



19 August 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: 33

## Summary.

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### Reporting week: 10 August to 16 August 2020.

During week 33, there were increases in heat/sun impact across all syndromic surveillance systems in line with the level 3 heatwave alert.

Community-based 'COVID-19-like' indicators remained stable across 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 33 there was an increase in NHS 111 'heat/sun impact' calls in line with the level 3 heatwave alert; calls have subsequently returned to expected levels (figure 12).

[Access bulletin](#)

NHS 111 calls and online assessments for potential COVID-19 remained stable during week 33 (figures 8 & 19).

#### GP In Hours:

During week 33, GP consultations for 'heat/sun stroke' increased in line with the recent level 3 heatwave alert (figure 22). 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 33, GP out of hours contacts for heatstroke and insect bites increased, in line with recent level 3 heatwave alert (figures 11 & 12). Contacts for acute respiratory infection overall remained stable, however continued to increase in children aged 5-14 years (but remain below seasonally expected levels; figures 2 & 2a).

[Access bulletin](#)

#### Emergency Department:

During week 33, ED attendances for 'heat/sun stroke' increased in line with the recent hot weather; attendances have since returned to expected levels (figure 15).

ED COVID-19-like attendances remained stable (figure 3). Attendances for acute respiratory infection remained stable and below baseline, although they remain

[Access bulletin](#)

#### Ambulance:

During week 33, there was an increase in ambulance calls for 'heat/cold exposure' in line with the recent warm weather (figure 4); daily calls have since returned to expected levels.

[Access bulletin](#)

COVID-19-like and breathing problems ambulance calls remained stable during week 33 (figures 2 & 3).

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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: (<https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>); reports are made available on Thursday afternoons.

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## **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.*

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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 SystemOne 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.
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## **PHE Real-time Syndromic Surveillance Team.**

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