

Syndromic Surveillance Summary:

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

31 December 2019.

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

Contact ReSST

Year: 2019 Week: 52

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 23 December to 29 December 2019.

During week 52, syndromic indicators associated with seasonal influenza remained elevated at medium intensity levels.

Remote Health Advice:

During week 52, NHS 111 cold/flu calls remained stable at medium intensity levels (figures 2 & 2a). Calls decreased in children aged 5-14 years but increased in adults (figure 2c).

Access bulletin.

GP In Hours:

During week 52, national GP consultations for influenza-like illness (ILI) increased and are at medium intensity levels (figure 2c). Other respiratory indicators have also increased in week 52 (figures 3, 5, 6 & 10).

Access bulletin.

GP Out of Hours:

GP out-of-hours contacts for influenza-like illness remained stable at medium intensity levels during week 52 (figure 3a). Bronchitis/bronchiolitis contacts in children aged <1 year continued to decrease during week 52 (figures 4 & 4a).

Access bulletin.

Emergency Department:

During week 52 there were further increases in ED attendances for influenza-like-illness, which remain highest in children aged 1-4 and 5-14 years (figures 7 & 7a).

Access bulletin.

Ambulance:

During week 52 breathing problems remained at elevated levels (figure 2), in line with seasonal influenza and respiratory syncytial virus activity.

Access bulletin.



PHE Syndromic Surveillance Summary

31 December 2019

- · 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.
- QSurveillance[®]; University of Oxford; EMIS/EMIS practices; ClinRisk®.
- 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.

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