

Syndromic Surveillance Summary:

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

09 February 2021.

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

Contact: ReSST Year: 2021 Week: 05

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 01 to 07 February 2021.

During week 5, COVID-19-like indicators continued to decrease across all syndromic systems.

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.

Remote Health Advice:

NHS 111 'potential COVID-19' calls continued to decrease during week 5 (figure 8). Calls for difficulty breathing also decreased further and are now below seasonally expected baselines (figure 6).

Access bulletin

GP In Hours:

During week 5, COVID-19-like consultations decreased and other respiratory indicators decreased or remained stable (figures 1, 2, 3, 6 & 7).

Access bulletin

GP Out of Hours:

During week 5, GP out of hours contacts for difficulty breathing/wheeze/ asthma continued to decrease (figure 5).

Access bulletin

Emergency Department:

Access bulletin

During week 5, emergency department COVID-19-like attendances decreased (figure 3). COVID-19-like attendances are decreasing across all age groups and in all areas (figures 3a & 3b).

Ambulance:

Ambulance COVID-19-like, breathing problems and cardiac/respiratory arrest calls continued to decrease during week 5 (figures 2, 3 & 6).

Access bulletin.



PHE Syndromic Surveillance Summary

09 February 2021

- · 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 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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