



04 November 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: 44

Summary.

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Reporting week: 26 October to 1 November 2020.

During week 44 emergency department COVID-19-like attendances continued to increase, particularly in adults 45 years and older.

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](#)

'Potential COVID-19' calls remained stable during week 44; however there have been small increases in calls in adults aged 45 years and over during recent weeks (figures 8 & 8a). Fever calls have increased in children aged 0-4 years (figure 3a). 'Potential COVID-19' online assessments remained stable (figure 17). 'Loss of taste/smell' calls and online assessments have decreased slightly, although there have been increases in calls for the 65-74 years age group (figures 5, 5a & 15).

GP In Hours:

[Access bulletin](#)

During week 44, COVID-19-like consultations increased, mainly in adults aged 45 years and over, and in the North West, Yorkshire and Humber and West Midlands regions (figures 1, 1b & 1c). Other respiratory conditions including influenza-like illness remained stable (figure 3).

GP Out of Hours:

[Access bulletin](#)

During week 44, GP out of hours respiratory indicators remained stable (figures 2-6) but there were slight increases in the over 65 years age group for acute respiratory infection and influenza-like illness (figures 2a & 3a).

Emergency Department:

[Access bulletin](#)

Emergency department COVID-19-like attendances continued to increase during week 44, particularly in adults 45 years and older (figure 3 & 3a). COVID-19-like attendances remain elevated in the North East, North West, Yorkshire and Humber and East Midlands regions (figure 3b). Acute respiratory infections continue to increase in the 65+ years age group (figure 5a).

Ambulance:

[Access bulletin](#)

During week 44, COVID-19-like ambulance calls decreased slightly while breathing problems calls remained stable (figures 2, 3). Calls for overdose/ingestion/poisoning increased and are above baseline levels (figure 10).

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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.

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 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>