

9<sup>th</sup> July 2020



Public Health  
England



Dear Colleagues

This letter is intended to capture the data sources on COVID-19 that are currently available to both the local authorities and the public. This information covers the activities of the Test and Trace service, outbreaks and broader surveillance that is related to COVID-19

As you will be aware there are multiple sources of information, and hence I hope that this letter provides clarity on the key sources of COVID information available to enable and inform your local responses. This letter includes three sections on what is available: 1) to the public; 2) to Local Authority's via DsPH as record level data; 3) to Local Authority's via DsPH in the form of reports and dashboards.

While progress has been made on the granularity, timeliness, and breadth of information we know that there is more data intelligence and analytics that is wanted at a local level. Through the networks that have been established with local authorities we are aware of many specific requests for additional information. We will continue to work with the national teams to get these requirements delivered locally.

We welcome continued feedback on key priorities to support the effective prevention and management of COVID-19.

Best,

[Redacted signature]

[Redacted signature]

## Data in the public domain

### Summary of national figures

- National figures for COVID-19 tests, cases, deaths for the UK and every country of the UK are produced daily  
<https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public>
- National figures for the NHS Test and Trace service are produced weekly. This includes numbers of people tested; people testing positive; time taken for results to become available; numbers of people transferred to the contact tracing service; the time taken for them to be reached; close contacts identified for complex and non-complex cases, and the time taken for them to be reached.  
<https://www.gov.uk/government/collections/nhs-test-and-trace-statistics-england-weekly-reports>

### Public dashboards with geographic breakdown

- The Weekly Coronavirus Disease 2019 (COVID -19) Surveillance Report, produced by Public Health England, summarises information from a variety of surveillance systems covering *national* data on cases, age, gender, rates, ethnicity, NHS111, google searches, general practice consultations, emergency attendances, hospitalisation rates deaths (age, ethnicity, excess mortality) antibody testing, global data. There is also *regional* data and weekly rates



of cases by *local authority including a PHE top 10 of UTLAs* with the highest weekly rate of cases

[www.gov.uk/government/publications/national-covid-19-surveillance-reports](https://www.gov.uk/government/publications/national-covid-19-surveillance-reports)

- The Coronavirus (COVID-19) in the UK dashboard contains information at UTLA and LTLA level on cases and rates and is updated daily  
<https://coronavirus.data.gov.uk/>
- A new dashboard, launched on June 25, has been updated with sub-national data including people tested and positive cases at national, regional and local authority level. This includes the ability to view epidemic curves and 7-day averages as well as the ability to look at positive cases as a proportion of all tests  
<https://coronavirus-staging.data.gov.uk/>
- On Friday 3 July, NHS-Digital released a public version of the Containment dashboard, Progression, that enables triages and cases to be tracked through time at UTLA level: that includes, by UTLA, the number of people with coronavirus identified through an NHS lab (Pillar 1) or from a commercial swab testing (Pillar 2). In addition, the count (not people) of triages of coronavirus symptoms through NHS Pathways by calls to NHS 111 and 999 and through NHS111 online.  
<https://digital.nhs.uk/dashboards/progression>

## Individual (case) level data accessible by local authorities

- Public Health England started providing individual-level, test data on the 24 June enabled through a data sharing agreement with Directors of Public Health. This contains additional information such as full postcode, age and ethnicity where available.
- Since last week PHE also included individual case data across pillars 1 (NHS and PHE laboratories) and 2 (commercial laboratories) of the testing programme. This data is being provided on a weekly basis but will shortly move to a daily frequency.
- Under this arrangement the local authorities are the data controllers and are responsible for what they share and publish. The local authority must ensure compliance with the relevant standards.

### Information on individual cases to help outbreak management

- PHE shares information with local directors of public health as part of the routine investigation of outbreaks and incidents. This includes information on individual cases and their contacts as required to support the public health response. This continues as the usual part of the management of COVID-19 outbreaks in specific settings or groups.



## Aggregated and interactive dashboards and reports accessible to approved users

- All the following (except the Containment and LRF dashboard) products are currently available to Directors of Public Health through a PHE SharePoint site.

### Local Authority Covid-19 Containment Dashboard

- This dashboard, produced by NHS-Digital, has been available since 11 June and provides a picture in the local area of cases and Covid triage data. There is a geographic breakdown to LTLA of the number of tests conducted, the total number of positive cases and a rolling average, as well as information on 111, 999 and online triage cases related to COVID-19. It enables easy comparison of areas.
- From July 6<sup>th</sup> the number of positive tests and 111 and 999 telephony triages is available to LSOA level. This dashboard is updated daily with a three-day lag due to the changeable nature of new data.
- The next development is to provide data at the full postcode level within the dashboard. Given this information is more sensitive it is reliant on a more robust security infrastructure that is being developed including Two Factor Authentication. Access to this dashboard is currently scheduled to be rolled out on Wednesday 15 July.
- Requests for new accounts should be emailed to [redacted] in the subject line. Each requestor to provide the following information:
  - Name, NHS Email Address, Role, Organisation, Mobile Number, Business Justification (reason for access)
  - After approval, the login info and T&Cs will be sent out

### Contact tracing

- Public Health England produce a daily contact tracing report – this report provides information on contact tracing activity at a regional and UTLA level. This includes cases invited, cases completed, contacts identified, contacts reached, including aggregate totals of contacts associated with incidents.
- A more detailed contact tracing report is produced weekly with a set of quality and epidemiological information including numbers of cases, case outcomes, number of contacts, contact outcomes, numbers of contacts per case and by exposure setting and time to completion. Data is presented at regional and UTLA level.

### Daily Situational Report

- Public Health England provides a daily situational report - this is a *national summary* of tests, cases, ethnicity, residential property type, workplace outbreaks, contacts by exposure settings/activities, links to healthcare settings. There is breakdown for some of this data by *region*. By *local authority* there is information on those UTLA's with the highest rates of incidence, testing, positivity rates, exceedances, outbreaks in educational settings. The aim is to bring together much of the information and intelligence on where the epidemic is currently taking place both in terms of place and groups of the population to help inform



local action. It is anticipated that the Covid-19 Situational Awareness Summary will be shared with the *public* in the next few days.

## Daily Exceedance Report

- Public Health England provides a regional daily exceedance report to Directors of Public Health. Exceedance scores are calculated using the current and historic data on cases of COVID-19 for each lower tier local authority area. An exceedance means that an area has a greater than expected rate of infection compared with the usual background rate for that location. This is a way of assessing a recent change in incidence in that area. Every day, PHE produce in depth reports for the areas that have exceeded (RED reports) shared with appropriate DsPH.

## Daily Surveillance Report

- Public Health England produce a daily surveillance report. The report provides descriptive information (trends and demography) at health protection team and local authority level of case data, testing data, in-hospital mortality data, outbreaks reported in a range of settings, syndromic surveillance data (GP out-of-hours calls, NHS 111 calls, emergency department attendances) and COVID-19 Hospitalisation in England Surveillance System (CHES) data.

## Bespoke epidemiological reports (deep dives)

- In addition, the PHE Field Service teams also support local partners with more detailed epidemiological analyses as needed to inform local action and agreed locally.

## Local Resilience Forum Dashboard

- The LRF dashboard is run by MHCLG to show multiple data points showing whole system response and resilience. It is accessible through the Local Resilience Forums and contains indicators such as police workforce, food supply, proportions of population shielding and ventilator availability.

## Future developments

From the feedback and requests made by local authorities there are several improvements being made to the existing sources. This includes giving full postcode and later demographics (where available) in the NHSD Dashboard. The PHE data feed will soon be available daily and will continue to be improved in terms of data quality. Improvements are being made on upstream data capture to improve ethnicity, occupation and place of work completeness. Work is ongoing jointly between the Joint Biosecurity Centre and PHE to develop a set of analytical products that will aid in early detection of outbreaks as well as the next best action to take.

We continue to welcome feedback on priority data feeds or improvements to existing sources to guide the work of the national teams.