

# **Emergency Department**

Syndromic Surveillance System: England

Data to: 09 December 2018

12 December 2018

Year: 2018 Week: 49

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### Key messages

During week 49 ED attendances for bronchiolitis continued to decrease (figure 6) with decreases particularly seen in the <1 years age group (figure 6a) suggesting that the recent increase in respiratory syncytial virus (RSV) activity has peaked, in line with seasonal expectations.

The **national EDSSS**, based on the newly introduced NHS England <u>Emergency Care Data Set</u>, is still under development and reports only from April 2018. Future bulletins will include further epidemiological analyses and, where possible, baselines constructed using previous surveillance data from the **sentinel EDSSS** (up to March 2018).

This bulletin only includes Type 1 EDs reporting with sufficient timeliness and frequency for **weekly** analysis. Full details of inclusion criteria can be found on page 6.

A Cold Watch System operates in England from 1 November to 31 March each year. As part of the Public Health England Cold Weather Plan for England the PHE Real-time Syndromic Surveillance Team will be monitoring the impact of cold weather on syndromic surveillance data during this period.

Cold weather alert level (current reporting week): Level 1 - Winter preparedness

http://www.metoffice.gov.uk/weather/uk/coldweatheralert/

### Diagnostic indicators at a glance:

Further details on the syndromic indicators reported can be found on page 6.

Indicator	<b>Current trend</b>	
Respiratory	no trend	
Acute Respiratory Infection	no trend	
Bronchiolitis	decreasing	
Influenza-like Illness	increasing	
Pneumonia	increasing	
Asthma	no trend	
Gastrointestinal	no trend	
Gastroenteritis	no trend	
Cardiac	no trend	
Myocardial Ischaemia	no trend	

# EDSSS weekly report statistics

Only Type 1 EDs meeting the weekly reporting criteria are included (see page 6 for details).

\*max EDs included across full time period reported in charts, individual days may include fewer EDs.

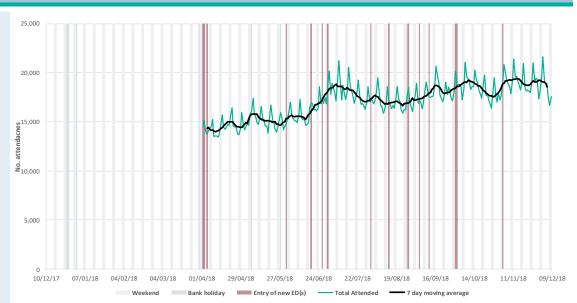
Date	Total	Diagnoses Coded		Type 1 EDs
	Attendances	Number	%	Included
03/12/2018	21,613	15,291	70.7%	78
04/12/2018	19,065	13,525	70.9%	78
05/12/2018	18,918	13,505	71.4%	78
06/12/2018	18,925	13,487	71.3%	78
07/12/2018	17,284	12,606	72.9%	76
08/12/2018	16,677	11,582	69.4%	76
09/12/2018	17,560	11,861	67.5%	74
Total	130,042	91,857	70.6%	(max)* 78



#### 1: Total attendances.

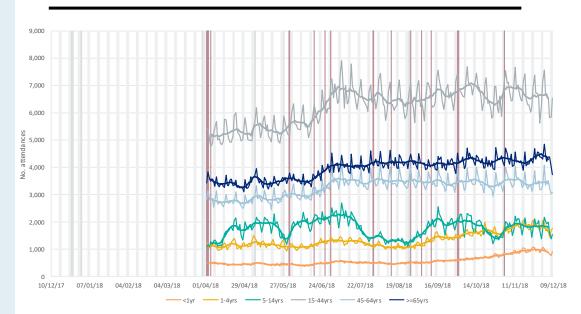
Daily number of total attendances recorded, across the EDSSS network.

The entry of new ED(s) is marked by a vertical **red** line (see page 6 for inclusion criteria).



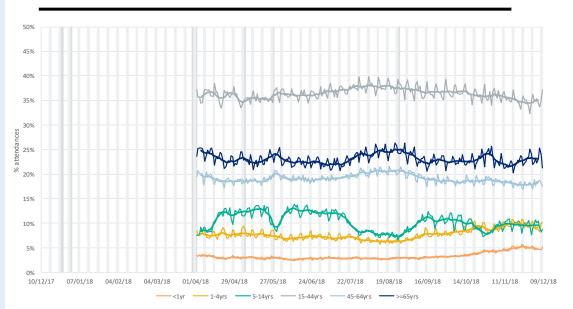
# 2: Daily attendances by age: Numbers.

Daily number of total attendances, by age group, recorded across the EDSSS network.



# 3: Daily attendances by age: Percentages

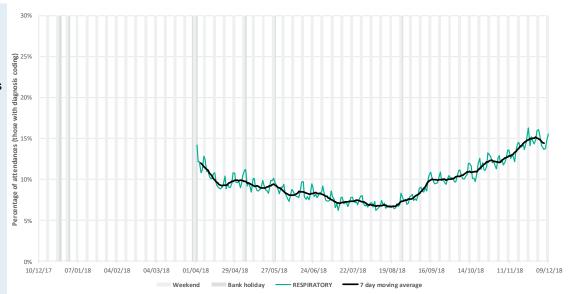
Daily percentage of total attendances by age group, recorded across the EDSSS network.





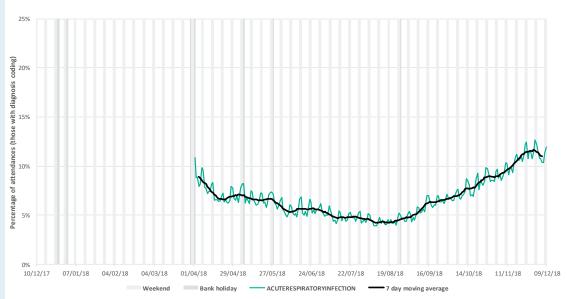
### 4: Respiratory.

Daily percentage of all attendances recorded as respiratory attendances across the EDSSS network.



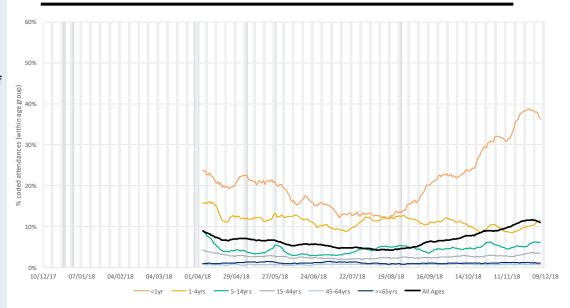
# 5: Acute Respiratory Infection.

Daily percentage of all attendances recorded as acute respiratory infection attendances across the EDSSS network.



# 5a: Acute Respiratory Infection by age group.

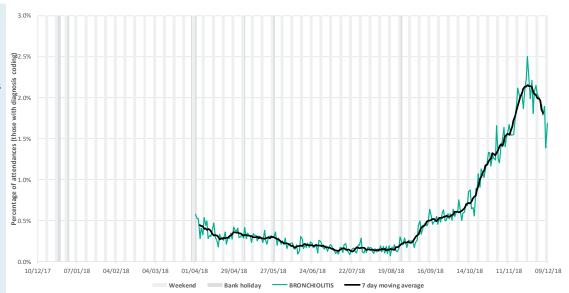
7 day moving average of ARI attendances presented as a proportion of the attendances within each age group.





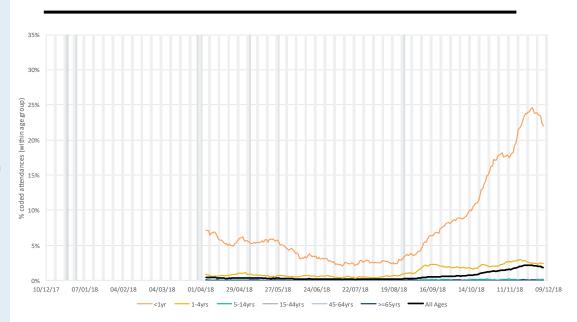
#### 6: Bronchiolitis/ bronchitis.

Daily percentage of all attendances recorded as bronchiolitis/ acute bronchitis attendances across the EDSSS network.



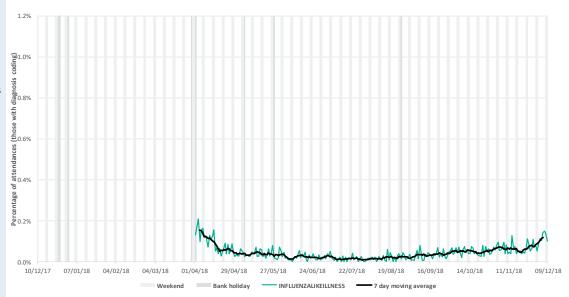
#### 6a: Bronchiolitis/ bronchitis by age group

7 day moving average of bronchitis/ bronchiolitis attendances presented as a proportion of the attendances within each age group.



### 7: Influenza-like Illness.

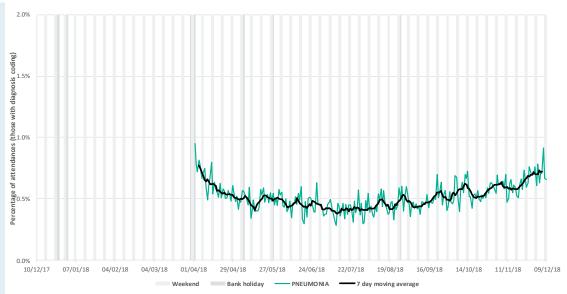
Daily percentage of all attendances recorded as influenza-like illness attendances across the EDSSS network.





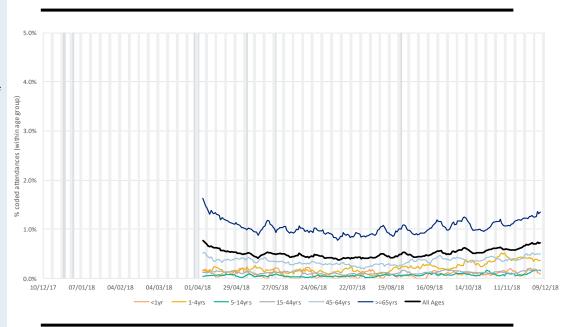
#### 8: Pneumonia.

Daily percentage of all attendances recorded as pneumonia attendances across the EDSSS network.



# 8a: Pneumonia by age group.

7 day moving average of pneumonia attendances presented as a proportion of the attendances within each age group.

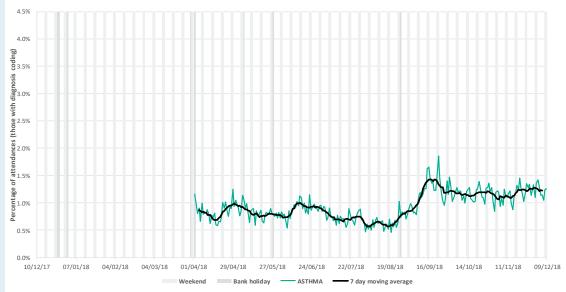


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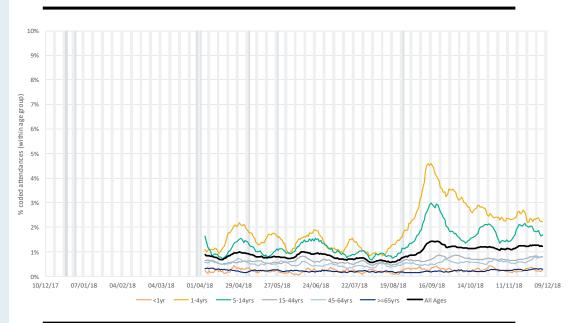
### 9: Asthma.

Daily percentage of all attendances recorded as asthma/wheeze/ difficulty breathing attendances across the EDSSS network.



# 9a: Asthma by age group.

7 day moving average of asthma/wheeze/ difficulty breathing attendances presented as a proportion of the attendances within each age group.

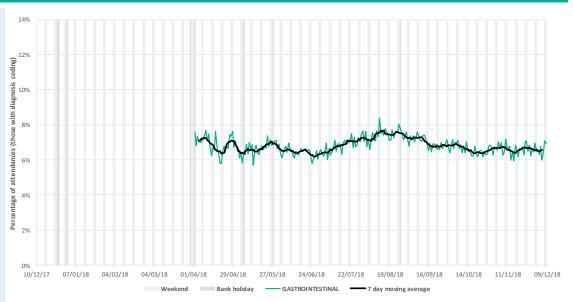


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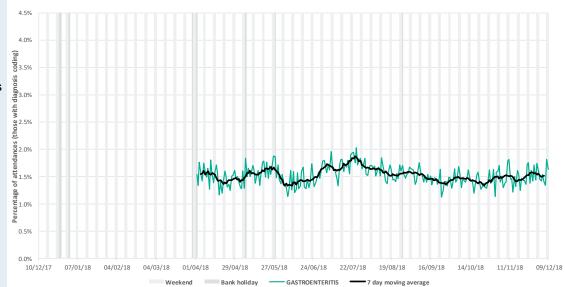
#### 10: Gastrointestinal.

Daily percentage of all attendances recorded as gastrointestinal attendances across the EDSSS network.



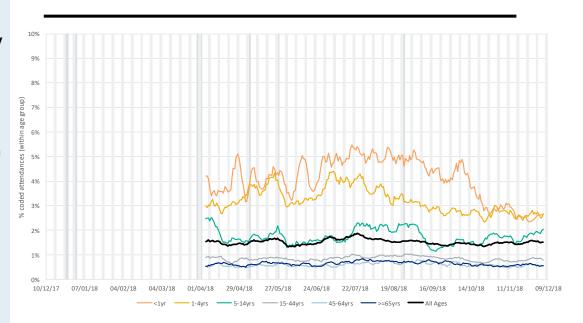
#### 11: Gastroenteritis

Daily percentage of all attendances recorded as gastroenteritis attendances across the EDSSS network.



# 11a: Gastroenteritis by age group.

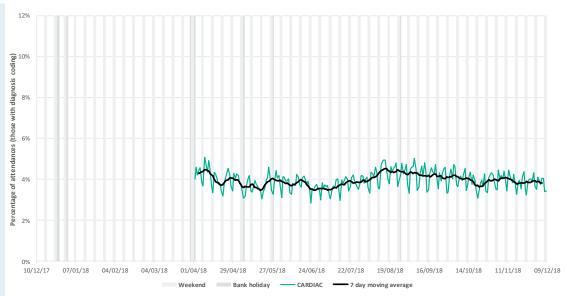
7 day moving average of gastroenteritis attendances presented as a proportion of the attendances within each age group.





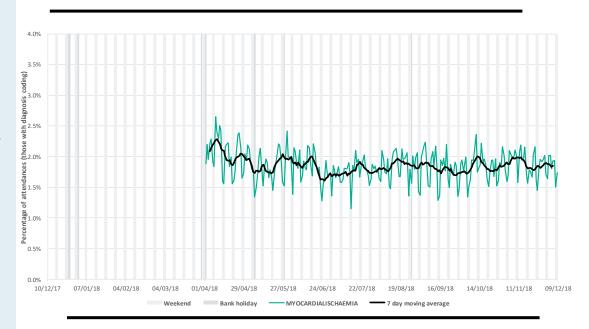
#### 12: Cardiac.

Daily percentage of all attendances recorded as cardiac attendances across the EDSSS network.



# 13: Myocardial Ischaemia.

Daily percentage of all attendances recorded as myocardial ischaemia attendances across the EDSSS network.



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#### Notes and caveats:

- ▶ National EDSSS began operating in April 2018
- ▶ Following the introduction of the Emergency Care Data Set (ECDS) the national reporting of secondary care activity data through the commissioning data sets mechanism from EDs to NHS Digital became a daily feed:

https://www.england.nhs.uk/ourwork/tsd/ec-data-set/

- ▶ EDSSS receives an automated daily transfer of anonymised ED data from NHS Digital
- ▶ The number of EDs reporting through ECDS continues to increase
- ▶Not all EDs currently provide data through ECDS on a daily basis
- ► EDs are eligible for inclusion in this report only where the **weekly EDSSS reporting criteria** have been met during the surveillance week reported:

Data relates to attendances at a type 1 ED

Data for 4 of the 7 days was received by PHE

Data for those days was received within 2 calendar days of the patient arrival

- ▶ Where an ED meets these criteria, all data received from that ED previous to the current surveillance week is included.
- ▶EDs eligible for inclusion is likely to change each week, which will in turn affect the historical data inclusion
- ▶ Individual EDs will not be identified in syndromic surveillance reporting in these bulletins
- ▶ All EDs report diagnoses to EDSSS using SnomedCT codes. Where Snomed codes are not used the ED is excluded from indicator analysis
- ▶The syndromic indicators presented in this bulletin are based on the SnomedCT diagnosis codes reported by EDs:

Respiratory: All respiratory diseases and conditions (infectious and non infectious).

Acute Respiratory Infections (ARI): All acute infectious respiratory diseases.

Asthma: As indicated by title.

Bronchiolitis/ bronchitis: As indicated by title (excluding 'chronic').

Influenza-like Illness (ILI): As indicated by title.

Pneumonia: As indicated by title.

**Gastrointestinal:** All gastrointestinal diseases and conditions (infectious and non infectious).

Gastroenteritis: All infectious gastrointestinal diseases.

Cardiac: All cardiac conditions.

Myocardial Ischaemia: All ischaemic heart disease.

- ► Sentinel EDSSS 2010 to March 2018, collected data through a bespoke, voluntary network of EDs across England and Northern Ireland
- ➤ Sentinel EDSSS reports be found in bulletins up to and including week 13 2018: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses

#### **Acknowledgements:**

We are grateful to the clinicians in each ED and other staff within each Trust for their continued involvement in the EDSSS.

We thank the Royal College of Emergency Medicine, NHS Digital and NHS England for their support in the development of national EDSSS, using anonymised data collection from ECDS.

**Emergency Department Syndromic Surveillance System Bulletin.** 

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