

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

14 October 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: 41

Summary.

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Reporting week: 05 October to 11 October 2020.

During week 41 emergency department COVID-19-like attendances continued to increase, particularly in adults and North East and Yorkshire and Humber PHE Centres.

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: Access bulletin	During week 41, NHS 111 cold/flu calls continued to decrease, particularly in children, but remain above seasonally expected levels (figures 2 & 2a). Cough calls also decreased and are now below baseline levels (figure 4). Similarly, NHS 111 online assessments for cold/flu and cough decreased during week 41 (figures 12 & 14). Difficulty breathing calls were stable and remain below baseline (figure 6).
	'Potential COVID-19' calls were stable in week 41 whereas online assessments decreased (figures 8 &17). 'Loss of taste/smell' calls decreased while online assessments increased slightly (figures 5 & 15).
GP In Hours: Access bulletin	During week 41 there was no trend in COVID-19-like GP consultations nationally, however there was a slight increase in adults aged 45-64 years and in the North East and Yorkshire and Humber PHE Centres (figures 1a, 1b & 1c). Consultations for pneumonia increased, particularly in adults 75 and over (figures 7 & 7a). All other GP respiratory indicators remained stable.
GP Out of Hours: Access bulletin	During week 41, GP out of hours respiratory indicators either remained stable or decreased slightly (figures 2-6). Contacts for difficulty breathing/wheeze/asthma were stable but remain elevated in children aged 1-4 years (figures 5 & 5a).
Emergency Department: Access bulletin	Emergency department COVID-19-like attendances continued to increase during week 41, particularly in adult age groups and in the North West and Yorkshire and Humber PHE Centres (figure 3). Acute respiratory infection attendances remain stable nationally (figure 5).
Ambulance: Access bulletin	During week 41, COVID-19-like ambulance calls increased (figure 2), while calls for breathing problems remained stable (figure 3). Calls for cardiac/respiratory arrest increased during week 41 (figure 6).



14 October 2020

- · 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.

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