



17 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: 32

Summary.

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Reporting week: 9th to 15th August 2021.

During week 32, gastrointestinal indicators remained above seasonally expected levels across multiple systems. Respiratory indicators remained stable.

Remote Health Advice:

During week 32, respiratory and gastroenteritis related indicators remained stable but above baseline for this time of year.

[Access bulletin](#)

GP In Hours:

During week 32, GP consultations for gastroenteritis increased slightly (figure 8). Consultations for respiratory indicators remained stable.

[Access bulletin](#)

GP Out of Hours:

During week 32, GP out of hours contacts for respiratory and gastrointestinal disease remained stable or decreased but are still above seasonally expected levels.

[Access bulletin](#)

Emergency Department:

During week 32, COVID-19-like attendances remained stable. Acute bronchiolitis attendances remained stable nationally but elevated in children aged less than 5 years (figures 6 & 6a). In addition, acute bronchiolitis attendances increased in the South East, South West and East of England, but decreased in the North East, North West and Yorkshire and Humber (figure 6b).

[Access bulletin](#)

Ambulance:

During week 32, COVID-19-like and difficulty breathing calls remained stable (figure 2 and 3 respectively).

[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: (<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.

Public Health England, 1st Floor, 5 St Philips Place, Birmingham, B3 2PW. **Tel:** 0344 225 3560 > Option 4 > Option 2.

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