

Syndromic Surveillance Summary:

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

26 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: 20

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 17 May to 23 May 2021.

During week 20, COVID-19-like syndromic indicators increased or remained stable. Acute respiratory infection indicators showed further increases in children aged under 15 years, and particularly in the 1-4 years age group.

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 20 there were increases in NHS 111 calls for cold/flu, fever and cough, notably in the 1-4 years age group (figures 2 & 2a, 3 & 3a, 4 & 4a). Cold/flu and cough are now above expected levels for the time of year. Sore throat calls also increased in the 1-4 years age group (figure 7a). Diarrhoea and vomiting calls increased in week 20 but remain below baseline levels (figures 9, 10).

GP In Hours:

Access bulletin

During week 20, COVID-19 consultations remained stable overall (figure 1). Consultations for upper respiratory tract infections continued to increase, particularly in children aged 1-4 years (figure 2a), as did lower respiratory tract infection consultations in children aged 1-4 years (figure 6a). Gastroenteritis consultations also increased in children aged 1-4 years (figure 8a).

GP Out of Hours:

Access bulletin

During week 20, GP out of hours contacts for acute respiratory infections increased, particularly in children under 15 years (figures 2 & 2a). Contacts for other syndromic indicators remained stable during week 20.

Emergency Department:

During week 20, COVID-19-like emergency department attendances decreased (figure 3).

Access bulletin

Acute respiratory infections continued to increase, particularly in children aged up to 5 years (figure 5a). Gastroenteritis attendances increased, again noted in the 1- 4 years age group (figures 11 and 11a). Attendances for acute alcohol intoxication increased (figure 14).

Ambulance:

Access bulletin.

COVID-19-like calls stabilised in week 20 (figure 2). Breathing problems were stable and remain at expected levels (figure 3). Unconscious/passing out calls increased and are at baseline levels (figure 9).



PHE Syndromic Surveillance Summary

26 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: (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.
- 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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