

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

11 August 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: 31

Summary.

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Reporting week: 2nd to 8th August 2021.

During week 31, respiratory and gastrointestinal indicators remained above seasonally expected levels in all systems. ED attendances for acute bronchitis continued to increase in children under 5 years, whilst gastrointestinal indicators decreased in younger age groups.

Remote Health Advice:	During week 31, calls for vomiting and diarrhoea continued to decrease but remain above seasonal levels (figure 9 and 10).
Access bulletin	
GP In Hours:	During week 31, GP consultations for respiratory and gastrointestinal symptoms remained stable but above seasonal baselines. Upper and lower respiratory tract
Access bulletin	infections in children aged under 15 continued to decrease (figures 2a & 6a).
GP Out of Hours: Access bulletin	During week 31, GP out of hours contacts for respiratory and gastrointestinal disease remained stable or decreased but are still above seasonally expected levels.
Emergency Department: Access bulletin	During week 31, acute bronchiolitis attendances increased and remained elevated in children aged less than 5 years (figures 6 & 6a). Gastroenteritis attendances decreased across all age groups except in those over 65 years (figures 11 & 11a).

Ambulance: Nothing new to report during week 31.

Access bulletin



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- 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>