

# **Emergency Department**

Syndromic Surveillance System: England

### 09 February 2021

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### Year: 2021 Week: 5

## Key messages

Data to: 07 February 2021

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).

Please note, baselines have been refreshed, please see notes and caveats for more detail.

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 <u>notes and caveats</u> for information about the ED syndromic indicators including important caveats around the interpretation.

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 2/3 - Alert & readiness / Cold weather action http://www.metoffice.gov.uk/weather/uk/coldweatheralert/

## Diagnostic indicators at a glance:

Further details on the syndromic indicators reported can be found on page 10.

Indicator	Current trend	Level
COVID-19-like	decreasing	-
Respiratory	decreasing	below baseline
Acute Respiratory Infection Bronchiolitis Influenza-like Illness Pneumonia Asthma	decreasing no trend decreasing decreasing no trend	below baseline below baseline below baseline below baseline below baseline
Gastrointestinal Gastroenteritis	no trend no trend	below baseline below baseline
Cardiac Myocardial Ischaemia	no trend increasing	below baseline below baseline
Alcohol intoxication	no trend	below baseline

Data	Total Attendences	Diagnoses Coded		Type 1 EDs
Date	Total Attendances	Number	%	Included
01/02/2021	23,540	17,176	73.0%	118
02/02/2021	21,454	15,870	74.0%	118
03/02/2021	21,824	15,869	72.7%	118
04/02/2021	21,406	15,055	70.3%	118
05/02/2021	22,322	16,254	72.8%	118
06/02/2021	20,253	14,511	71.6%	118
07/02/2021	18,543	13,578	73.2%	118
Total	149,342	108,313	72.5%	(max)* 118

#### EDSSS weekly report statistics

Only Type 1 EDs meeting the weekly reporting criteria are included (see page 10 for details).

\*max EDs included across full time period reported in charts, individual days may include fewer EDs.

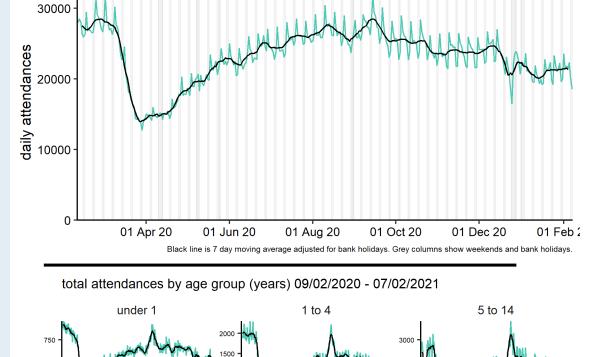
# Nublic Health England

## 09 February 2021

### 1: Total attendances.

Daily number of total attendances recorded, across the EDSSS network.

(see page 6 for ED inclusion criteria).



Total attendances 11/02/2020 - 07/02/2021

1000

500

6000

4000

2000

# 2a: Daily attendances by age: numbers.

Daily number and 7-day moving average of total attendances, by age group.

500

250

0

12000

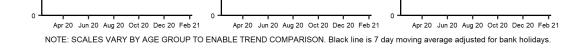
9000

6000

3000

15 to 44

daily attendances



45 to 64

2000

1000

6000

4000

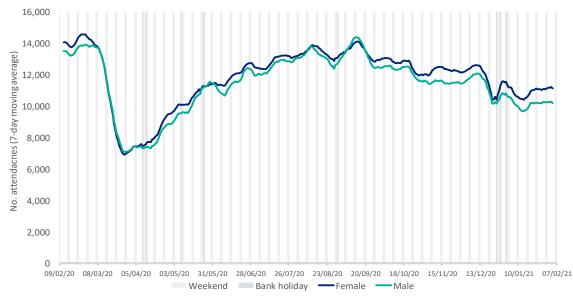
2000

0

over 65

### 2b: Daily attendances by gender: numbers

Daily number of total attendances by gender, recorded across the EDSSS network (shown as a 7-day moving average). Please note: indeterminate gender is not shown due to small numbers



## EDSSS

## EDSSS

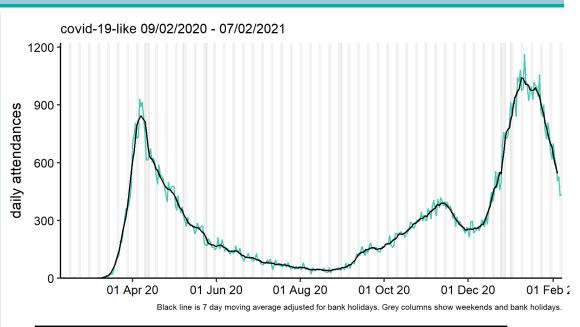
## 09 February 2021

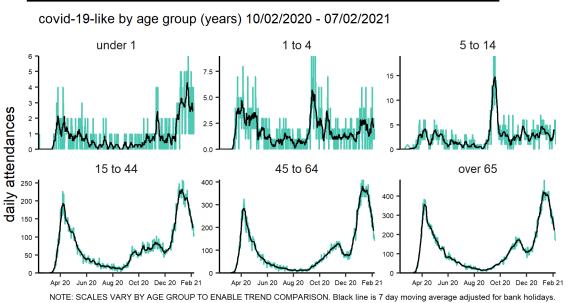


Daily number of attendances recorded as COVID-19-like attendances across the EDSSS network.



Daily number and 7 day moving average of COVID-19-like attendances within each age group.

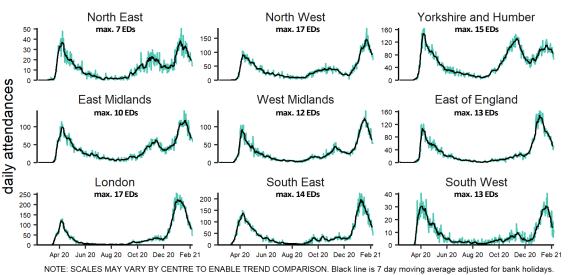




### 3b: COVID-19-like by PHE Centre

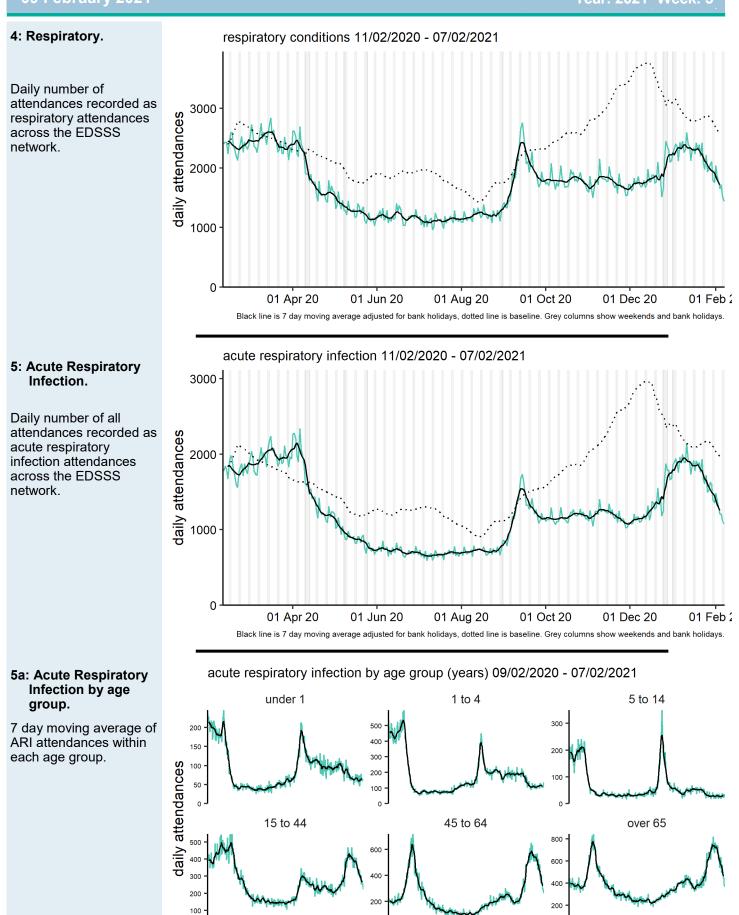
Daily attendances and 7 day moving average of COVID-19-like attendances within each PHE Centre (with the maximum number of EDs included in each time series). Please see '<u>notes and</u> <u>caveats'</u> for information on how EDs are selected for inclusion each week.

### covid-19-like by PHE Centre 09/02/2020 - 07/02/2021



## 09 February 2021





0

Apr 20 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21

Apr 20 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21

0

Apr 20 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21

NOTE: SCALES VARY BY AGE GROUP TO ENABLE TREND COMPARISON. Black line is 7 day moving average adjusted for bank holidays

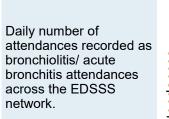


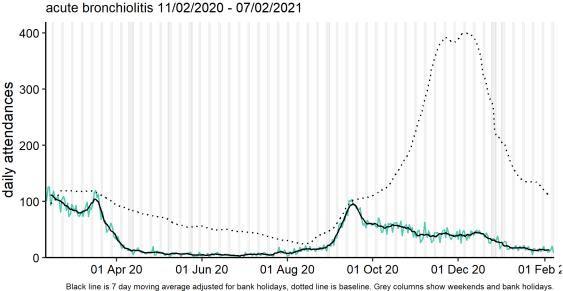
## 09 February 2021

6: Bronchiolitis/ bronchitis.

# EDSSS

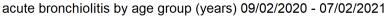
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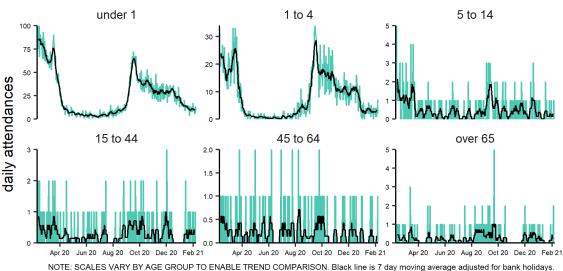




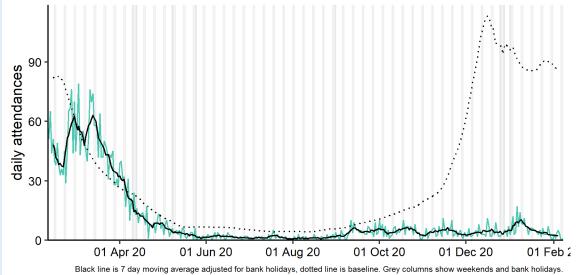
### 6a: Bronchiolitis/ bronchitis by age group

7 day moving average of bronchiolitis/ bronchitis attendances within each age group.









### 7: Influenza-like Illness.

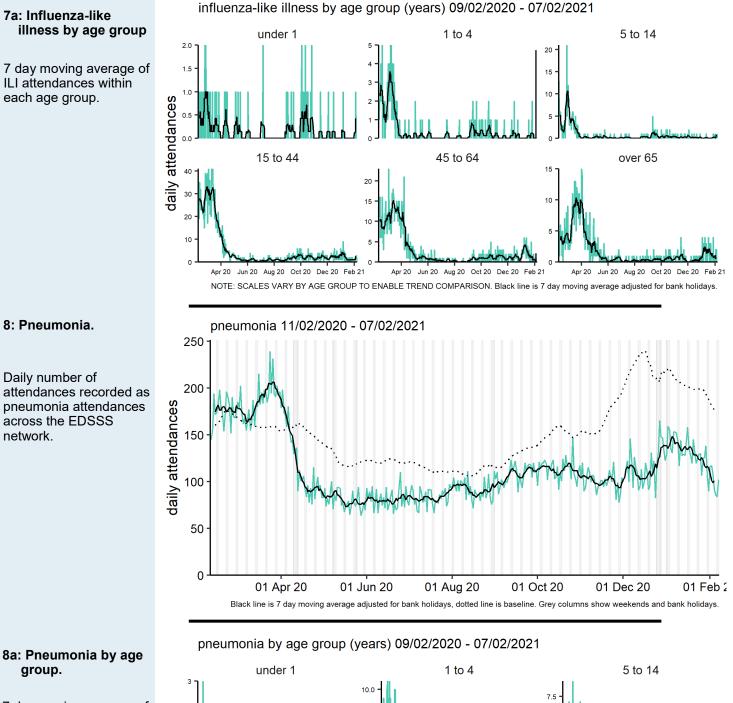
Daily number of attendances recorded as influenza-like illness attendances across the EDSSS network.

## EDSSS

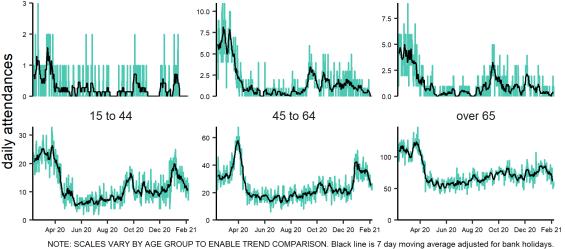


## 09 February 2021

### (ear: 2021 Week: 5



7 day moving average of pneumonia attendances within each age group.

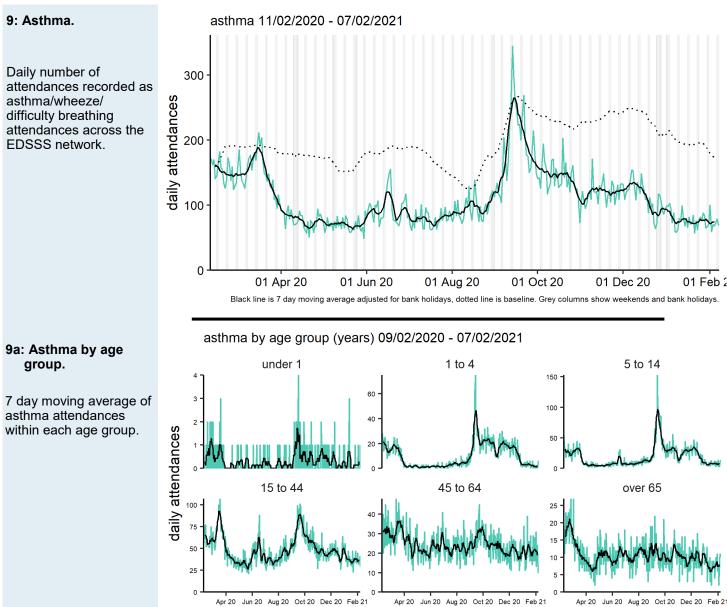


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## 09 February 2021

Year: 2021 Week: 5



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 NOTE: SCALES VARY BY AGE GROUP TO ENABLE TREND COMPARISON. Black line is 7 day moving average adjusted for bank holidays.

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## 09 February 2021

10: Gastrointestinal.

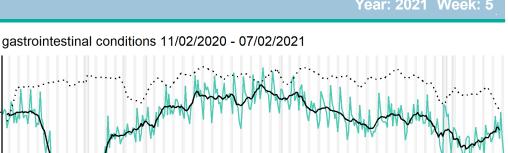
attendances recorded as

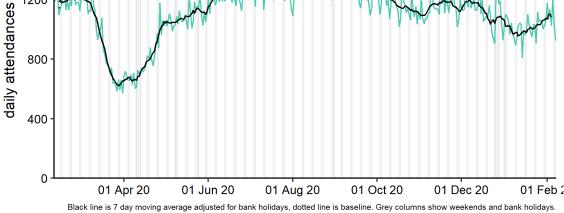
attendances across the EDSSS network.

1200

Daily number of

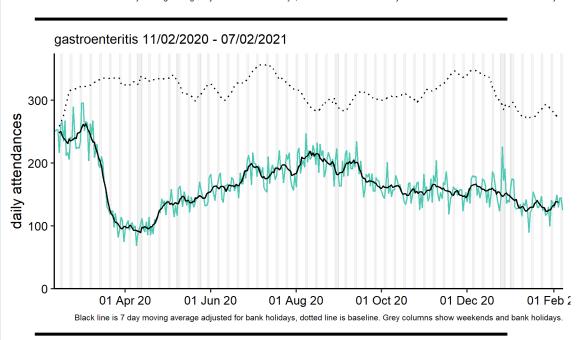
gastrointestinal





### 11: Gastroenteritis

Daily number of attendances recorded as gastroenteritis attendances across the EDSSS network.



#### gastroenteritis by age group (years) 09/02/2020 - 07/02/2021

under 1 1 to 4 5 to 14 30 20 daily attendances 15 to 44 45 to 64 over 65 50 25 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21 Apr 20 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21 Apr 20 Jun 20 Aug 20 Oct 20 Dec 20 Feb 21 Apr 20 NOTE: SCALES VARY BY AGE GROUP TO ENABLE TREND COMPARISON. Black line is 7 day moving average adjusted for bank holidays.

# 11a: Gastroenteritis by age group.

7 day moving average of gastroenteritis attendances within each age group.

12: Cardiac.

Daily number of

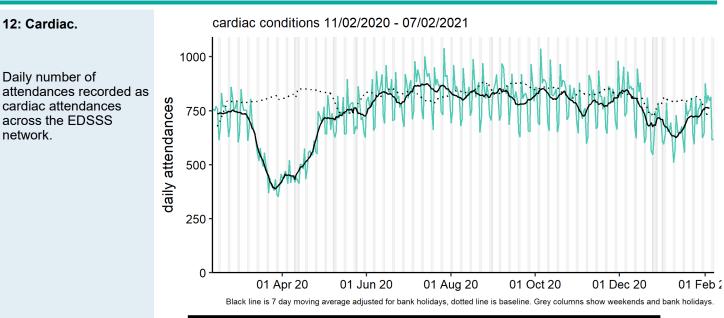
cardiac attendances

across the EDSSS

network.

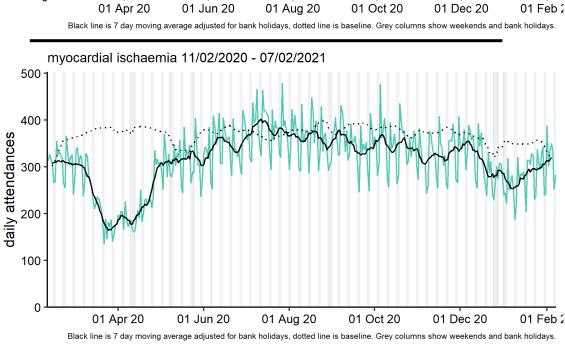
## 09 February 2021

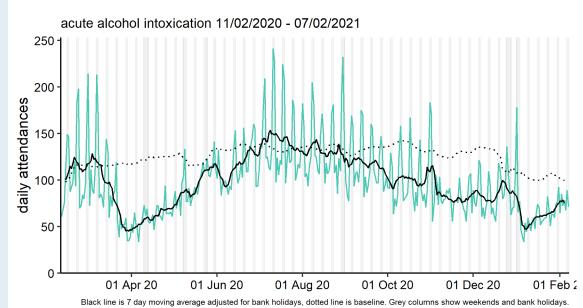




### 13: Myocardial Ischaemia.

Daily number of attendances recorded as myocardial ischaemia attendances across the EDSSS network.





### 14. Acute alcohol intoxication

Daily number of attendances recorded as acute alcohol intoxication attendances across the EDSSS network.

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Notes and caveats:	<ul> <li>National EDSSS began operating in April 2018. Following the introduction of the Emergency Care Data Set (ECDS) the: <u>https://www.england.nhs.uk/ourwork/tsd/ec-data-set/</u></li> <li>EDSSS receives an automated daily transfer of anonymised ED data from NHS Digital</li> </ul>
	► Not all EDs currently provide data through ECDS on a daily basis
	<ul> <li>EDs are eligible for inclusion in this report only where the EDSSS reporting criteria have been met during the surveillance week reported:</li> </ul>
	Data relates to attendances at a type 1 ED Data for 7 of the 7 most recent days was received by PHE Data for those days was received within 2 calendar days of the patient arrival
	► Where an ED meets these criteria, all data received from that ED previous to the current surveillance week is included. EDs eligible for inclusion is likely to change each week, which will in turn affect the historical data inclusion
	Individual EDs will not be identified in syndromic surveillance reporting in these bulletins
	►All EDs report diagnoses to EDSSS using SnomedCT codes
	►Not all diagnoses are confirmed
	The syndromic indicators presented in this bulletin are based on the primary diagnosis of each attendance as reported by EDs using SnomedCT codes:
	<b>Respiratory:</b> All respiratory diseases and conditions (infectious and non infectious). <b>Asthma:</b> As indicated by title.
	Acute Respiratory Infections (ARI): All acute infectious respiratory diseases. Bronchiolitis/ bronchitis: As indicated by title (excluding 'chronic'). Influenza-like Illness (ILI): As indicated by title. Pneumonia: As indicated by title.
	<b>COVID-19-like:</b> Coronavirus <sup>*</sup> or Severe Acute Respiratory Syndrome (SARS). *Please note: not all EDs have reported a coronavirus diagnosis code.
	<b>Gastrointestinal:</b> All gastrointestinal diseases and conditions (infectious and non infectious). <b>Gastroenteritis:</b> All infectious gastrointestinal diseases.
	Cardiac: All cardiac conditions. Myocardial Ischaemia: All ischaemic heart disease.
	Acute alcohol intoxication: As indicated by title (excluding 'chronic')
	EDSSS indicators are likely to be an underestimation of number attendances as they are based on primary diagnosis only.
	► The EDSSS should therefore be used to monitor trends in ED attendances and not numbers of 'cases'.
	►Baselines: Last refreshed: 1 February 2021
	<ul> <li>Represent seasonally expected levels of activity</li> </ul>
	<ul> <li>Constructed from historical data, taking into account:</li> </ul>
	change from sentinel to National EDSSS
	coverage (numbers of attendances and the individual type 1 EDs included)
	- Gastroenteritis baseline accounts for rotavirus vaccine introduction (July 2013)
	<ul> <li>Exclude data from 2020 due to the impact of the COVID-19 pandemic on ED services and patient healthcare seeking behaviour</li> </ul>
	Sentinel EDSSS ran from July 2010 to March 2018, collected data through a bespoke, voluntary network of EDs across England and Northern Ireland: <u>https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses</u>
Acknowledgements:	We are grateful to the clinicians in each ED and other staff within each Trust for their continued involvement in the EDSSS.
	We thank the Royal College of Emergency Medicine, NHS Digital and NHS England for their support in the development of national EDSSS, using anonymised data collection from ECDS.
	Emergency Department Syndromic Surveillance System Bulletin.
	<b>Produced by:</b> PHE Real-time Syndromic Surveillance Team 1 <sup>st</sup> Floor, 5 St Philips Place, Birmingham, B3 2PW

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 Web: <a href="https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses">https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses</a>