

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

29 July 2020.

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

Contact ReSST

Year: 2020 Week: 30

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 20 July to 26 July 2020.

During week 30, community-based respiratory indicators, including 'COVID-19-like' indicators, remained stable across most syndromic surveillance systems.

Please see the 'notes and caveats' sections in each individual syndromic surveillance bulletin for information about 'COVID-19-like' syndromic indicators, including important caveats around the interpretation of these indicators.

| Remote Health Advice: | During week 30, there were small increases in NHS 111 calls for cold/flu and sore throat (figures 2 & 7). There were increases in cough calls in children aged <1 and 1 -4 years, however these remain below seasonally expected levels (figure 4a). |
|--------------------------|---|
| Access bulletin | NHS 111 calls and online assessments for potential COVID-19 remained stable (figures 8 & 19). |
| GP In Hours: | During week 30, COVID-19-like GP consultations decreased slightly (figure 1). All other respiratory indicators remained stable and at or below seasonally expected levels. |
| Access bulletin | |
| GP Out of Hours: | During week 30, GP out of hours contacts for respiratory indicators (including acute respiratory infection and influenza-like illness) remained stable and at or below seasonally expected levels (figures 2-4). |
| Access bulletin | |
| Emergency Department: | During week 30 ED COVID-19-like attendances decreased slightly (figure 3). There were small increases in respiratory and acute respiratory infection attendances, particularly in young children under 5 years, but levels remain below baseline (figures 4 & 5). |
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| Ambulance: | During week 30, COVID-19-like and breathing problems ambulance calls remained stable (figures 2 & 3). |
| Access bulletin | |



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- 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: (<u>https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses</u>); 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.

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