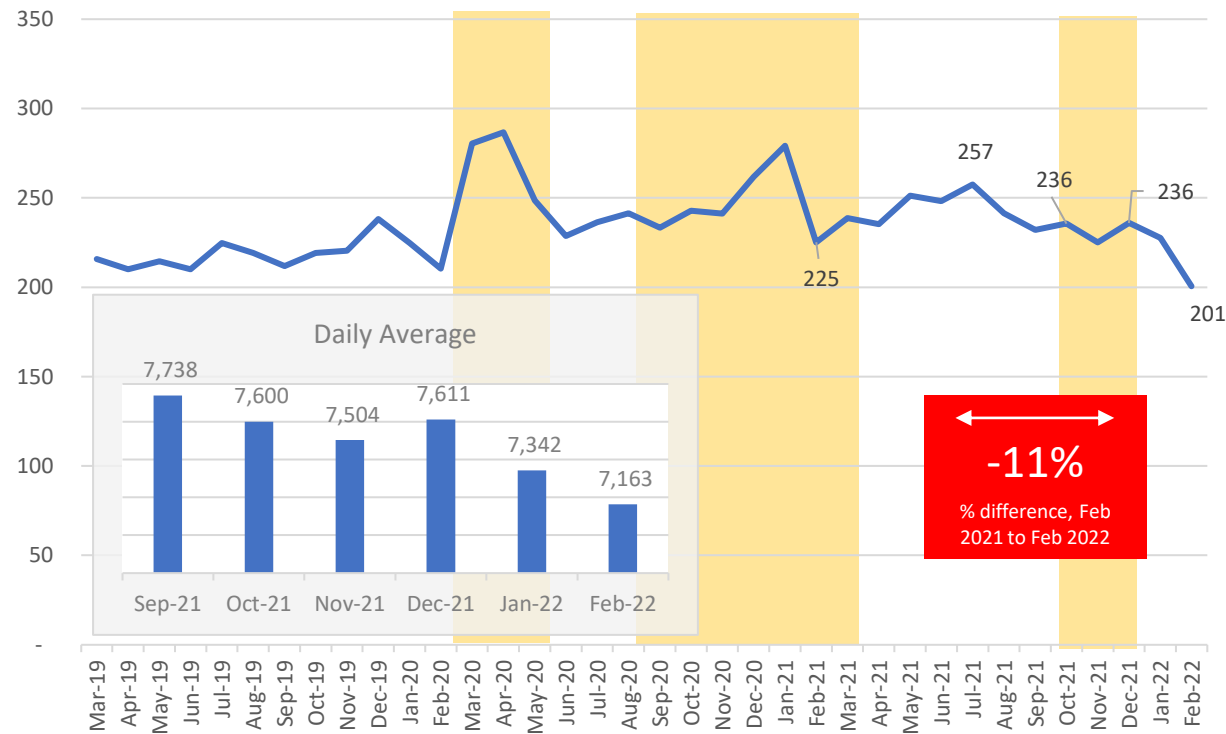


19. See and Treat (measure A55)

See-and-treat outcomes also dropped in February with the monthly volume representing a difference of -11% compared with February 2021.

1. Monthly

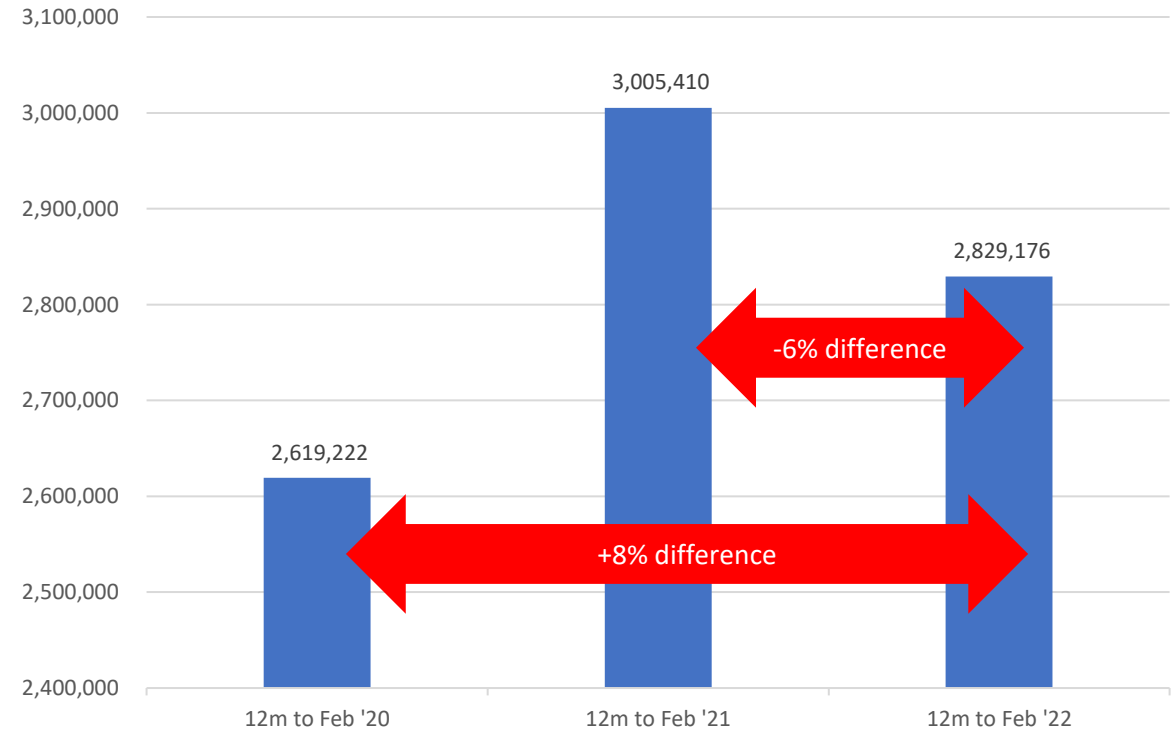
Volume of See and Treat Responses ('000, A55)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A55)

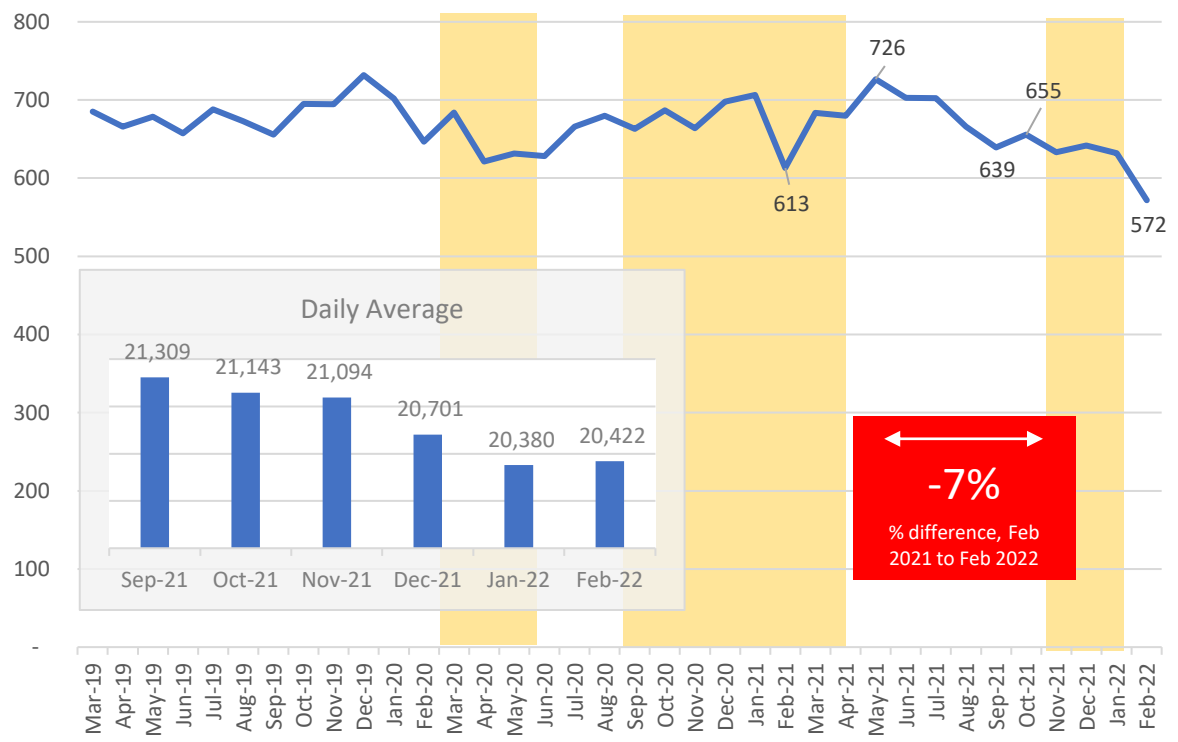


20. Face to Face (measure A56)

While the monthly volume of face-to-face outcomes dropped, the daily average remained steady in February. There was a difference of -7% in monthly volume when comparing February 2022 with February 2021.

1. Monthly

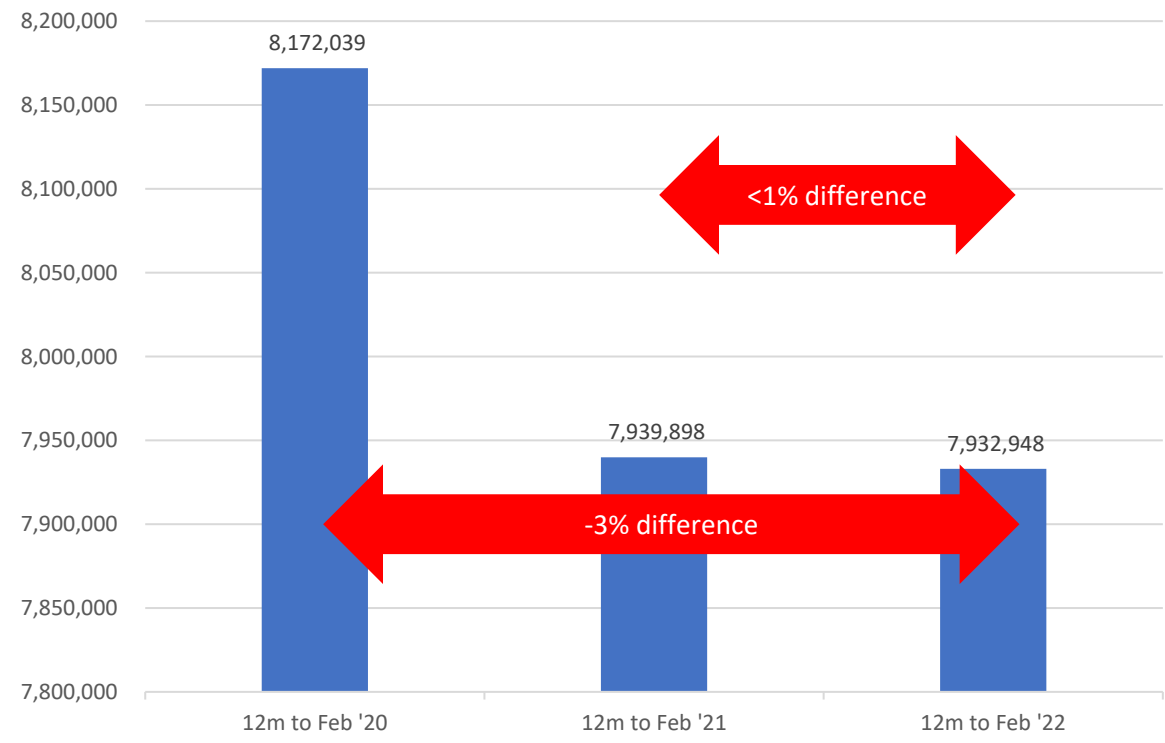
Volume of F2F Responses ('000, A56)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A56)

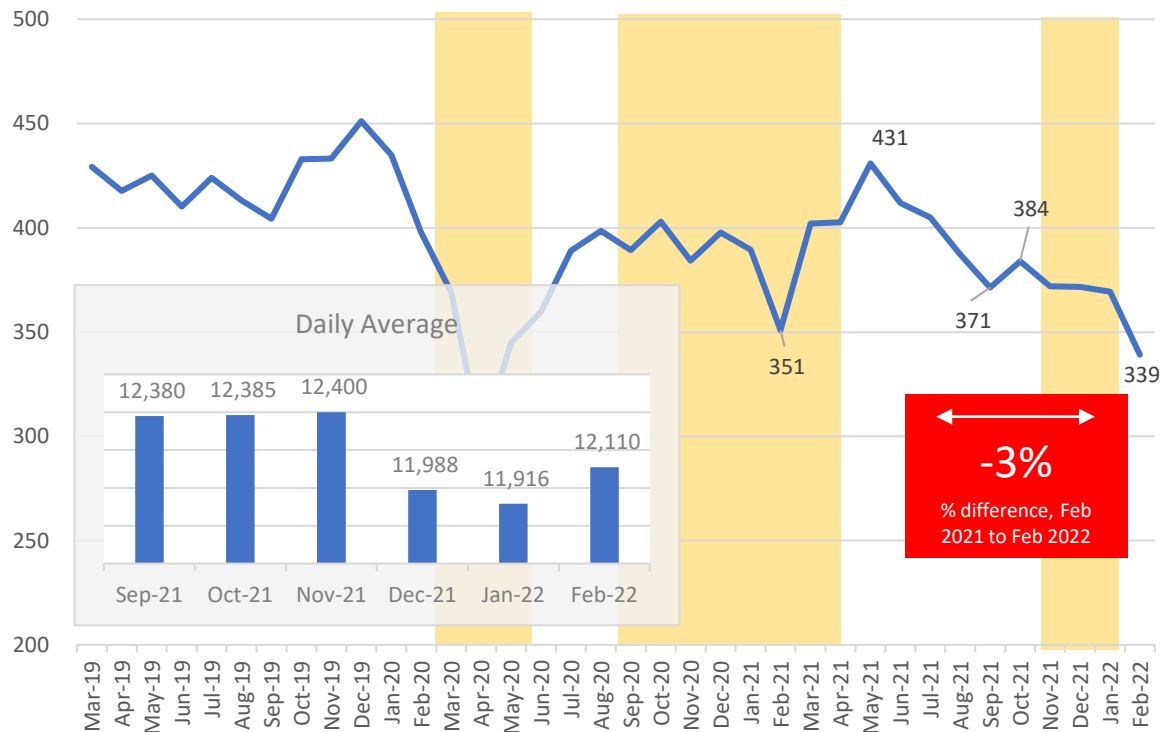


21. Transport to Emergency Departments (measure A53)

At a monthly level, there were 30k fewer transport-to-ED outcomes in February, with a difference of -3% in volume compared with the same time last year. However, the daily average saw an uptick of 194 incidents to exceed 12k.

1. Monthly

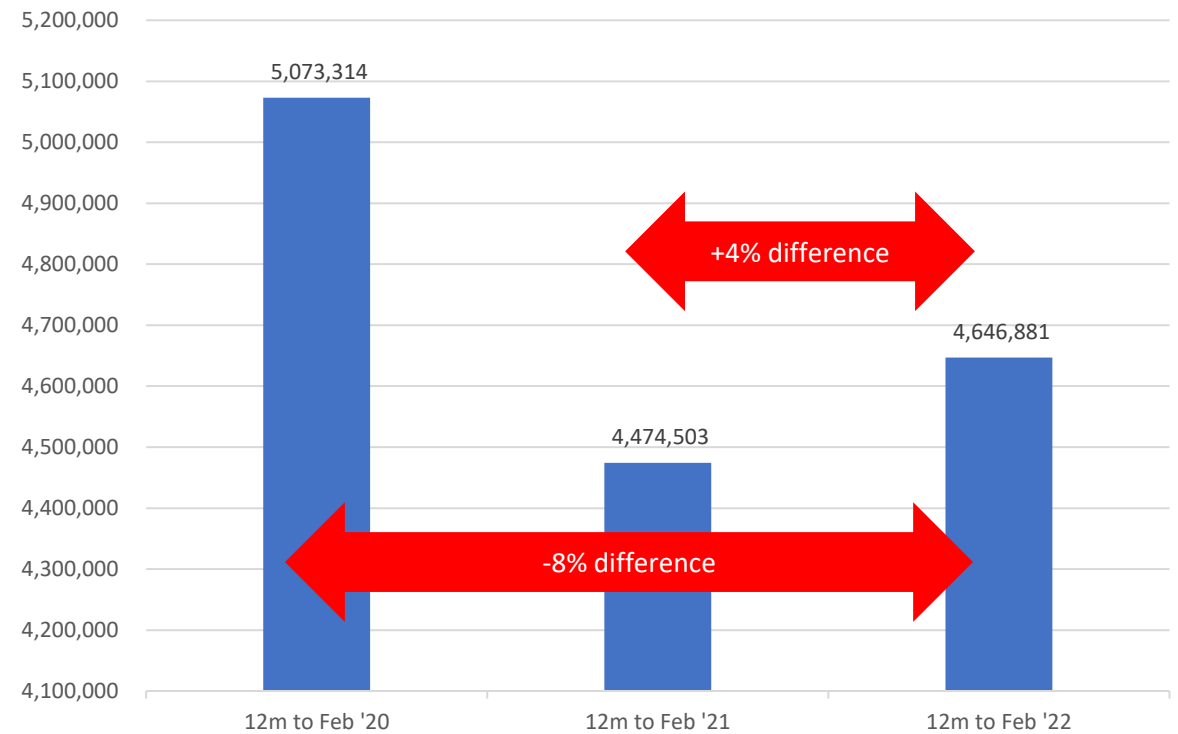
Incidents with Transport to ED ('000, A53)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A53)

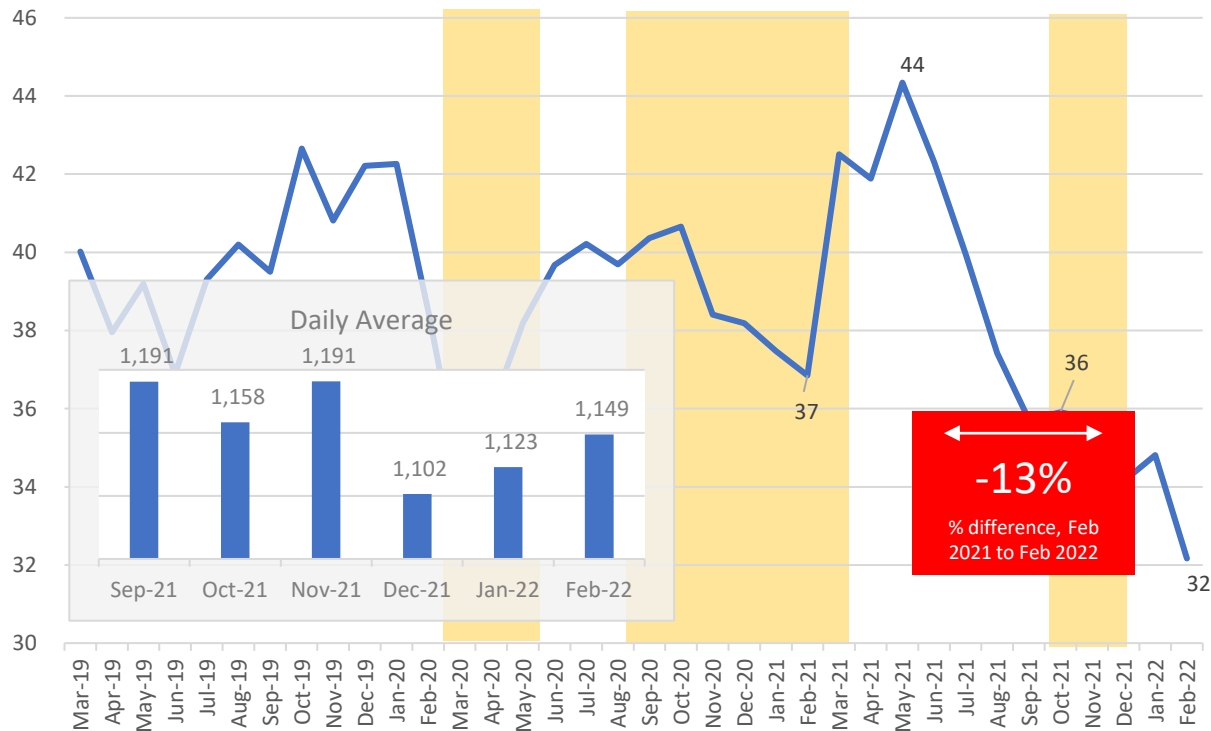


22. Transported to Destination other than ED (measure A54)

Incidents where the patient was transported to a destination other than ED also decreased month-on-month while the daily average increased slightly. There was a difference of -13% in the volume of these outcomes compared with the same month last year.

1. Monthly

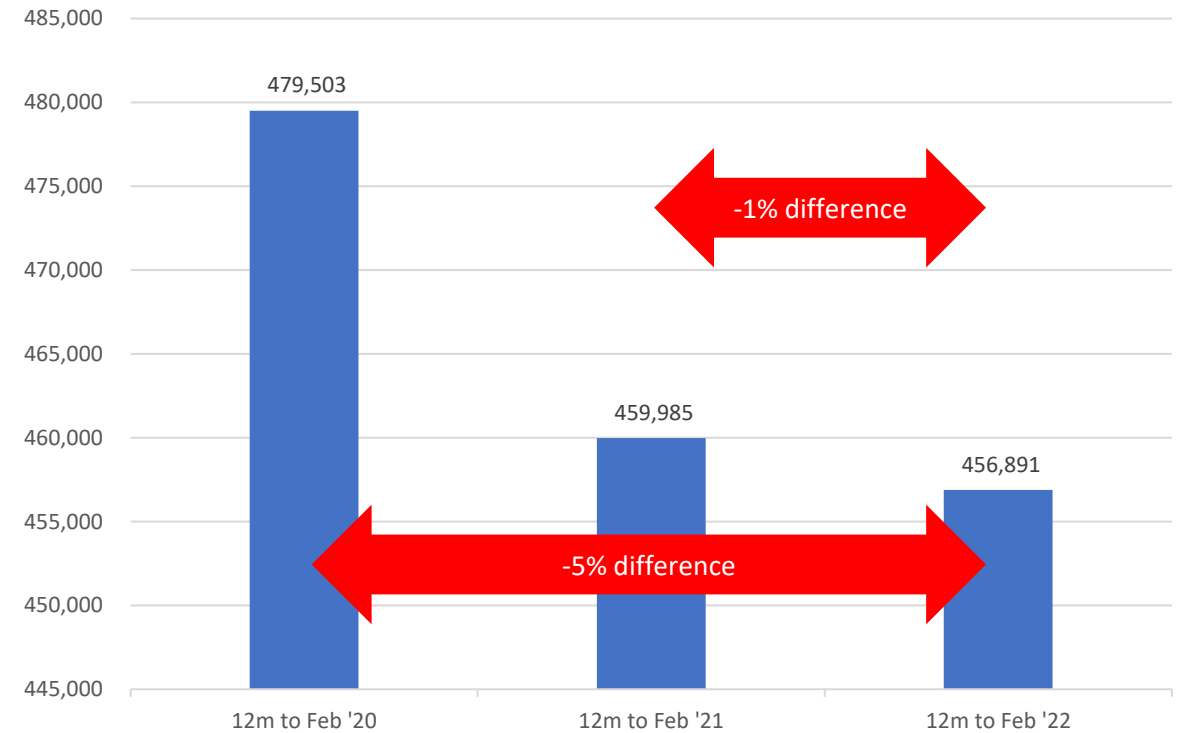
Transport to Destination not ED ('000, A54)



Yellow areas denote COVID waves in the UK: source ONS.

2. Summary: 12 months to February

Volume of contacts in the 12 months to Feb (A54)

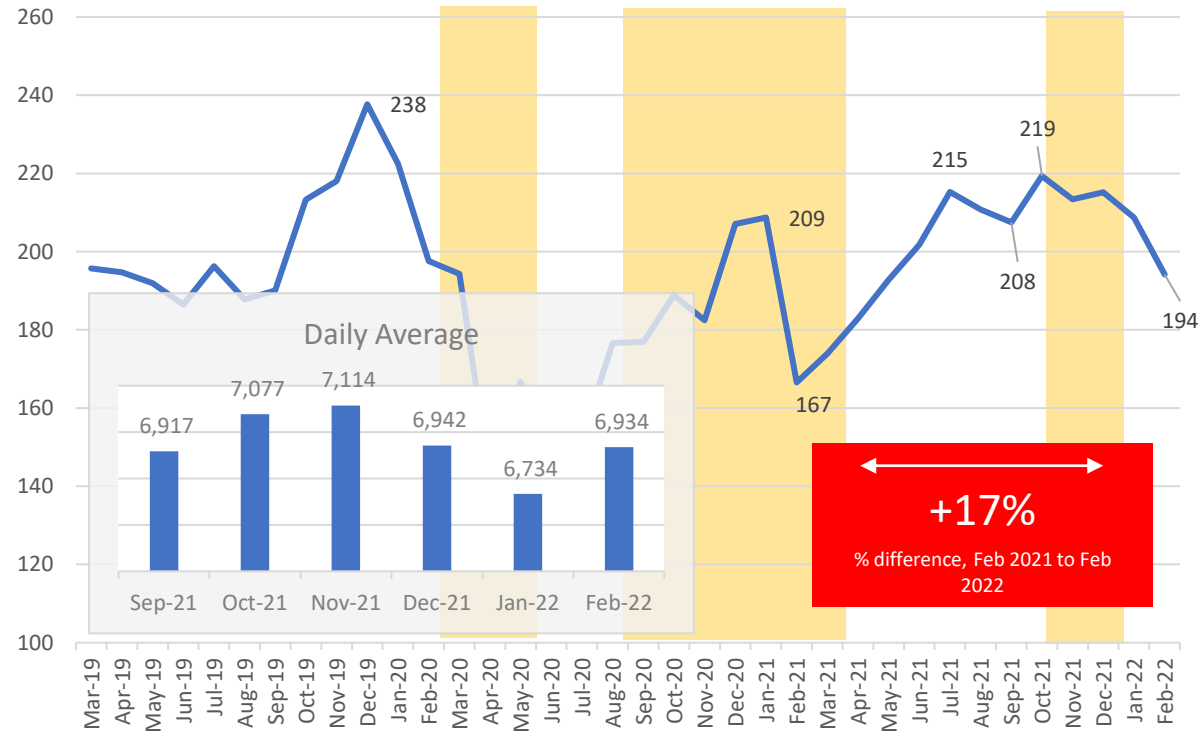


23. Handover Delays over 15 Minutes (source, NAIG)

In February 2022, handovers exceeding 15 minutes accounted for 60% of handovers across England: for several trusts this figure was greater than 70%. There were 194k handovers over 15 minutes in February: this represents a drop in monthly volume but – factoring in the shorter month - the daily average increased (by 201 to 6,934 handovers). The monthly drop also masks a steady trend for hours lost as a result of those handovers.

1. Delays over 15 Minutes

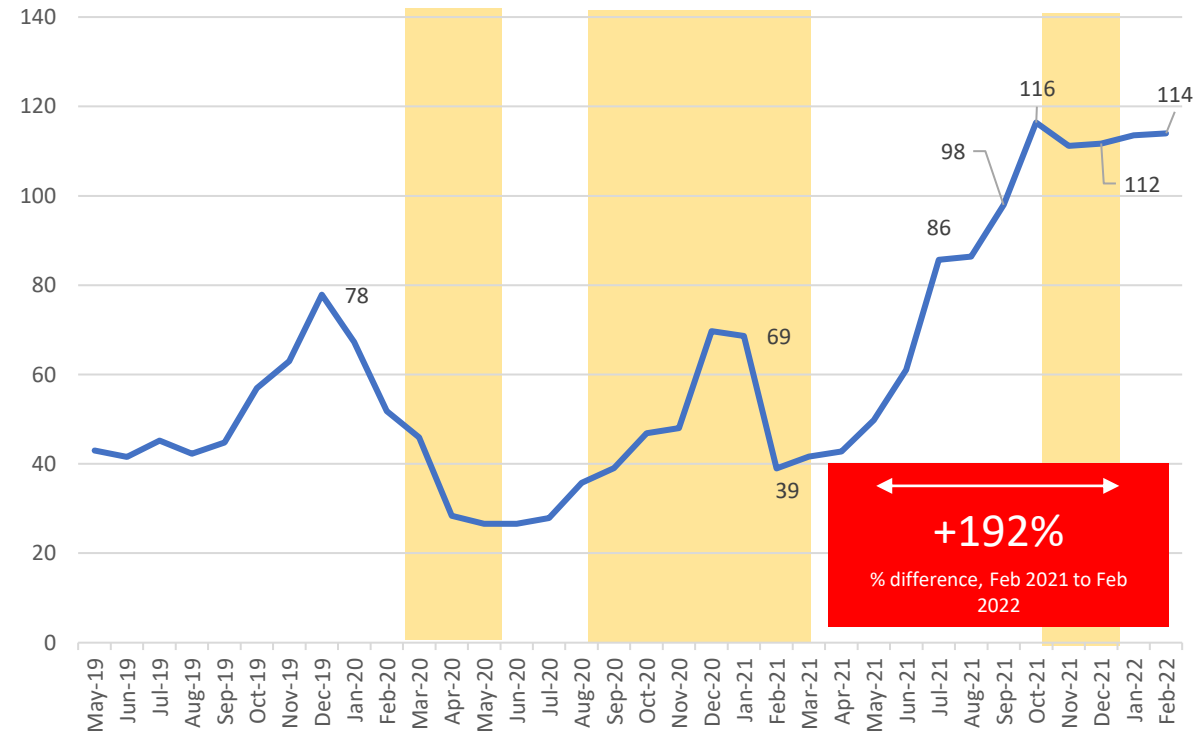
Volume of Handovers Over 15 Minutes ('000, source NAIG)



Yellow areas denote COVID waves in the UK: source ONS.

2. Hours lost for Handovers Over 15 Minutes

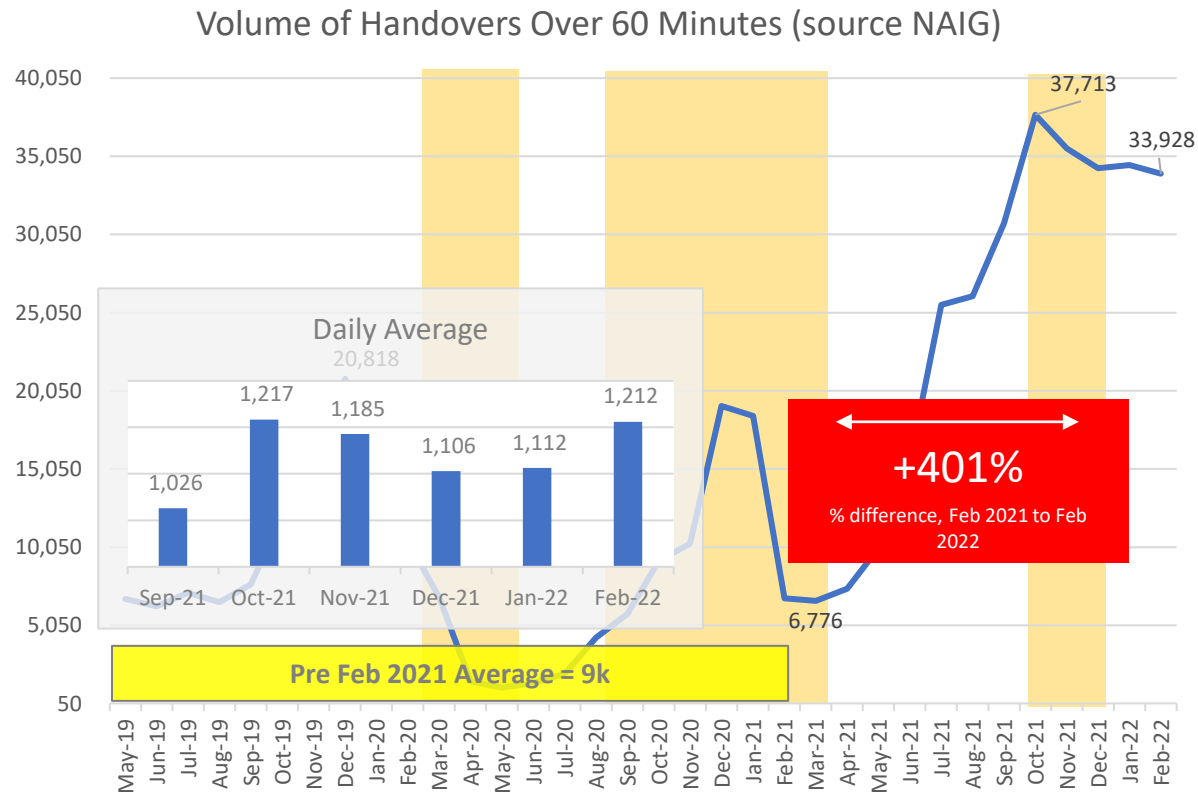
Hours Lost: Handovers over 15 Minutes ('000, source NAIG)



24. Handover Delays over 60 Minutes (source, NAIG)

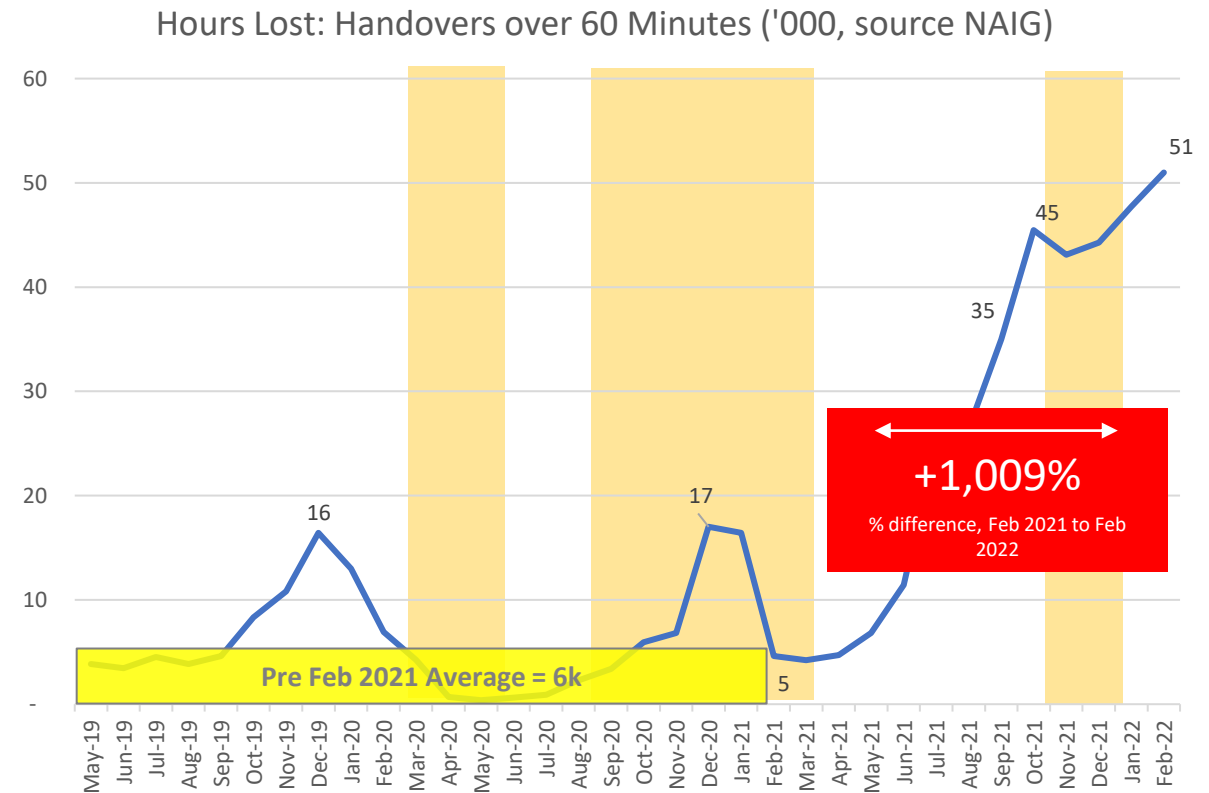
For handovers exceeding 60 minutes, there was a decrease in monthly volume but an increase in the daily average (by 99 to 1,212 handovers). Hours lost to these delays reached 51,000 – over 1,000% greater than the same time last year.

1. Delays over 60 Minutes



Yellow areas denote COVID waves in the UK: source ONS.

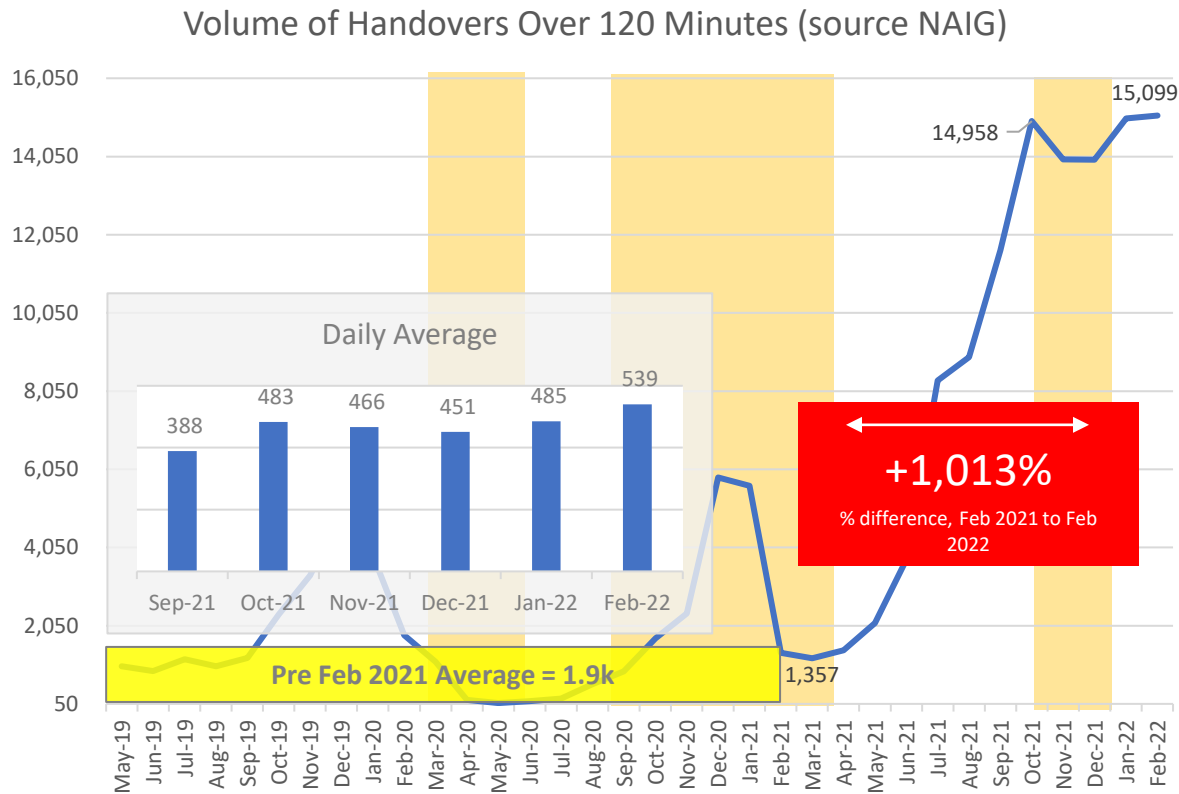
2. Hours lost for Handovers Over 60 Minutes



25. Handover Delays over 120 Minutes (source, NAIG)

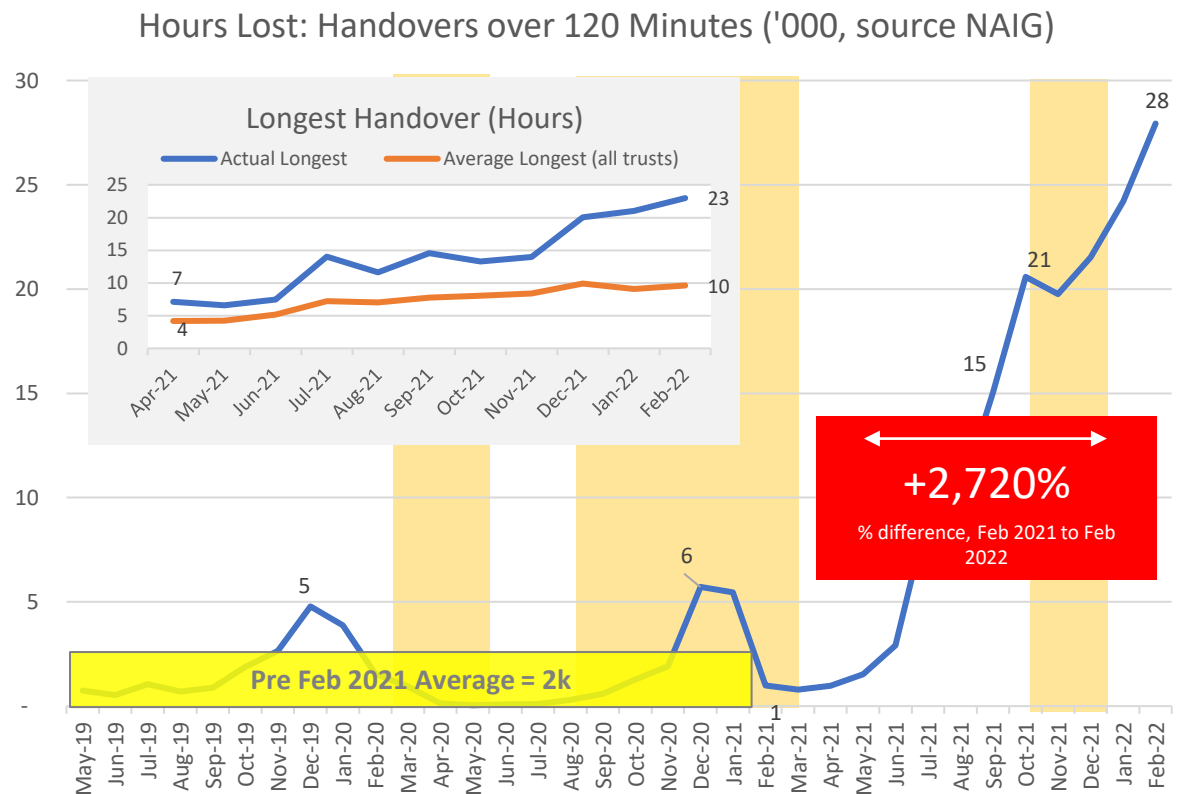
Handovers exceeding 120 minutes increased both monthly volume and daily average, with both reaching a series high. The monthly volume of these handover delays is 11-times greater and the hours lost 28-times greater than in February 2021. The very longest delays also continue to increase. The longest individual delay in February 2022 was 23 hours (from 7 in April 2021) while the average longest delay across all trusts was 10 hours.

1. Delays over 120 Minutes



Yellow areas denote COVID waves in the UK: source ONS.

2. Hours lost for Handovers Over 120 Minutes

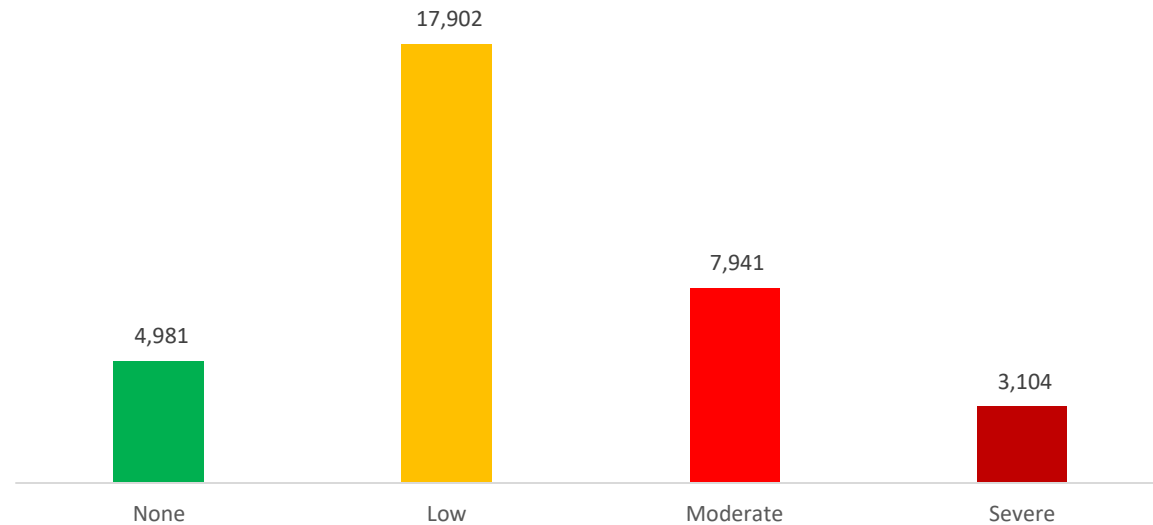


26. Delays over 60 Minutes and estimated harm (source, NAIG and [AACE](#))

Using AACE's 2021 clinical review of potential harm arising during handover delays over 60 minutes, the latest national data suggests 29k patients would have experienced some harm in February 2022, with over 3k of these experiencing severe harm.

1. Estimated number of patients experiencing potential harm: Feb 2022

Vol of >60 min handovers by estimated harm (NAIG and AACE)
Patients waiting more than 60 minutes for handover completion



Estimates based on clinical review of patients waiting >60 minutes in 2021

Yellow areas denote COVID waves in the UK: source ONS.

2. Volume of patients by potential harm: time series

Vol of >60 min handovers by estimated harm (NAIG & AACE)

