

National Ambulance Data – Final

Data period to end January 2022

Date of Report: February 16, 2022



2. Summary and Contents

- **Following several months of unprecedented high demand, contacts and incident volumes decreased in January 2022.** Some measures were at the lowest level since spring 2021, including volume of contacts, call-answer time, 2-minute call-answer delays, and C1 mean-response time.
- **Nonetheless demand remained high, and despite the positive movement highlighted above, many key measures were still well above the averages seen before February 2021.** C1 incidents continue to account for over 10% of incidents, while call-answer and response times remain well above historical averages and national standards.
- **Additionally, demand on the Urgent and Emergency Care system saw the volume of longest hospital handover delays increase.** Delays exceeding 15 minutes (the national standard) account for around 60% of handovers. Handovers taking longer than 60 minutes increased in January, taking the total to nearly 35k, compared with a monthly average of 9k prior to February 2021. Hours lost due to 60 minute handover reached a series high of 48k, compared with a monthly average of 6k to February 2021.
- **Potential harm incurred as a result of handovers taking over 60 minutes could be impacting thousands of patients a month.** Extrapolation of AACE's clinical assessment of the impact of handover delays suggest that in January 2022 as many as 29,000 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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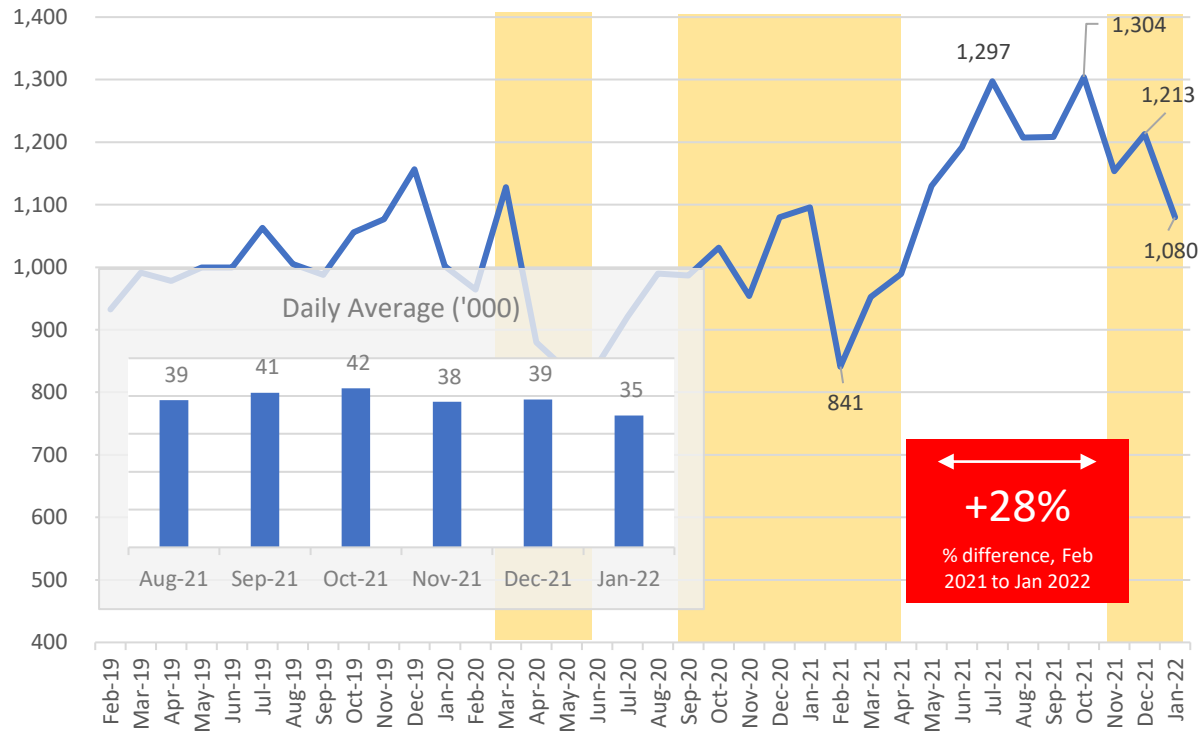
Source of all data is [AQI January 2022](#) unless otherwise stated. As well as the full data set, the linked page also includes a PDF of the data spec which includes a full description of each measure used.

3. Demand: Volume of Contacts (Measure A0)

There were 133k fewer A0 contacts in January 2022, taking the measure to its lowest since April 2021. Nonetheless, volumes remained above 1 million, 28% greater than in last February, while the annualised total (to January) was 16% greater than the previous year.

1. Monthly

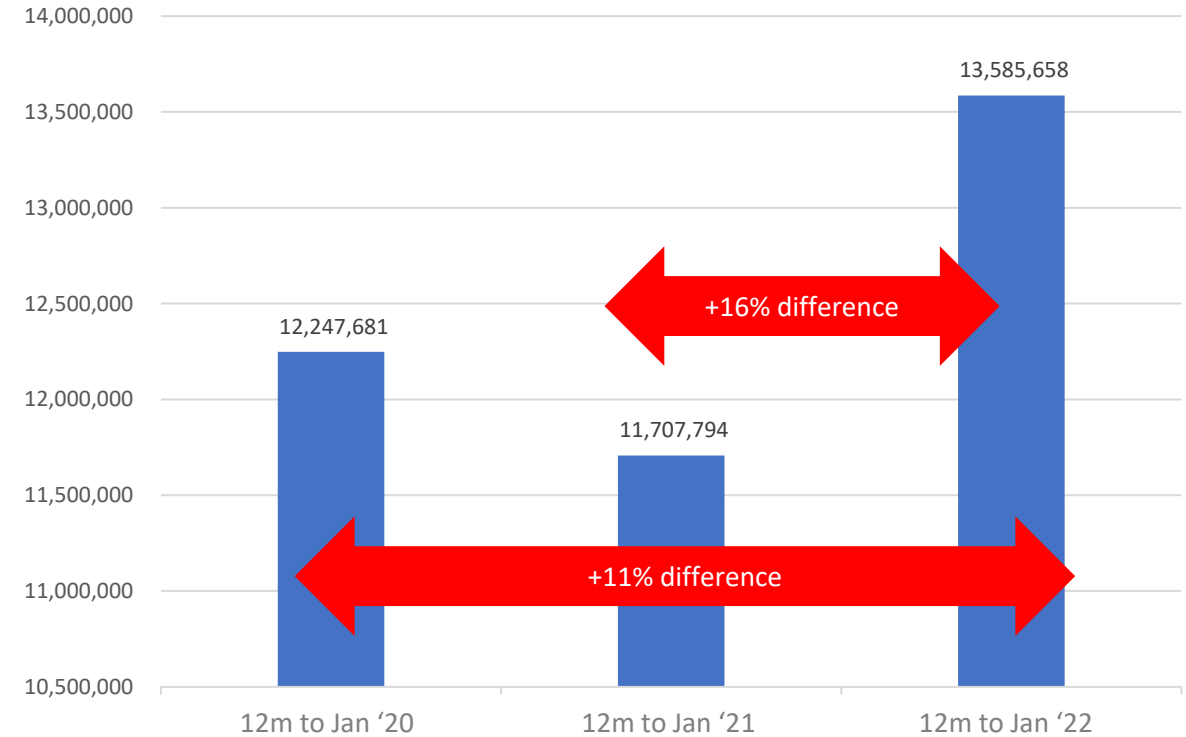
Volume of Contacts ('000, A0)



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

2. Summary: 12 months to January

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

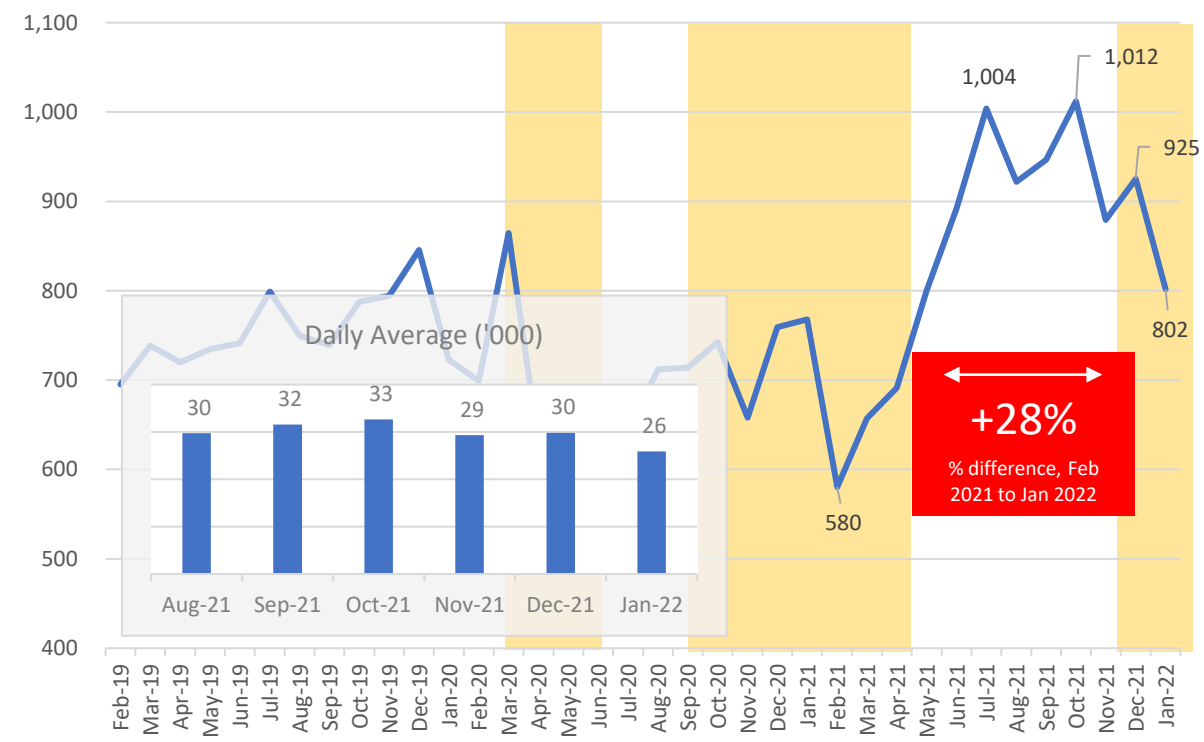


4. Demand: Volume of 999 Calls Answered (Measure A1)

In January 2022, the volume of 999 calls-answered dropped to its lowest since June 2021, with a decrease of 123k. The volume of calls answered in the 12 months to January was over 10 million compared with 8 million over the previous period.

1. Monthly

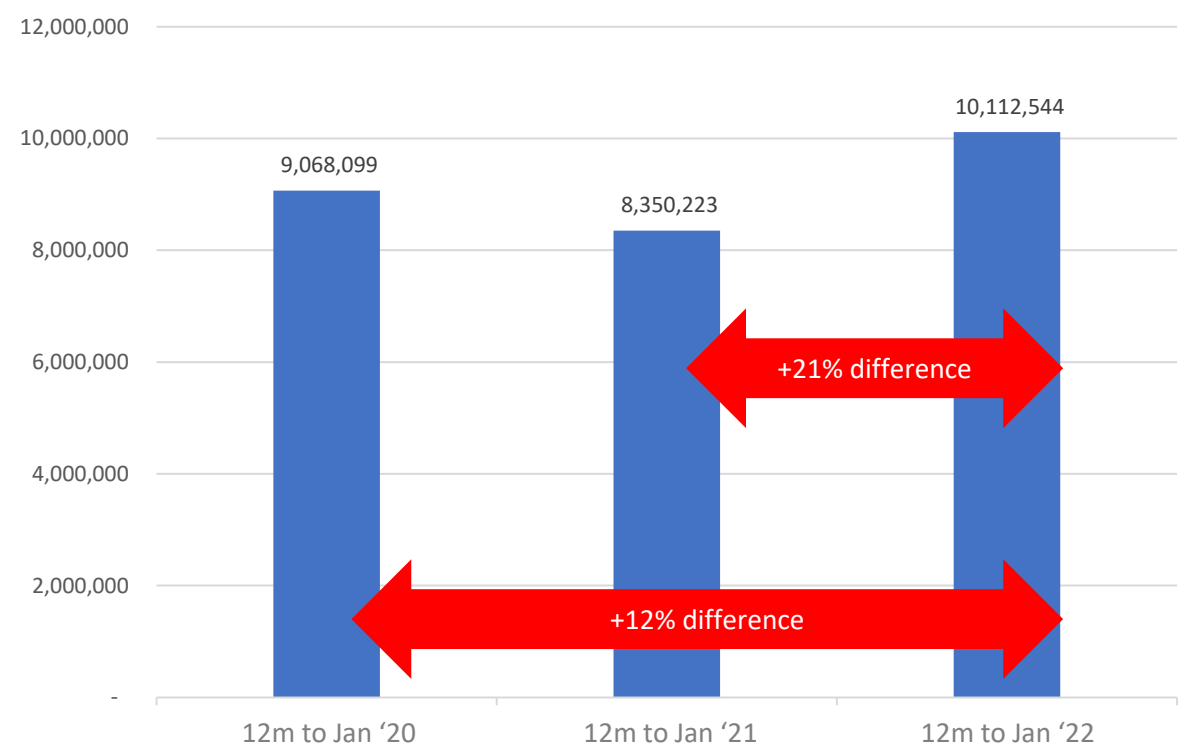
Volume of Calls Answered ('000, A1)



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

2. Summary: 12 months to January

Volume of calls answered in the 12 months to Jan (A1)

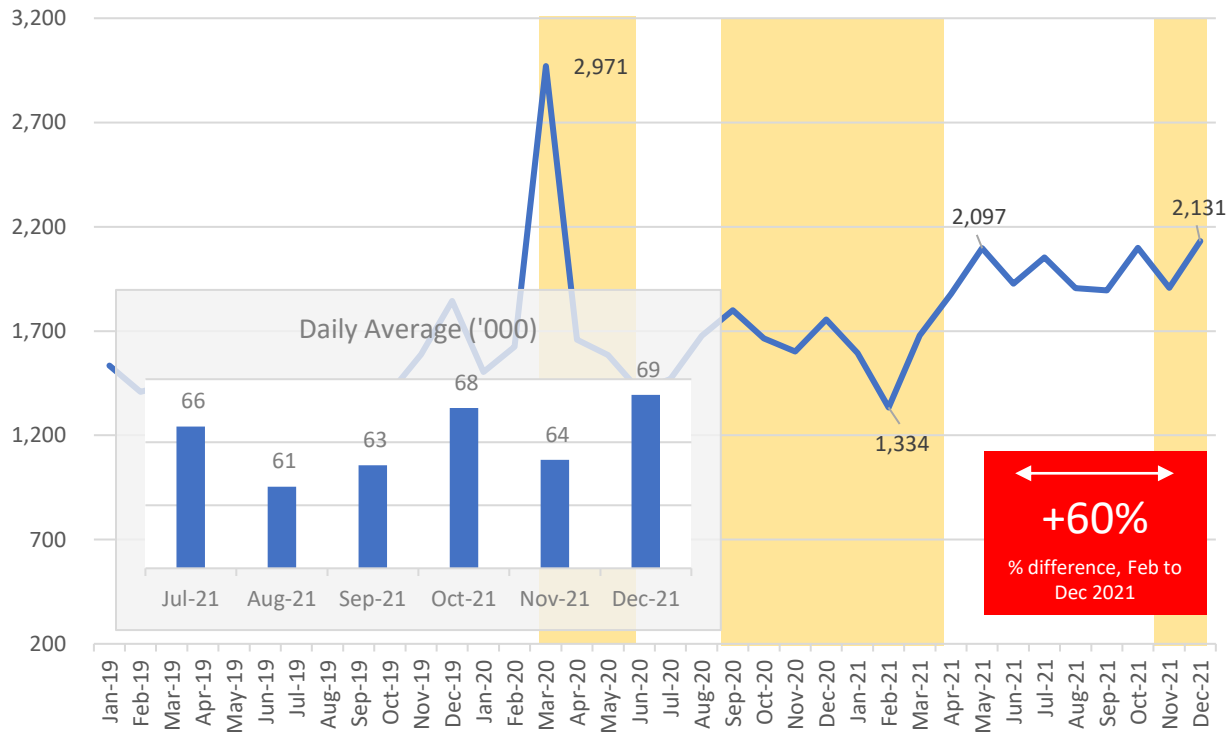


5. Demand: 111 Call Volumes (sources NHS 111 Min Data Set to March 2021 (5.3) then [IUCADC](#) to August 2021 (A0))

Running a month behind the AQI numbers, 111 data show an increase in December (reflected by the AQI statistics). The monthly total reached its highest since the start of the pandemic in March 2020, and the daily average reached 69k calls.

1. Monthly

Total 111 Calls to Sept 2021 ('000, measure 5.3 & A01)

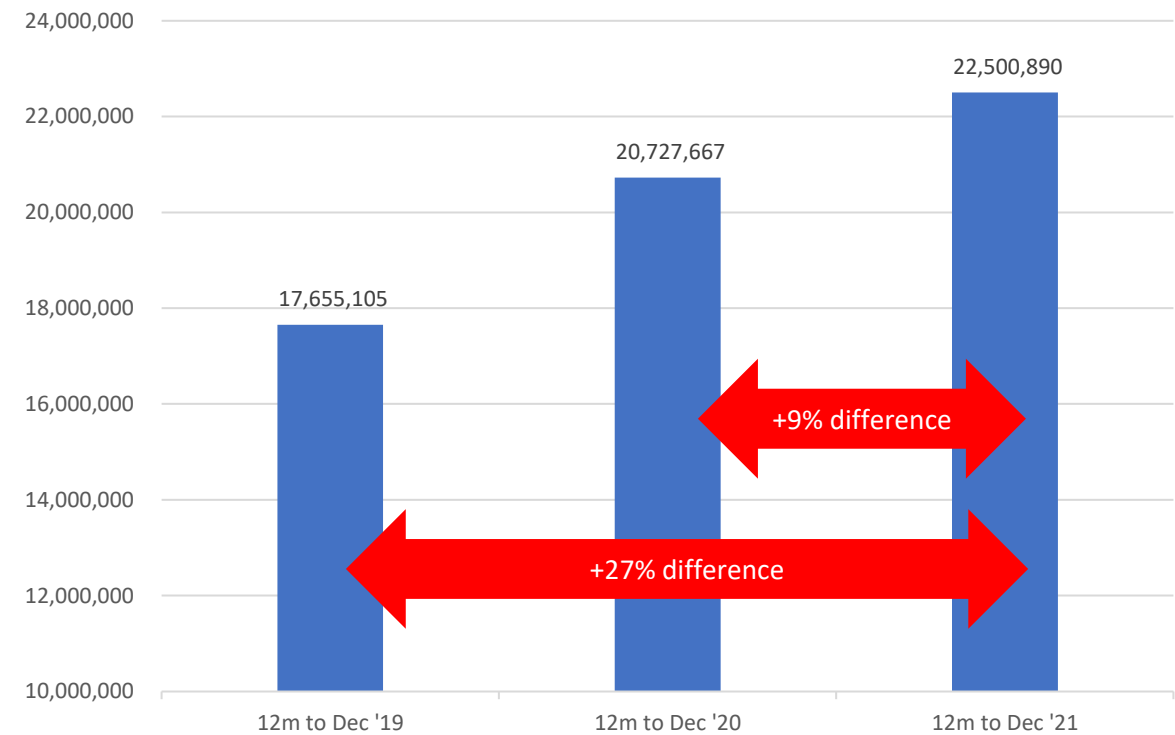


Yellow areas denote COVID waves in the UK: source ONS.

Note: IUCADC data runs a month behind AQI.

2. Summary: 12 months to December

Total 111 Calls: 12 months to Dec (5.3, A01)



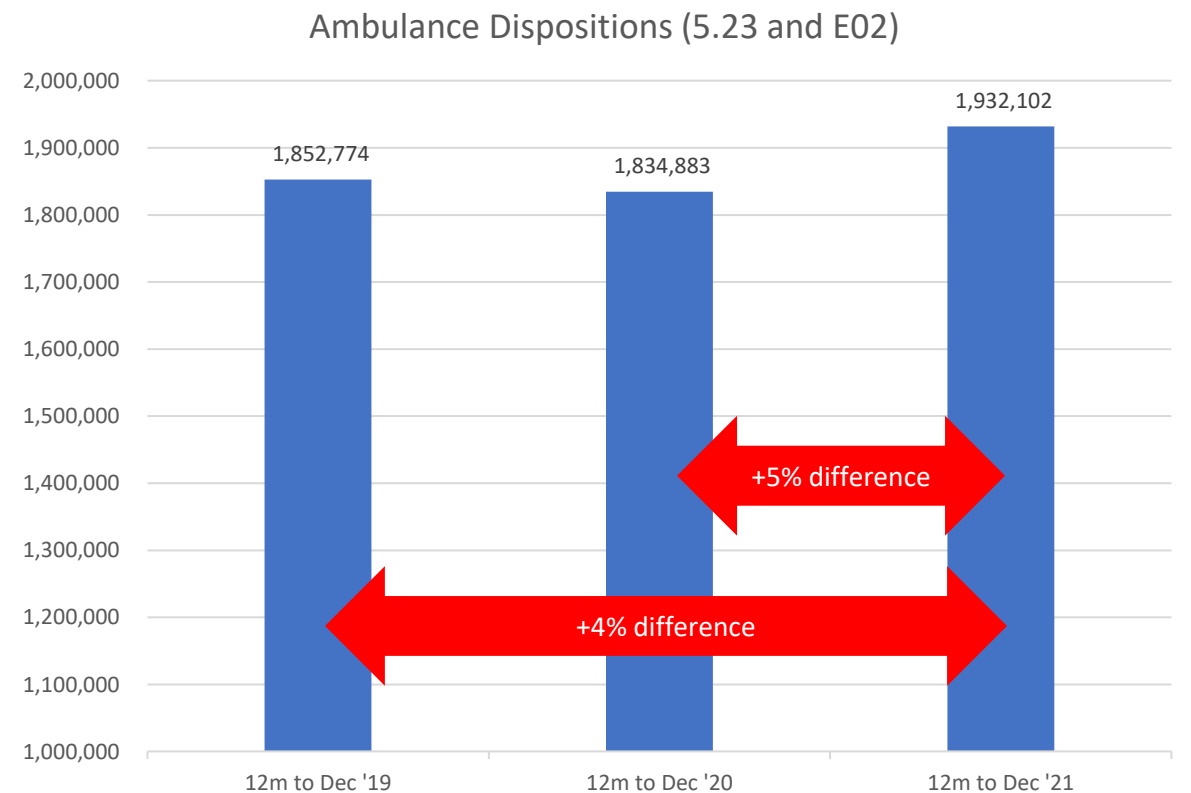
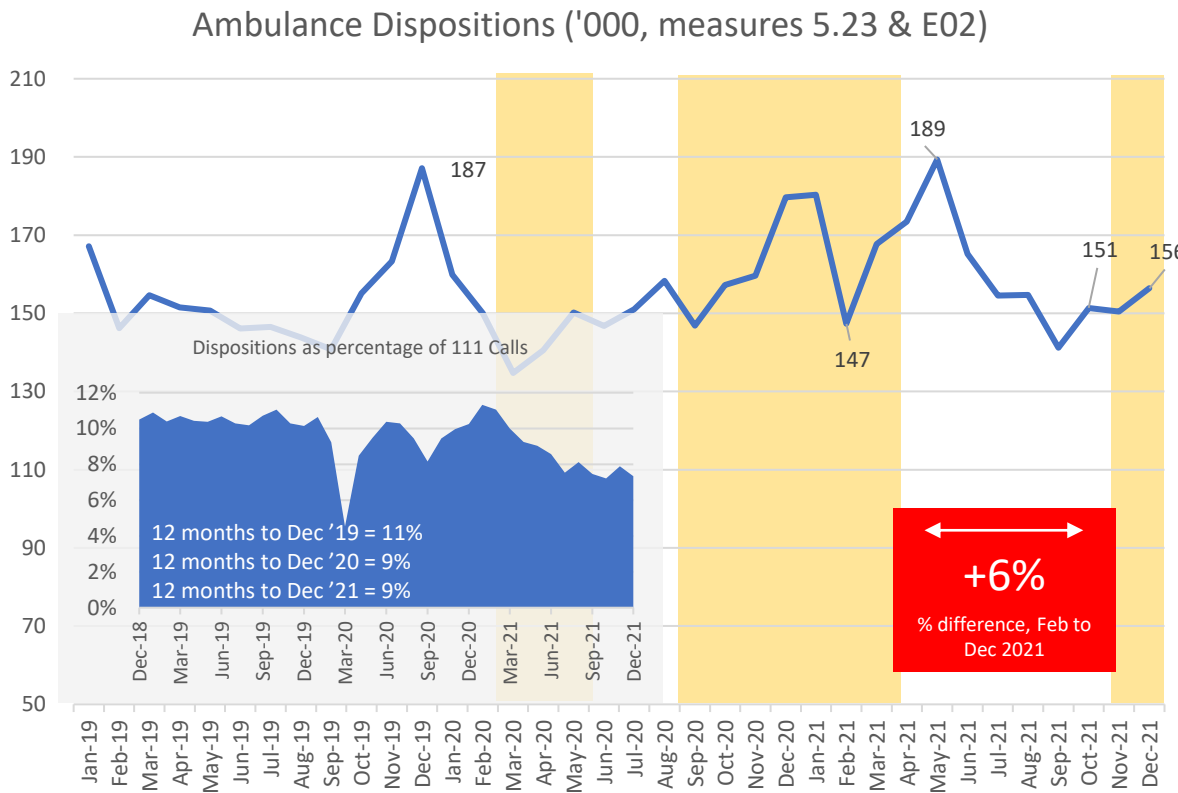
6. Ambulance Dispositions (sources NHS 111 Min Data Set to March 2021 (measure 5.23) then IUCADC to Aug 2021 (measure E02))



Volume of ambulance dispositions increased from 151k to 156k between November and December, and reflected 7% of 111 calls (vs. 11% in February). Overall volumes remain high: in the 12 months to December 2021 there were 1.9 million calls, compared with 1.8 million for each of the previous two years.

1. Monthly

2. Summary: 12 months to December



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

Note: IUCADC data runs a month behind AQL.

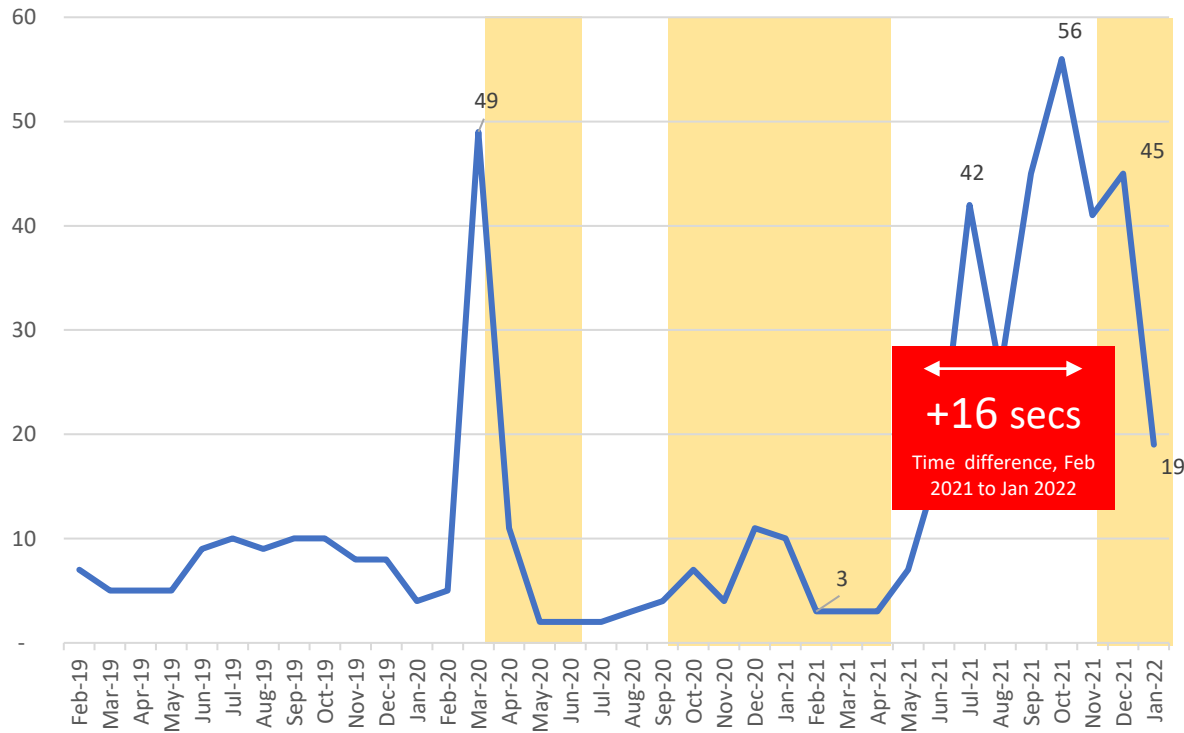


7. Demand: Call Answer Time (Measures A3 and A5)

Mean call answer-time was 26 seconds faster in January 2022 than in December, its fastest since June 2021 (although still exceeding February's answer-time by 16 seconds). The 95th Centile answer-time saw similar improvement: 94 seconds faster and, again, the fastest monthly time since June.

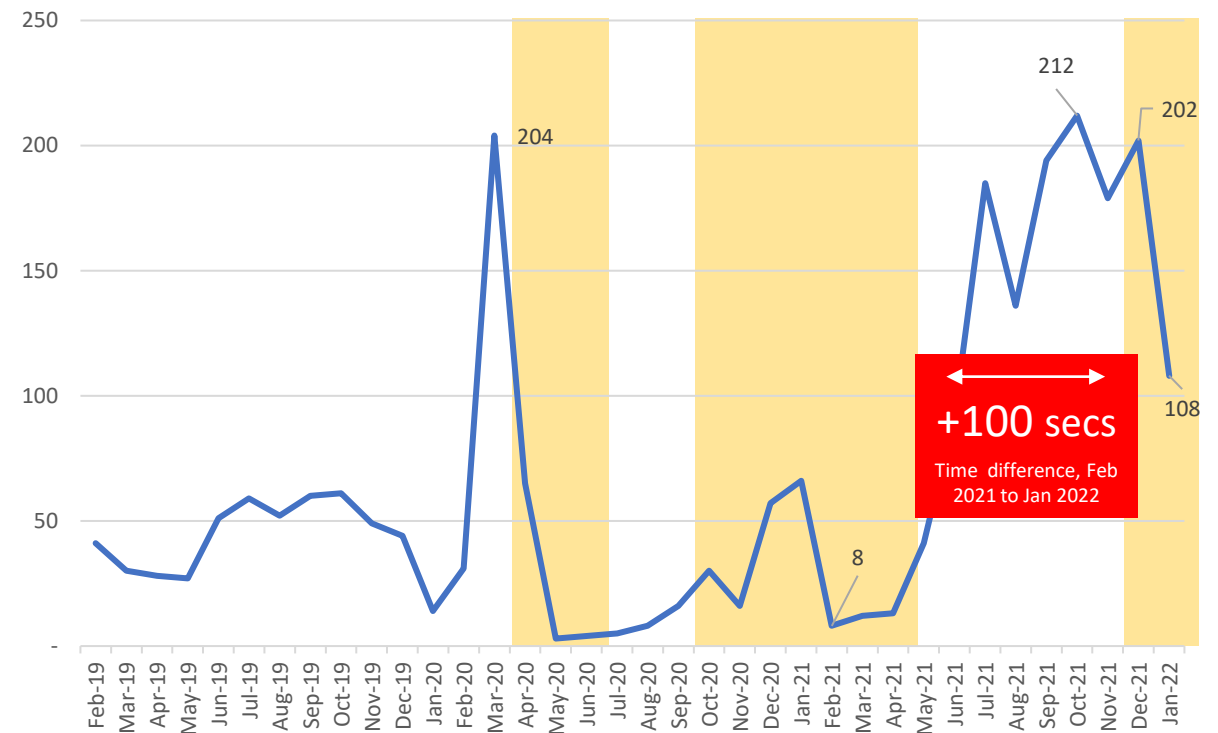
1. Mean

Mean Call Answer Time (A3)



2. 95th Centile

95th Centile Call Answer Time (A5)



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

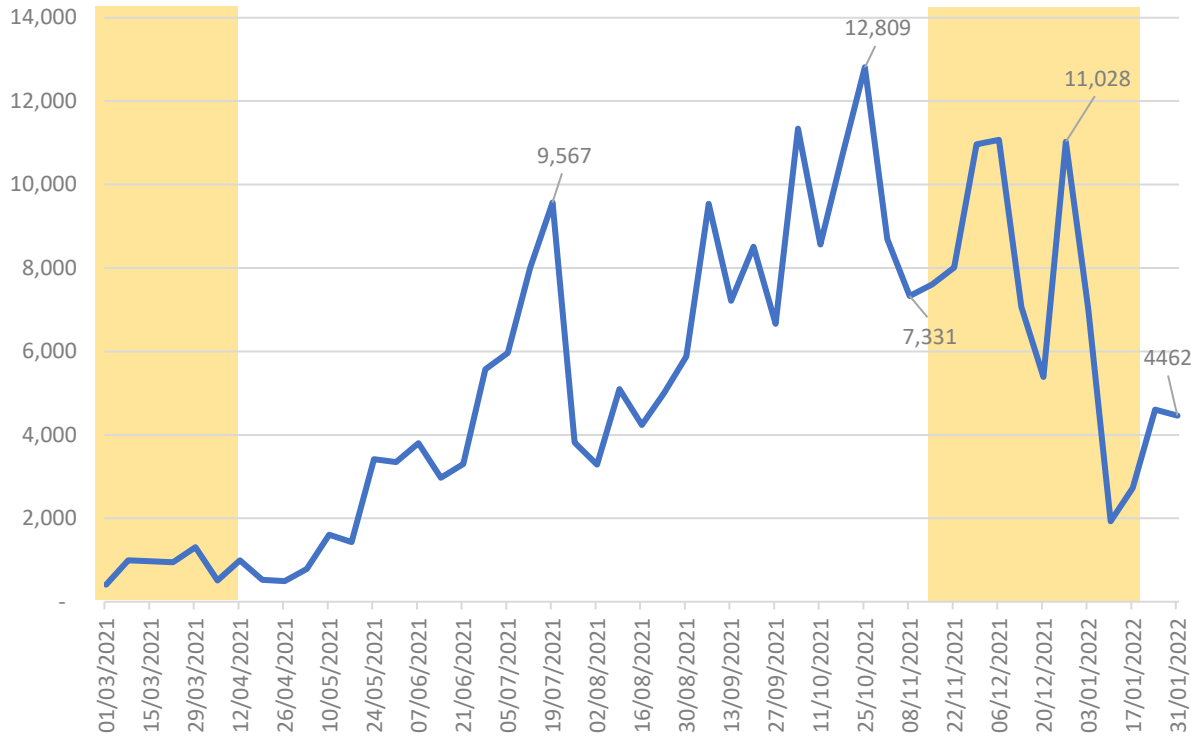


8. Call Delays over 2 minutes and Network Partner Connections (weekly data)

Having peaked at the end of December, the volume of 2 minute call delays dropped in January 2022. It has increased again in recent weeks, but is currently under half the volume seen at the end of 2021. This pattern is reflected for Network Partner Connections.

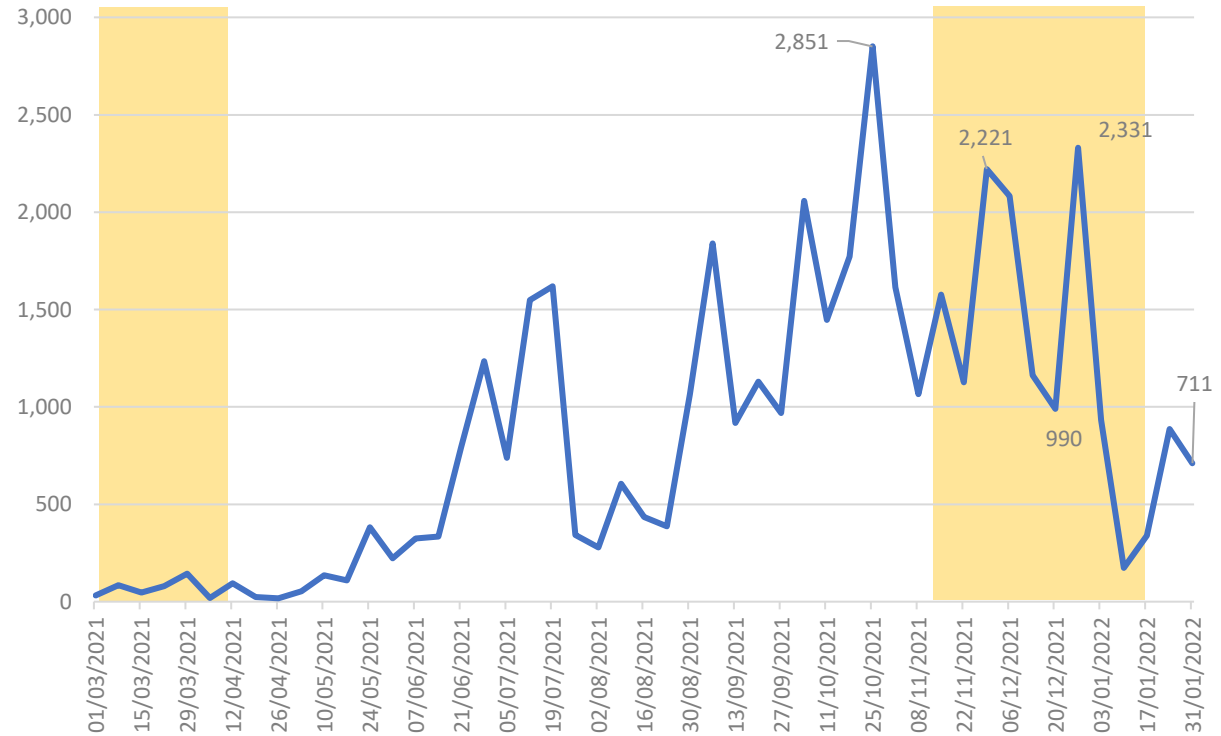
1. Call Answer Delays (2 mins+): Weekly Data

Volume of 2 min Call Delays from March 1 2021



2. Network Partner Connections: Weekly Data

Total Connections from March 1 2021



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

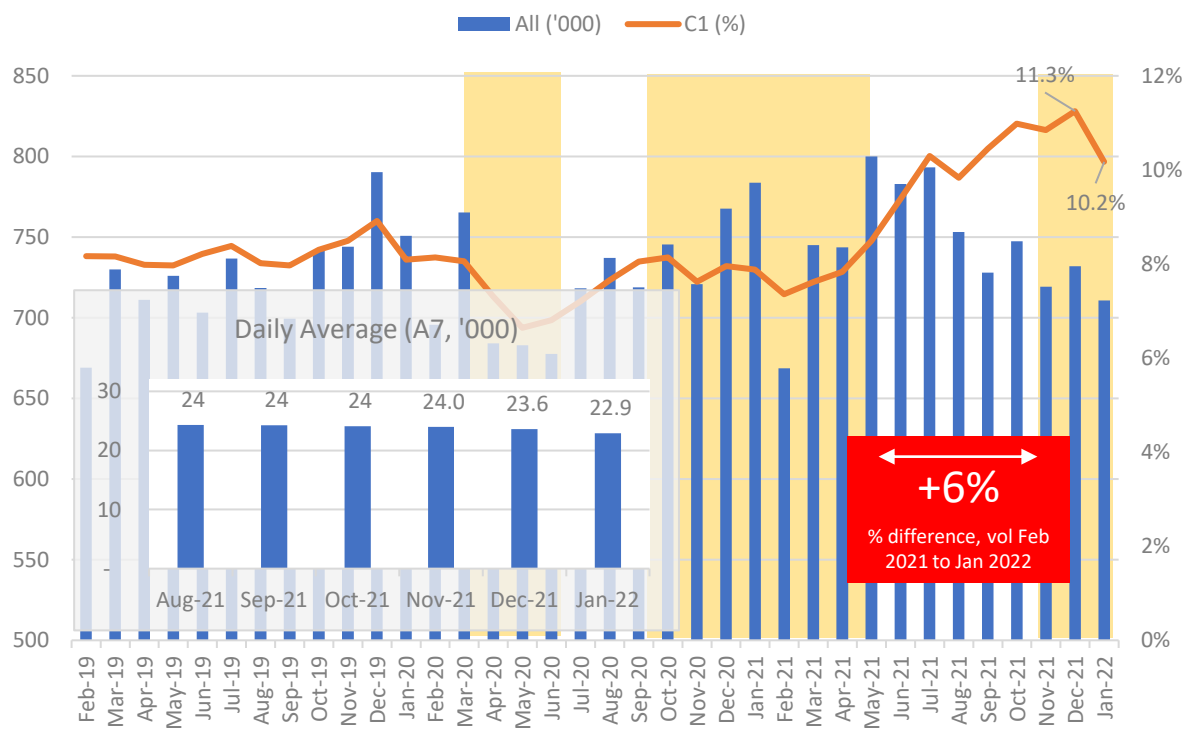


9. Demand: All Incidents (A7) and Proportion C1 (A8)

There were 21k fewer incidents in January compared with December, with a total of 711k overall. This is the lowest since February 2021. The proportion of these incidents made up by C1 remains above 10%.

1. Monthly volume of Incidents and Proportion that are C1

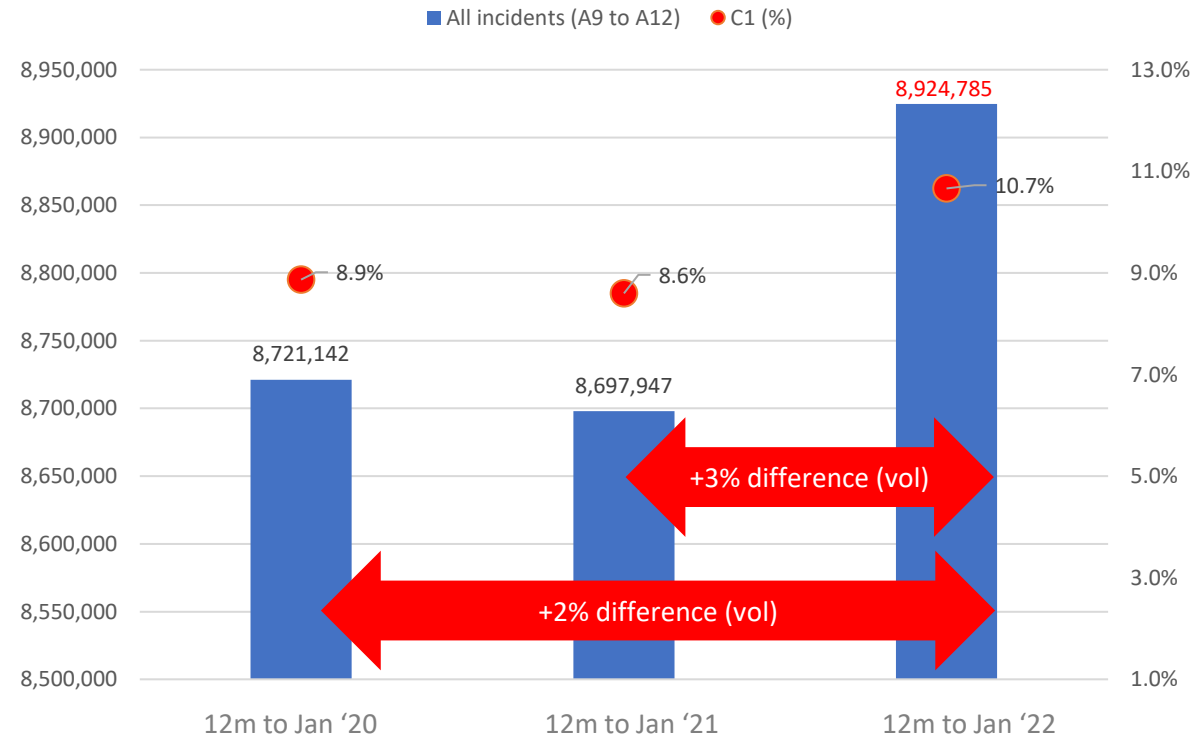
Volume of Incidents ('000, A7) and % C1 (A8)



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

2. Summary: 12 months to January

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



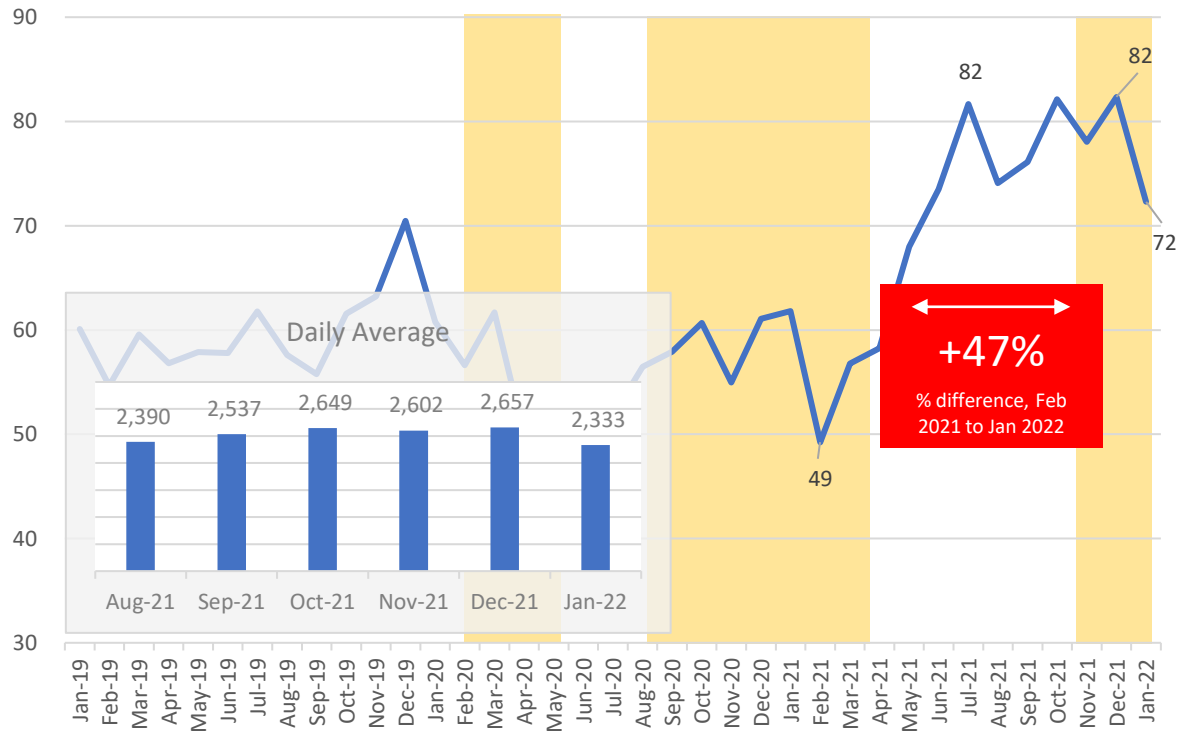
10. Demand: C1 Incidents (A8)

Following a series high in December, the volume of C1 incidents dropped by 10k to 72k in January 2022. This is 47% greater than in February last year and represents a daily average of 2,333 incidents across all trusts. The annualised volume is currently 28% greater than the previous period, with over 850k incidents in the 12 months to January 2022.

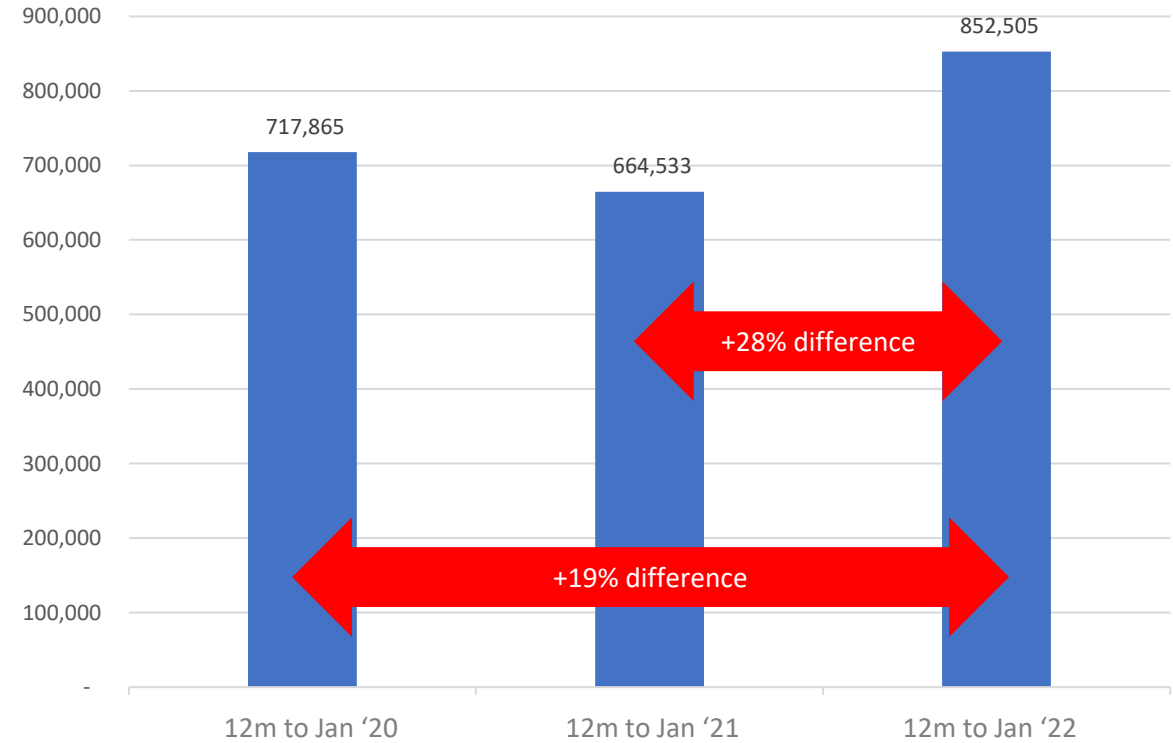
1. Monthly

2. Summary: 12 months to January

Volume of C1 Incidents ('000, A8)



Volume of C1 Incidents: 12 months to Jan (A8)



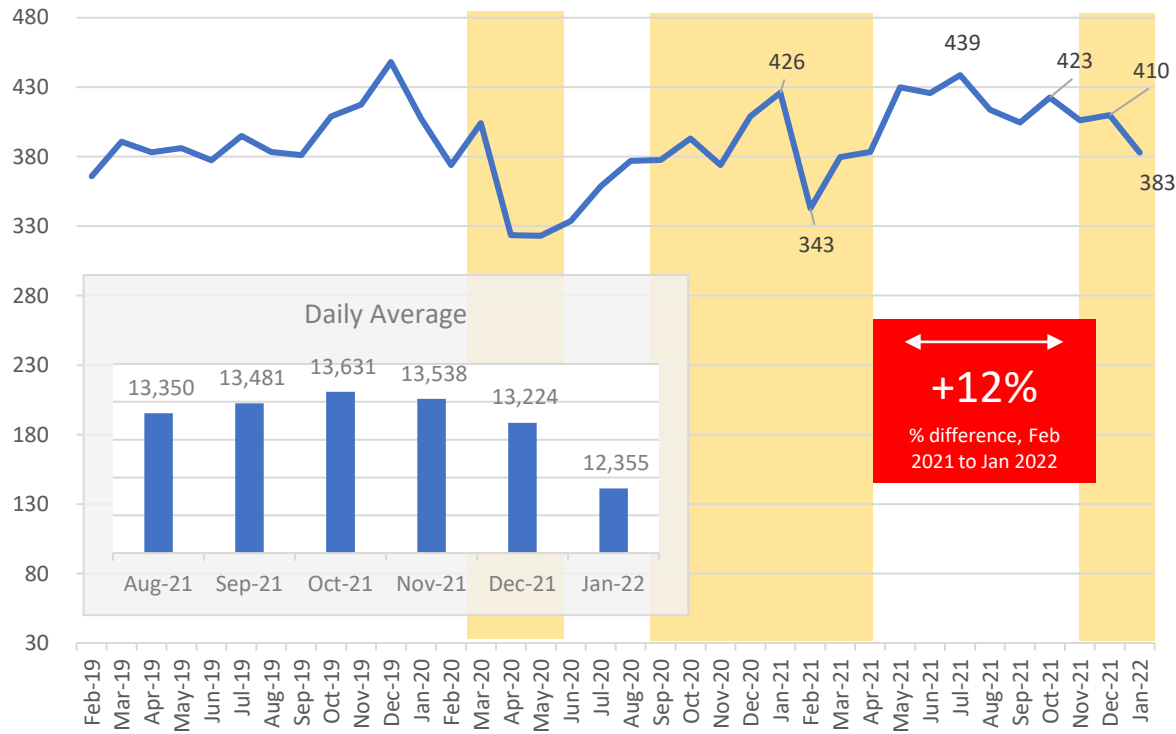
Yellow areas denote COVID waves in the UK: source ONS.

11. Demand: C2 Incidents (A10)

There were 383k C2 incidents in January 2022, 27k less than the previous month. This is the lowest monthly volume since April 2021. In the 12 months to January 2022, there were just under 5 million C2 incidents, 8% more than the previous period.

1. Monthly

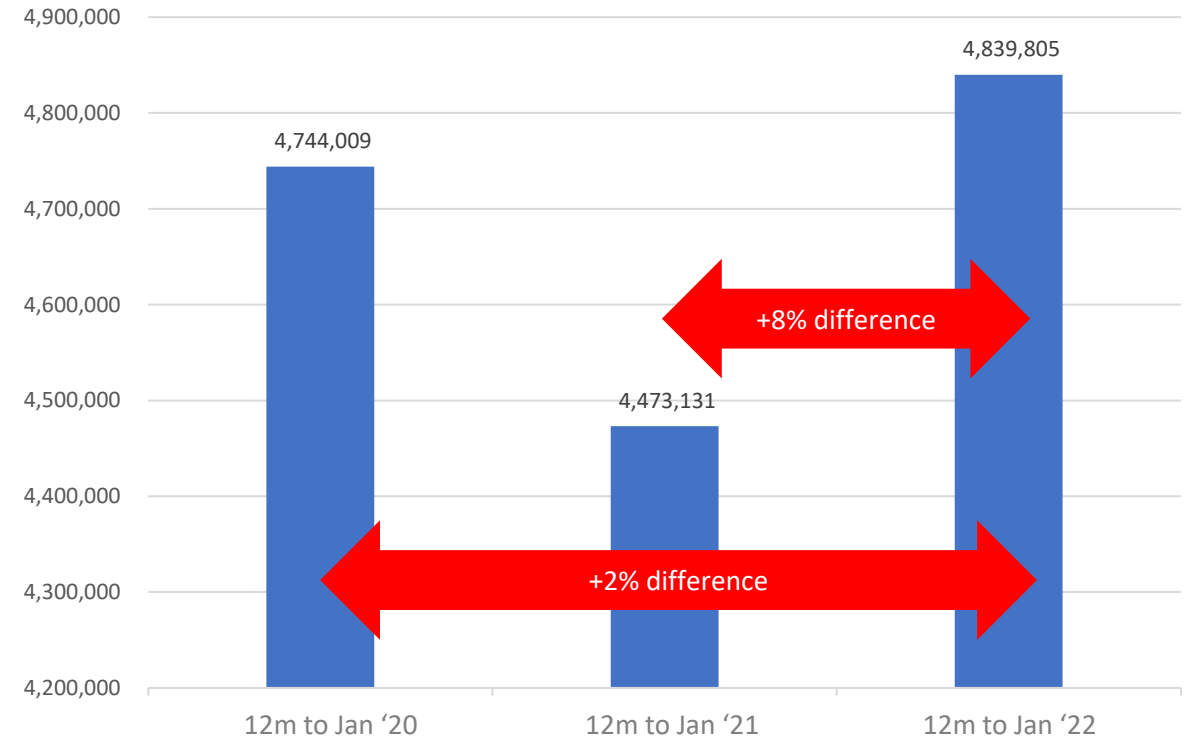
Volume of C2 Incidents ('000, A10)



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

2. Summary: 12 months to January

Volume of C2 Incidents: 12 months to Jan (A10)

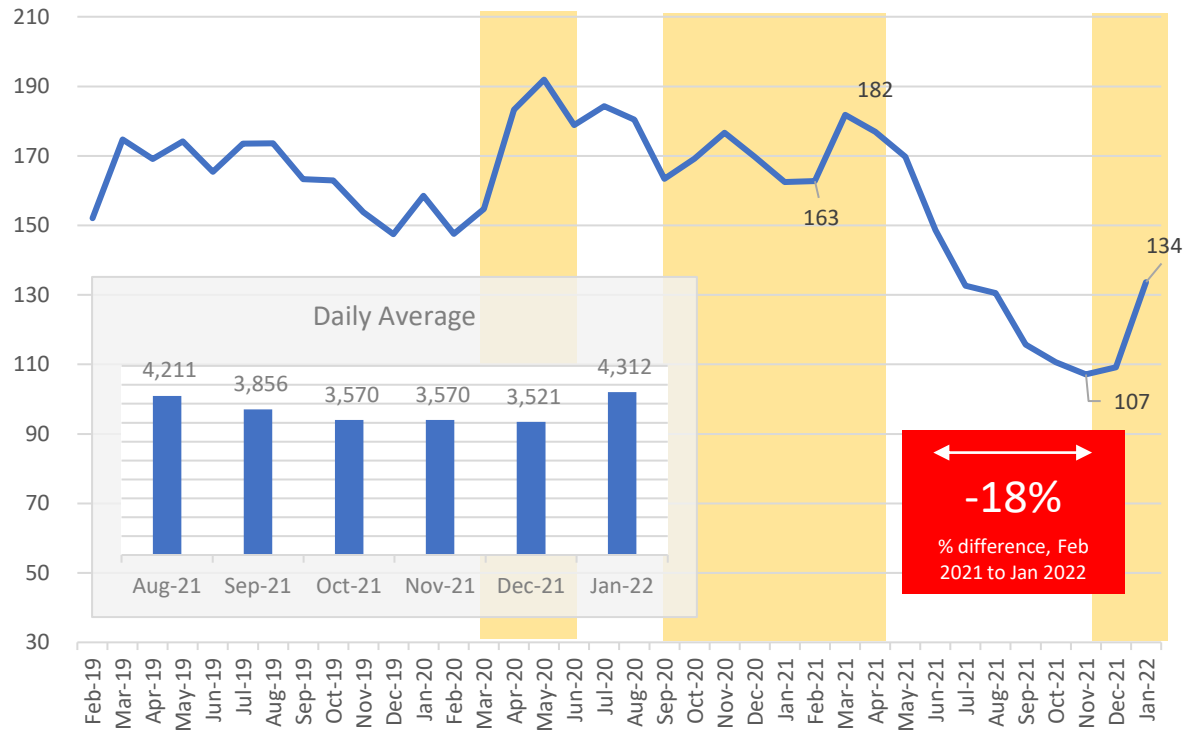


12. Demand: C3 Incidents (A11)

Following a steady decrease in monthly volume since March 2021, C3 incidents increased in January 2022 with 25k more recorded than in December. The daily average increased to over 4k.

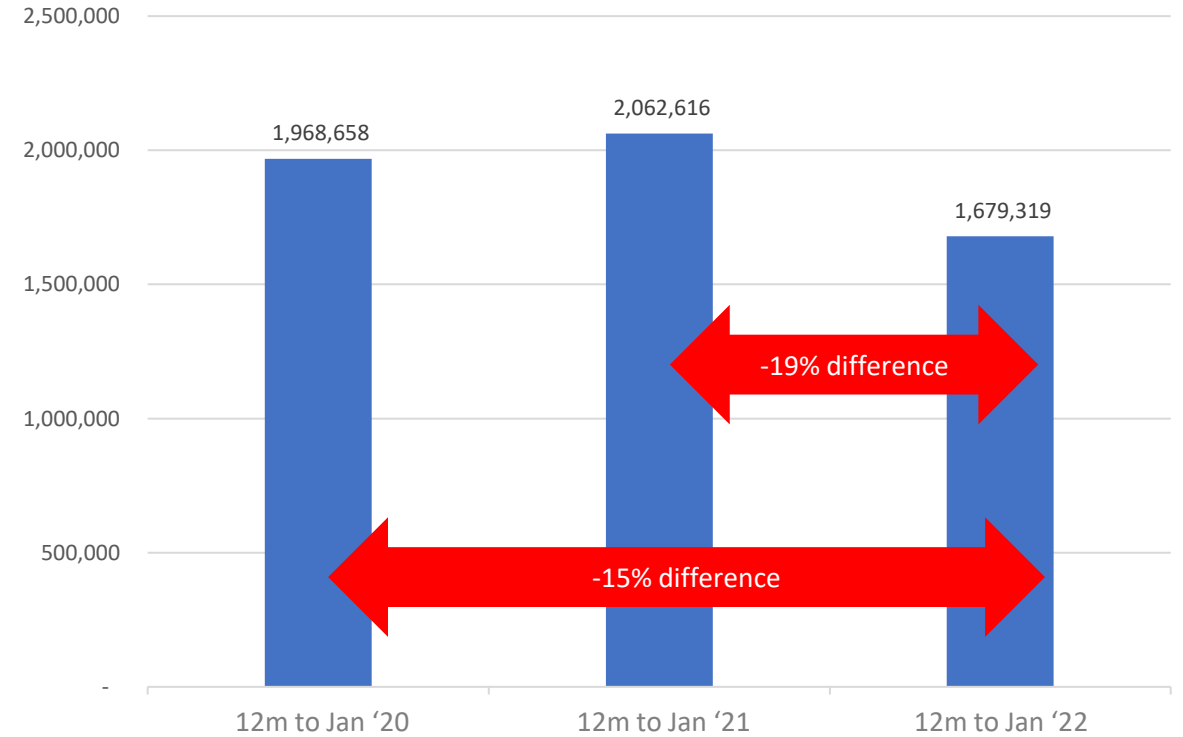
1. Monthly

Volume of C3 Incidents ('000, A11)



2. Summary: 12 months to January

Volume of C3 Incidents: 12 months to Jan (A11)



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

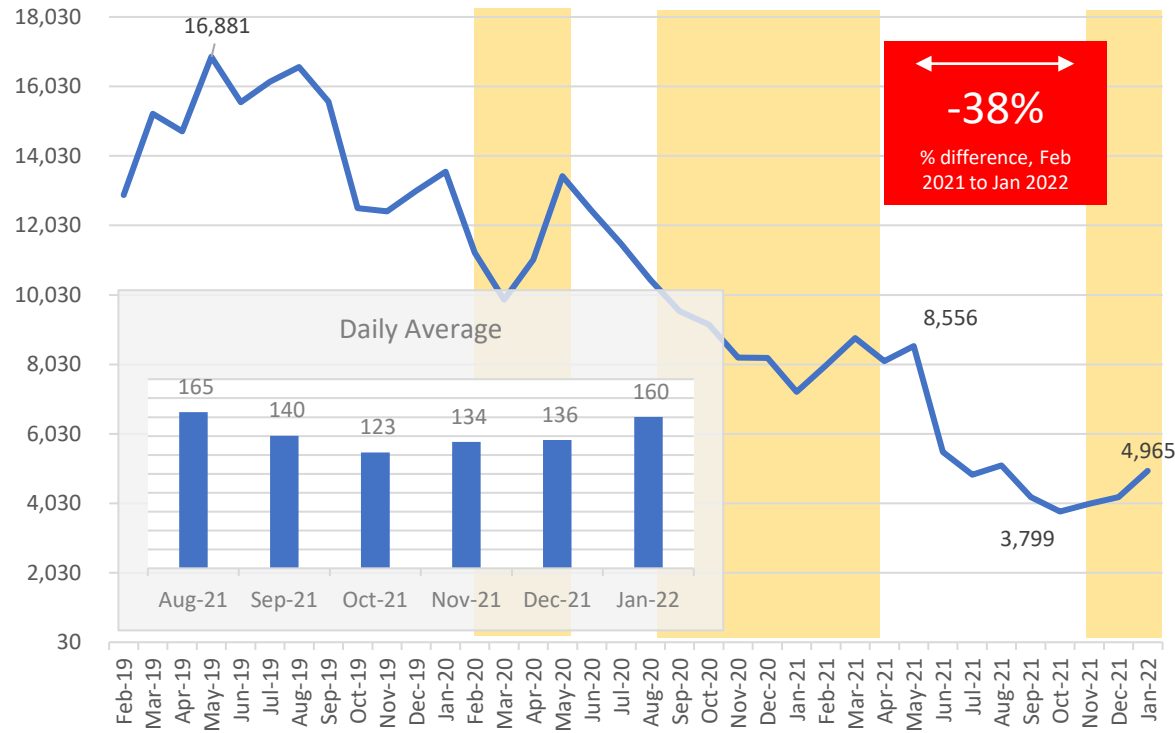


13. Demand: C4 Incidents (A12)

Following a similar pattern to C3, C4 incidents have recently increased following over six months of steady contraction. There were just under 5k incidents in January 2022 representing an increase of 752 from December.

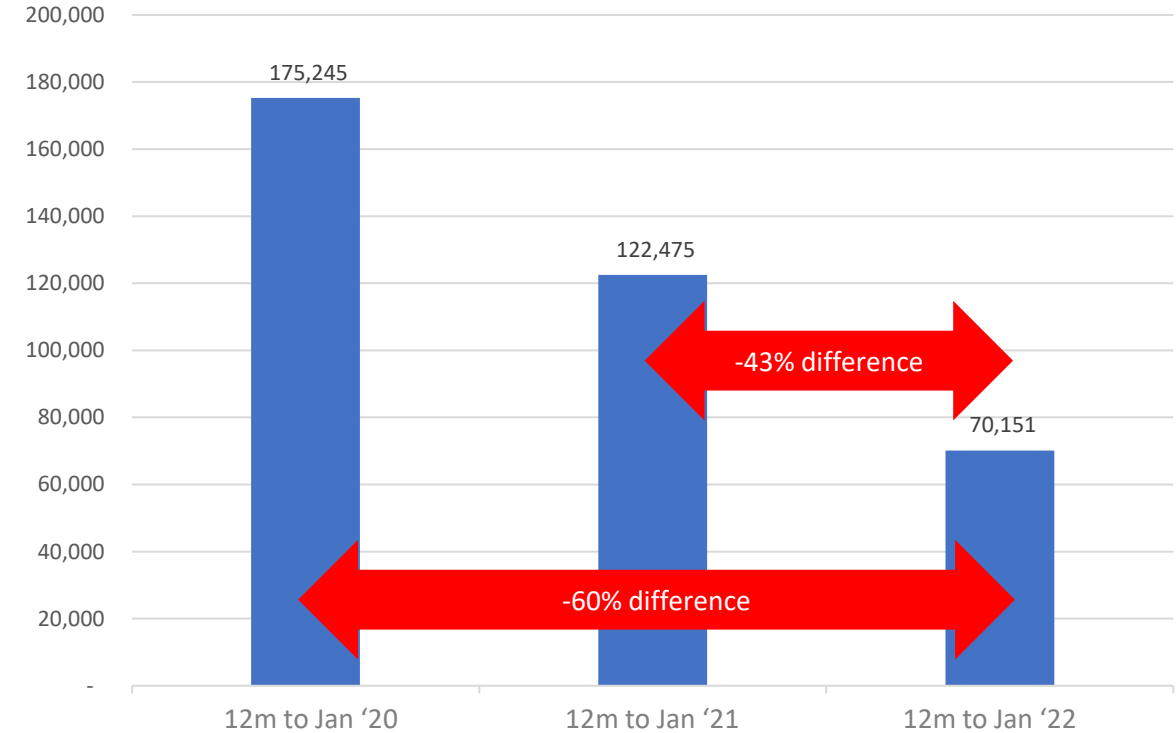
1. Monthly

Volume of C4 Incidents (A12)



2. Summary: 12 months to January

Volume of C4 Incidents: 12 months to Jan (A12)



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

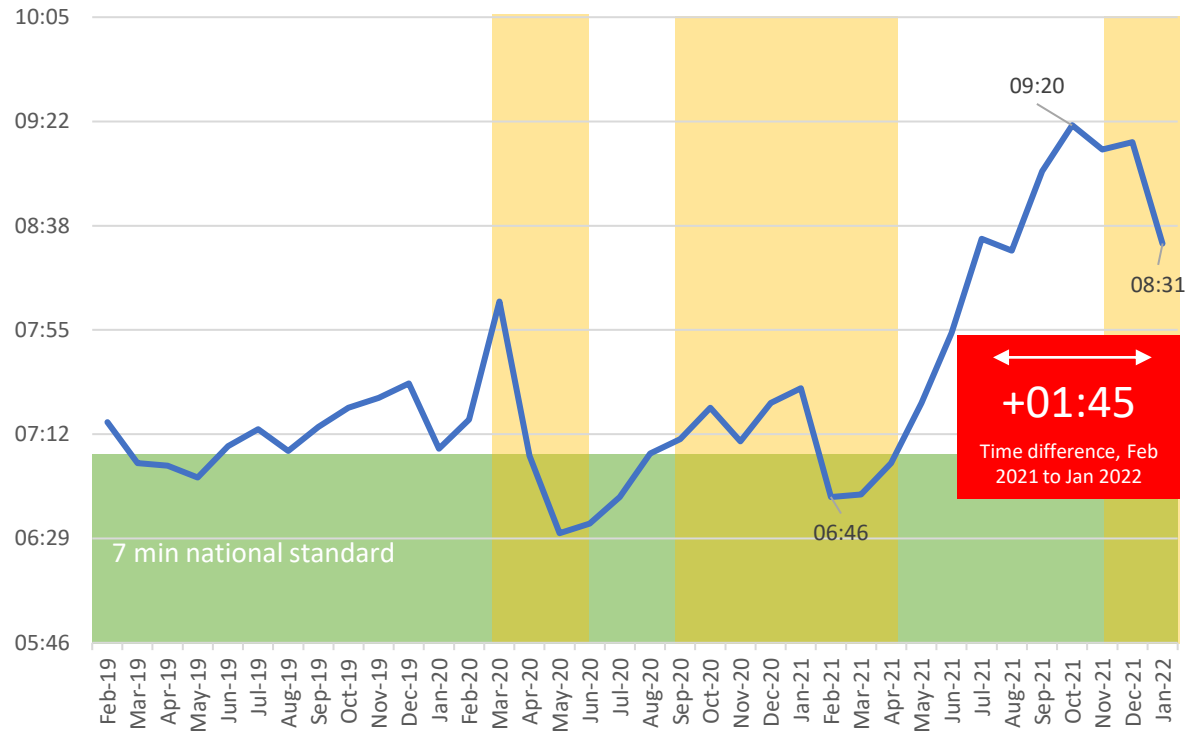


14. Demand: C1 Response Times (Measures A25 and A26)

While both measures remain above their respective national standard, C1 response times improved in January: the mean response was 42 seconds faster, while the 90th centile was over a minute faster than the previous month.

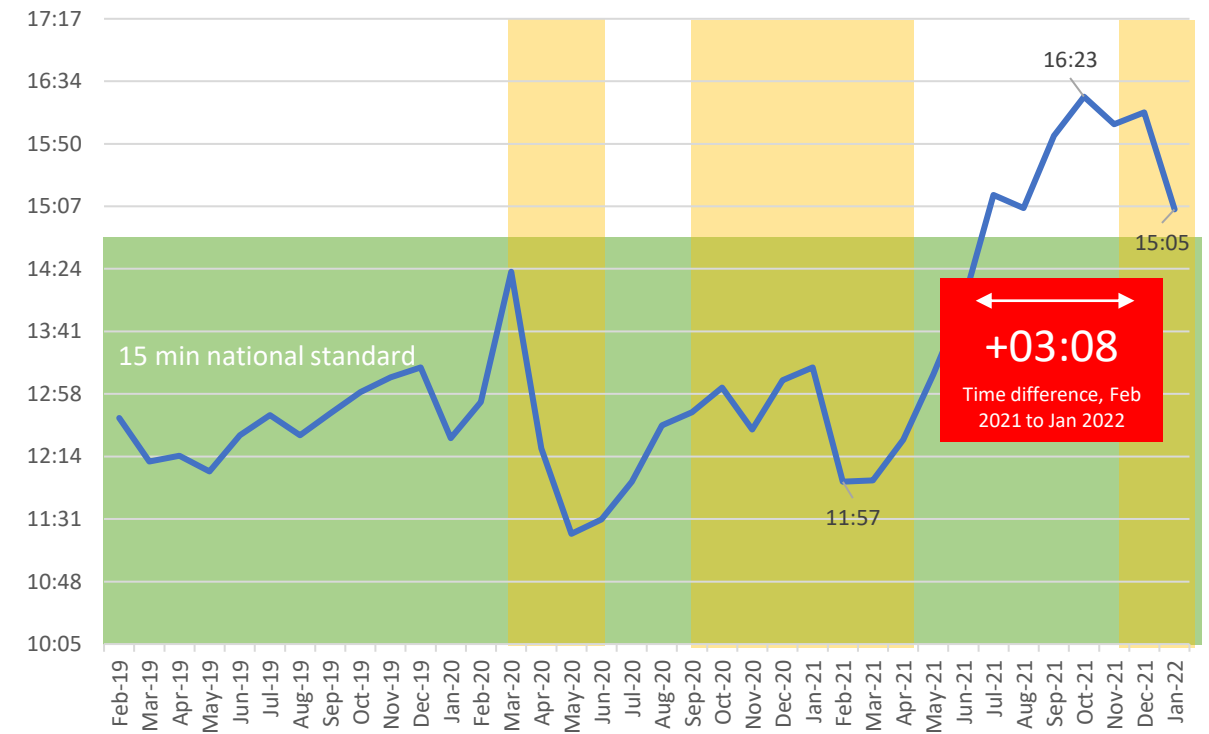
1. Mean

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.

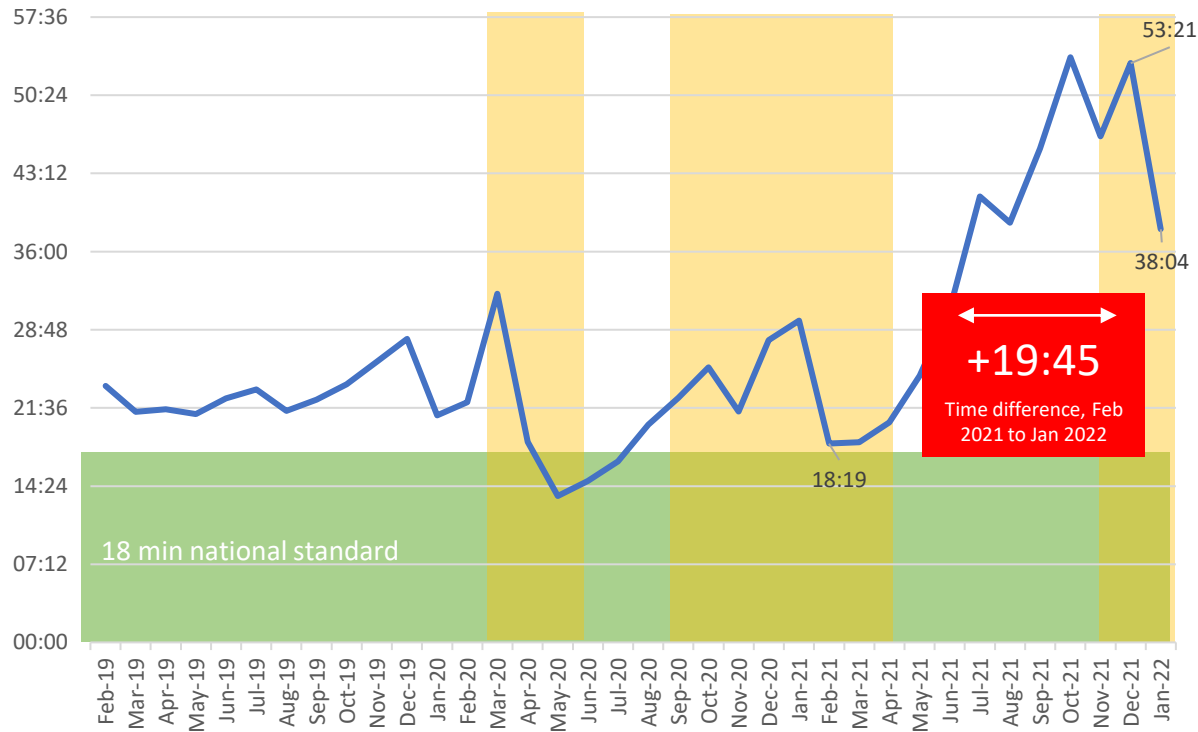


15. Demand: C2 Response Times (Measures A31 and A32)

As with C1, C2 response times improved in January 2022 – although they also remain somewhat slower than the national standards. The mean response time was over 15 minutes faster and the 90th centile measure over 35 minutes faster than the previous month.

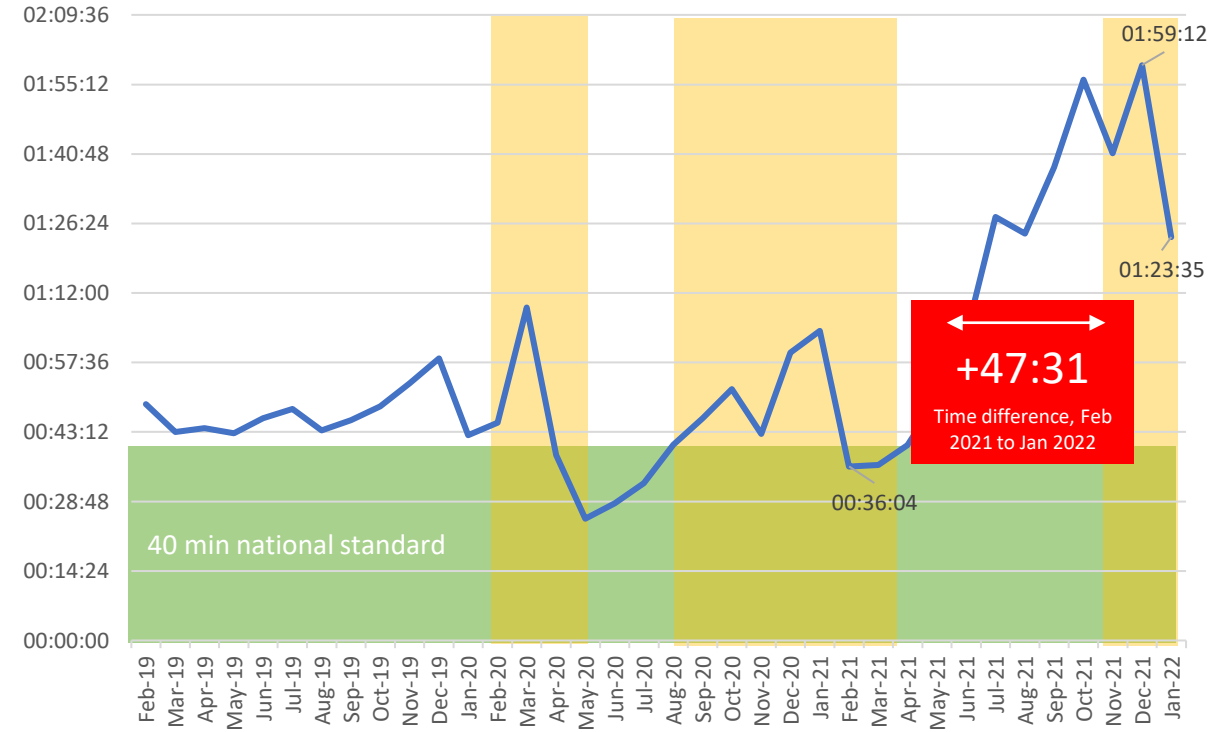
1. Mean

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.

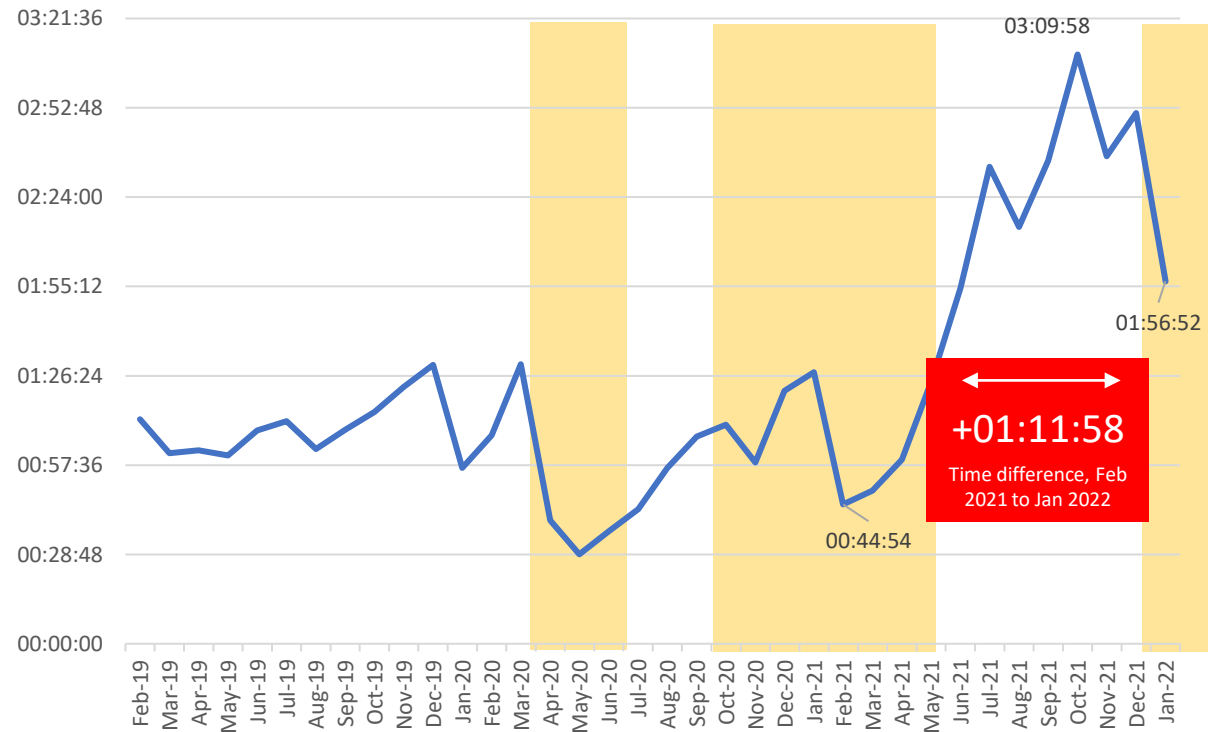


16. Demand: C3 Response Times (Measures A34 and A35)

Response times for C3 incidents saw a decrease in time taken, although both measures remain substantially higher than 12 months ago. The most recent data show the mean time was 54 minutes faster - and the 90th centile time an hour-and-a-half faster - than in December 2011.

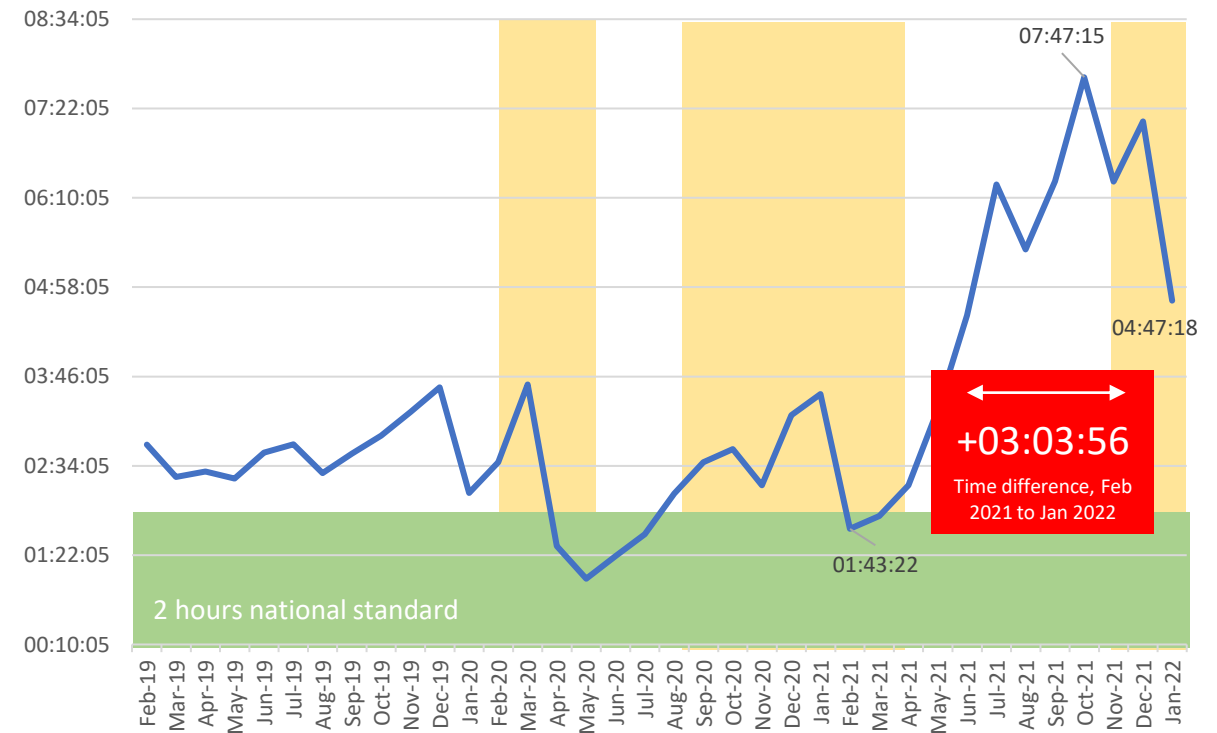
1. Mean

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.

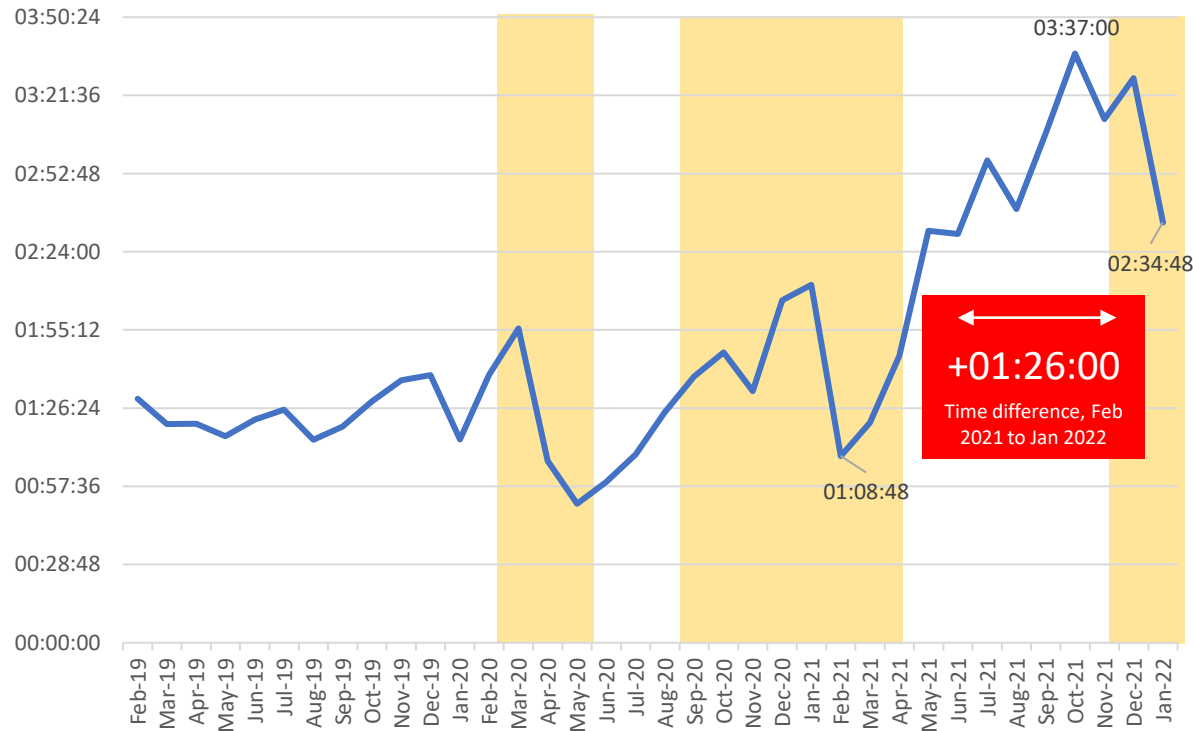


17. Demand: C4 Response Times (Measures A37 and A38)

As seen in the other categories response times, C4 improved in January 2022, but remains high. The mean response time was 53 mins faster, and the 90th centile 2 hours 12 mins faster than in December 2021.

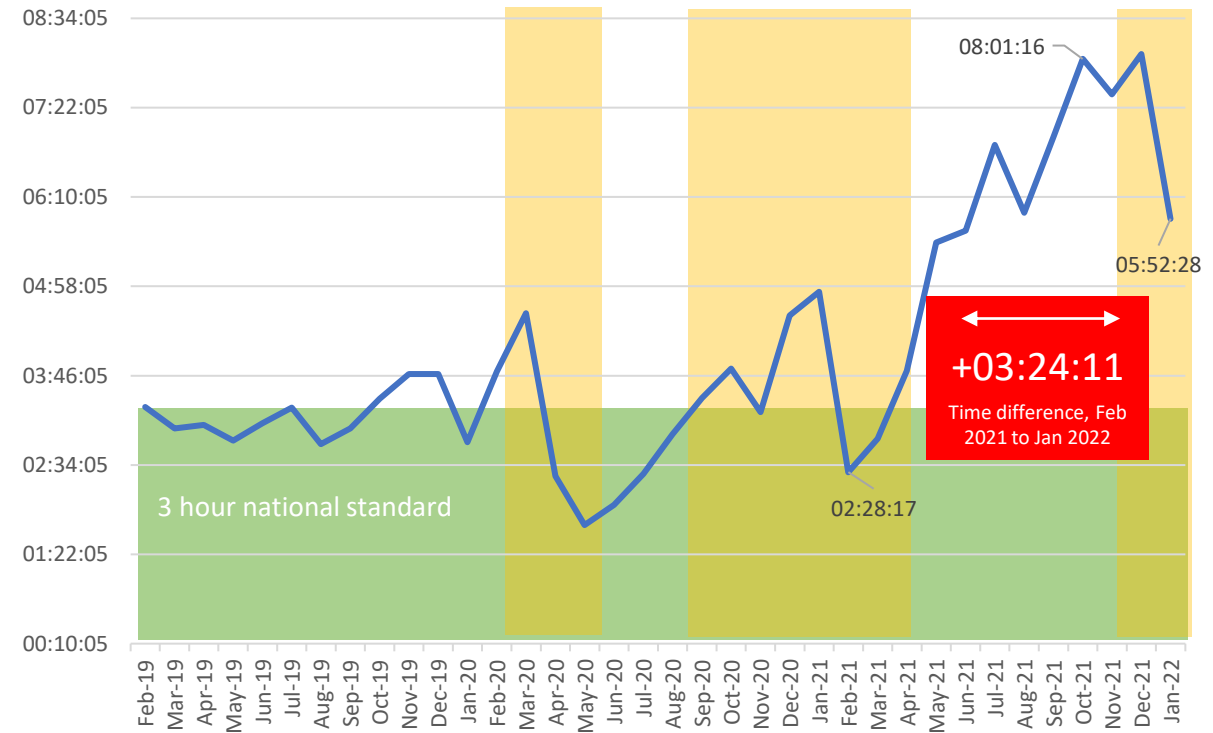
1. Mean

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.

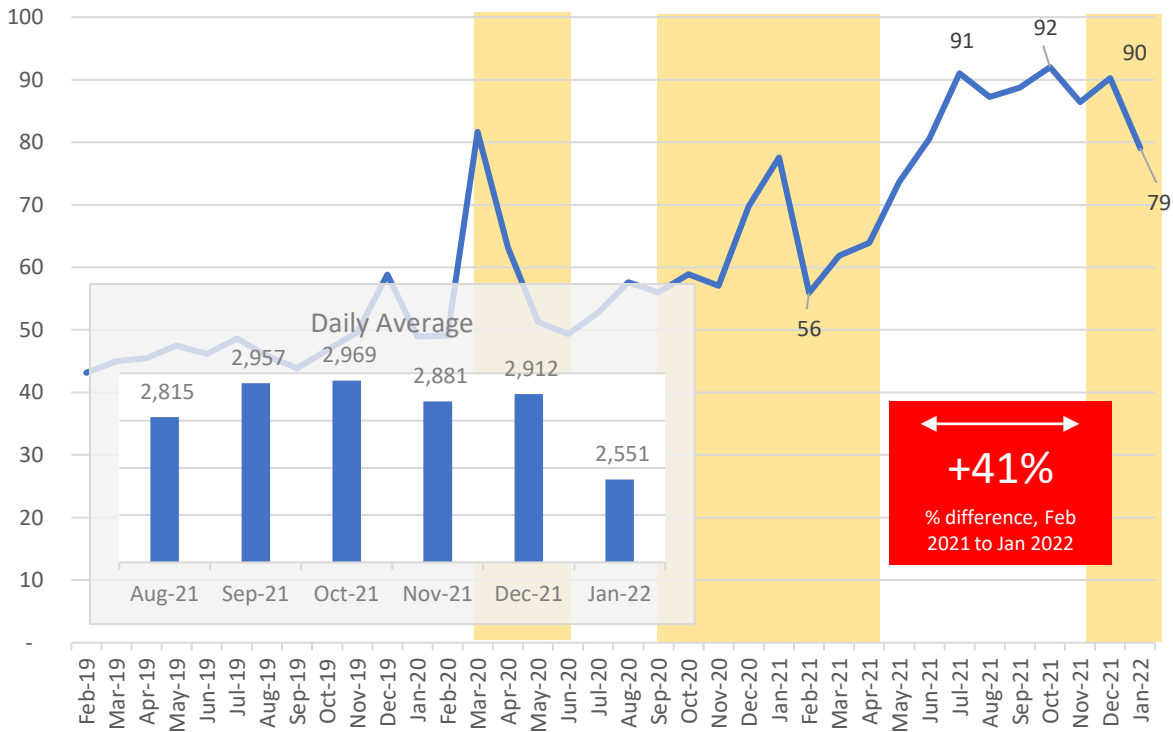


18. Hear and Treat (measure A17)

There were 11k fewer Hear-and-Treat incidents in January 2022 than in December, with the monthly total decreasing to 79k. The annualised volume is currently 31% greater than the previous period, with 951k incidents in the 12 months to January 2022.

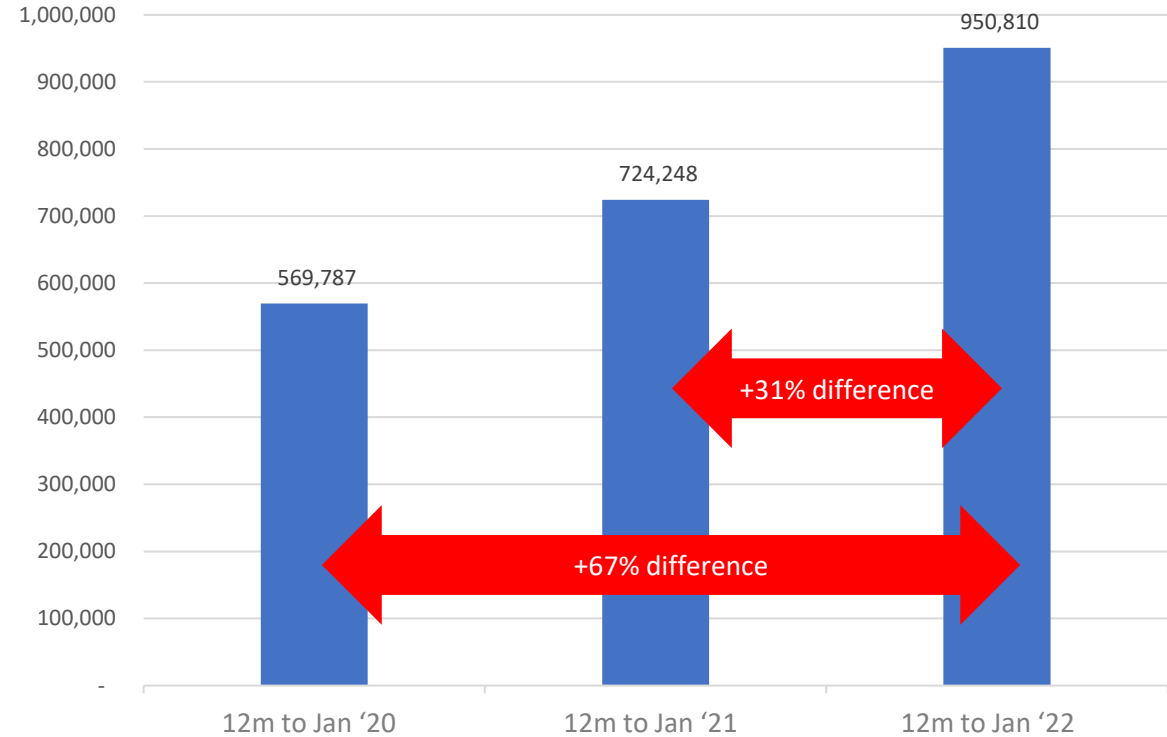
1. Monthly

Volume of Hear and Treat ('000, A17)



2. Summary: 12 months to January

Volume of Hear and Treat: 12 months to Jan (A17)



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

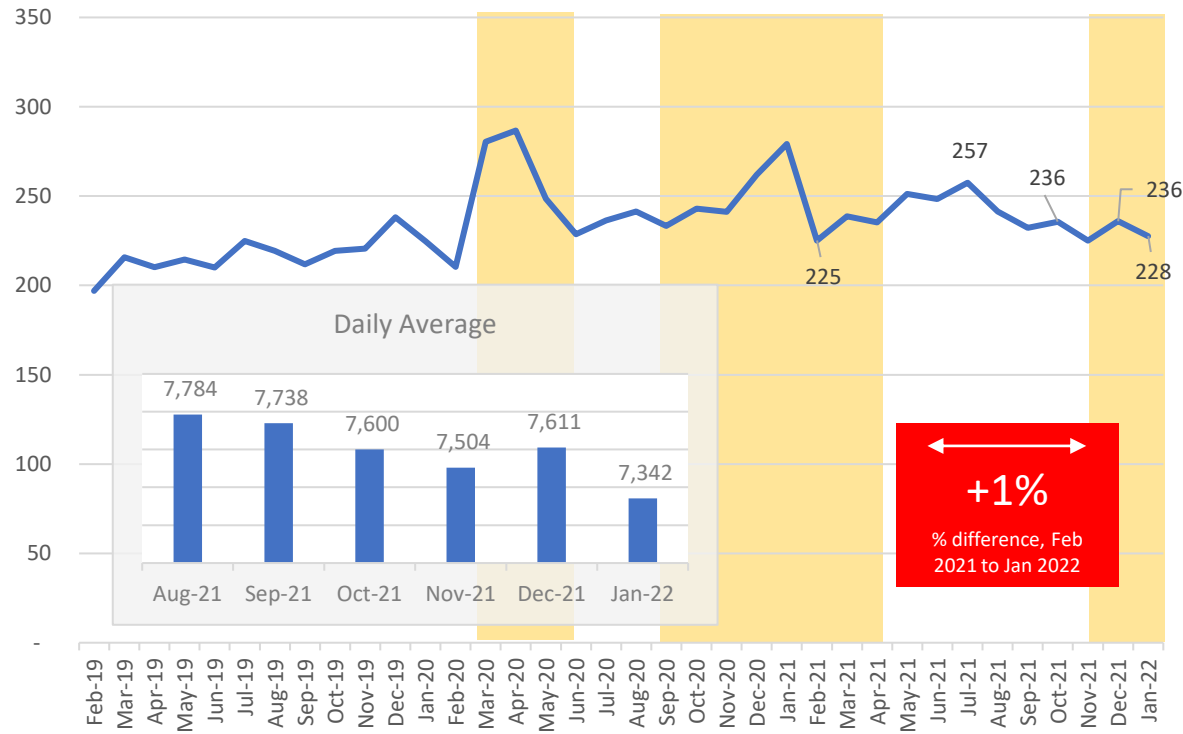


19. See and Treat (measure A55)

See-and-Treat volumes remained relatively steady: there was a 1% difference between February 2021 and January 2022, and a decrease of 8k incidents in the most recent month.

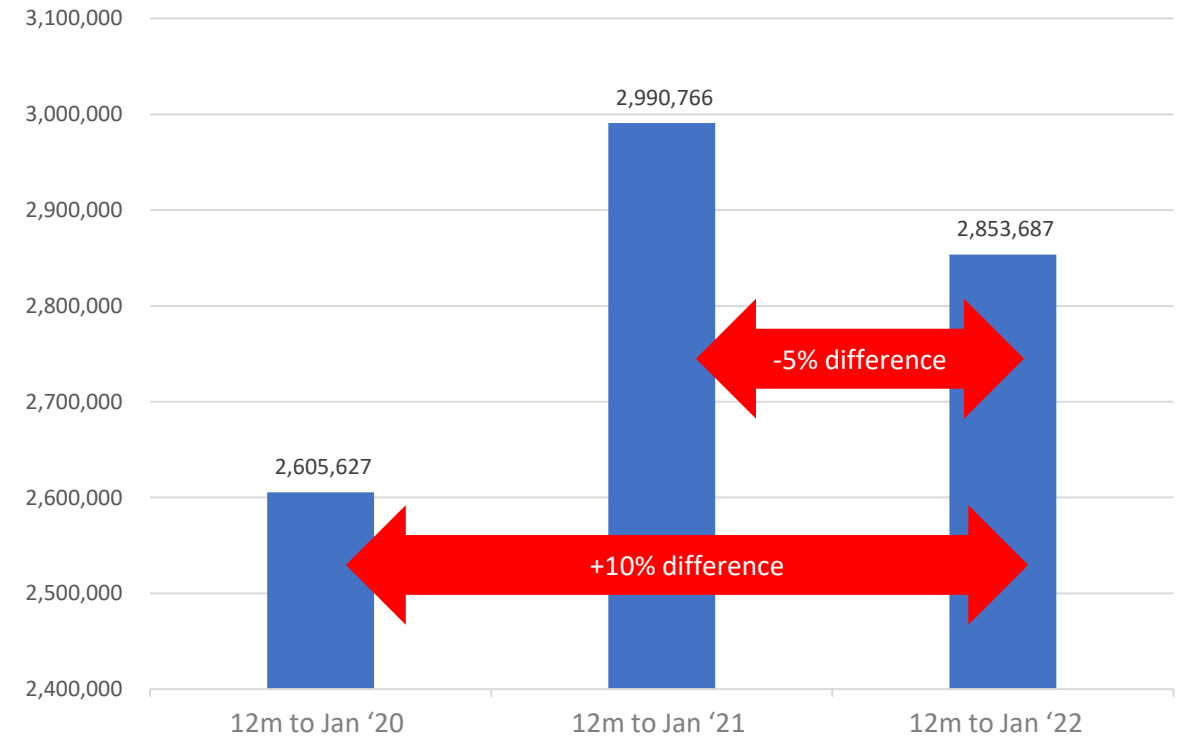
1. Monthly

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



2. Summary: 12 months to January

Volume of See and Treat Responses: 12 months to Jan (A55)



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

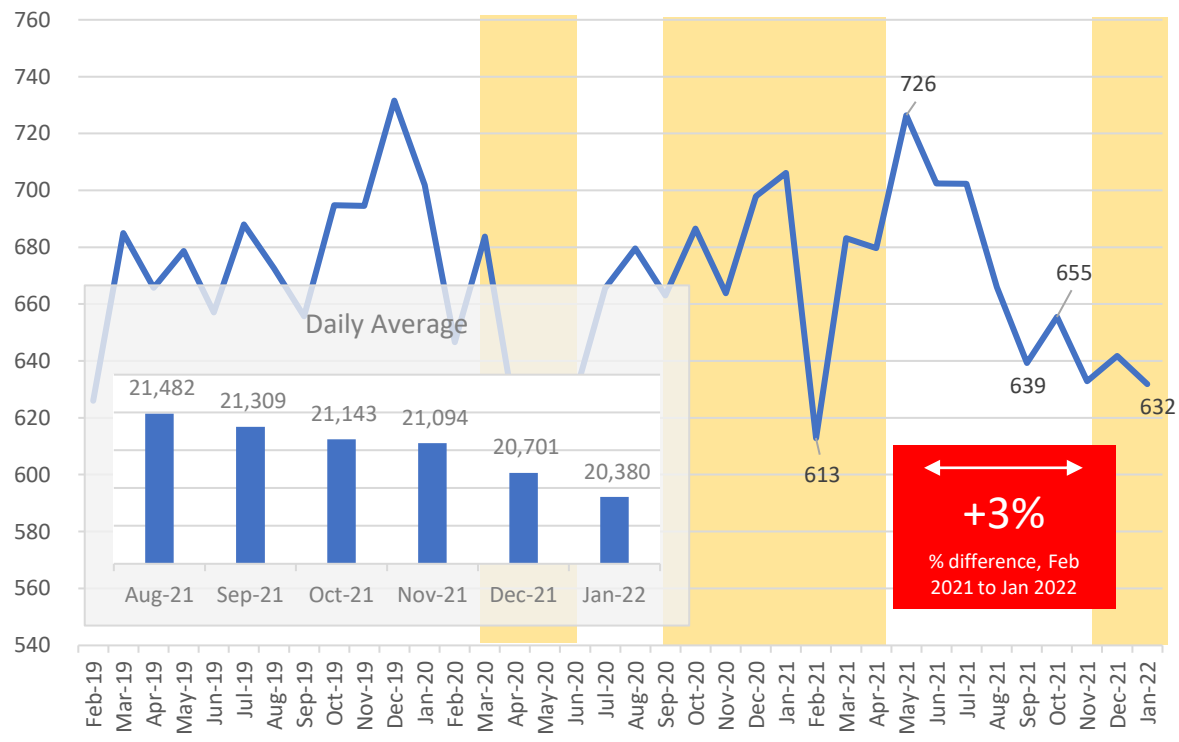


20. Face to Face (measure A56)

Incidents with a Face-to-Face outcome continued to decrease. From a series high in May 2021 the volume dropped by 95k, with a further decrease of nearly 10k between December and January. Comparing the last two years, overall volume remains flat.

1. Monthly

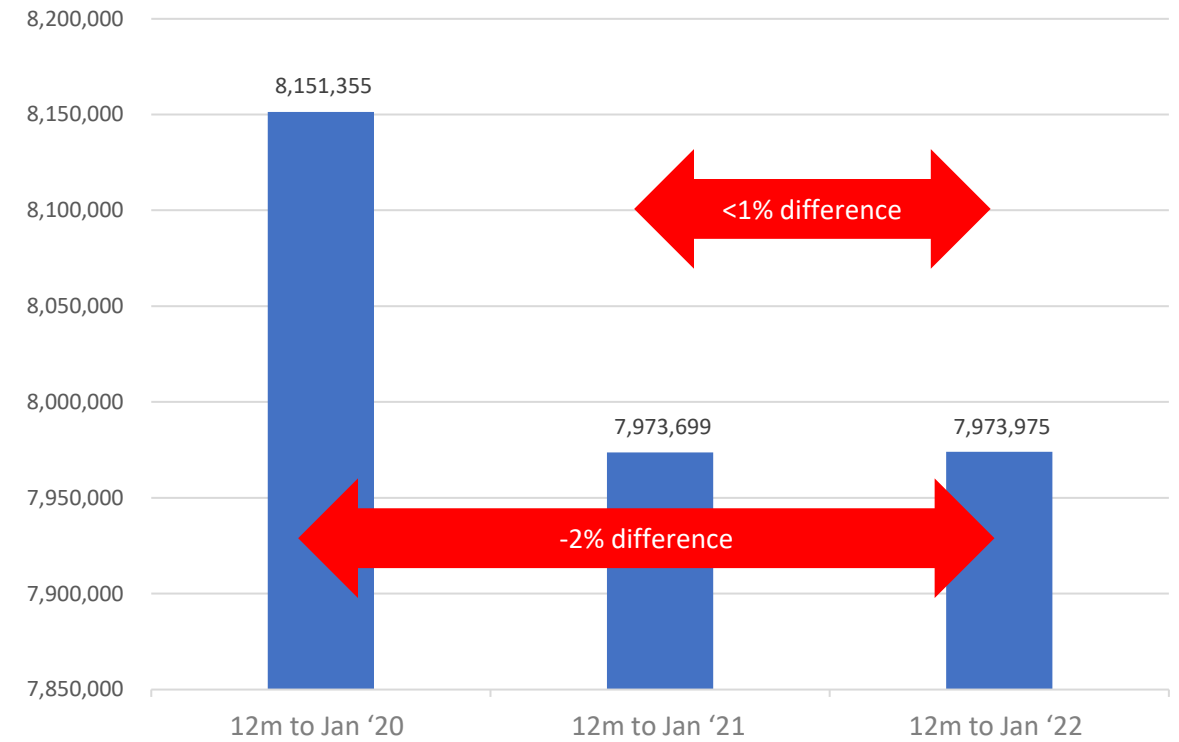
Volume of F2F Responses ('000, A56)



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

2. Summary: 12 months to January

Volume of F2F Responses: 12 months to Jan (A56)

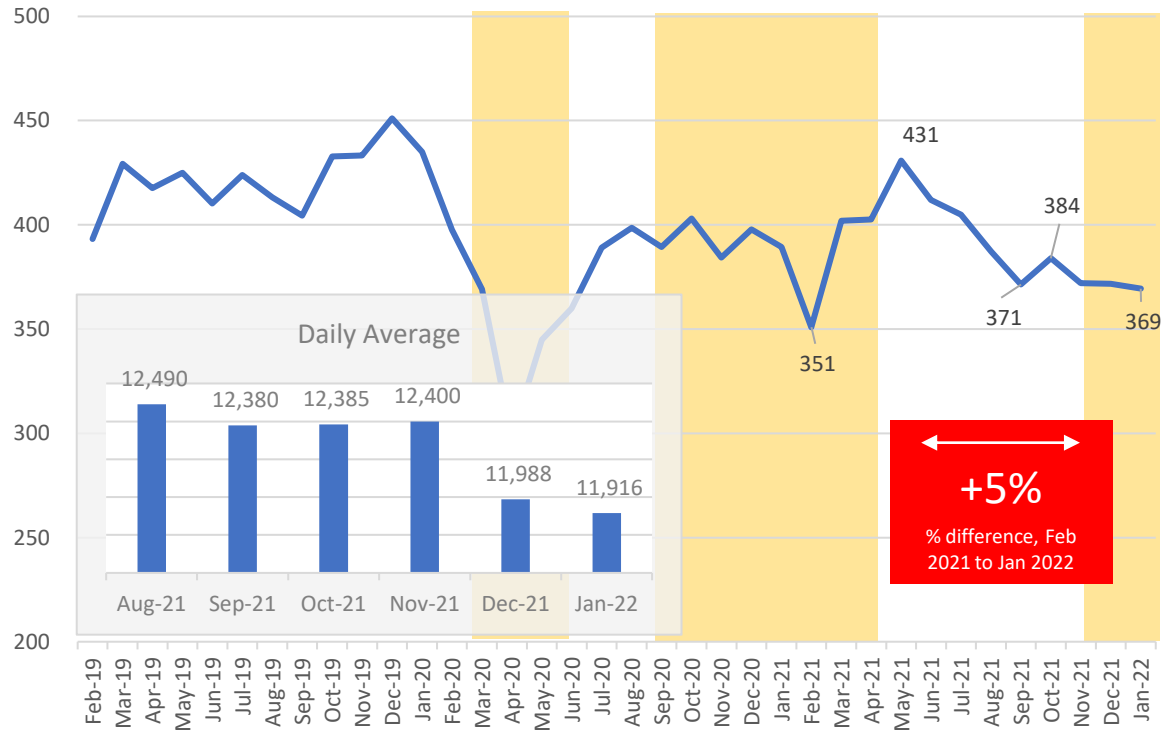


21. Transport to Emergency Departments (measure A53)

There were around 2k fewer incidents with Transport-to-Emergency-Departments in January 2022, marking a continuation of a steady decrease in volume that started in May 2021.

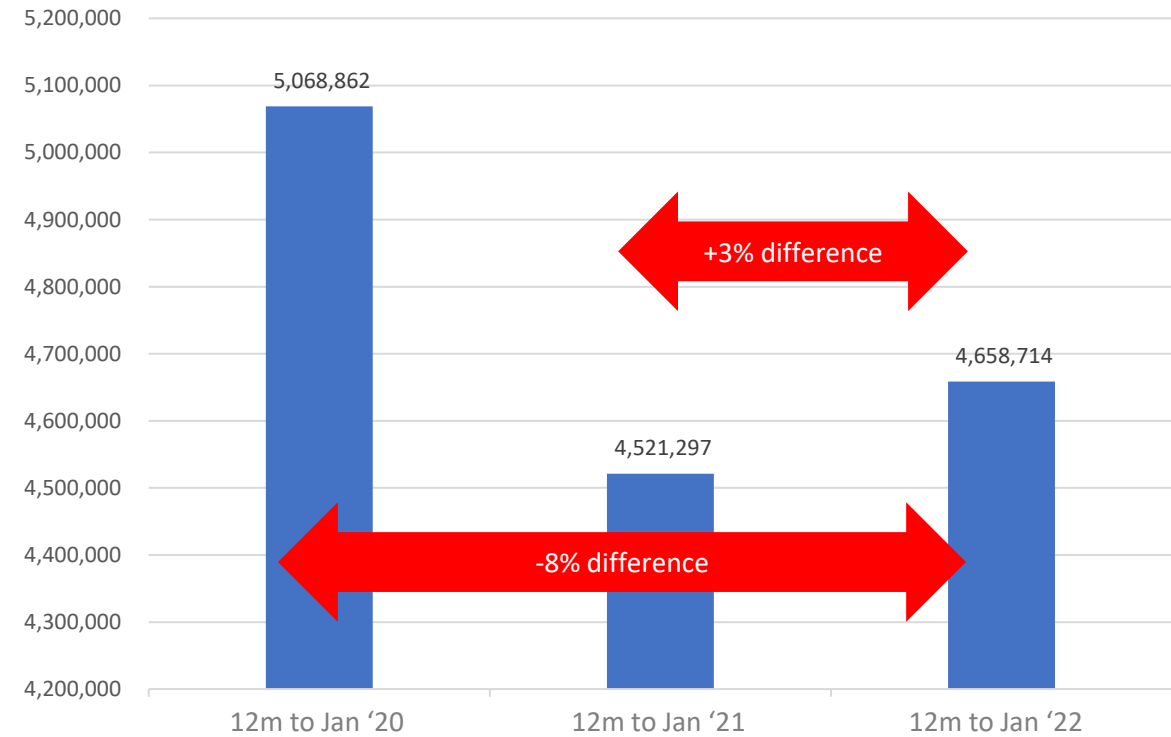
1. Monthly

Incidents with Transport to ED ('000, A53)



2. Summary: 12 months to January

Incidents with Transport to ED: 12 months to Jan (A53)



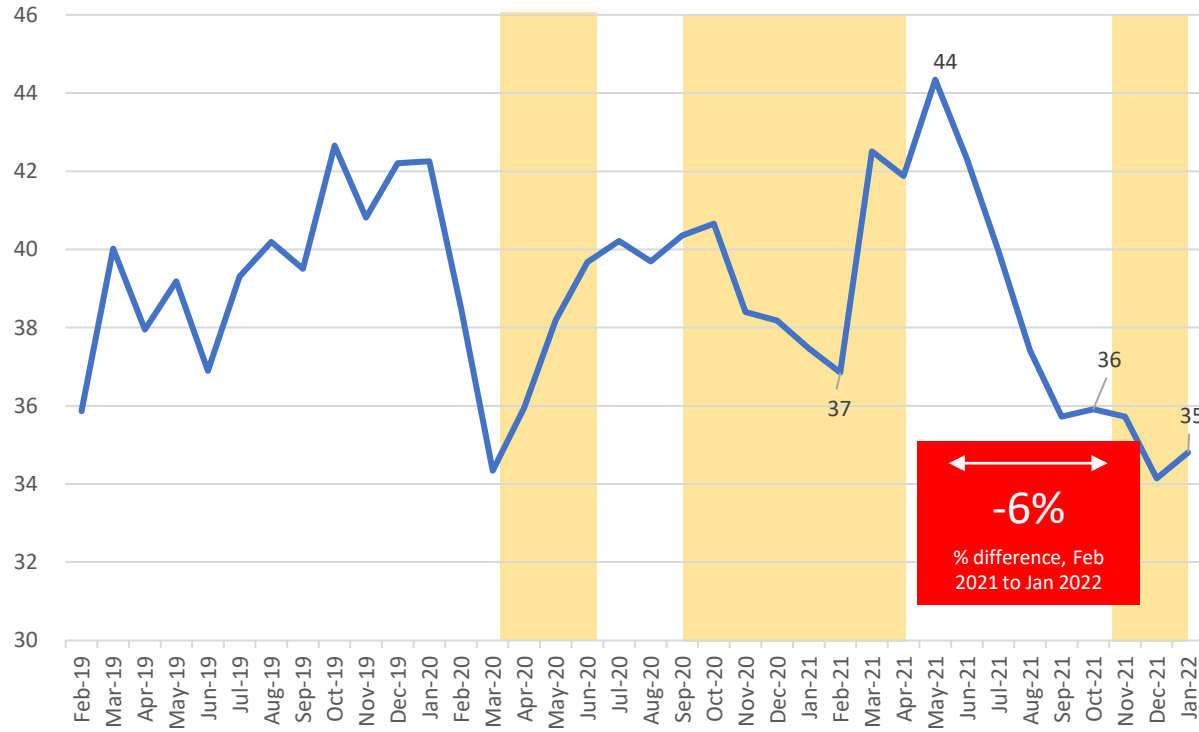
Yellow areas denote COVID waves in the UK: source ONS.

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

Volume of incidents with transport to destinations other than Emergency Departments increased very slightly in January 2022. There were 661 more incidents with this outcome when compared with December.

1. Monthly

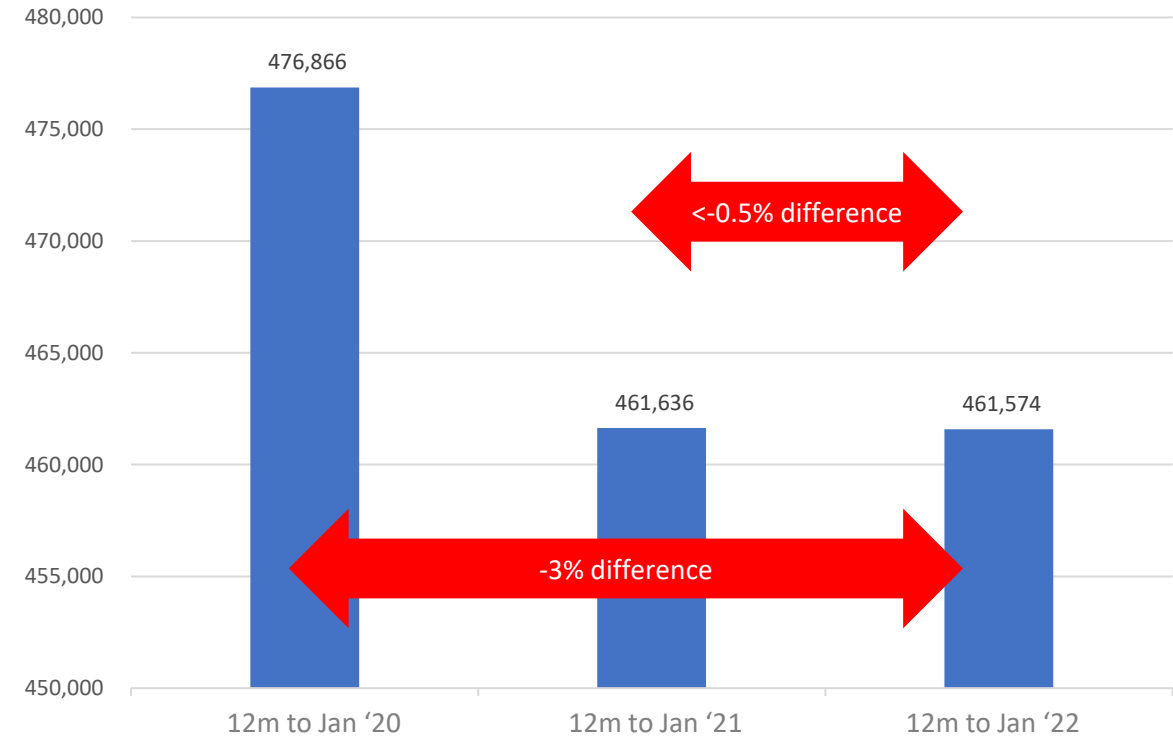
Transport to Destination not ED ('000, A54)



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

2. Summary: 12 months to January

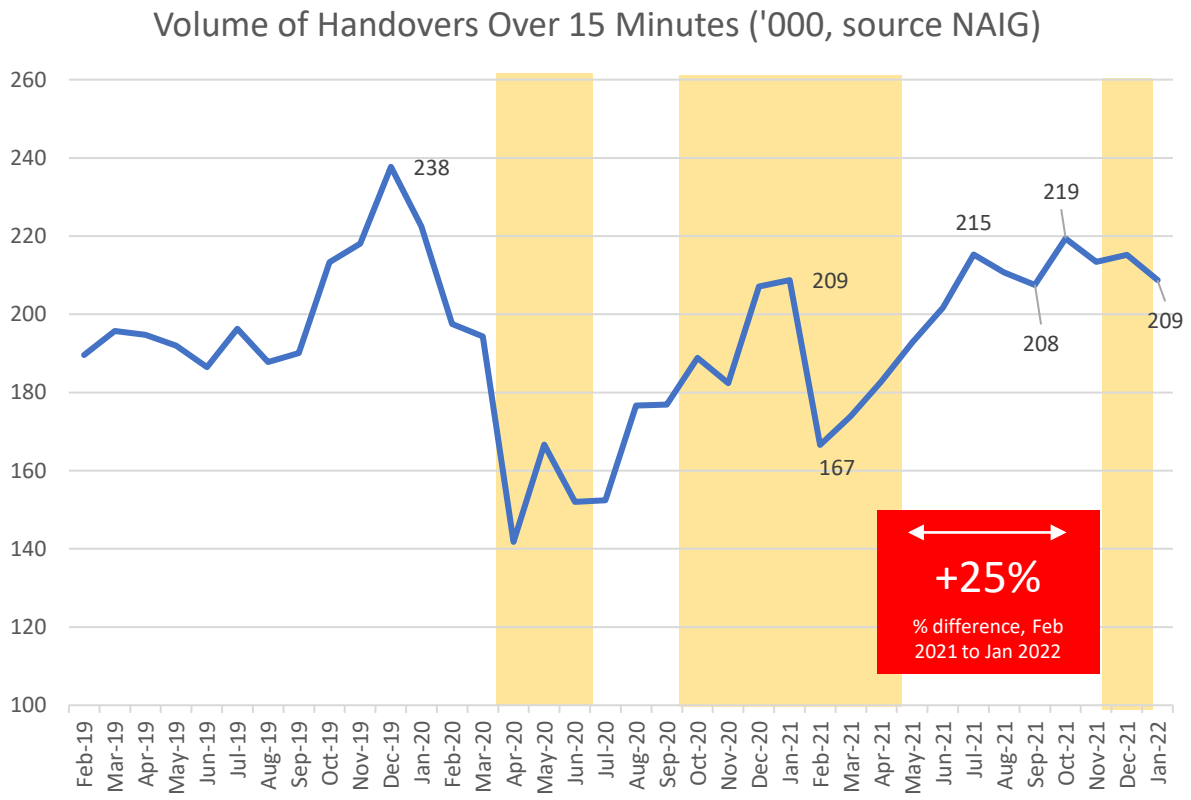
Transport to Destination not ED: 12 months to Jan (A54)



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

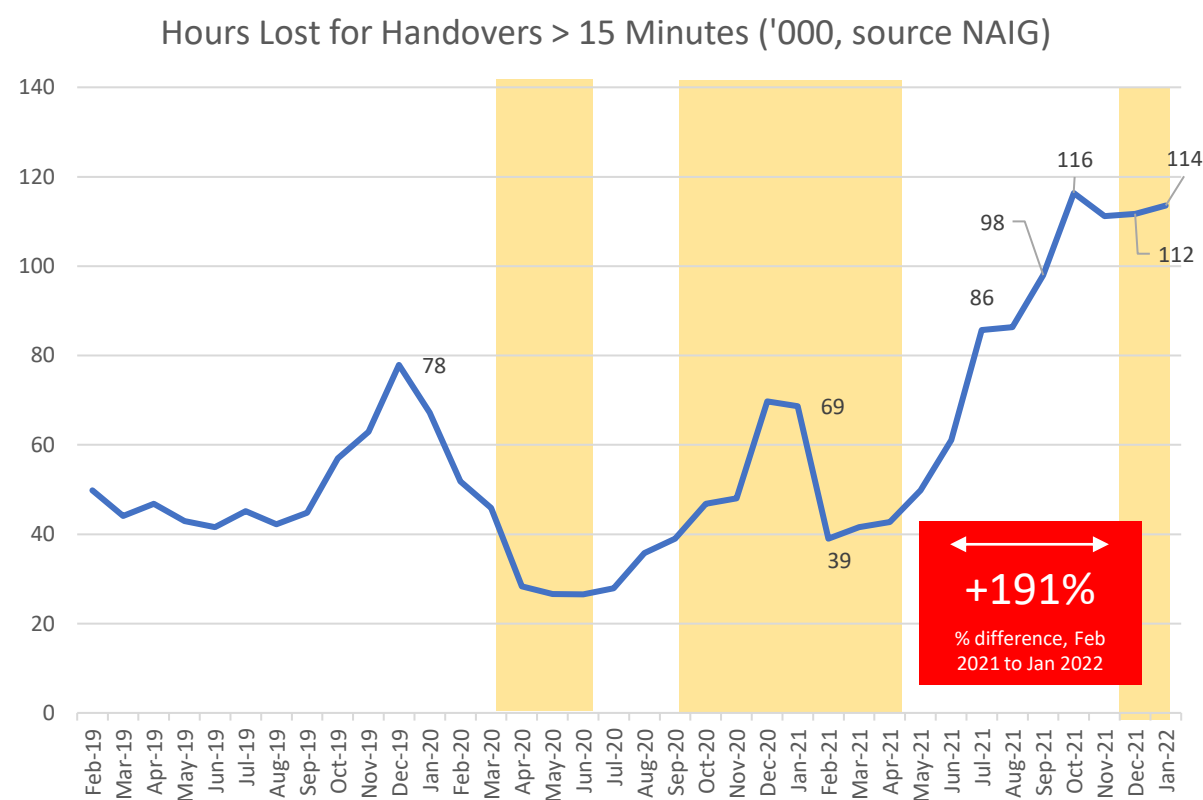
In January 2022, handovers taking longer than 15 minutes accounted for 59% of all handovers – but this was over 70% for LAS and EEAST. While the volume of >15 minute handover delays decreased by 6.5k between December and January, hours lost due to those handovers increased from 112k to 114k.

1. Delays over 15 Minutes



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

2. Hours lost for Handovers Over 15 Minutes

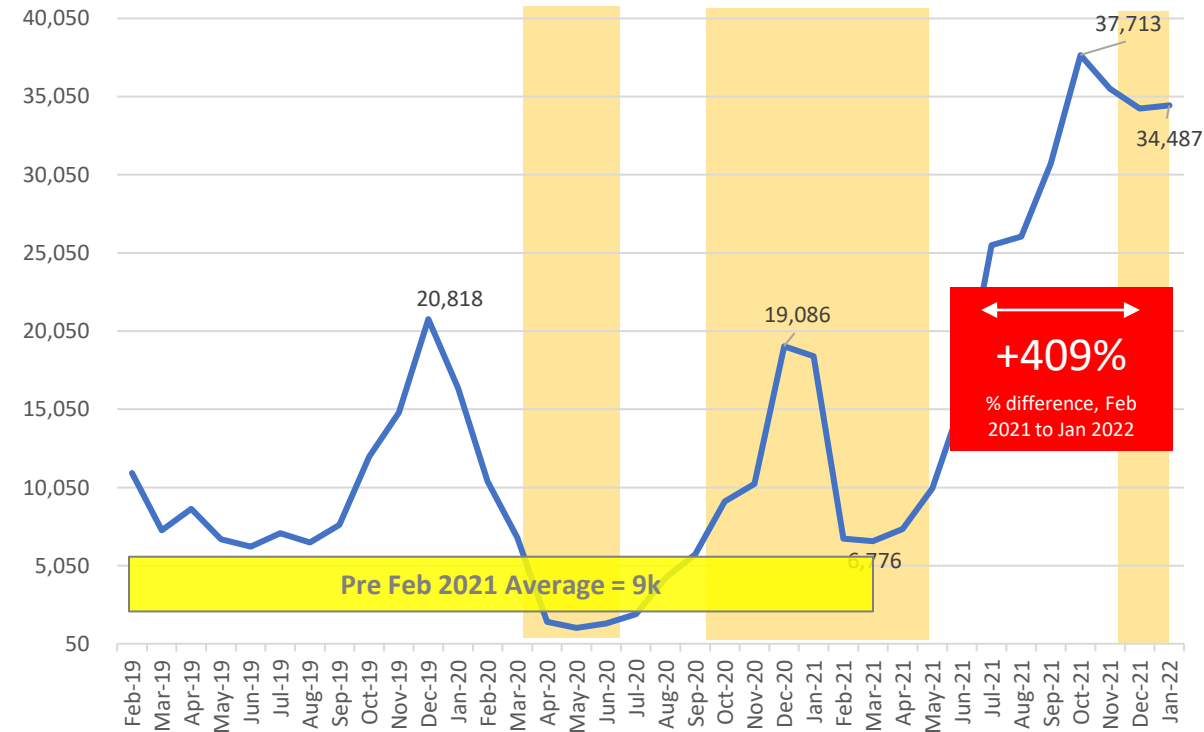


24. Handover Delays over 60 Minutes (source, NAIG)

There was an increase of 201 handovers taking longer than 60 minutes between December and January – taking the total to 34,487 in January. Hours lost also increased from 44k to 48k, and the longest individual handover increased from 20 hours (in December) to 21 hours.

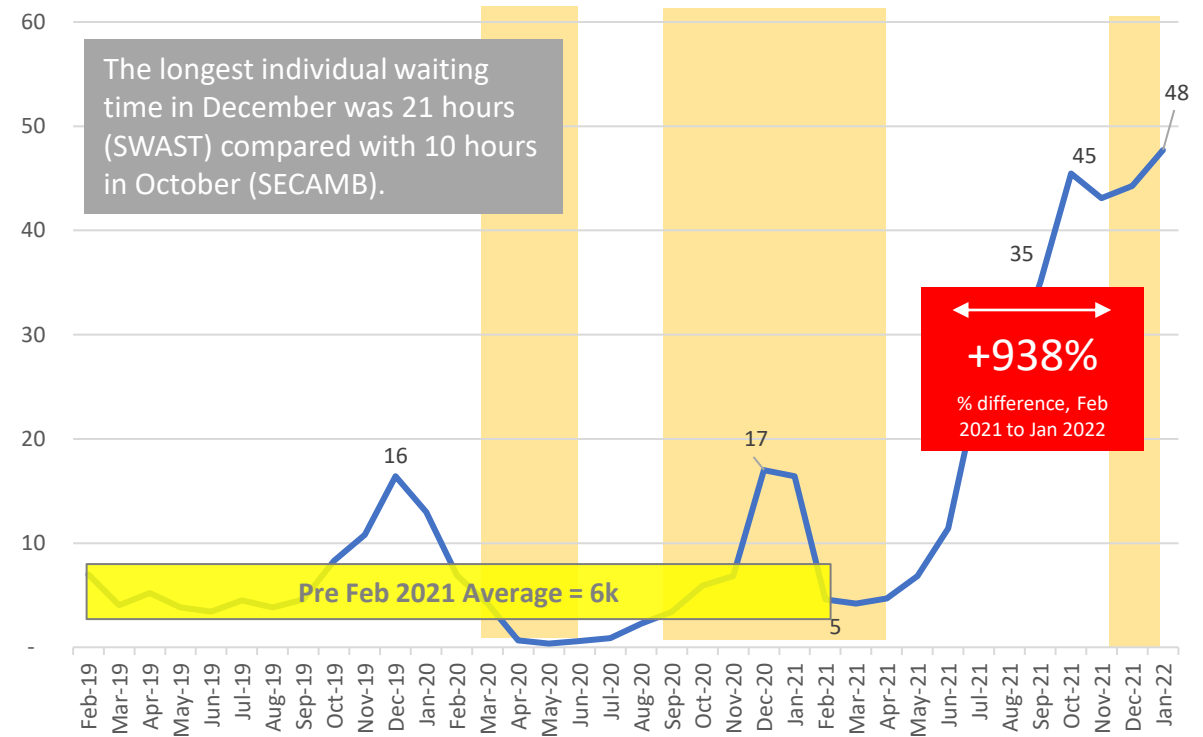
1. Delays over 60 Minutes

Volume of Handovers Over 60 Minutes (source NAIG)



2. Hours lost for Handovers Over 60 Minutes

Hours Lost for Handovers over 60 Minutes (source NAIG)



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

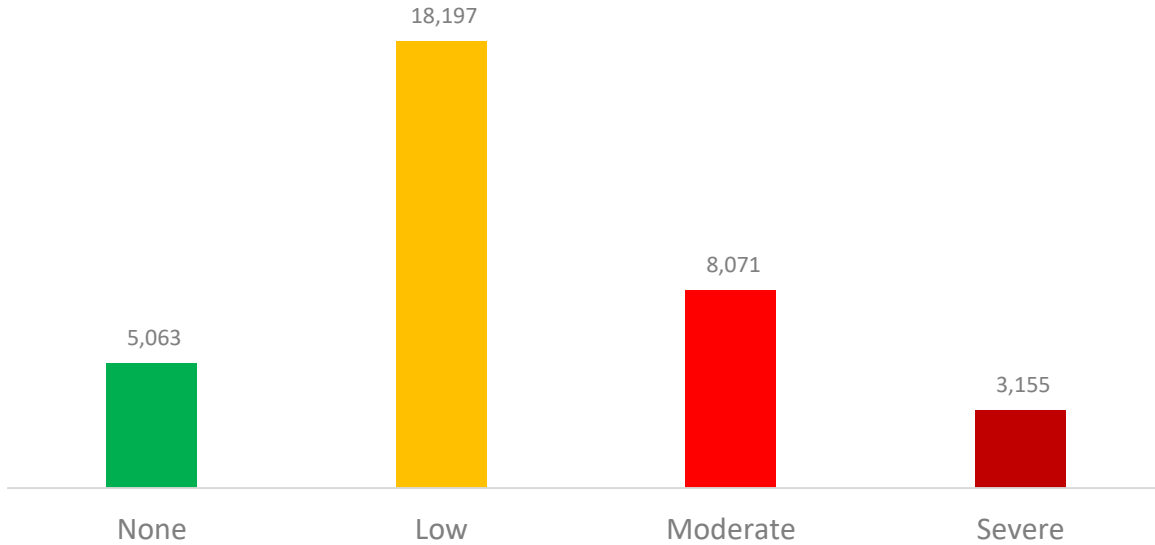


25. Delays over 60 Minutes and estimated harm (source, NAIG and [AACE](#))

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 January 2022, with over 3k of these experiencing severe harm.

1. Estimated number of patients experiencing potential harm: Jan 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)

