

Syndromic Surveillance Summary:

Field Service, National Infection Service, Real-time Syndromic Surveillance.

23 June 2021.

Field Service | From local to global: combining expertise in epidemiology and microbiology to protect the population from public health threats.

Contact: ReSST Year: 2021 Week: 24

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 14 June to 20 June 2021.

During week 24, COVID-19-like ED attendances increased, particularly in adults aged 15-44 years and in the North West. On 17 June, spikes in difficulty breathing indicators were reported across a number of syndromic systems, potentially linked with thunderstorms occurring across parts of England at that time; indicators have since returned to expected levels.

Remote Health Advice:

Access bulletin

There was a spike in difficulty breathing calls and online assessments reported on 17 June, with increases in calls noted in the 5-14 and 15-44 years age groups (figures 6, 6a & 16). These increases are potentially linked with thunderstorms occurring across parts of England on 17 June.

During week 24, there were small increases in NHS 111 calls for diarrhoea and vomiting (figures 9 & 10).

GP In Hours:

Access bulletin

During week 24, COVID-19-like consultations decreased further (figure 1). Consultations for both upper and lower respiratory tract infections continued to decrease in children aged under 5 years (figures 2a & 6a). Consultations for conjunctivitis and allergic rhinitis remained high during week 24 (figures 12 and 21) but within seasonally expected levels and in line with seasonal grass pollen activity. Heat/sun stroke also remained above baseline (figure 22).

GP Out of Hours:

Access bulletin

During week 24, GP out of hours contacts for difficulty breathing increased, with a spike in activity recorded on 17 June, notably in the 5-14 and 15-44 years age groups (figures 5 and 5a). These increases potentially coincided with thunderstorms across parts of England on 17 June. Gastroenteritis increased above expected levels (figure 7). Vomiting also increased, particularly in the 1-4 years age group (figure 9 and 9a).

Emergency Department:

Access bulletin

During week 24, COVID-19-like emergency department attendances continued to increase, most notably in the 15-44 years age group and in the North West (figures 3a-b).

There was a large spike in asthma attendances on 17 June, particularly in age groups 5-64 years (figures 9 & 9a). These increases are potentially linked with thunderstorms occurring across parts of England at that time.

Gastroenteritis attendances continued to increase and are above both the current baseline and pre-COVID levels (figure 11).

Ambulance:

Access bulletin.

COVID-19-like calls increased slightly in week 24 (figure 3). Breathing problems stabilised in week 24 but there was a spike in calls noted on 17 June (figure 2) potentially linked with thunderstorms across parts of England at that time.



PHE Syndromic Surveillance Summary

23 June 2021

- Key messages are provided from each individual system.
- The different PHE syndromic surveillance systems access data from different areas of the national health care system.
- Each syndromic surveillance system is able to monitor a different selection of syndromic indicators based upon a different case mix of patients.
- Access to the full version of each syndromic surveillance bulletin is available through the PHE
 Syndromic Surveillance website found at: (https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses); reports are made available on Thursday afternoons.

Remote Health Advice Syndromic Surveillance System:

A remote health advice syndromic surveillance system that monitors syndromic calls from remote health advice services e.g. NHS 111 each day across England.

GP In-Hours Syndromic Surveillance System:

A large general practitioner surveillance system monitoring daily consultations for a range of clinical syndromic indicators across England.

GP Out-of-Hours Syndromic Surveillance System (GPOOHS):

A syndromic surveillance system monitoring daily GP out-of hours activity and unscheduled care across England using a range of clinical syndromic indicators.

Emergency Department Syndromic Surveillance System (EDSSS):

A national ED network across England monitoring daily attendances and presenting symptoms/diagnoses.

National Ambulance Syndromic Surveillance System (NASSS):

The national ambulance syndromic surveillance system (NASSS) monitors daily calls made by persons to an ambulance trust. All 10 ambulance trusts in England provide data.

We thank and acknowledge the contribution of all data providers including:

- NHS 111 and NHS Digital.
- TPP, ResearchOne and participating SystmOne GP practices.
- Advanced Health & Care and the participating OOH service providers.
- Participating EDSSS emergency departments.
- Royal College of Emergency Medicine.
- North East, North West, Yorkshire, East Midlands, West Midlands, East of England, London, South East Coast, South Central, and South Western NHS Ambulance Trusts and The Association of Ambulance Chief Executives.

PHE Real-time Syndromic Surveillance Team.

Public Health England, 1st Floor, 5 St Philips Place, Birmingham, B3 2PW. **Tel:** 0344 225 3560 > Option 4 > Option 2. **Web:** https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses