

Syndromic Surveillance Summary:

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

05 May 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: 17

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 26 April to 02 May 2021.

During week 17, COVID-19-like syndromic indicators decreased or remained stable. Selected acute respiratory indicators continued to increase in children aged under 15 years.

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: Access bulletin	During week 17, there were small increases in NHS 111 calls for cough, difficulty breathing and sore throat, mainly in children aged under 15 years (figures 4, 4a, 6, 6a, 7, & 7a). NHS 111 'potential COVID -19' calls remained stable (figure 8). All NHS 111 online assessment indicators were stable or decreasing during week 17 (figures 12-17).
GP In Hours: Access bulletin	During week 17, COVID-19 consultations increased slightly (figure 1). Influenza-like illness remained stable and similar to expected levels for this time of year (figure 3). Consultations for upper and lower respiratory tract infections increased in children aged <15 years (figures 2a & 6a). Gastroenteritis consultations increased, particularly in children aged 1-4 years (figures 8 & 9).
GP Out of Hours: Access bulletin	During week 17 GP out of hours contacts for acute respiratory infection increased slightly (figure 2); increases were particularly seen in children aged <15 years (figure 2a).
Emergency Department: Access bulletin	COVID-19-like emergency department attendances continued to decrease during week 17 (figure 3). Acute respiratory infection and bronchiolitis attendances increased slightly, particularly in child age groups, 1-4 and 5-14 years (figures 5a and 6a). Gastroenteritis increased nationally and in children under 5 years (figure 11a).
Ambulance: Access bulletin.	COVID-19 ambulance calls remained stable during week 17 however breathing problems calls increased slightly (figures 2 & 3).



05 May 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: (<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.
- 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.

Public Health England, 1st Floor, 5 St Philips Place, Birmingham, B3 2PW. **Tel:** 0344 225 3560 > Option 4 > Option 2. **Web:** <u>https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses</u>