

Data Provision Notice

Patient Level Information and Costing Systems (PLICS)

Ambulance FY 2024/25 data

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Contents

Background	3
Purpose	3
Benefits	4
Legal basis for collection, analysis, publication and dissemination	5
Collection and analysis	5
Publication	5
Dissemination	6
Persons consulted	6
Scope of the collection	6
Form of the collection	7
Manner of the collection	7
Period of the collection	7
Data quality	8
Burden of the collection	8
Steps taken by NHS England to minimise the burden of collection	8
Assessed costs	8
Annex A Section 4: Ambulance Providers	8

Background

The Health and Social Care Act 2012 (the Act) gives [NHS England](#) statutory powers, under section 259(1)(a), to require data from health or social care bodies, or organisations that provide publicly funded health or adult social care in England, where it has been directed to establish an information system by the Secretary of State for Health and Social Care.

The data, as specified by NHS England in this published Data Provision Notice, is required to support a direction from the Secretary of State for Health and Social Care to NHS England. Therefore, organisations that are in scope of the notice are legally required, under section 259(5) of the Act, to provide the data in the form and manner specified below.

Purpose

The Costing Transformation Programme (CTP) was set up to implement PLICS across acute, mental health, ambulance and community providers.

Patient Level Information and Costing data is used to standardise the method of reporting cost information.

PLICS data enables NHS England to perform its pricing and licensing functions under the Health and Social Care Act 2012 (**the 2012 Act**) more effectively. The data is used to:

- Analytics:
 - develop analytical tools, metrics and reports to help providers improve their data quality, identify operational and clinical efficiencies, and review and challenge their patient-level cost data at provider, population, system and national level
 - supporting efficiency and quality of care improvement programmes and other operational productivity dashboards such as the Model Hospital, Model Mental Health, Model Community and Model Ambulance
 - produce and distribute patient-level data in our tools for use by NHS providers, e.g. national PLICS portal and PLICS data quality tool
 - support efficiency and quality of care improvement programmes, e.g. Getting It Right First Time (GIRFT), and operational productivity in NHS providers
 - support additional functionality in new releases of our range of tools, e.g. the PLICS portal
- Investment, pricing and pathway design
 - inform the existing payment models including the NHS payment scheme
 - inform and model new methods of pricing NHS services
 - inform new approaches and other changes to currency design
 - review investment decisions, e.g., for technology and staffing
- Effectiveness, efficiency, and quality
 - implement integrated care systems and organisations
 - support efficiency and quality of care improvement programmes
 - inform the relationship between provider and patient characteristics and cost
 - inform the relationship between provider characteristics, patient characteristics and cost
 - understand the cost of patient care during and post the COVID-19 pandemic.
- Improving costing
 - inform future cost collection design

- informing costing standards development
 - develop to the PLICS collection, including the impact assessment on mandating the submission of PLICS.

Benefits

Understanding how providers spend money is essential in tackling short-term deficits, supporting the development of new models of care and reducing the variation in resource utilisation.

The level of data collected in legacy aggregate collections were not granular enough to easily identify potential efficiency gains. Such data is limited in its ability to reflect the complexity of patient care and identify cost variation between individual patients. By implementing PLICS, a standardised method of reporting cost information at patient level, this can be rectified. This will be produced by patient-level information and costing systems (PLICS).

NHS England's Costing Transformation Programme (CTP) was established to implement PLICS across Acute, Mental Health, Ambulance and Community providers. The programme entails:

- introducing and implementing new standards for patient level costing
- developing and implementing one single national cost collection to replace current multiple collections
- establishing the minimum required standards for costing software and promoting its adoption; and
- driving and encouraging sector support to adopt Patient Level Costing methodology and technology.

This collection is being undertaken as part of that Programme and comprises data from 11 Ambulance providers as per Annex A Section 4 of the Requirements Specification for Patient Level Information and Costing Systems (PLICS) Mandatory Collections continued implementation and associated published Mandatory Request.

These documents are published on the NHS Digital website: <https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notices/mandatory-requests-from-nhs-improvement/patient-level-information-and-costing-systems-plics-mandatory-collections-continued-implementation-mandatory-request-information-system>

Additional benefits include that PLICS data may be released when appropriate to do so under Data Sharing Agreements by NHS England to organisations, including universities, where it can be used for research to better inform delivery of effective and efficient healthcare services in the future.

Legal basis for collection, analysis, publication and dissemination

As of 1 July 2022, Monitor (NHS Improvement) was abolished and all mandatory requests to NHS Digital from Monitor were to be treated as a direction from NHS England to NHS Digital under section 254 Health and Social Care Act 2012 (the 2012 Act). On 1 February 2023, NHS Digital was merged into NHS England. The statutory functions of NHS Digital transferred to NHS England under the Health and Social Care Information Centre (Transfer of Functions, Abolition and Transitional Provisions) Regulations 2023 (Transfer Regulations). Under these Transfer Regulations, all directions from either the Secretary of State for Health and Social Care or NHS England to NHS Digital are now treated as directions from the Secretary of State for Health and Social Care to NHS England.

Therefore, the acceptance of the direction (formerly a mandatory request) is the legal basis to perform the PLICS collection.

Collection and analysis

NHS England is directed under section 254 of the Health and Social Care Act 2012 (previously deemed as a mandatory request under section 255 of the Health and Social Care Act 2012); to establish and operate a system for the collection and analysis of the information specified for this service. A copy of the mandatory request (now Direction) and accompanying requirements specification, which sets out the legal basis under which this request is made, is published on the NHS England website: <https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notice/mandatory-requests-from-nhs-improvement/patient-level-information-and-costing-systems-plics-mandatory-collections-continued-implementation-mandatory-request-information-system>

This information is required by NHS England under section 259(1)(a) of the Health and Social Care Act 2012.

In line with section 259(5) of the Act, all organisations in scope, in England, must comply with the requirement and provide information to NHS England in the form, manner and period specified in this Data Provision Notice.

This Notice is issued in accordance with the procedure published as part of an NHS England duty under section 259(8).

Publication

In accordance with section 260(1) of the 2012 Act, NHS England has a legal duty to publish all information it collects by complying with a request unless it falls within section 260(2) of the 2012 Act.

It is intended that the information from the data collected will be made widely available through publication to commissioners, providers, clinicians, service users and the public (to inform choice). In addition, NHS England may also be required to undertake ad-hoc analyses utilising the data, to answer ad-hoc analytical requests, such as parliamentary questions.

Dissemination

Regular Dissemination/Sharing

It is also intended that information from the data collected will be made available through the provision of data extracts (including linked data) to other organisations, subject to relevant information governance approvals please see DARS section below.

Data Access Request Service (DARS)

NHS England disseminates data via the [Data Access Request Service \(DARS\)](#). This process verifies that there is an appropriate legal basis for an applicant to access the requested data and that appropriate safeguards are in place to ensure that the applicant will store and handle data safely and securely.

Requests for data from external bodies for analysis and/or publication purposes will be subject to the controls and approvals in place within NHS England's [Data Access Environment](#) and [Data Access Request Service](#)

Under section 261 of the Act, NHS England may disseminate the information it obtains by complying with the section 255 mandatory request to an organisation that has a legal basis for receiving the information. Dissemination of data by NHS England is managed by the Data Access Request Service (DARS)

Persons consulted

Upon receipt of a request to establish a system to collect Patient Level Information and Costing Systems (PLICS) Ambulance, NHS England has, as required under section 258 of the Health and Social Care Act 2012, consulted with the following persons:

- NHS England
- Providers of Ambulance services in accordance with Annex A, Section 4, of this document.
- Representatives of other stakeholders including, Arm's Length Bodies (ALBs).

There have been no changes to the scope of the ambulance element of PLICS in 2025, other than to uplift for the new financial year.

The Data Alliance Partnership Board (DAPB) has been established as part of a system-wide information and technology governance model. The DAPB acts with delegated authority from the Secretary of State as the main governance route through which all data collections and standards requirements are agreed, and priorities assigned.

DAPB also noted that the changes are not as significant this year as they have been in previous years, and so the level of consultation is reflected in that, and is deemed appropriate.

Scope of the collection

Under section 259(1)(a) of the Health and Social Care Act 2012, this Notice is served in accordance with the procedure published as part of the NHS England duty under section 259(8) on the following persons:

- All trusts identified in Annex A Section 4 of the published Requirements Specification for Patient Level Information and Costing Systems (PLICS) Mandatory Collections continued implementation and associated Mandatory Request. These documents are

published on the NHS Digital website: <https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notice/mandatory-requests-from-nhs-improvement/patient-level-information-and-costing-systems-plics-mandatory-collections-continued-implementation-mandatory-request-information-system>

The organisation specified in the above Scope are requested to comply with the Form, Manner and Period requirements below.

Further information on this PLICS collection is contained within the Approved Costing Guidance 2024 published by NHS England. [NHS England » Approved costing guidance](#)

Form of the collection

The data to be collected can be found in Annex A Section 3 of the published Requirements Specification for Patient Level Information and Costing Systems (PLICS) Mandatory Collections continued implementation and associated Mandatory Request.

The Ambulance Extract Specification for collection is published on the NHS England website: [NHS England » Ambulance extract specification 2025](#)

Submissions into NHS England are preferred in XML but .csv format is also acceptable.

The format and structure of the XML files are detailed in the Ambulance Schema which is published on the NHS England website: [NHS England » Ambulance schema 2025](#)

Manner of the collection

Providers submitting data will transfer it using the NHS England [Secure Electronic File Transfer \(SEFT\)](#) platform.

This service is currently used to submit a range of information. The platform is a web-based solution that does not require the installation of any software, apart from the use of a compatible web browser.

The collection will also be supported by a range of technical and business controls, including validation of data submitted against the XML Schema and notification of any Data Quality Warnings.

Period of the collection

The data will be collected annually. The submission window for 24/25 will run from 9 June to 1 August 2025.

This is a single annual collection exercise from each trust at Annex A Section 4 of the Requirements Specification for Patient Level Information and Costing Systems (PLICS) Mandatory Collections continued implementation.

Data quality

Data quality will be supported by a range of technical and business controls at NHS England, including validation of data submitted against the XML Schema.

The Approved Costing Guidance 2025 published on the NHS England website: [NHS England » Approved costing guidance](#) contains further guidance for Trusts prior to and during data submission.

Burden of the collection

Steps taken by NHS England to minimise the burden of collection

NHS England has a statutory duty under section 253(2) of the Act to seek to minimise the burden it imposes on others. In seeking to meet these obligations in relation to this collection, NHS England has:

- sought to minimise the burden on general practices by using existing data already submitted to NHS England via activity datasets, rather than requesting information in another format which may be more burdensome to process.

In addition, in support of its obligation under 265(3) of the Act, NHS England has an assessment process to validate and challenge the level of burden incurred through introducing new information standards, collections and extractions.

This process is carried out by the Data Standards Assurance Service (DSAS) which assures burden assessment evidence as part of the overarching Data Alliance Partnership Board (DAPB) approval process. The DAPB, acting under authority of the Secretary of State, oversees the assurance, approval and publication of information standards and data collections for the health and social care system in England.

Assessed costs

The associated burden of the data collection is:

Burden on providers	£820k	The total estimated additional cost for data providers of processing and submitting this annual return to NHS England
Total Burden	£820k	No other costs have been identified for this data collection, so the total stands at £820k.

Annex A Section 4: Ambulance Providers

Trust ODS Code	Trust Name
R1F	ISLE OF WIGHT NHS TRUST

RRU	LONDON AMBULANCE SERVICE NHS TRUST
RX6	NORTH EAST AMBULANCE SERVICE NHS FOUNDATION TRUST
RX7	NORTH WEST AMBULANCE SERVICE NHS TRUST
RX8	YORKSHIRE AMBULANCE SERVICE NHS TRUST
RX9	EAST MIDLANDS AMBULANCE SERVICE NHS TRUST
RYA	WEST MIDLANDS AMBULANCE SERVICE NHS FOUNDATION TRUST
RYC	EAST OF ENGLAND AMBULANCE SERVICE NHS TRUST
RYD	SOUTH EAST COAST AMBULANCE SERVICE NHS FOUNDATION TRUST
RYE	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST
RYF	SOUTH WESTERN AMBULANCE SERVICE NHS FOUNDATION TRUST