

Syndromic Surveillance Summary:

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

25 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: 33

Summary.

Subscribe to the weekly syndromic surveillance email

Reporting week: 16 to 22 August 2021.

During week 33 respiratory indicators increased slightly nationally, across multiple systems.

Gastrointestinal indicators remained stable above seasonally expected levels across multiple systems.

Remote Health Advice:

During week 33, calls and online assessments for cough increased slightly and are above baseline levels (figures 4 & 15). The increase in cough calls was noted in adults aged 15-44 years in particular (figure 4a).

Access bulletin

GP In Hours: During week 33, GP consultations for upper and lower respiratory tract infections

increased slightly particularly in adults (figures 2, 2a, 6 & 6a).

Access bulletin Consultations for asthma also showed a slight increase (figure 11).

GP Out of Hours:

During week 33, GP out of hours contacts for acute respiratory infection increased slightly particularly in adults aged 15-44years (figure 2).

Access bulletin

Diarrhoea and vomiting contacts also increased, with vomiting continuing above baseline levels (figures 8 & 9).

Emergency Department:

During week 33, COVID-19-like attendances increased slightly, particularly in adults aged 45 years and over (figures 3 & 3a).

Access bulletin

Acute bronchiolitis attendances decreased slightly nationally, although remain elevated in children aged less than 5 years (figures 6 & 6a). In addition, acute bronchiolitis attendances continued to increase in the North East, South East and South West (figure 6b).

Ambulance:

During week 33, COVID-19-like and difficulty breathing calls decreased (figures 2 and 3).

Access bulletin



PHE Syndromic Surveillance Summary

25 August 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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