Public Health England

Remote Health Advice

Syndromic Surveillance System: England

01 June 2020 Year: 2020 Week: 22

In This Issue:

Syndromic indicators at a glance

Data summary:

1: Total calls

The total number of syndromic calls recorded each day by NHS 111.

Key messages

Data to: 31 May 2020

During week 22, NHS 111 'potential COVID-19' telephone calls and completed web assessments decreased nationally and across all age groups and PHE Centres (figures 2a-c & 3a-c).

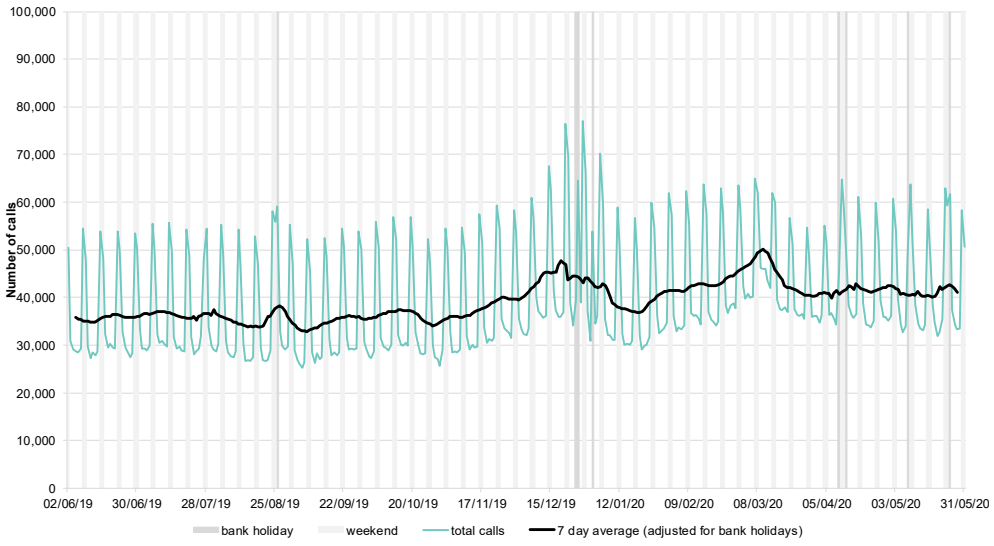
Calls for eye problems, heat/sun impact and insect bites increased in line with the recent warm weather (figures 11-13).

Please see notes and caveats section for information about the 'potential COVID-19' NHS 111 syndromic indicators including important caveats around the interpretation of this indicator.

Indicator	Trend*	Level
'Potential COVID-19' calls	decreasing	-
'Potential COVID-19' online assessments	decreasing	-
Cold/flu	no trend	similar to baseline levels
Fever	increasing	below baseline levels
Cough	no trend	below baseline levels
Difficulty breathing	no trend	below baseline levels
Sore throat	increasing	below baseline levels
Diarrhoea	increasing	below baseline levels
Vomiting	increasing	below baseline levels
Eye problems	increasing	similar to baseline levels
Heat/sun impact	increasing	above baseline levels
Insect bites	increasing	above baseline levels

* Due to changes in data processing since 13th March 2020, trends should be interpreted with caution.

Year	Week	Total calls
2020	22	309,317



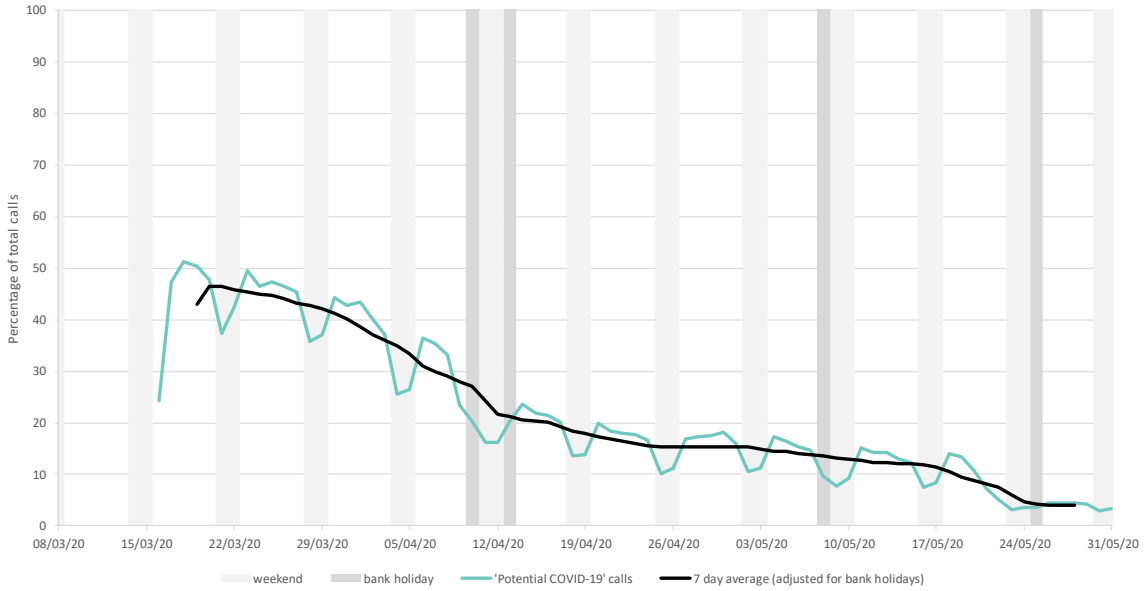
Public Health England

Remote Health Advice

01 June 2020 **Year: 2020** **Week: 22**

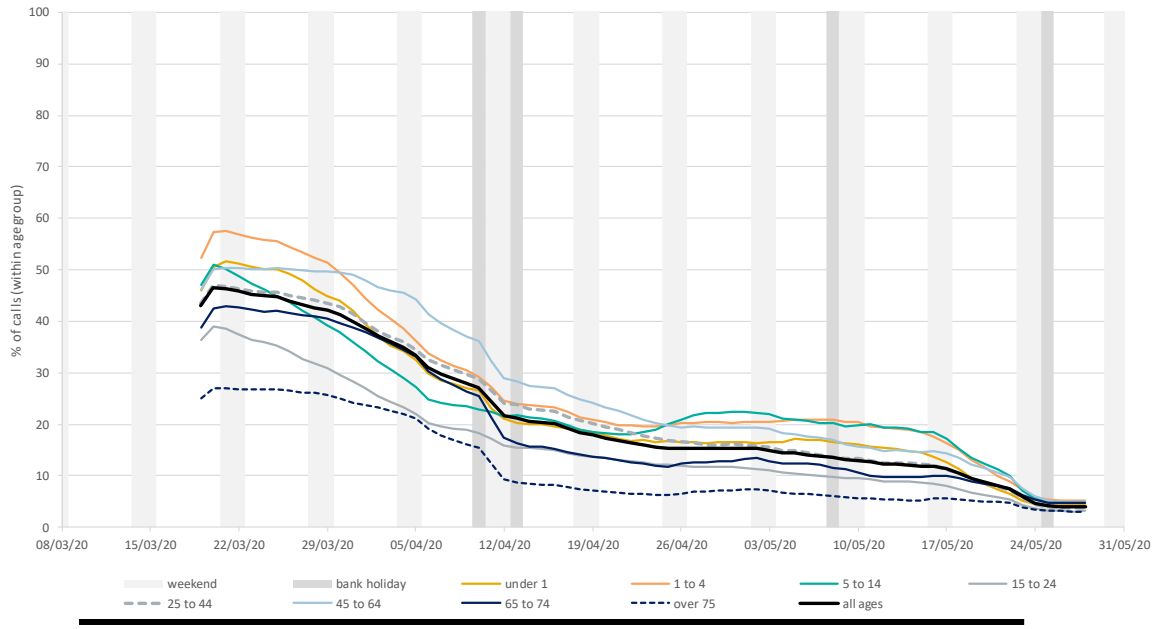
2a: 'Potential COVID-19' calls

Daily calls, as a percentage of all calls (and 7-day moving average*).



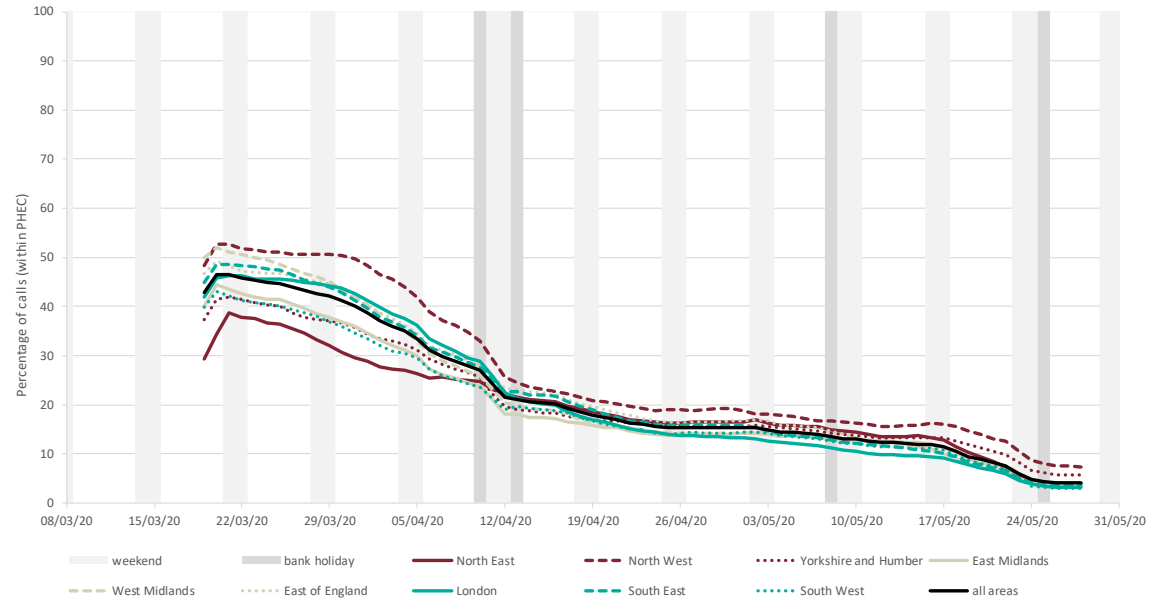
2b: 'Potential COVID-19' calls by age group

Daily calls by age group (as a percentage of total calls within each age group, shown as a 7-day moving average*).



2c: 'Potential COVID-19' calls by PHE Centre

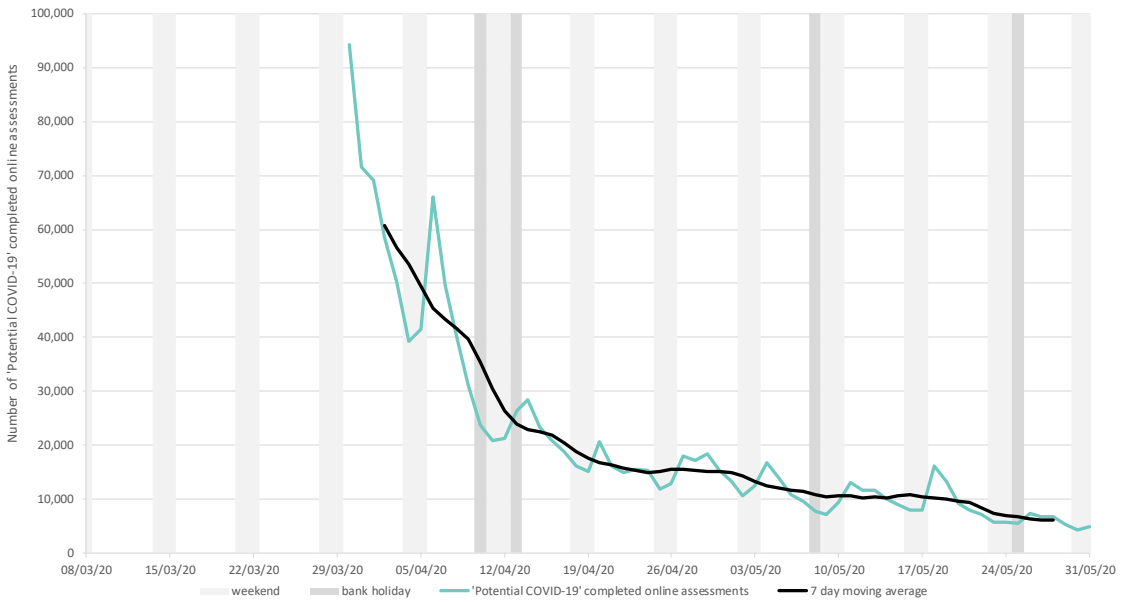
Daily calls, by PHE Centre (as a percentage of total calls within each PHEC, shown as a 7day moving average*).



*7-day moving average adjusted for bank holidays.

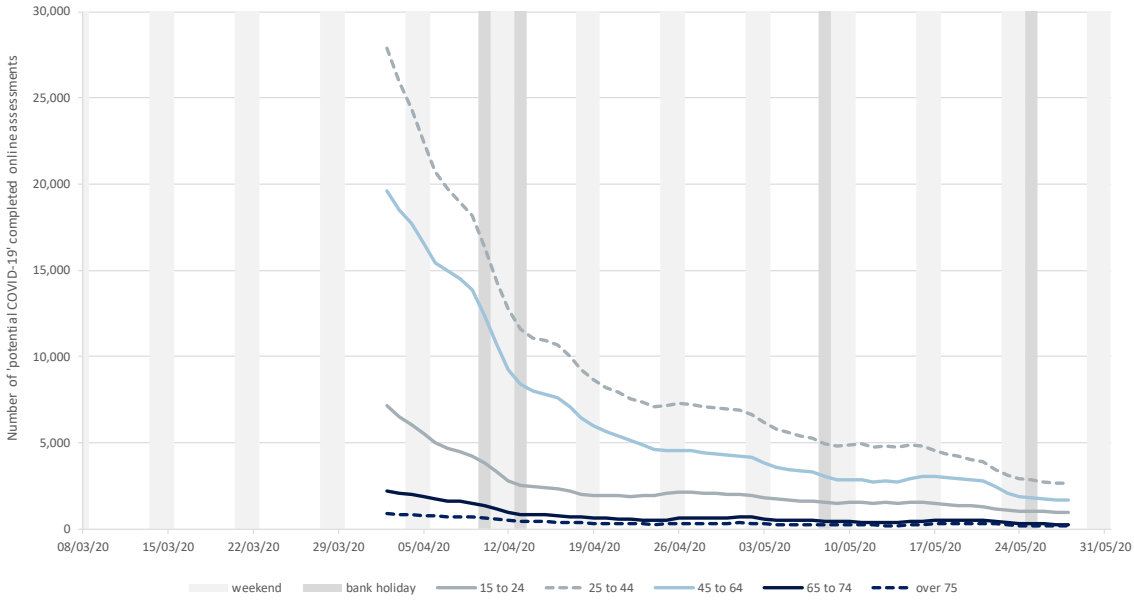
3a: 'Potential COVID-19' completed online assessments

Number of completed NHS 111 Online assessments which have a 'potential COVID -19' final disposition (and 7-day moving average*).



3b: 'Potential COVID-19' completed online assessments by age group

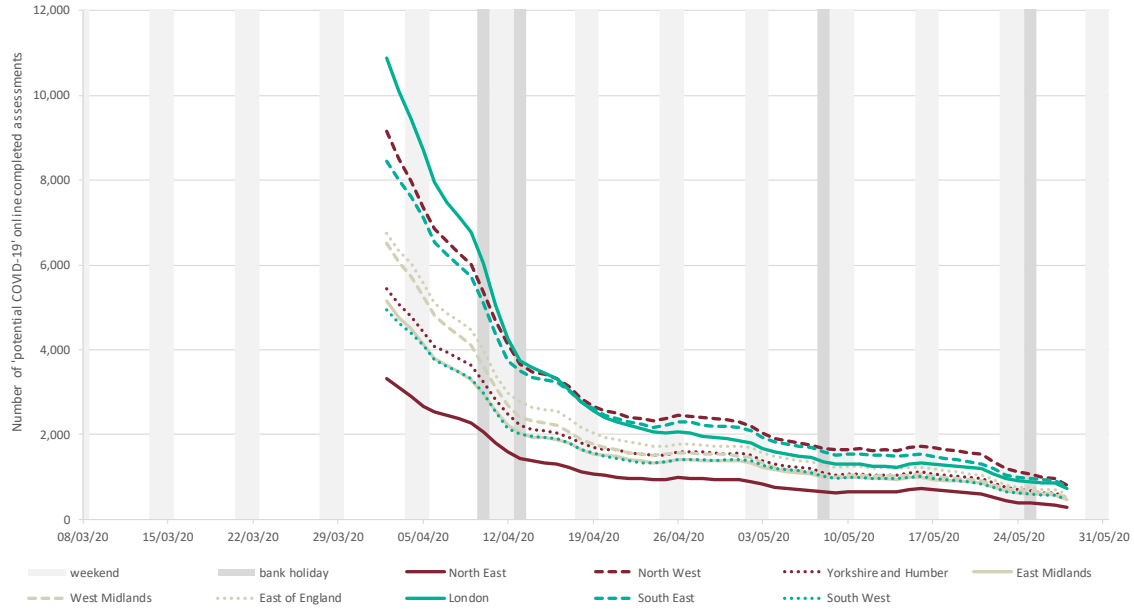
Number of completed NHS 111 Online assessments which have a 'potential COVID -19' final disposition, by age group (as a percentage of total assessments within each age group) for ages 15 years and over, shown as a 7-day moving average*.



3c: 'Potential COVID-19' completed online assessments by PHE Centre

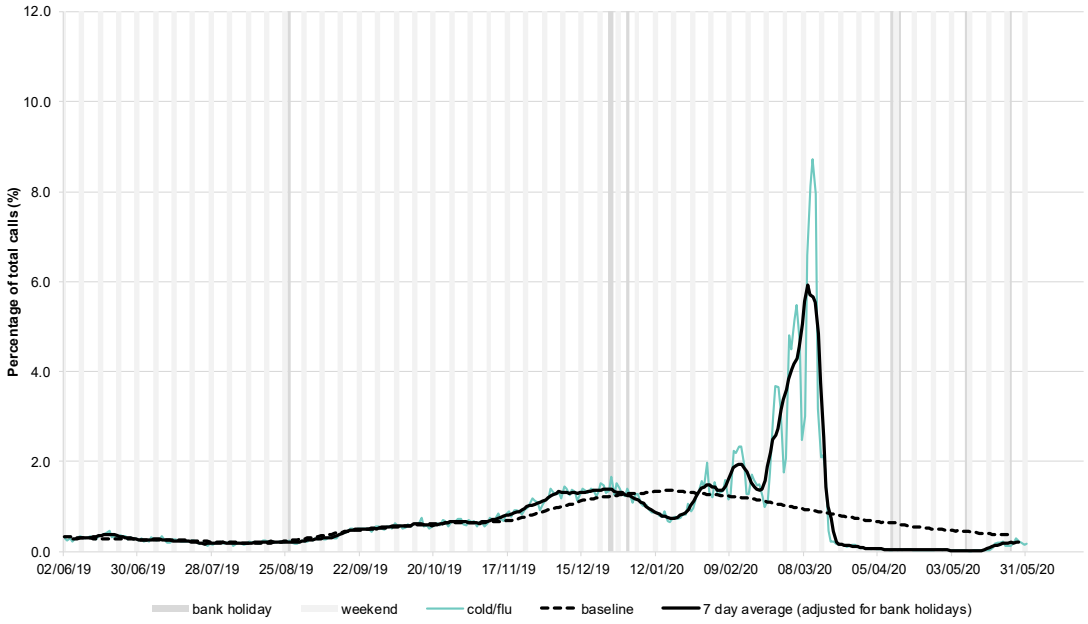
Number of completed NHS 111 Online assessments which have a 'potential COVID -19' final disposition, by PHE Centre (as a percentage of total assessments within each PHEC, shown as a 7-day moving average*).

*7-day moving average adjusted for bank holidays.



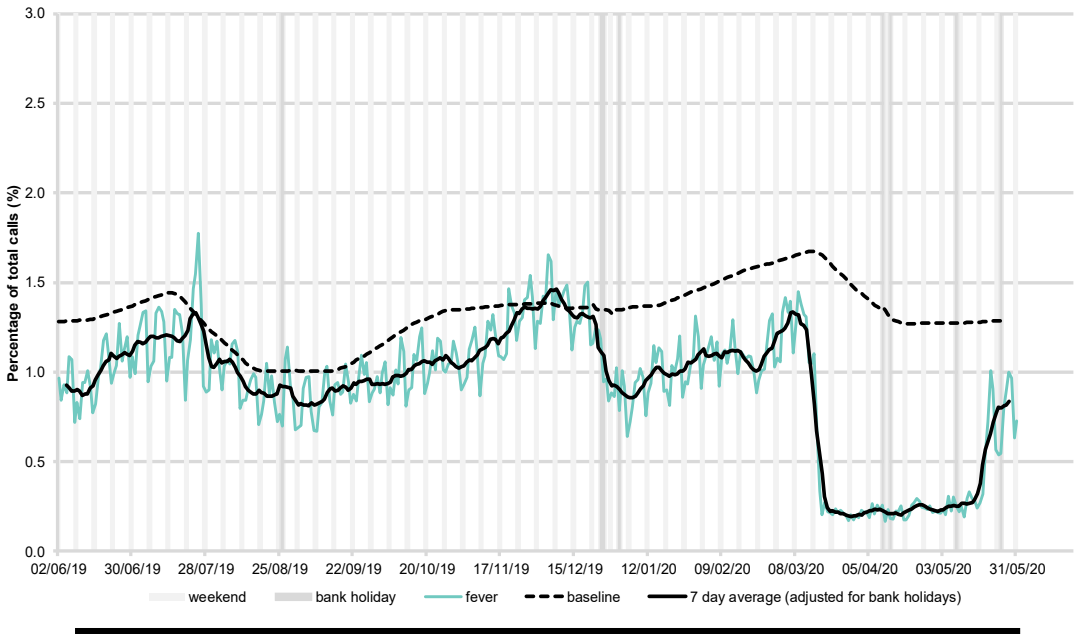
4: Cold/flu

Daily 'cold/flu' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



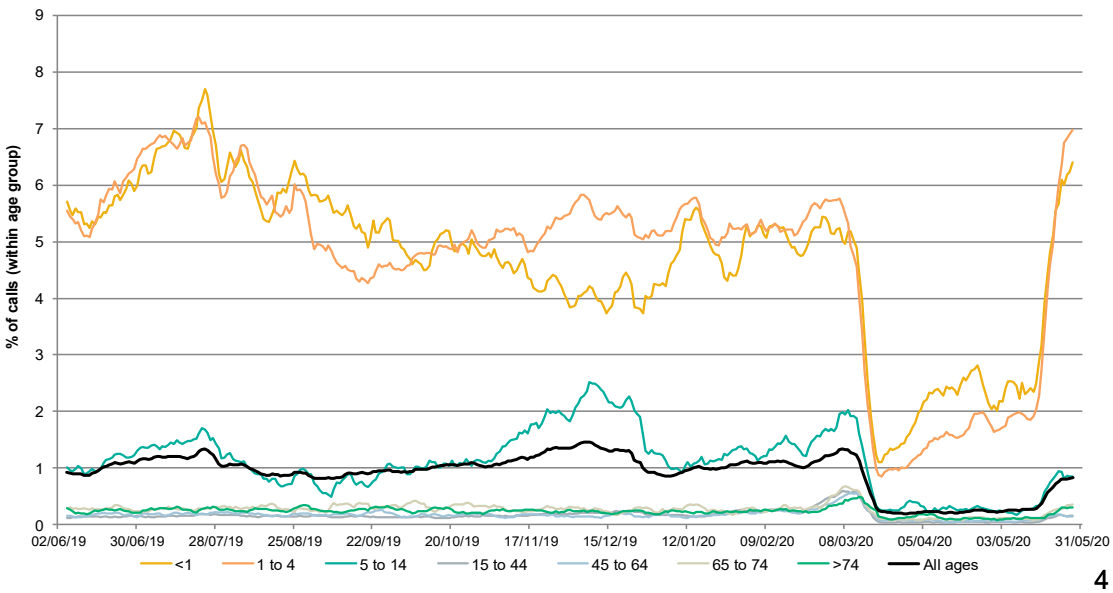
5: Fever

Daily 'fever' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



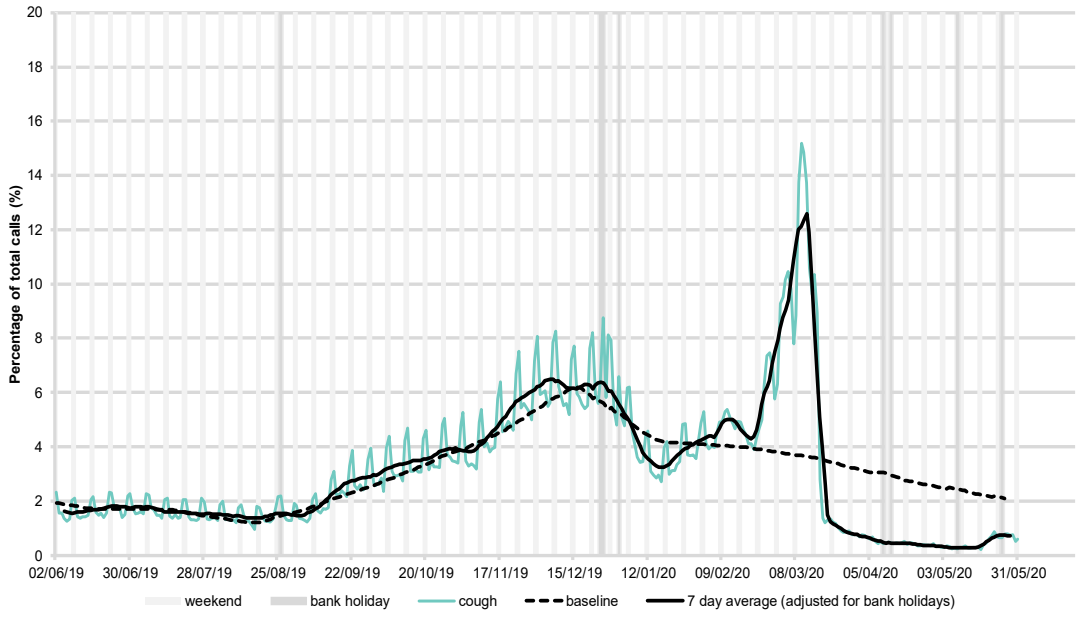
5a: Fever calls by age group

Fever calls as a percentage of total calls within each age group, shown as a 7 day moving average adjusted for bank holidays.



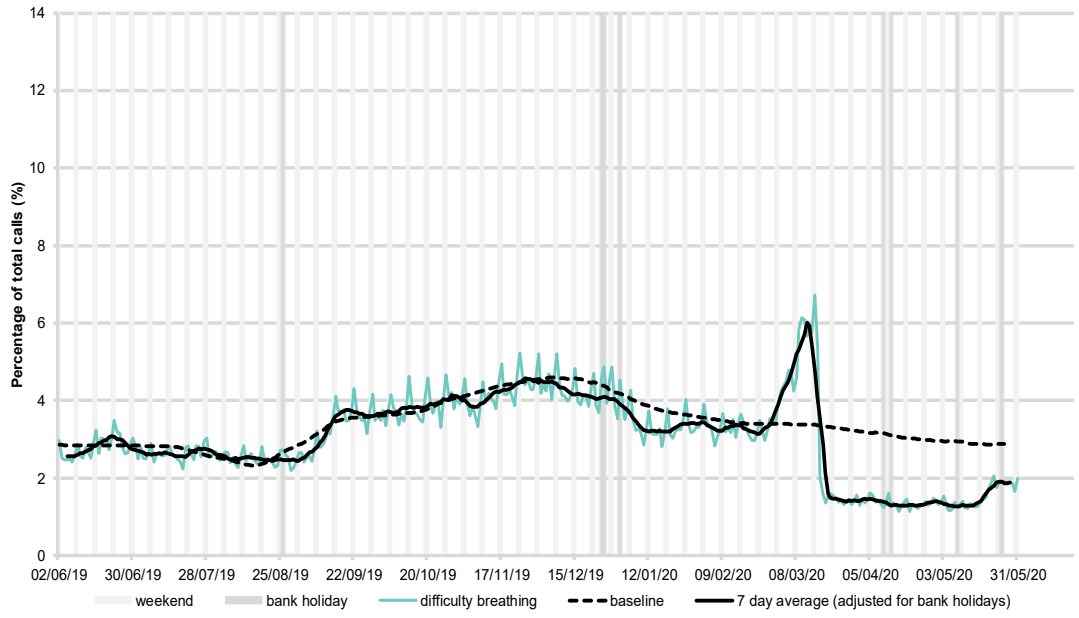
6: Cough

Daily 'cough' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



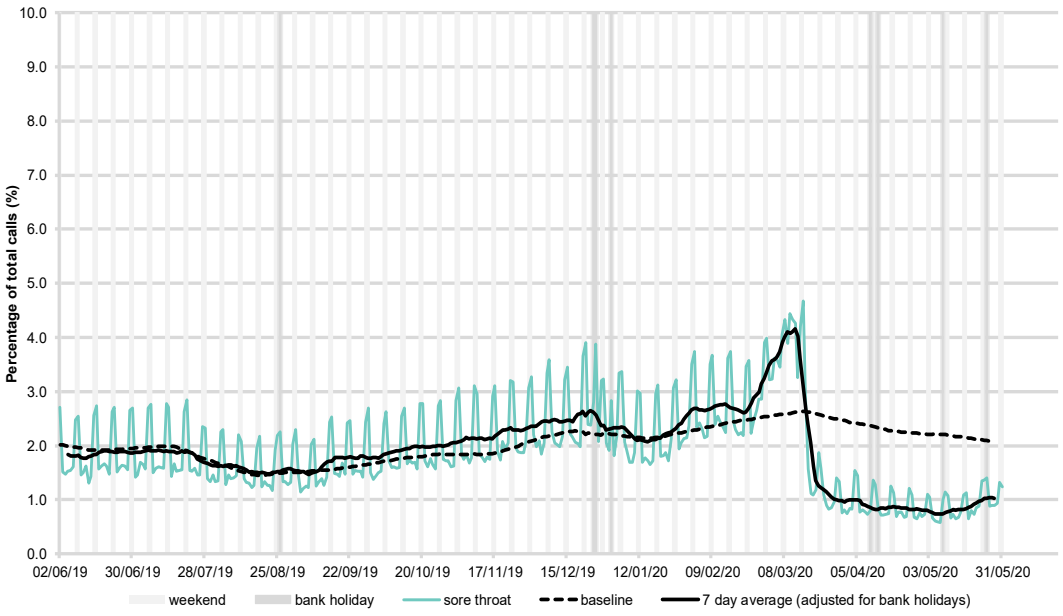
7: Difficulty breathing

Daily 'difficulty breathing' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



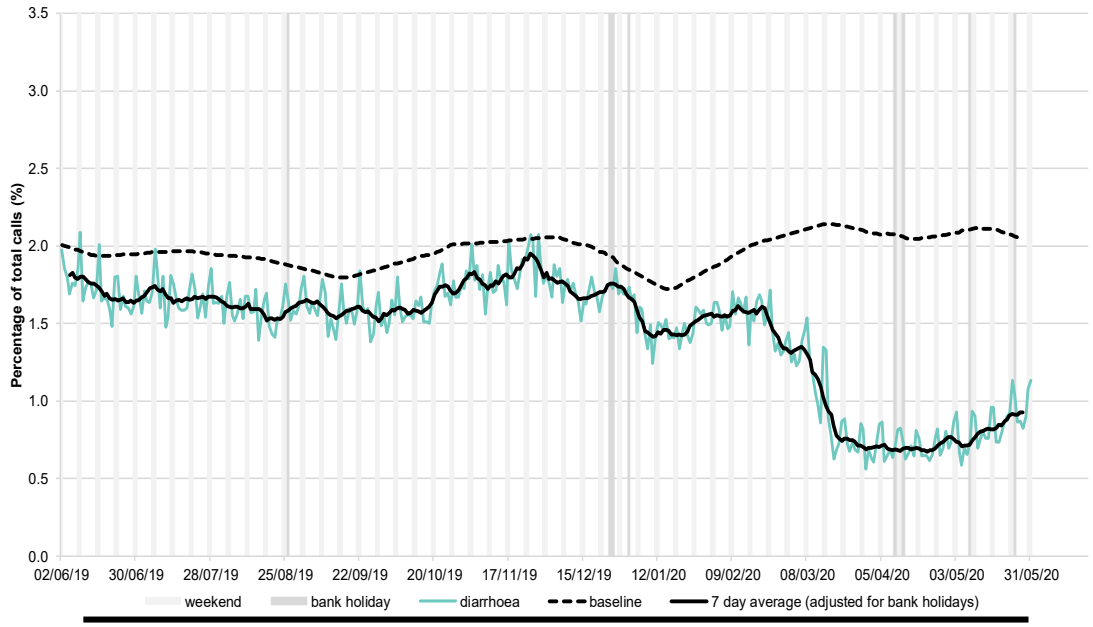
8: Sore throat

Daily 'sore throat' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



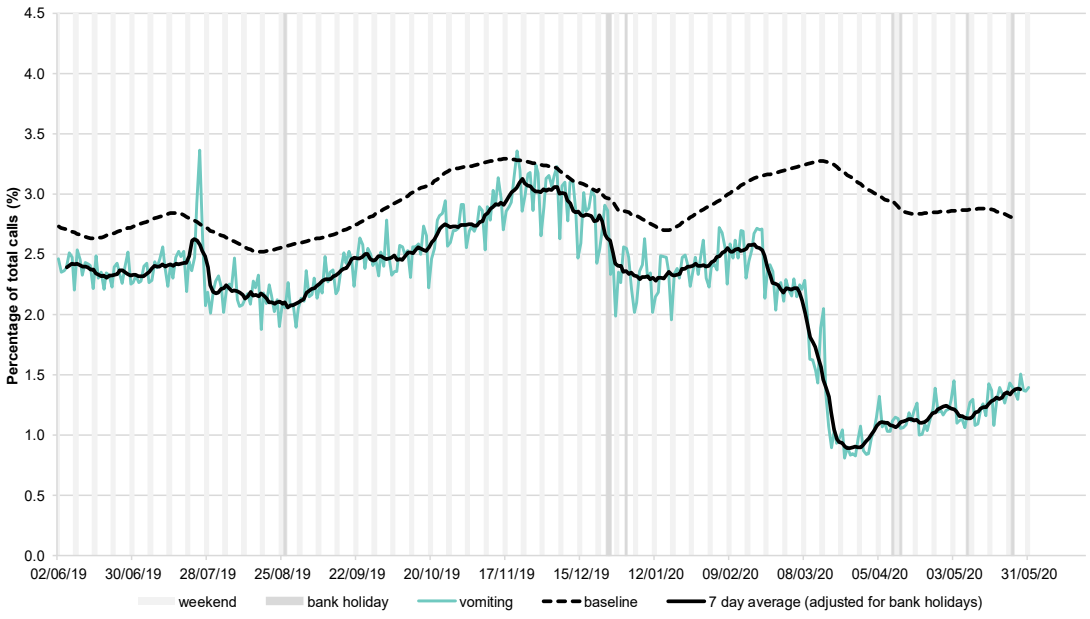
9. Diarrhoea

Daily 'diarrhoea' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



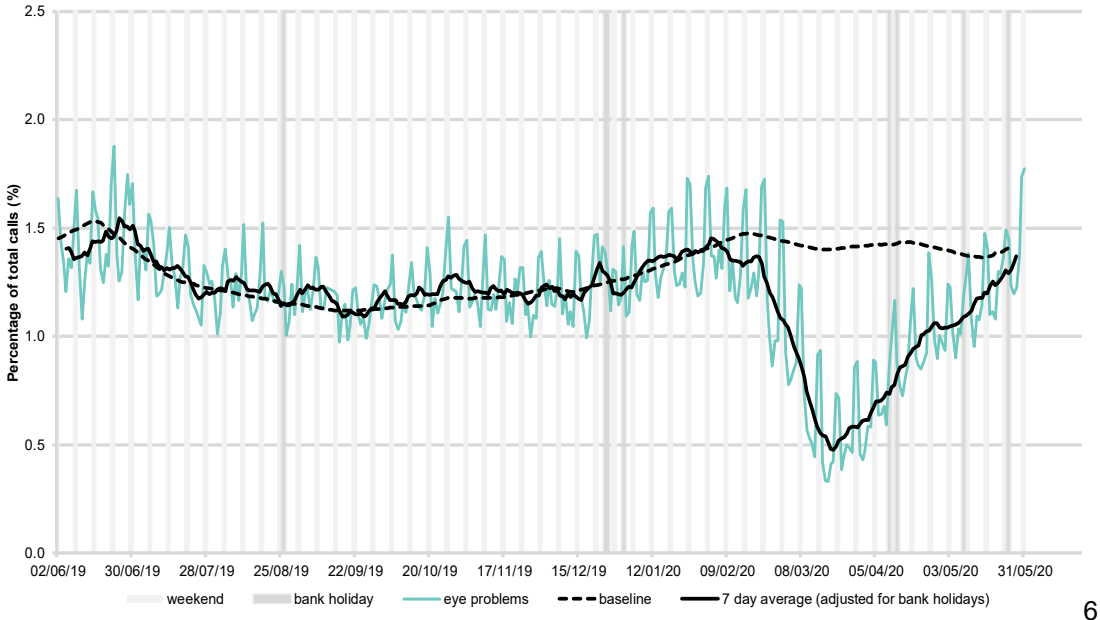
10: Vomiting calls

Daily 'vomiting' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



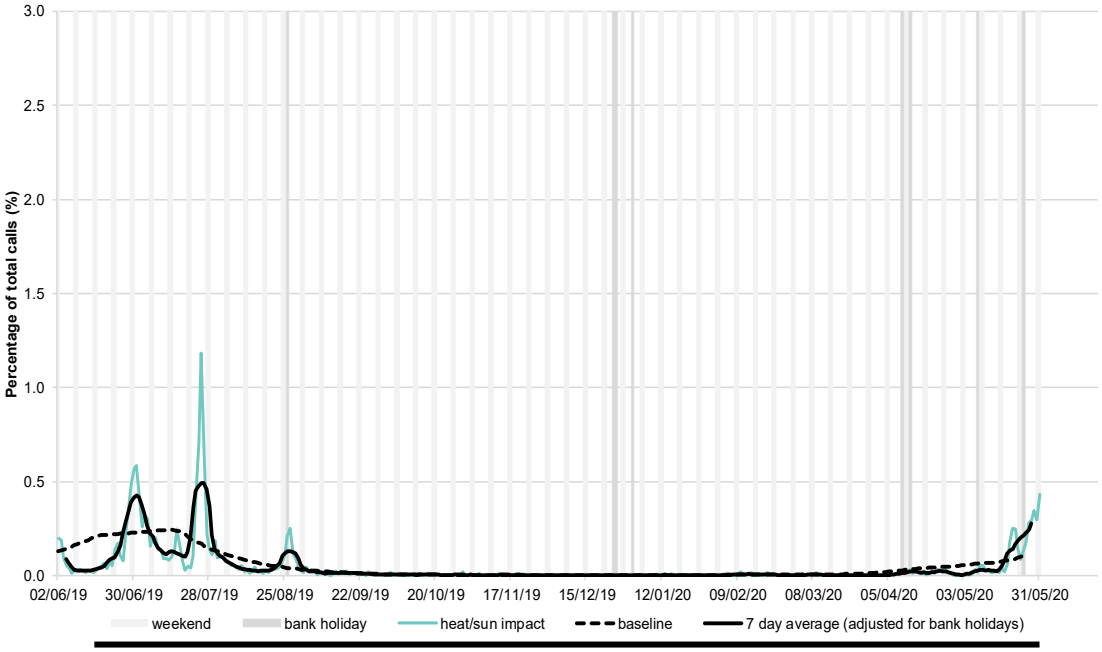
11: Eye problems

Daily 'eye problems' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



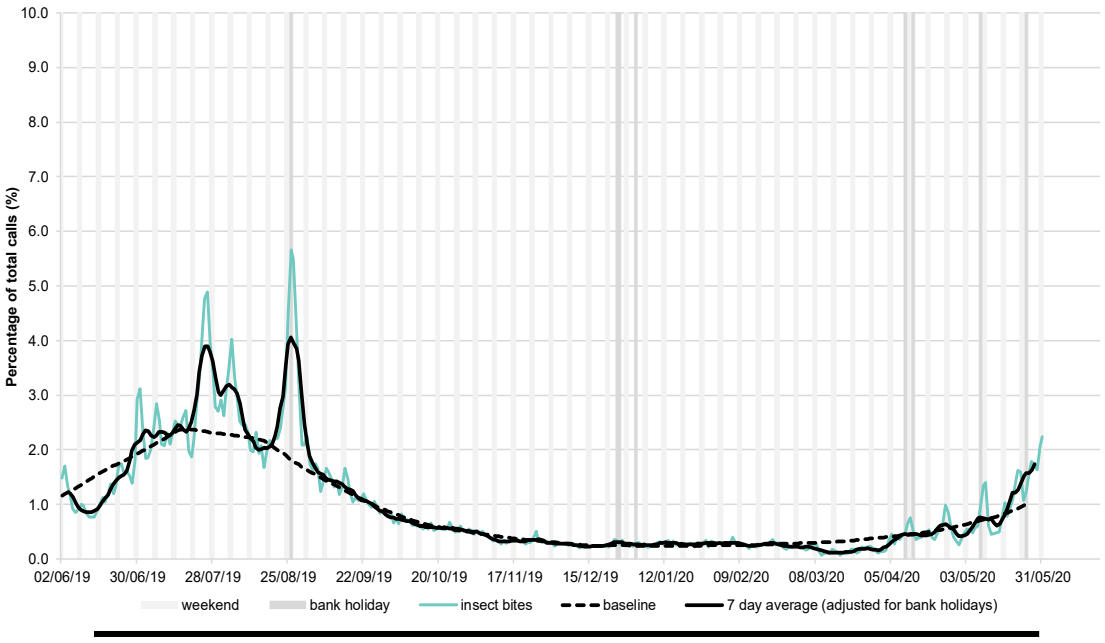
12: Heat/sun impact calls

'Heat/sun impact' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



13 Insect bites calls

'Insect bites' calls as a percentage of total calls. Baselines are constructed from historical data since 2013.



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Introduction to charts and caveats:

NHS 111 'potential COVID-19' call data

- **Please note** that the NHS 111 'potential COVID-19' call data included within this report may not include all NHS 111 integrated urgent care service calls. **The call data presented in this report should therefore be used to monitor trends rather than numbers**.
- Potential COVID-19 calls monitored here include all NHS 111 calls triaged through the COVID-19 Pathway and with a COVID-19 disposition (outcome). These data are based on potential COVID-19 symptoms reported by the public to NHS Pathways via NHS 111 and are not based on outcomes of tests for coronavirus.
- COVID-19 Response Centre (CRS) calls are those calls made by the public to NHS 111 that are directed to the COVID-19 Response Centre (CRS). These calls are not triaged using NHS Pathways by the NHS 111 call service but are triaged using NHS 111 Online Pathways and are included within NHS 111 Online assessment data.
- During the current COVID-19 incident, NHS 111 are triaging large volumes of 'potential COVID-19' patients using new and evolving telephone and online triaging systems. PHE are currently working with NHS 111 and NHS England to develop syndromic surveillance indicators to monitor trends in these calls. Meanwhile, we continue to present our routine NHS 111 syndromic indicators in this report however these should be interpreted with caution as they do not currently represent a true indication of activity.

NHS 111 'potential COVID-19' completed online assessment data

- The data presented in this report are based on 'potential COVID-19' symptoms reported by the public to NHS Pathways either via the NHS 111 Online service or via the COVID-19 Response Centre and are not based on outcomes of tests for coronavirus. These data are not counts of people. In the NHS 111 Online service, any user that launches the COVID-19 assessment service is indicating that they have symptoms of coronavirus and they may access the service multiple times with different symptoms. As users can change their answers and follow multiple journeys through the online system, these data represent completed online assessments rather than counts of individuals.
- An individual may use both the NHS 111 Online service and the NHS 111 telephony service creating records in both systems. Therefore, counts of individuals from the two services cannot be considered as distinct counts of individuals with potential COVID-19 symptoms.
- All NHS 111 indicator trends should be interpreted with caution due to current national advice and guidance regarding access to health care services during the COVID-19 pandemic.
- Weekends and bank holidays are marked by vertical **grey** lines (bank holidays **darker grey**). A 7-day moving average (adjusted for bank holidays) is overlaid on the daily data reported in each chart, unless specified.
- Baselines represent seasonally expected levels of activity and are constructed from historical data since September 2013. They take into account any known substantial changes in data collection, population coverage or reporting practices. Baselines are refreshed using the latest data on a regular basis.
- NHS 111 call data are analysed on a daily basis to identify national and regional trends. A statistical algorithm underpins each system, routinely identifying activity that has increased significantly or is statistically significantly high for the time of year. Results from these daily analyses are assessed by the ReSST, along with analysis by age group, and anything deemed of public health importance is alerted by the team.

Notes and further information:

- Further information about NHS 111 can be found at: https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/
- The Remote Health Advice Syndromic Surveillance bulletin can also be downloaded from the PHE Real-time Syndromic Surveillance website which also contains more information about syndromic surveillance: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses

Acknowledgements:

We are grateful to NHS 111 and to NHS Digital for their assistance and support in providing the anonymised data that underpin the Remote Health Advice Syndromic Surveillance System.

Contact ReSST:
syndromic.surveillance@phe.gov.uk

Produced by: PHE Real-time Syndromic Surveillance Team

Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses