## Public Health England

# National Ambulance

#### Syndromic Surveillance System: England

#### 05 July 2021

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COVID-19-like Difficulty breathing Impact of heat or

cold.

arrest

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or poisoning

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#### Year: 2021 Week: 26

### Key messages

#### Data to: 04 July 2021

COVID-19-like and breathing problem calls increased during week 26 (figures 2 & 3). Cardiac indicators also increased slightly and are above baseline levels (figures 6 & 7). Overdose/ingestion/poisoning calls increased in week 26 and remain above baseline levels (figure 8).

## Baselines have been remodelled to account for changes due to COVID-19 and additional, new modelled lines have been added to the charts to represent expected levels if COVID-19 had not occurred.

A Heat-Health Watch system operates in England from 1 June to 15 September each year. As part of the Heatwave Plan for England, the PHE Real-time Syndromic Surveillance team will be routinely monitoring the public health impact of hot weather using syndromic surveillance data during this period. Heat-health watch level (current reporting week): Level 1: Summer preparedness http://www.metoffice.gov.uk/weather/uk/heathealth/

## Syndromic indicators at a glance:

Indicator		Calls*	<b>Trend</b> <sup>†</sup>	Level <sup>‡</sup>
COVID-19-like		12,445	increasing	-
Breathing problems		12,794	increasing	above baseline levels
Heat/ cold exposure		27	no trend	below baseline levels
Falls/ back injuries - traumatic		15,571	decreasing	above baseline levels
Cardiac	Cardiac/ respiratory arrest	2,381	increasing	above baseline levels
	Chest pain	11,909	increasing	above baseline levels
Overdose/ ingestion/ poisoning		4,517	increasing	above baseline levels
Unconscious/ passing out		10,073	no trend	above baseline levels

\* Number of syndromic calls received by PHE in the reporting week

<sup>†</sup> Trend is defined as the overall activity over the last few weeks

 $^{\ddagger}$  Current activity in comparison to historical baselines, which have been constructed using data from 1 January 2018

Day	/ Trusts	* Week 26
Monday	/ 10	18,050
Tuesda	iy 10	17,242
Wedne	sday 10	17,677
Thursd	ay 10	17,620
Friday	10	17,511
Saturda	ay 10	17,384
Sunday	v 10	17,826
Tota	al (max) 1	0 123,310

Data summary:

Daily total syndromic counts and number of English ambulance trusts for which data is included in this bulletin.

#### \* Ambulance Trusts (England) submitting daily syndromic surveillance data included in report





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Public Health England Ambulance

## **Ambulance**



#### **3a: Difficulty Breathing** calls by PHE Centre.

Number of daily breathing problems calls by PHE Centre. Please note: very few calls of this type are recorded in the East Midlands PHE Centre.





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**X** 

Daily number of calls related to 'falls/ back injury - traumatic', England.







Black line is 7 day moving average adjusted for bank holidays. Black dotted line is baseline. Orange dotted line is expected pre-covid-19 level. Grey columns show weekends and bank holidays.

#### 6: Cardiac or respiratory arrest.

Daily number of calls related to 'cardiac/ respiratory arrest', England.



## Ambulance

Week:

26

Year:

2021



#### 7: Chest pain.





### Overdose or ingestion or poisoning 05/07/2020 - 04/07/2021



#### Unconscious or passing out 05/07/2020 - 04/07/2021



Black line is 7 day moving average adjusted for bank holidays. Black dotted line is baseline. Orange dotted line is expected pre-covid-19 level. Grey columns show weekends and bank holidays.

#### 8: Overdose or ingestion or poisoning.

Daily number of calls related to 'overdose/ ingestion/ poisoning', England.

## 9: Unconscious orpassing out.

Daily number of calls related to 'unconscious', England.

## Ambulance

05 July 2021	Year: 2021 Week: 26
COVID-19-like ambulance calls:	<ul> <li>During March 2020 ambulance trusts started using a 'Pandemic/Epidemic/Outbreak' triage card to assess potential COVID-19 patients. Calls using this 'Pandemic' triage are now presented in this bulletin as 'COVID-19-like' calls.</li> </ul>
	<ul> <li>When the Pandemic triage was introduced the number of syndromic indicator calls e.g. breathing problems decreased, reflecting the increased use of the pandemic triage.</li> </ul>
	• Please note that these ambulance calls are not an absolute count of COVID-19 cases assessed by ambulance trusts: not all ambulance trusts use the Pandemic triage card; other chief complaint categories and local codes are also used to triage potential COVID-19 patients.
	• The 'COVID-19-like' call data presented in this bulletin should therefore be used to monitor trends in calls and not numbers.
Introduction to charts:	• A 7-day moving average (adjusted for bank holidays) is overlaid on the daily data reported in each chart, unless specified.
	<ul> <li>Baselines have been constructed using historical data since 1 January 2018</li> </ul>
	<ul> <li>Baselines have been remodelled to account for changes due to COVID-19 and the orange dotted lines are counter-factual models showing seasonally expected levels if COVID-19 had not occurred.</li> </ul>
	• National ambulance syndromic surveillance (NASS) call data are analysed by the Real- time Syndromic Surveillance Team (ReSST) on a daily basis to identify national and regional trends. A statistical algorithm underpins each syndromic surveillance 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.
	Coverage:
Notes and further information:	<ul> <li>Total syndromic calls includes all calls where the chief presenting complaint can be mapped to one of the syndromic indicators monitored by Public Health England.</li> </ul>
	• Some indicators are not routinely presented in this report.
	• Total syndromic calls is lower than the total number of calls received by ambulance trusts.
	Description of included NASS indicators:
	<ul> <li>Difficulty breathing: persons finding it difficult to breathe.</li> <li>Impact of heat or cold: heat or cold exposure.</li> </ul>
	<ul> <li>Injuries: persons falling or having a back injury.</li> </ul>
	Cardiac or respiratory arrest: persons who have stopped or have ineffective breathing or/and no pulse.
	Chest Pain: persons experiencing chest pain or chest discomfort.
	• Overdose or ingestion or poisoning: overdoses, ingestion of a substance or poisoning.
	• Unconscious or passing out: persons who are unconscious, not alert or fainting.
Acknowledgements:	We would like to thank:
	<ul> <li>North East, North West, Yorkshire, East Midlands, West Midlands, East of England, London, South East Coast, South Central, and South Western NHS Ambulance Trusts for submitting anonymised, daily data to the National Ambulance Syndromic Surveillance system.</li> </ul>
	•The Association of Ambulance Chief Executives for their support in establishing NASS.
Contact ReSST:	

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#### Produced by: PHE Real-time Syndromic Surveillance Team