



21 December 2020

Year: 2020

Week: 51

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## NHS 111 online assessments:

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- Fever
- Cough
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## Key messages

Data to: 20 December 2020

NHS 111 'potential COVID-19' calls and online assessments increased during week 51, notably in London (figures 8 & 8b, 17 & 17b). Calls and online assessments for 'loss of taste or smell' were increased (figure 5 & 15). Online assessments for cold/flu increased in week 51 (figure 12).

**Please note: due to technical issues, syndromic call numbers for the North West are currently incomplete and should be treated with caution.**

**Note: during the COVID-19 pandemic, patients with COVID-19 symptoms are generally advised to initially access a COVID-19 test through the national COVID-19 testing programme. This is likely to result in lower numbers of patients accessing health advice as monitored through syndromic surveillance systems. Syndromic data should therefore be interpreted with some caution and in the context of other COVID-19 monitoring data sources. Please see [notes and caveats](#) section for more information about the 'potential COVID-19' and standard NHS 111 syndromic indicators.**

A Cold Watch System operates in England from 1 November to 31 March each year. As part of the Public Health England Cold Weather Plan for England the PHE Real-time Syndromic Surveillance Team will be monitoring the impact of cold weather on syndromic surveillance data during this period.

Cold weather alert level (current reporting week): **Level 1 Winter preparedness**  
<http://www.metoffice.gov.uk/weather/uk/coldweatheralert/>

## Syndromic indicators at a glance:

Indicator	Trend*	Level
Cold/flu calls	no trend	below baseline levels
Fever calls	no trend	below baseline levels
Cough calls	no trend	below baseline levels
Loss of taste or smell calls	increasing	*
Difficulty breathing calls	no trend	below baseline levels
Sore throat calls	increasing	below baseline levels
Potential COVID-19' calls	increasing	*
Diarrhoea calls	no trend	below baseline levels
Vomiting calls	no trend	below baseline levels
Eye problems calls	decreasing	below baseline levels
Cold/flu online assessments	increasing	*
Fever online assessments	increasing	*
Cough online assessments	increasing	*
Loss of taste or smell online assessments	increasing	*
Difficulty breathing online assessments	increasing	*
'Potential COVID-19' online assessments	increasing	*

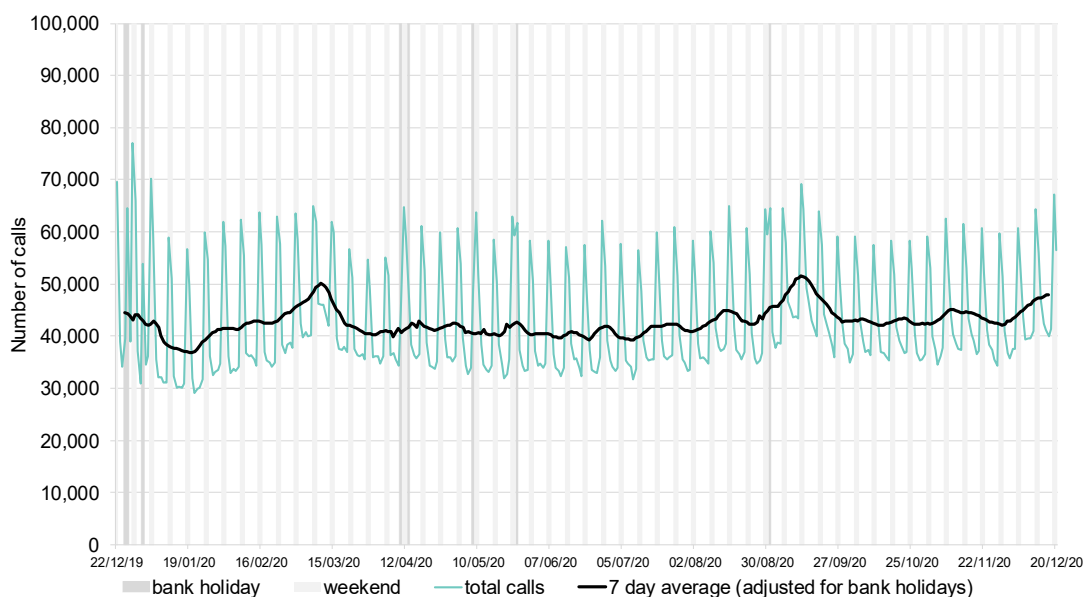
\* Indicators where there are no historical data to allow assessment of 'level' compared to baseline

## Data summary

Year	Week	Total calls	Total online assessments
2020	51	335,674	114,741

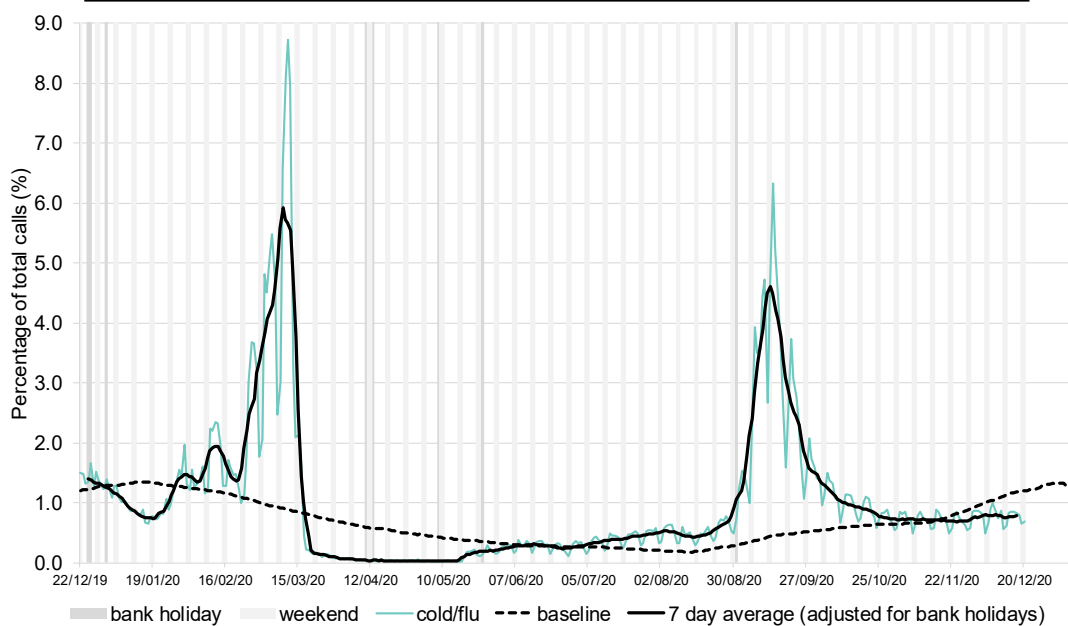
## 1. Total NHS 111 calls

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



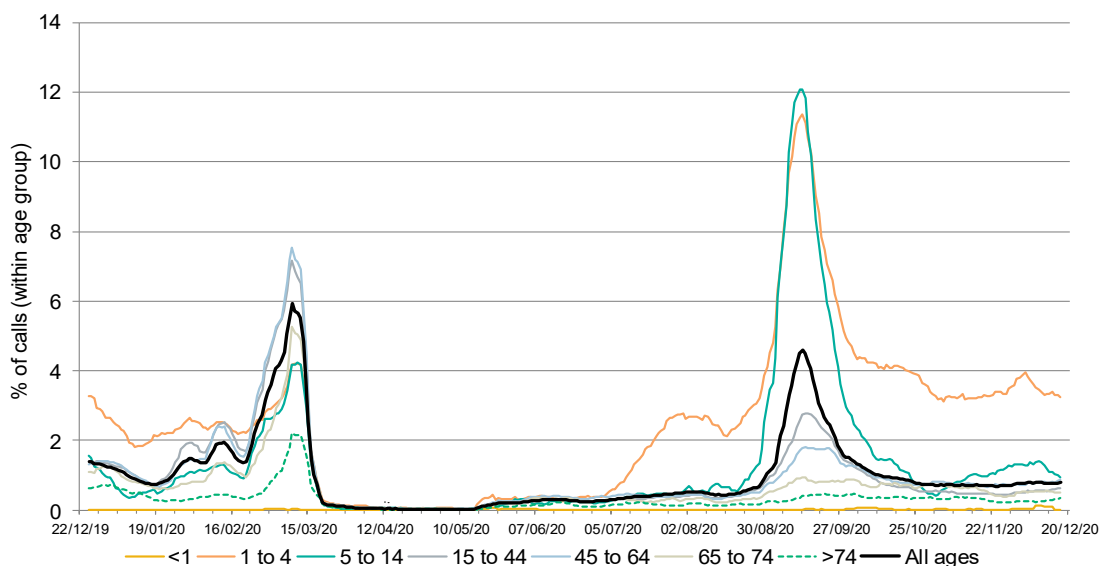
## 2: Cold/flu

Daily 'cold/flu' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



## 2a: Cold/flu by age group

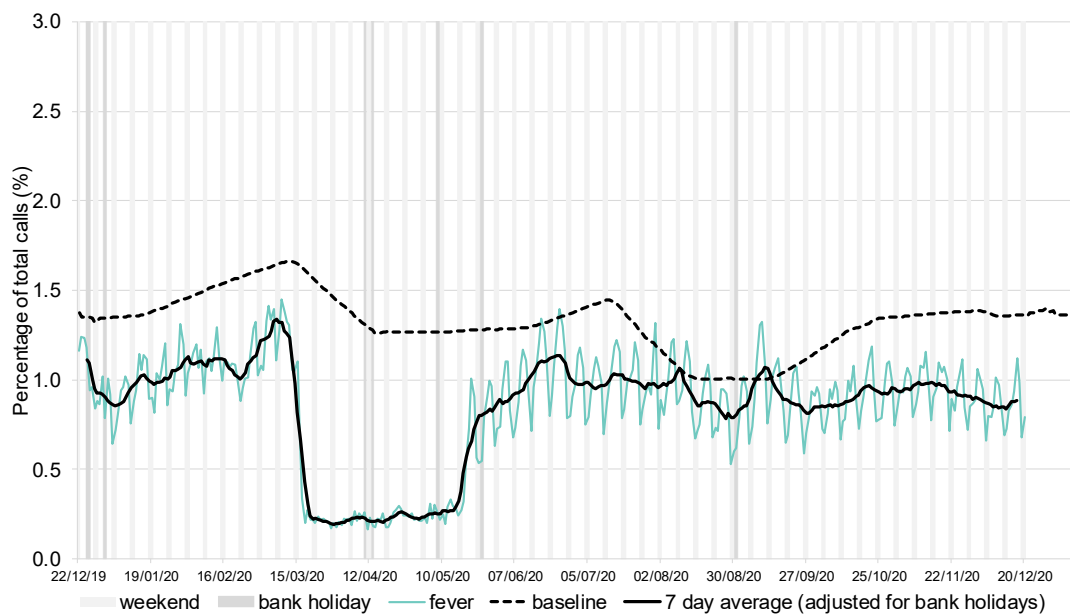
Cold/flu calls as a percentage of total calls within each age group, shown as a 7 day moving average\*. Age groups below 5 years old not shown.



\*7-day moving average adjusted for bank holidays.

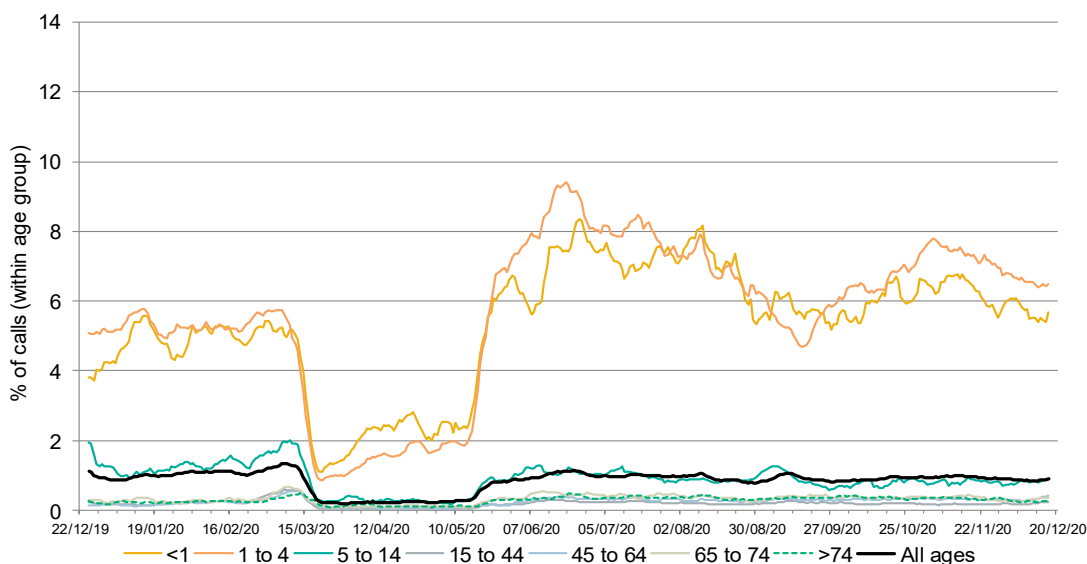
### 3: Fever

Daily 'fever' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



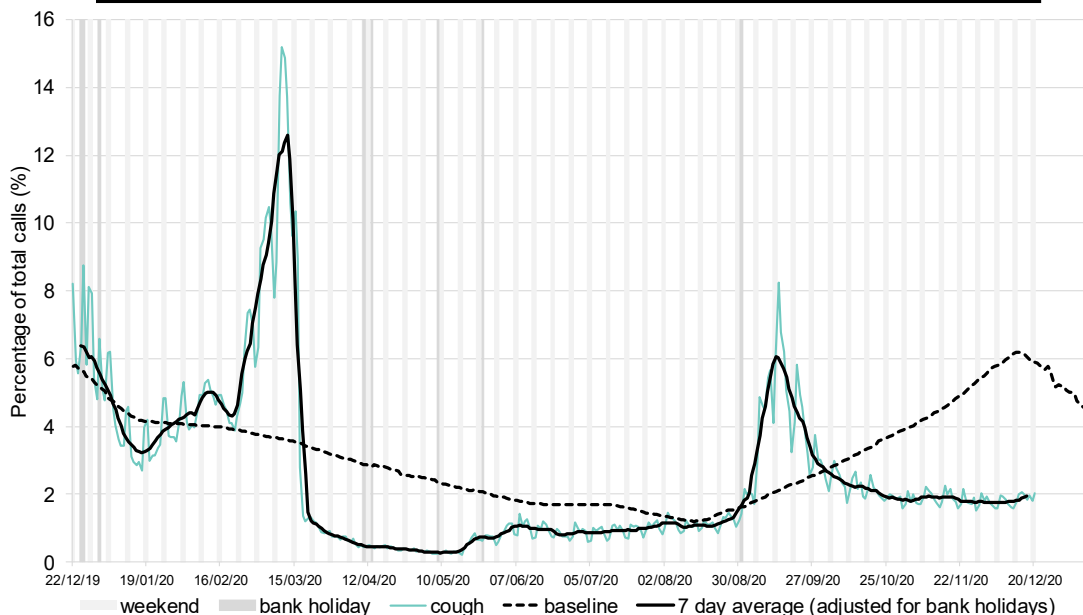
### 3a: Fever calls by age group

Fever calls as a percentage of total calls within each age group, shown as a 7-day moving average\*.



### 4: Cough

Daily 'cough' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



\*7-day moving average adjusted for bank holidays.

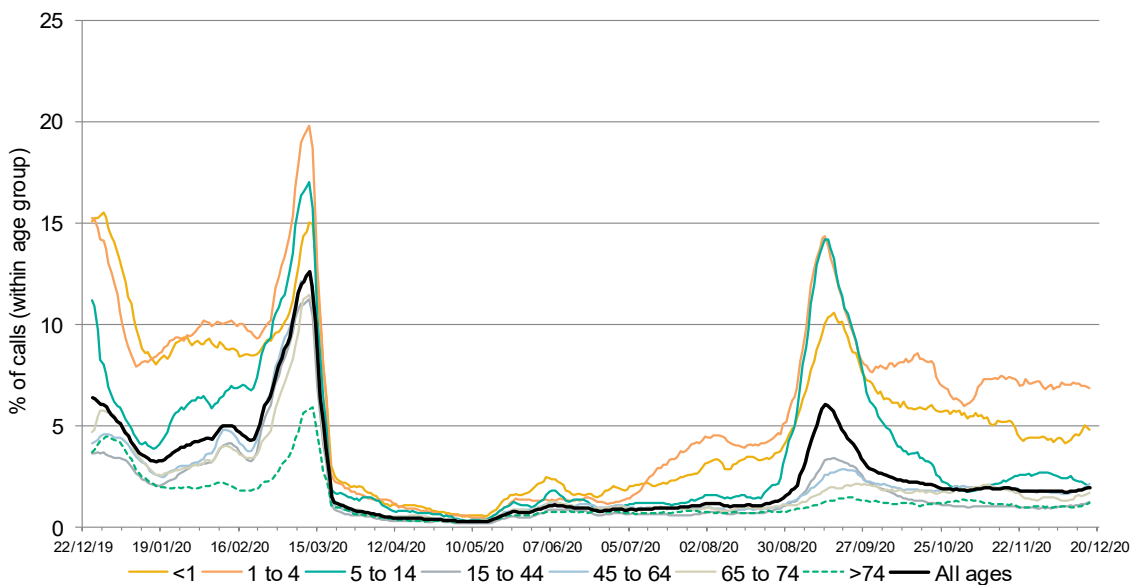
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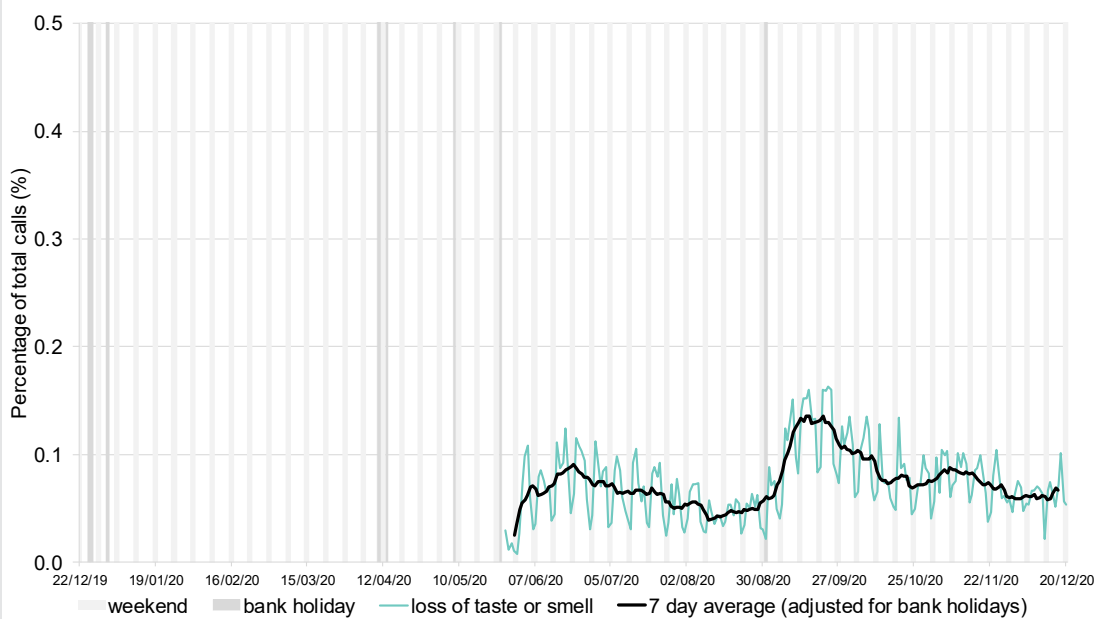
## 4a: Cough calls by age group

Cough calls as a percentage of total calls within each age group, shown as a 7-day moving average\*.



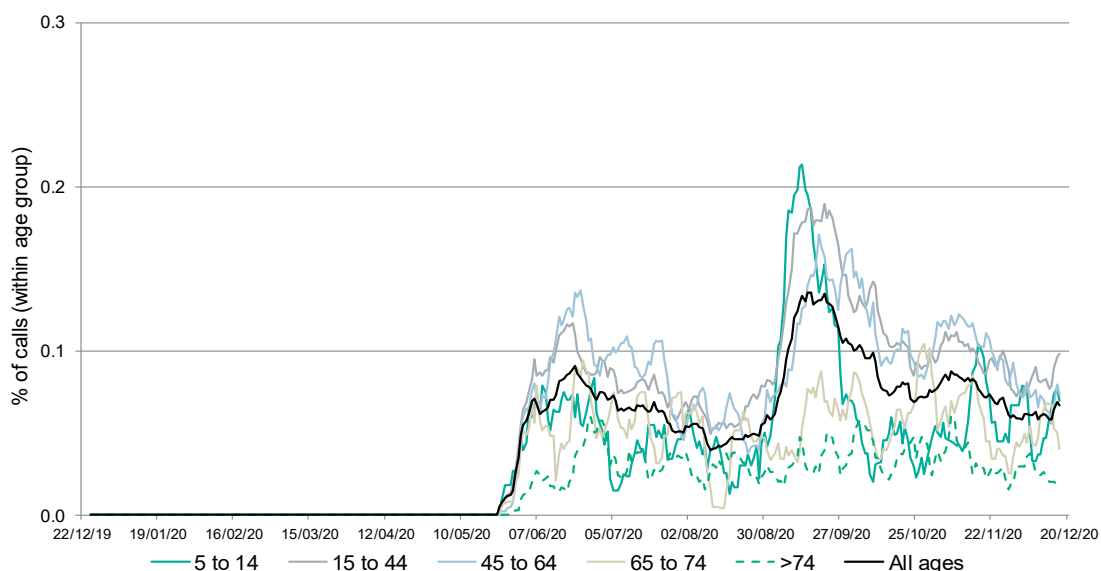
## 5: Loss of taste or smell

Daily 'loss of taste or smell' calls as a percentage of total calls (and 7-day moving average\*).



## 5a: Loss of taste or smell by age group

'Loss of taste or smell' calls as a percentage of total calls within each age group, shown as a 7-day moving average\*.



\*7-day moving average

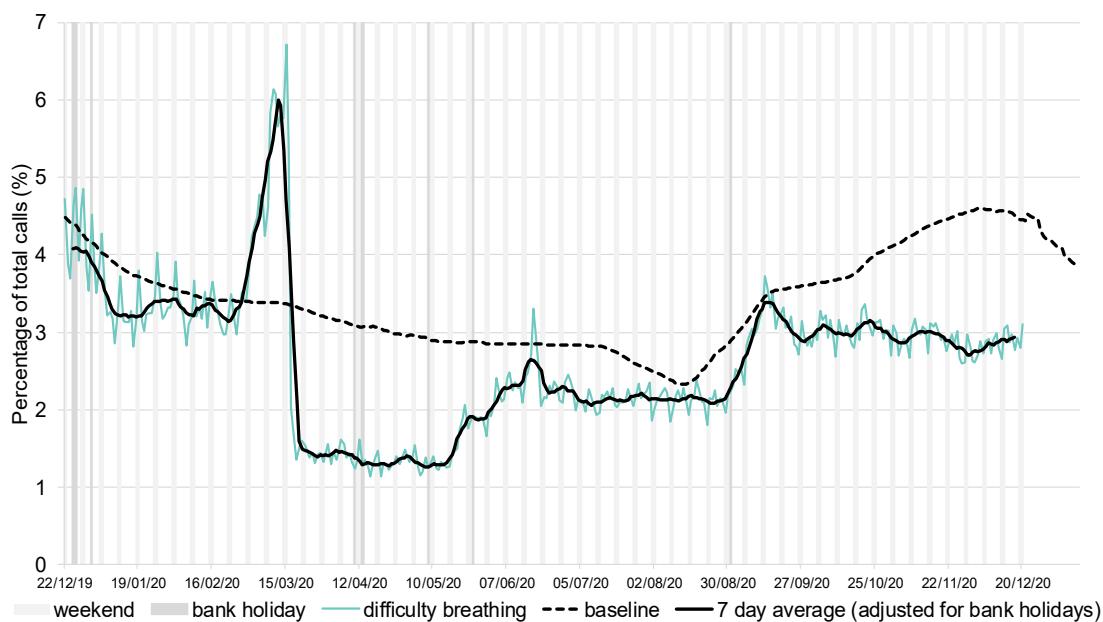
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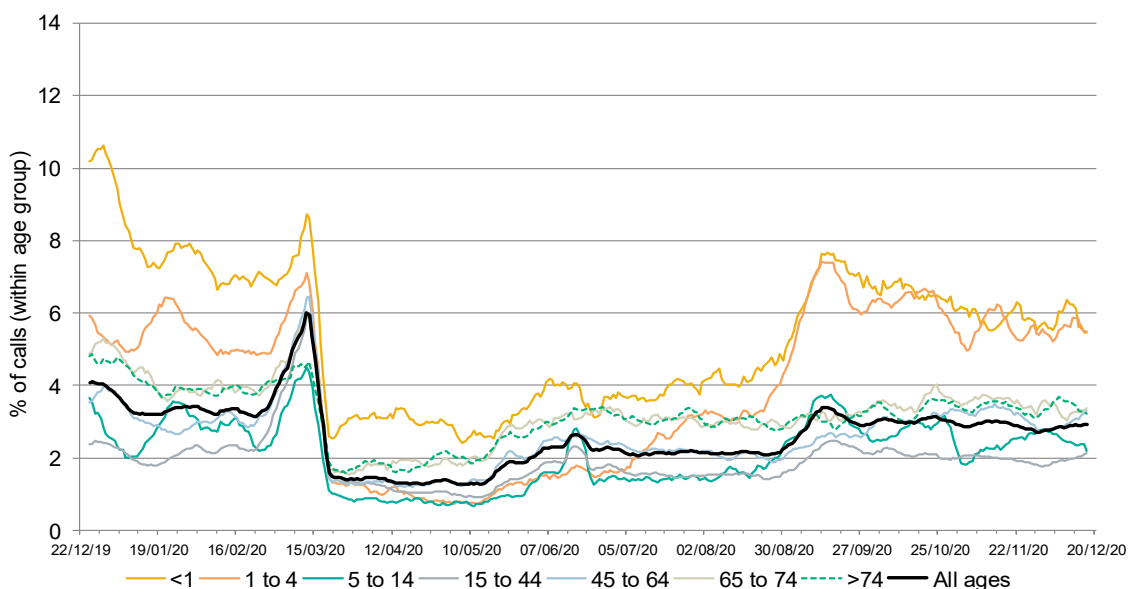
## 6: Difficulty breathing

Daily 'difficulty breathing' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



## 6a: Difficulty breathing calls by age group

Difficulty breathing calls as a percentage of total calls within each age group, shown as a 7-day moving average\*.



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\*7-day moving average adjusted for bank holidays.

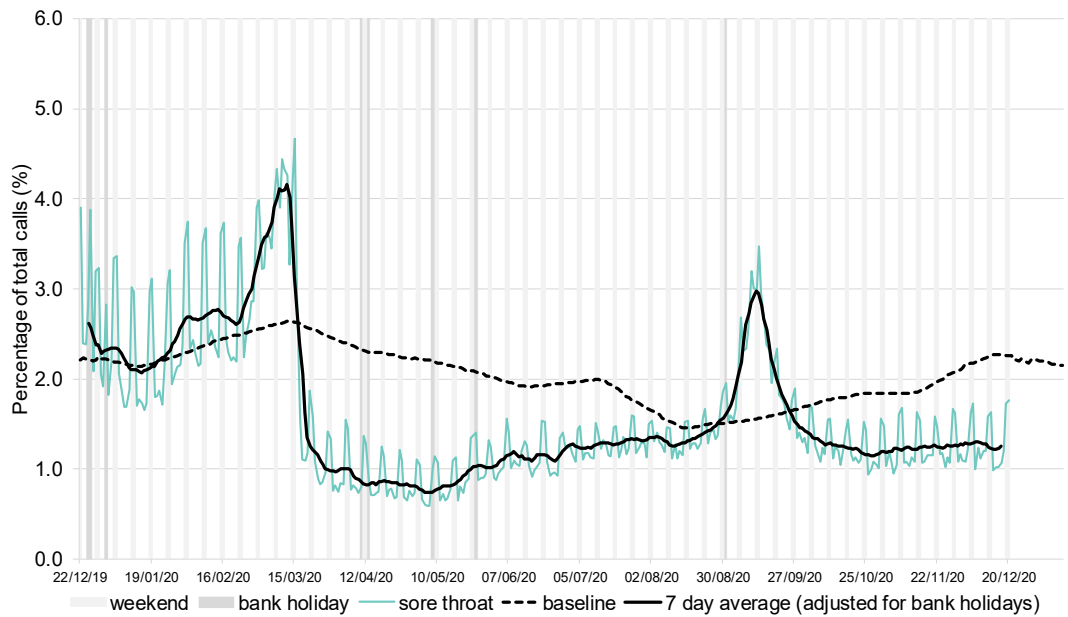
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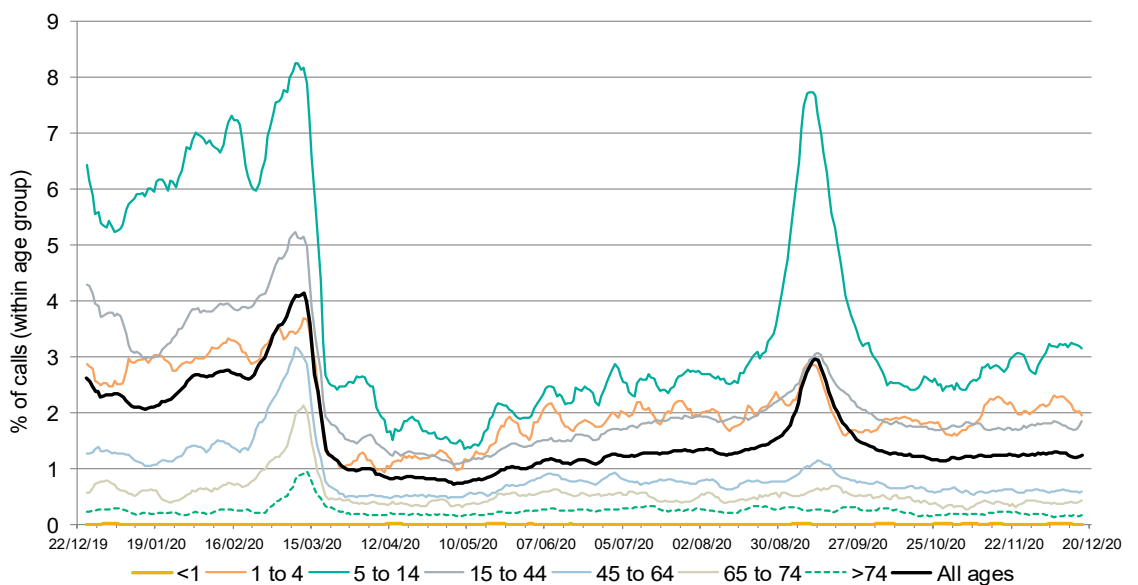
## 7: Sore throat

Daily 'sore throat' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



## 7a: Sore throat calls by age group

Sore throat calls as a percentage of total calls within each age group, shown as a 7-day moving average\*.



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\*7-day moving average adjusted for bank holidays.

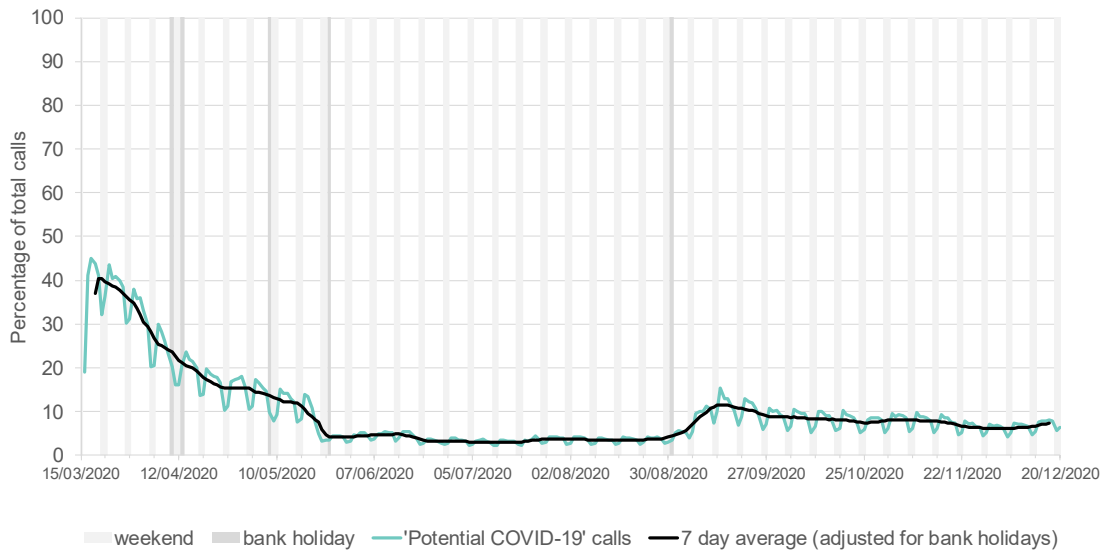
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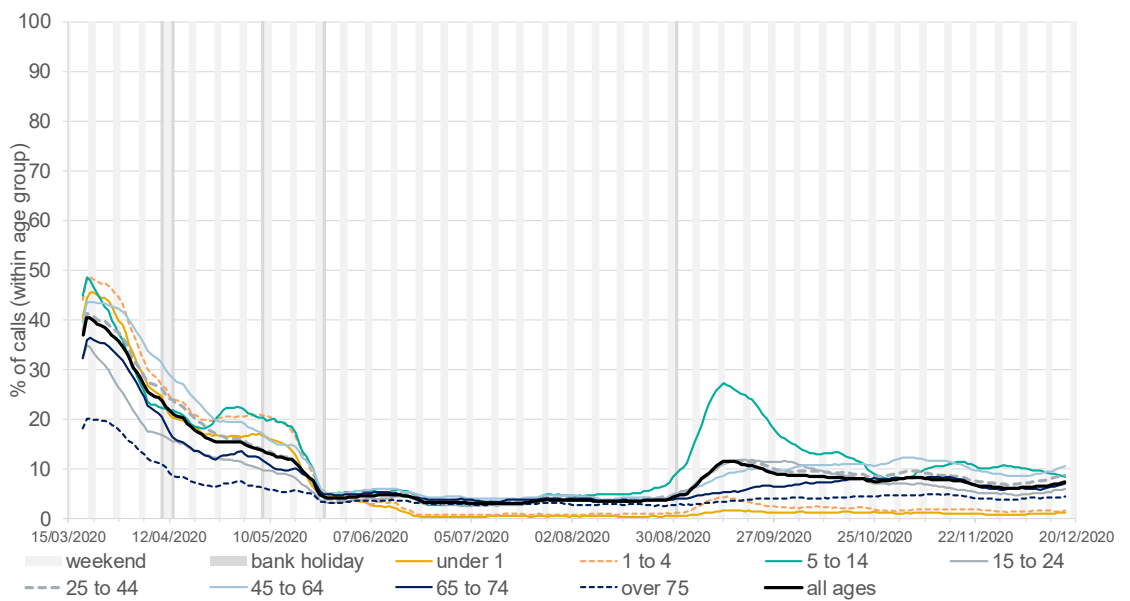
## 8: 'Potential COVID-19' calls

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



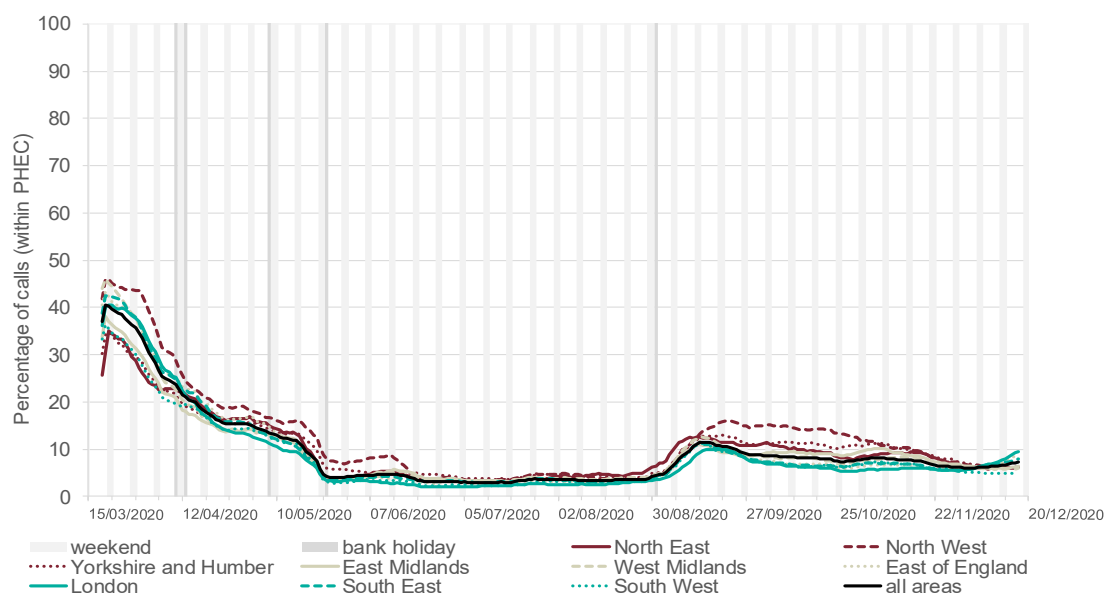
## 8a: 'Potential COVID-19' calls by age group

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



## 8b: 'Potential COVID-19' calls by PHE Centre

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



\*7-day moving average adjusted for bank holidays.

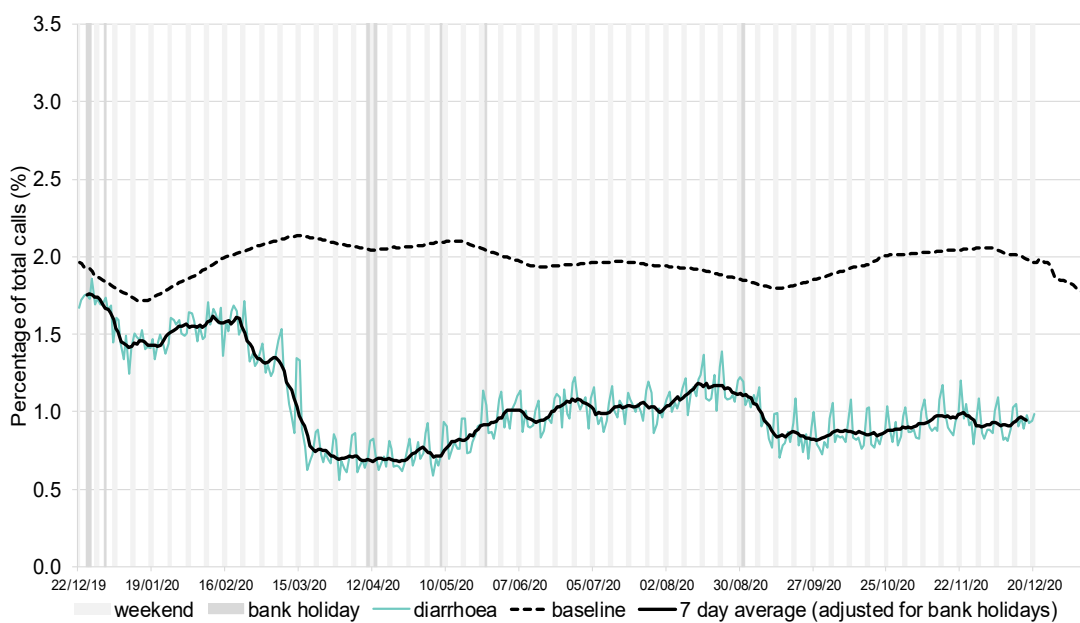
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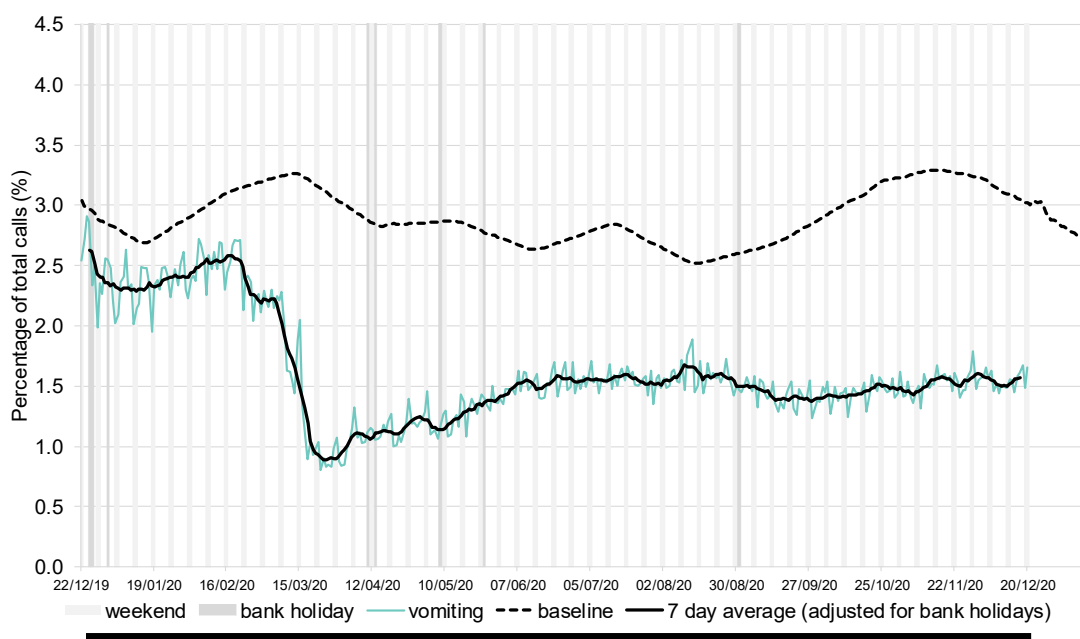
## 9. Diarrhoea

Daily 'diarrhoea' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



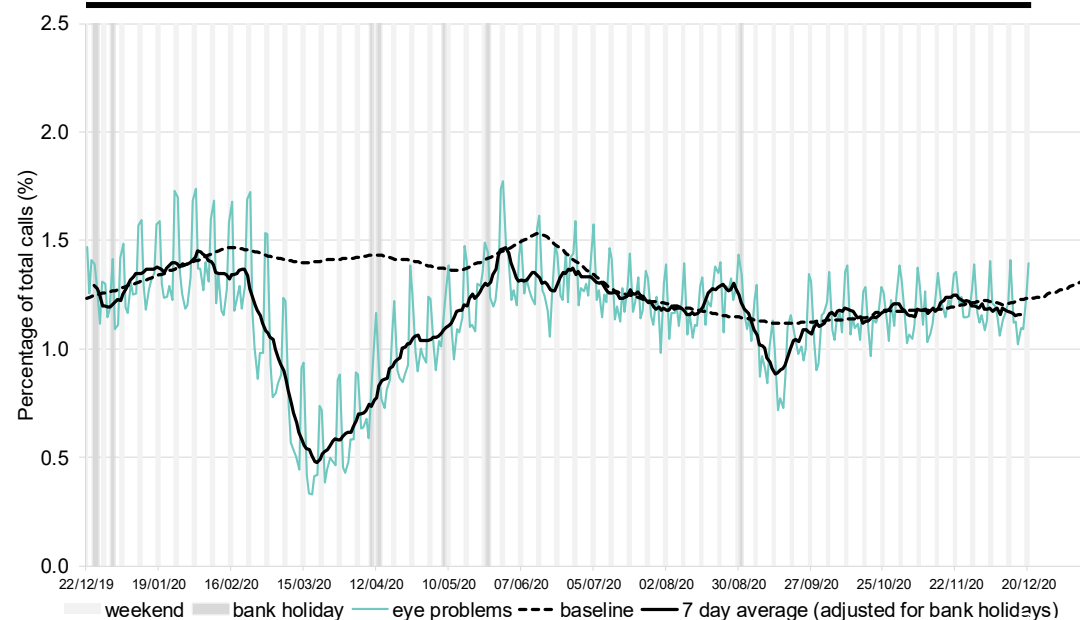
## 10: Vomiting calls

Daily 'vomiting' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



## 11: Eye problems

Daily 'eye problems' calls as a percentage of total calls (and 7-day moving average\*). Baselines are constructed from historical data since 2013.



\*7-day moving average adjusted for bank holidays.



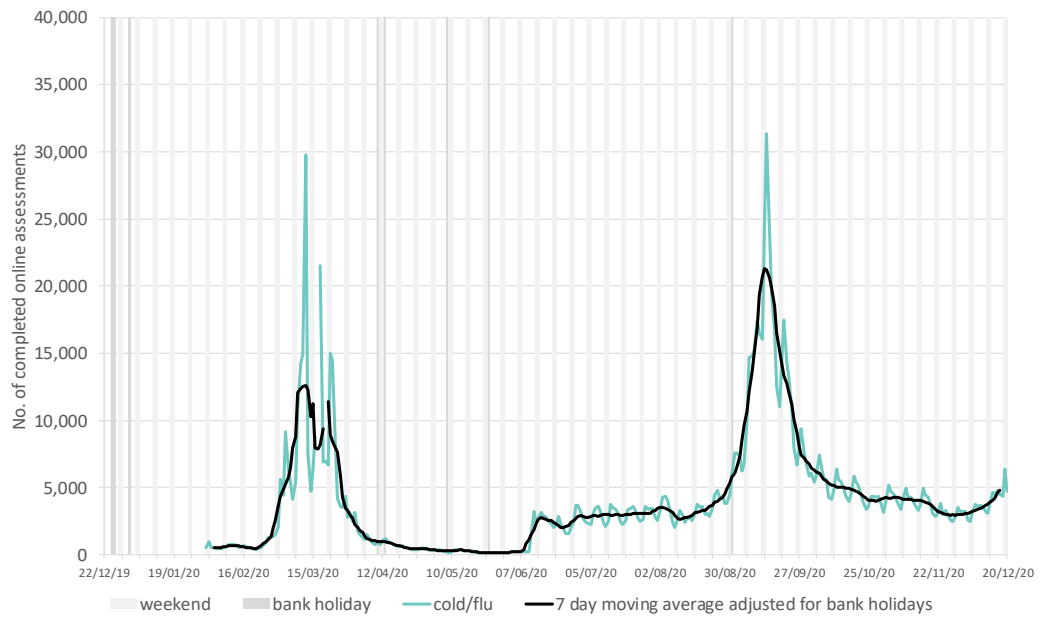
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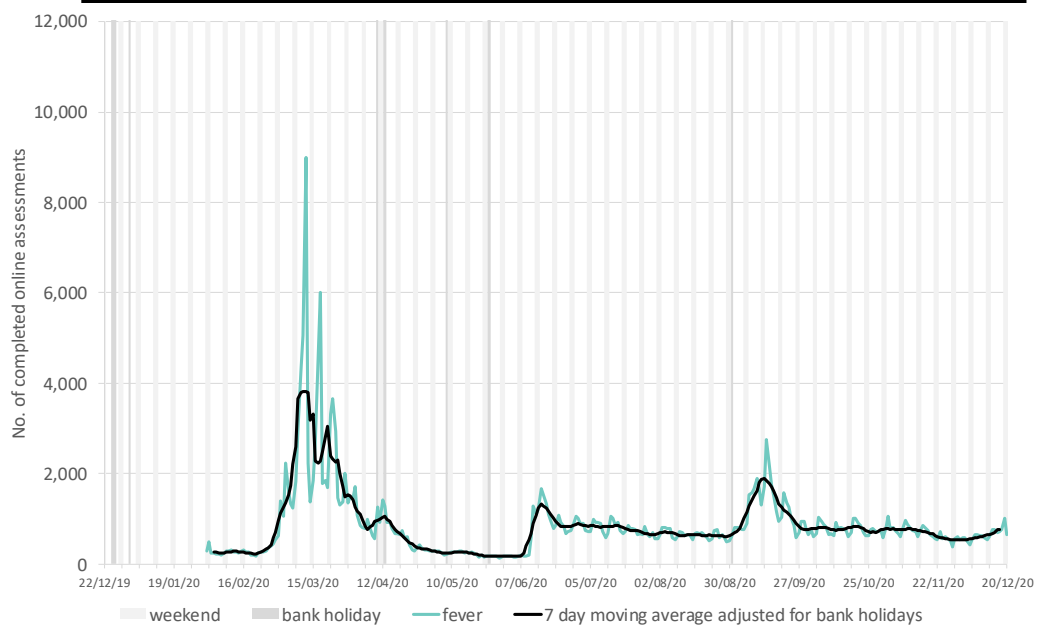
## 12: NHS 111 online cold/flu

Number of 'cold/flu' online completed assessments, with 7-day moving average\*.



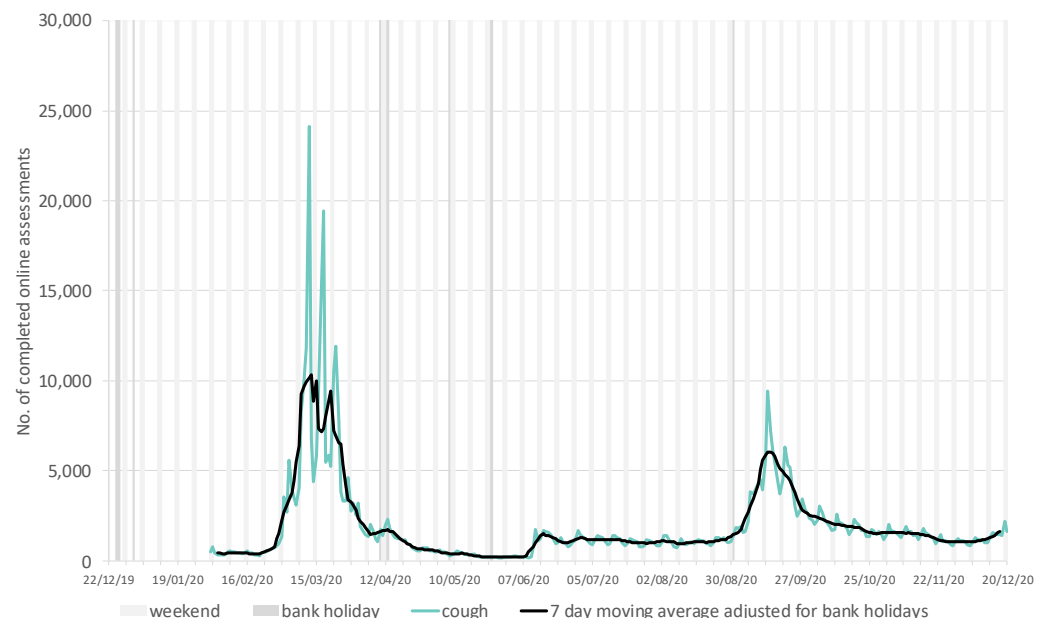
## 13: NHS 111 online fever

Number of 'fever' online completed assessments, with 7-day moving average\*.



## 14: NHS 111 online cough

Number of 'cough' online completed assessments, with 7-day moving average\*.



\*7-day moving average adjusted for bank holidays.

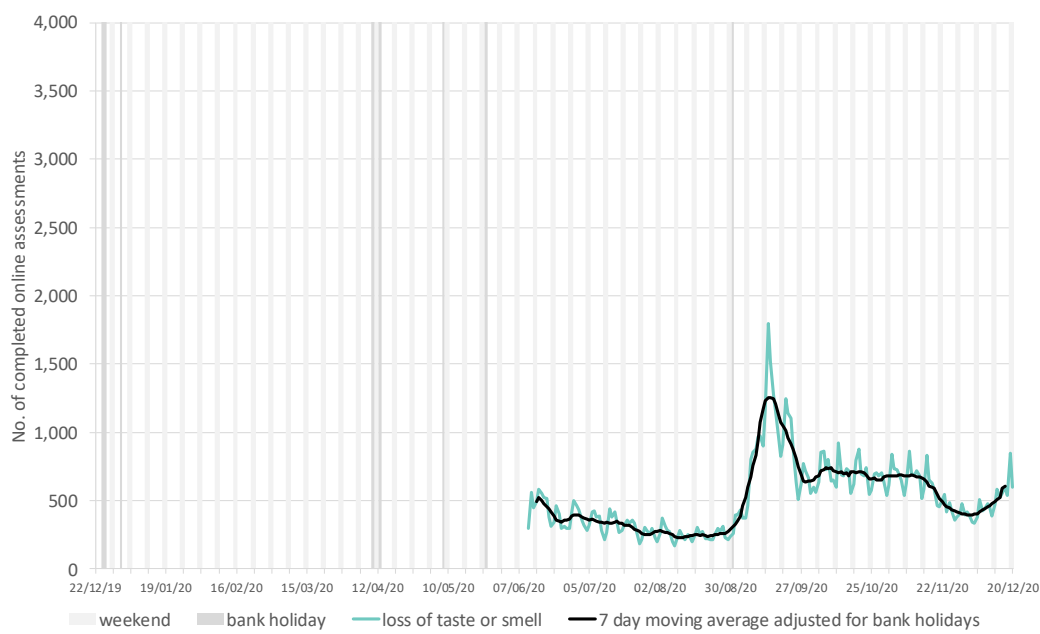
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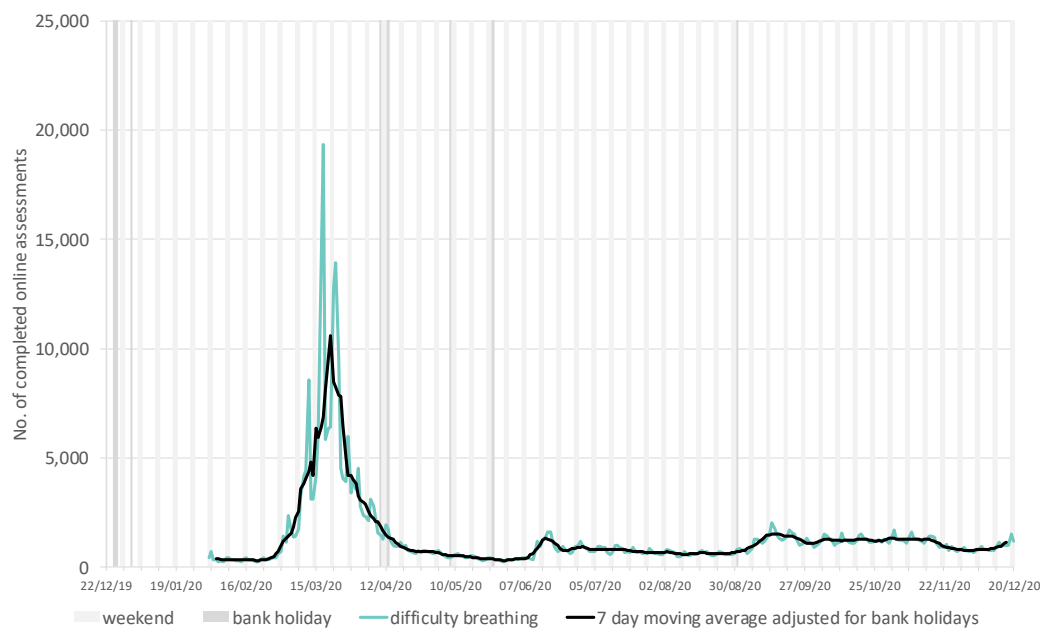
## 15: NHS 111 online loss of taste or smell

Number of 'loss of taste or smell' online completed assessments, with 7-day moving average\*.



## 16: NHS 111 online difficulty breathing

Number of 'difficulty breathing' online completed assessments, with 7-day moving average\*.

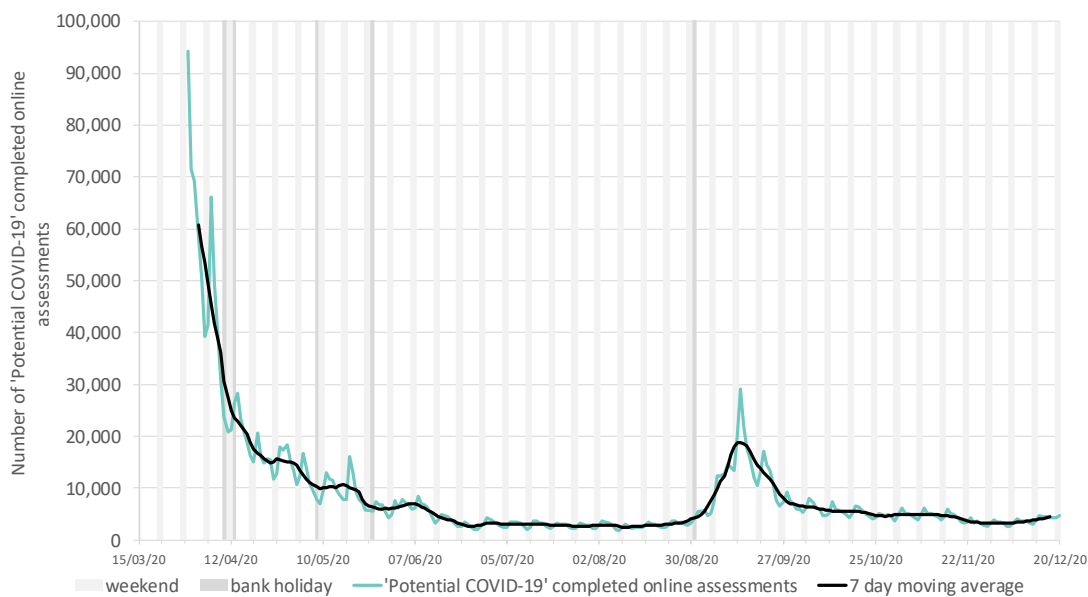


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\*7-day moving average adjusted for bank holidays.

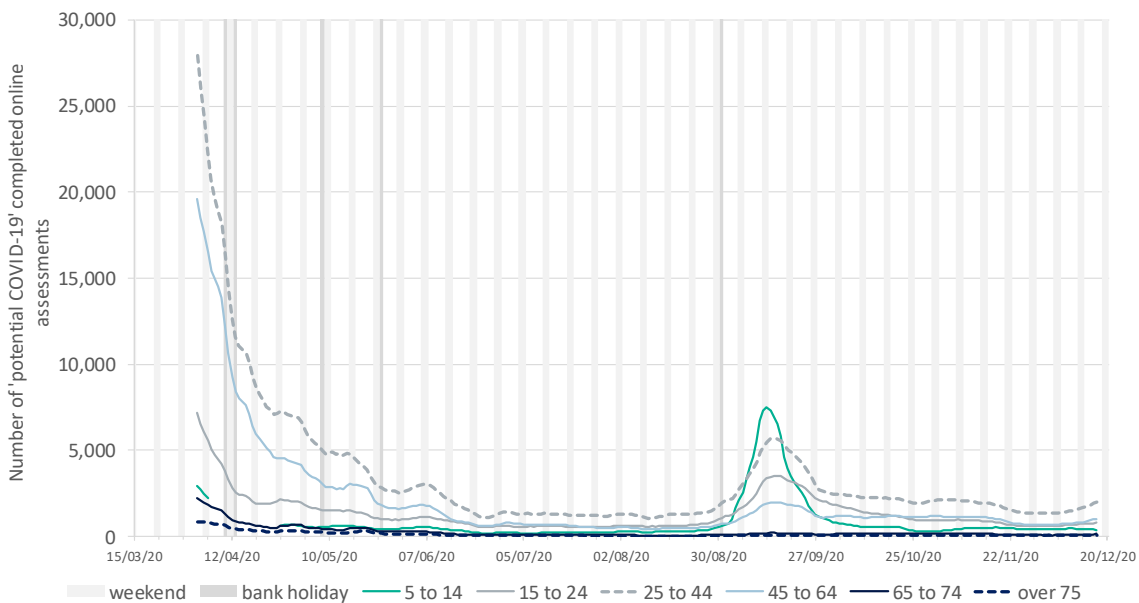
## 17: 'Potential COVID-19' completed online assessments

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



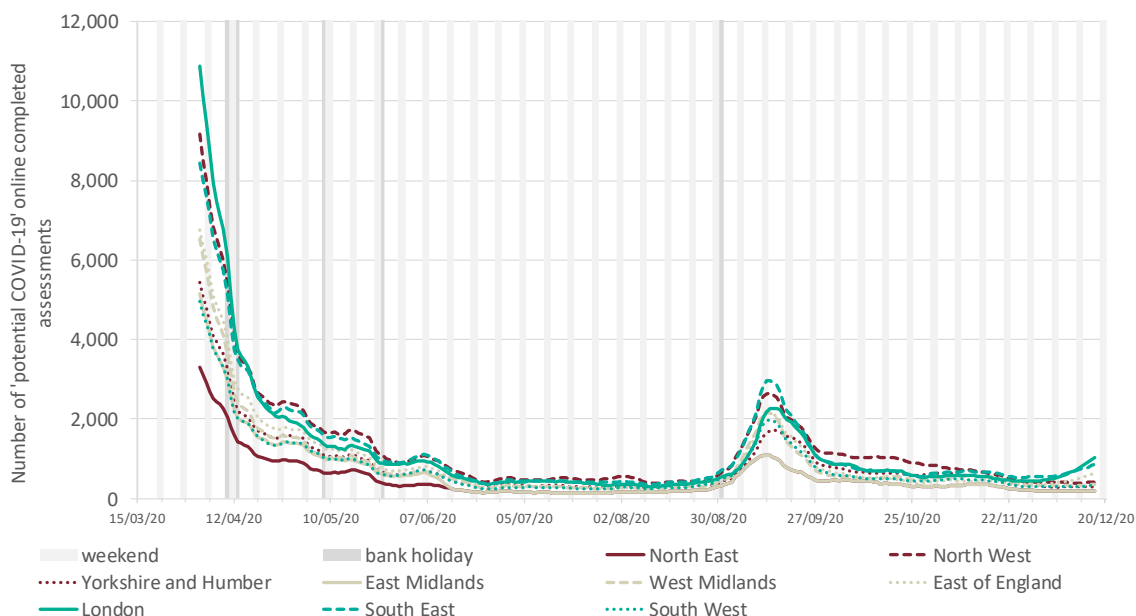
## 17a: 'Potential COVID-19' completed online assessments by age group

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\*.



## 17b: '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.

## Introduction to charts and caveats:

### COVID-19 syndromic surveillance data:

During the current COVID-19 pandemic, NHS 111 are triaging 'potential COVID-19' patients using new and evolving telephone and online systems. PHE are working with NHS 111 and NHS England to ensure that syndromic surveillance indicators monitor trends in these calls and online assessments. However, changes within the NHS 111 triaging systems will be reflected in our routine syndromic indicators and 'potential COVID-19' indicators.

An individual may use both the NHS 111 Online and NHS 111 telephony services. Therefore, counts of individuals from the two services cannot be considered as distinct counts of individuals with potential COVID-19 symptoms. All NHS 111 syndromic trends should be interpreted with caution due to current national advice and guidance regarding access to health care services during the COVID-19 pandemic.

### NHS 111 'potential COVID-19' call data

- The NHS 111 'potential COVID-19' syndromic indicator may not include all NHS 111 integrated urgent care service calls and therefore should be used to monitor trends in calls rather than numbers.
- The 'Potential COVID-19' syndromic indicator includes NHS 111 calls triaged using NHS Pathways and given a COVID-19 disposition (call outcome). These data are based on potential COVID-19 symptoms reported by callers and are not based on outcomes of tests for coronavirus. Prior to 11 May 2020 callers with COVID-19-like symptoms were assessed via COVID-19 Pathways. From 11 May 2020 callers who are assessed as having probable COVID-19 symptoms are triaged in symptom specific pathways which are included in our routine syndromic indicators.

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

- The NHS 111 online data presented in this report are based on 'potential COVID-19' symptoms reported by the public via the NHS 111 Online service or the COVID-19 Response Centre and are not based on outcomes of tests for coronavirus. Any user that launches a COVID-19 online assessment may access the service multiple times and can change their answers and follow multiple journeys through the online system. The data presented are therefore completed online assessments rather than counts of individuals and should be used to monitor trends rather than numbers.
- From 11 June 2020 online users who are assessed as having probable COVID-19 symptoms will be triaged using symptom specific pathways.

### Notes on charts

- 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 account of any known substantial changes in data collection, population coverage or reporting practices. Baselines are refreshed using the latest data on a regular basis however they currently exclude data from 2020 due to COVID-19 affecting the NHS 111 service and patient health care seeking behaviour
- 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.

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