



19 December 2018

Year: 2018 Week: 50

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## Key messages

Data to: 16 December 2018

During week 50 ED attendances for bronchiolitis continued to decrease (figure 6), in line with seasonal expectations. There were also small decreases in respiratory and acute respiratory infection attendances (figures 4 & 5).

The **national EDSSS**, based on the newly introduced NHS England [Emergency Care Data Set](#), 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 / 2—Alert & readiness**

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

## EDSSS weekly report statistics

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

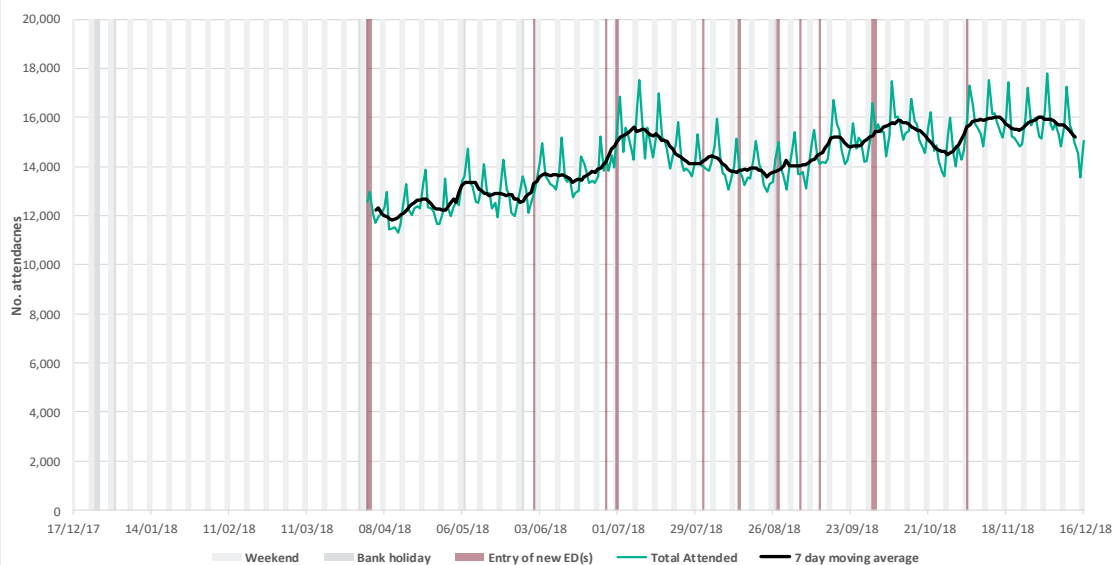
\*max EDs included across full time period reported in charts, individual days may include fewer EDs.

Date	Total Attendances	Diagnoses Coded		Type 1 EDs Included
		Number	%	
10/12/2018	17,247	12,396	71.9%	66
11/12/2018	15,662	11,181	71.4%	66
12/12/2018	15,420	11,125	72.1%	66
13/12/2018	14,957	10,578	70.7%	66
14/12/2018	14,551	10,840	74.5%	66
15/12/2018	13,575	9,476	69.8%	65
16/12/2018	15,038	10,755	71.5%	64
<b>Total</b>	<b>106,450</b>	<b>76,351</b>	<b>71.7%</b>	<b>(max)* 66</b>

## 1: Total attendances.

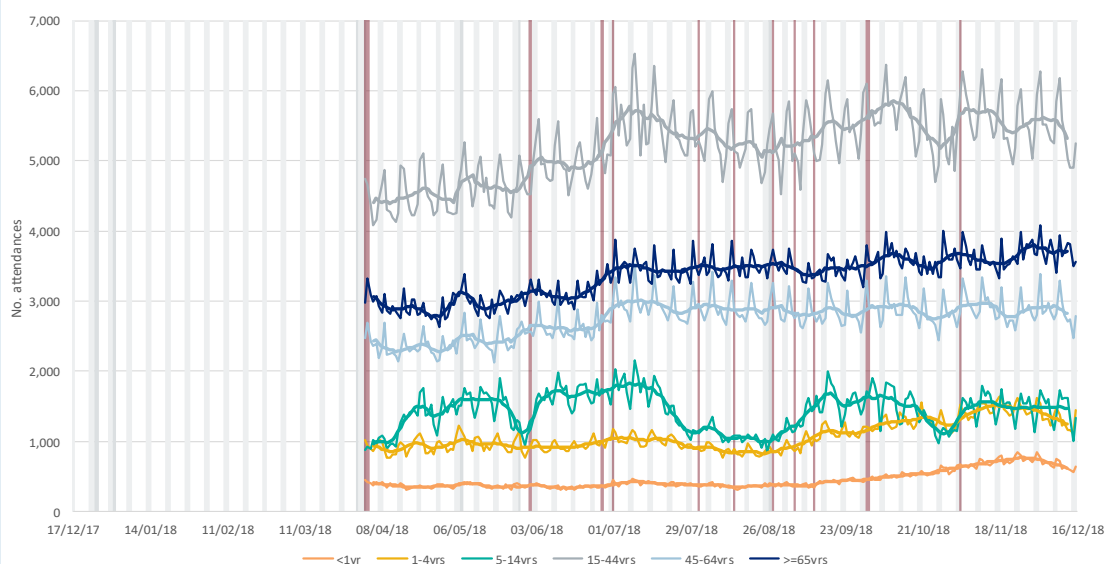
Daily number of total attendances recorded, across the EDSSS network.

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



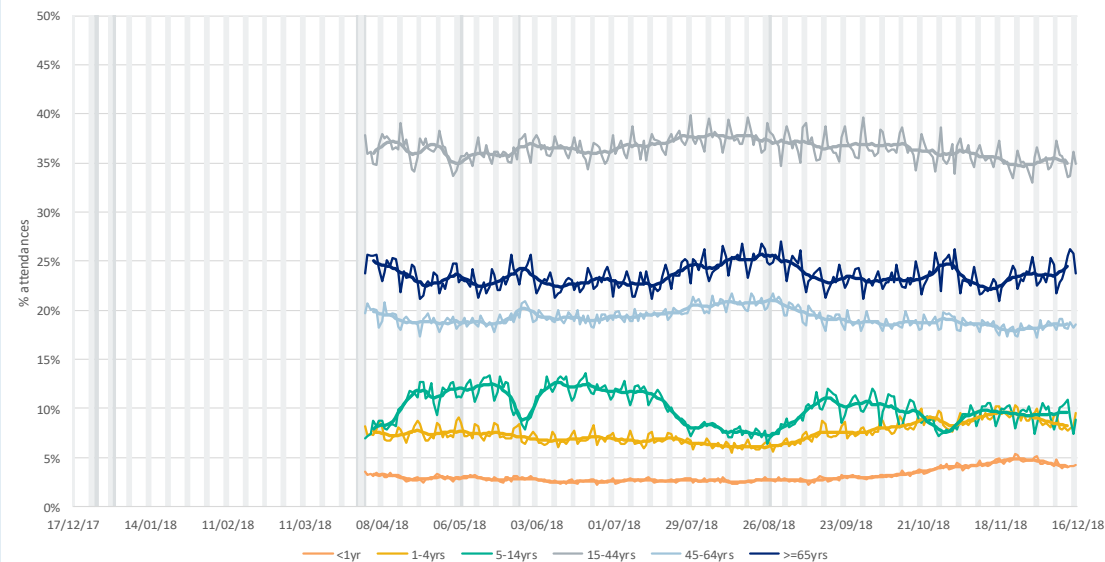
## 2: Daily attendances by age: Numbers.

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



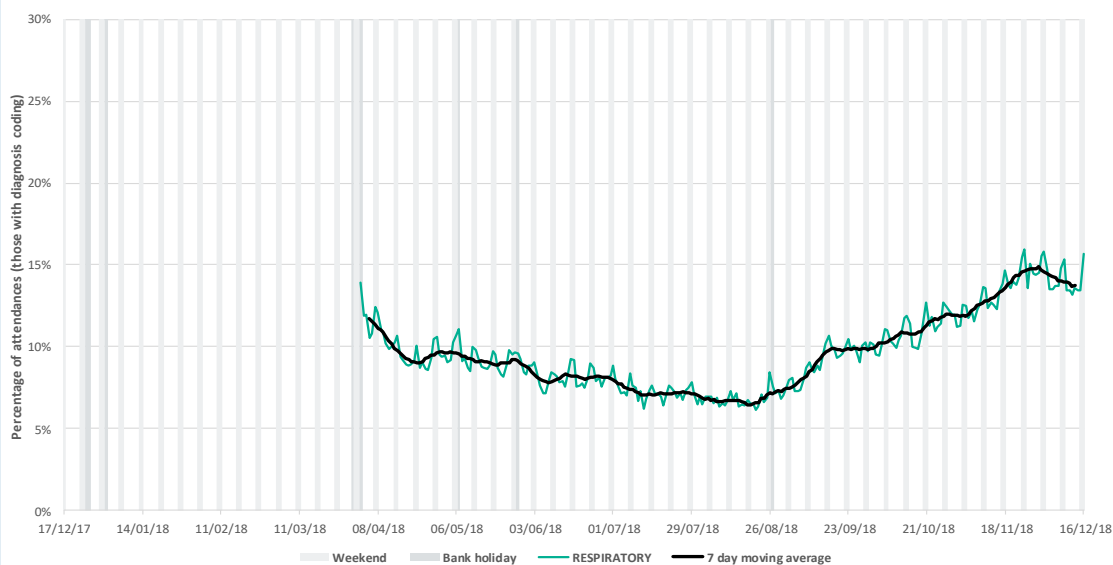
## 3: Daily attendances by age: Percentages

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



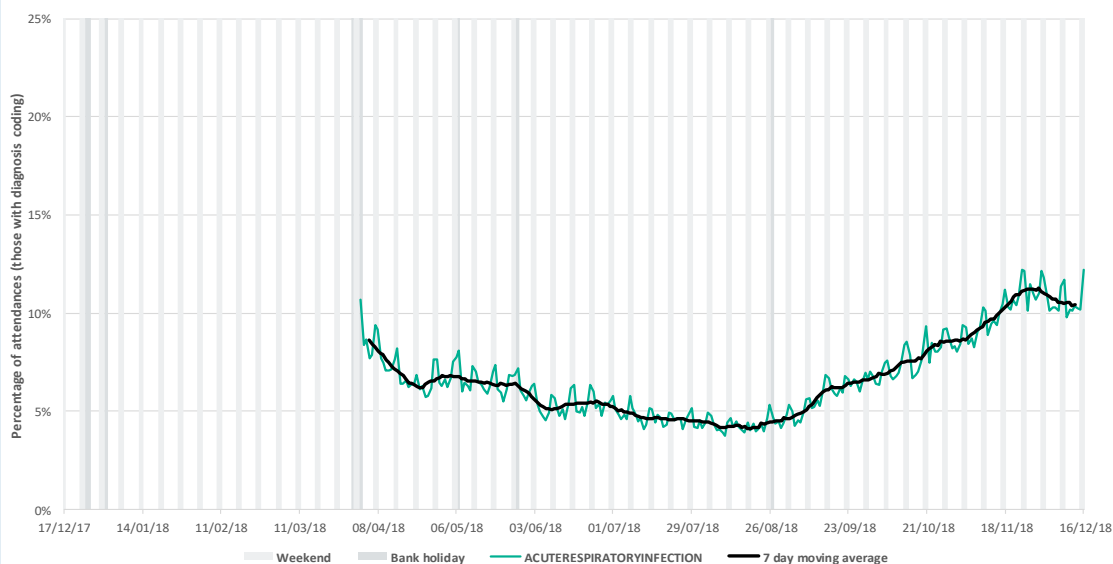
#### 4: Respiratory.

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



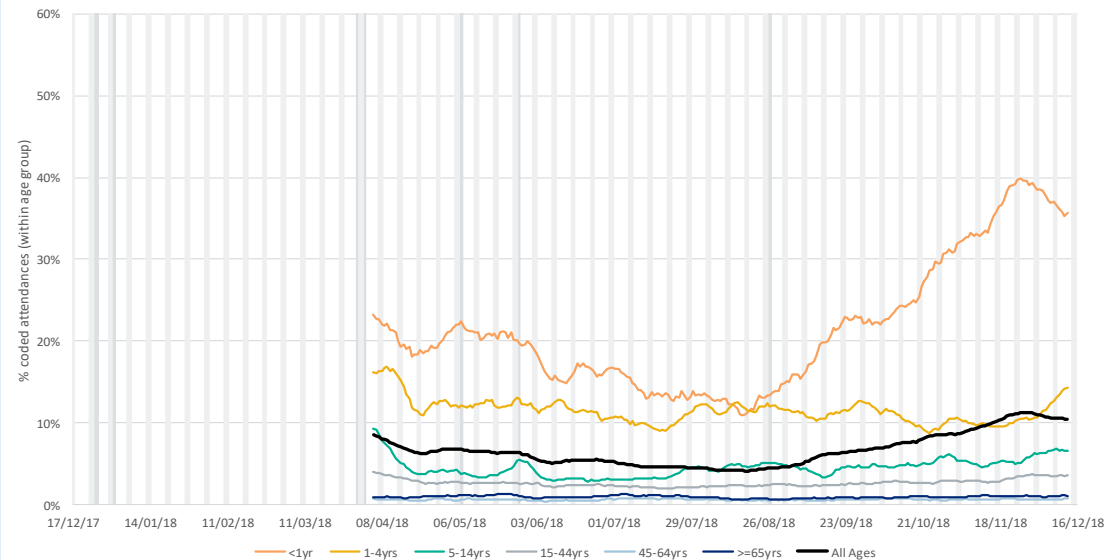
#### 5: Acute Respiratory Infection.

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



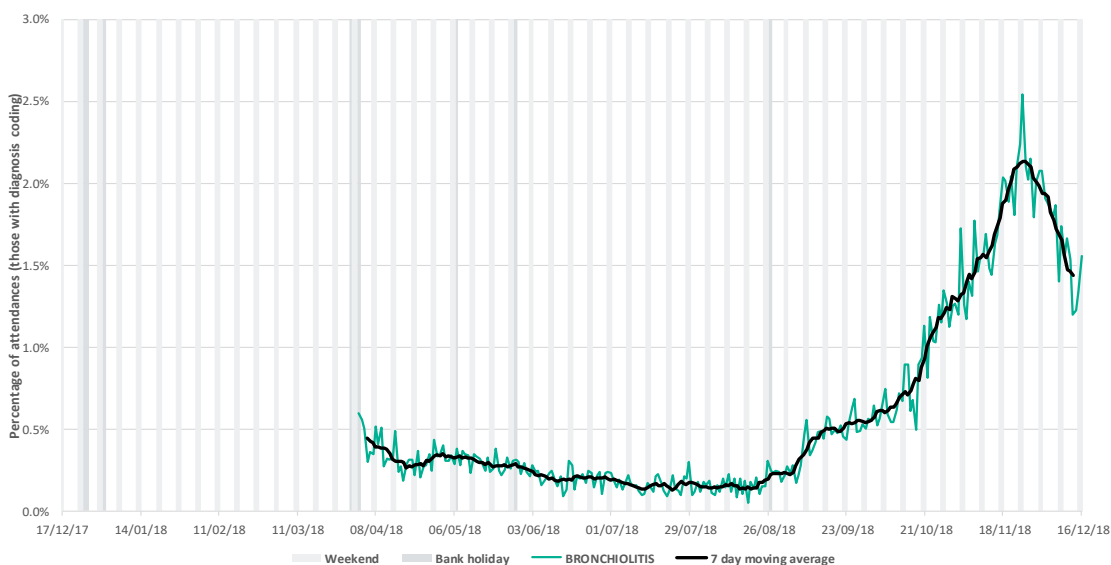
#### 5a: Acute Respiratory Infection by age group.

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



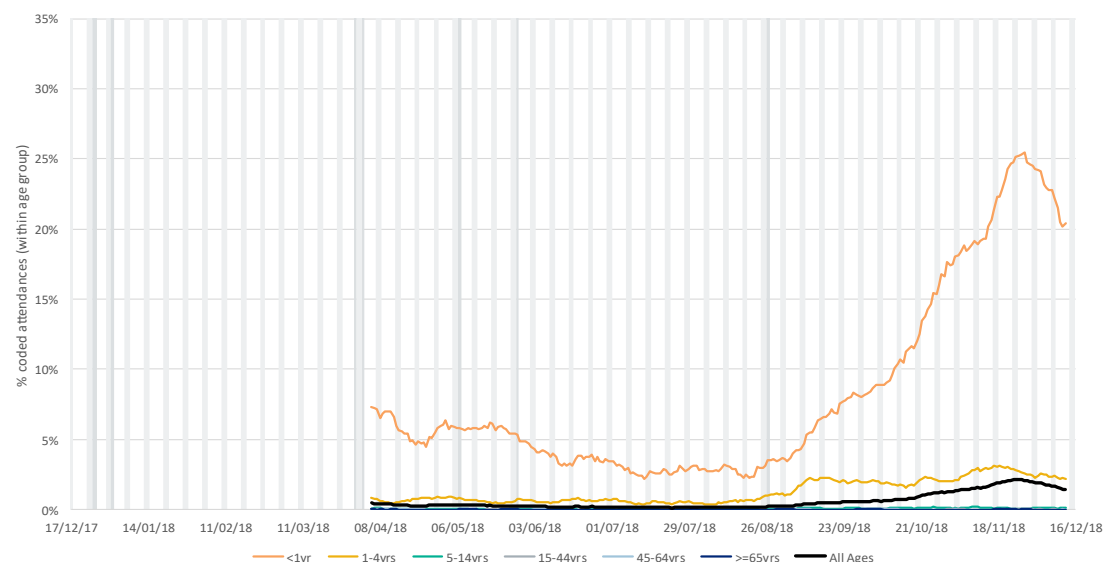
**6: Bronchiolitis/  
bronchitis.**

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



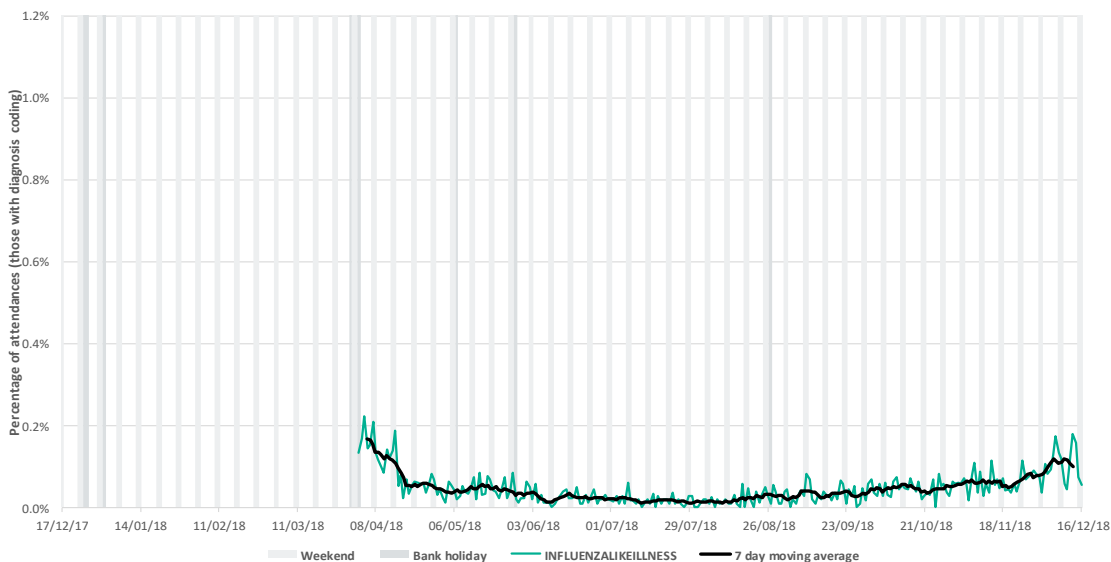
**6a: Bronchiolitis/  
bronchitis by age group**

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



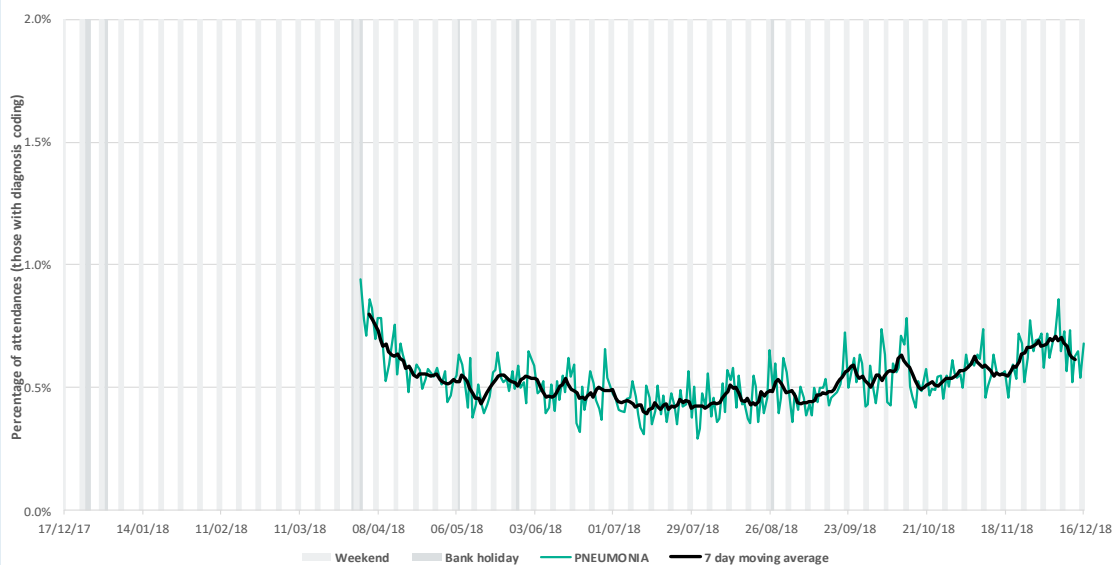
**7: Influenza-like  
illness.**

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



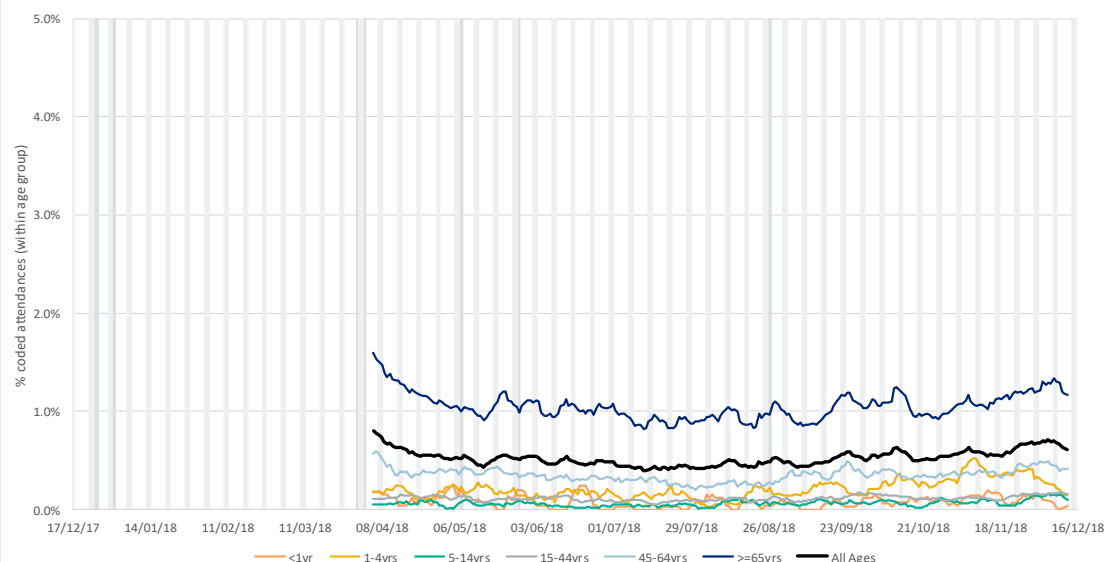
**8: Pneumonia.**

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



**8a: Pneumonia by age group.**

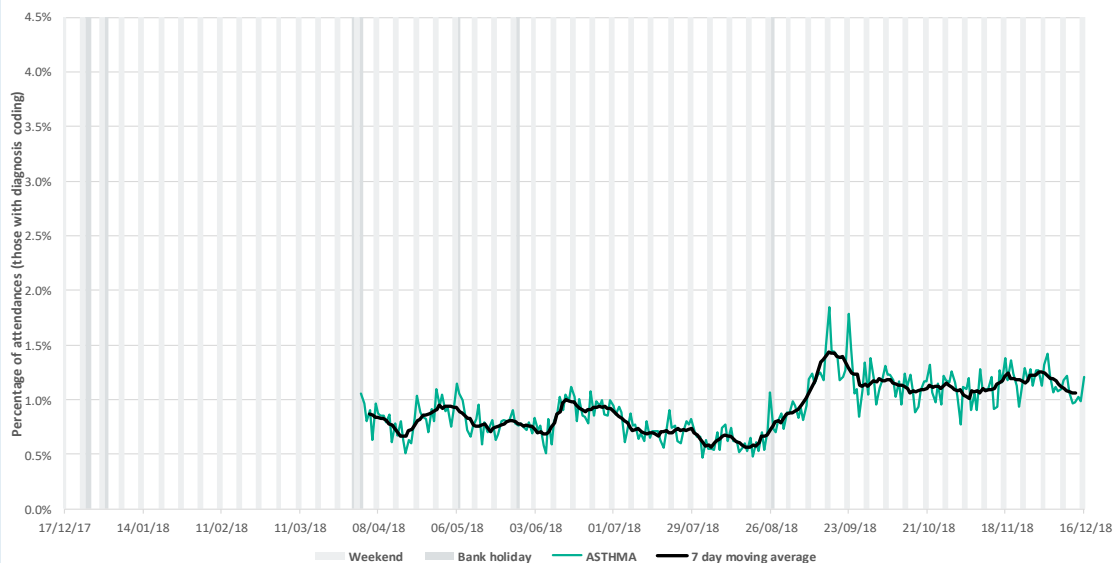
7 day moving average of pneumonia attendances presented as a proportion of the attendances within each age group.



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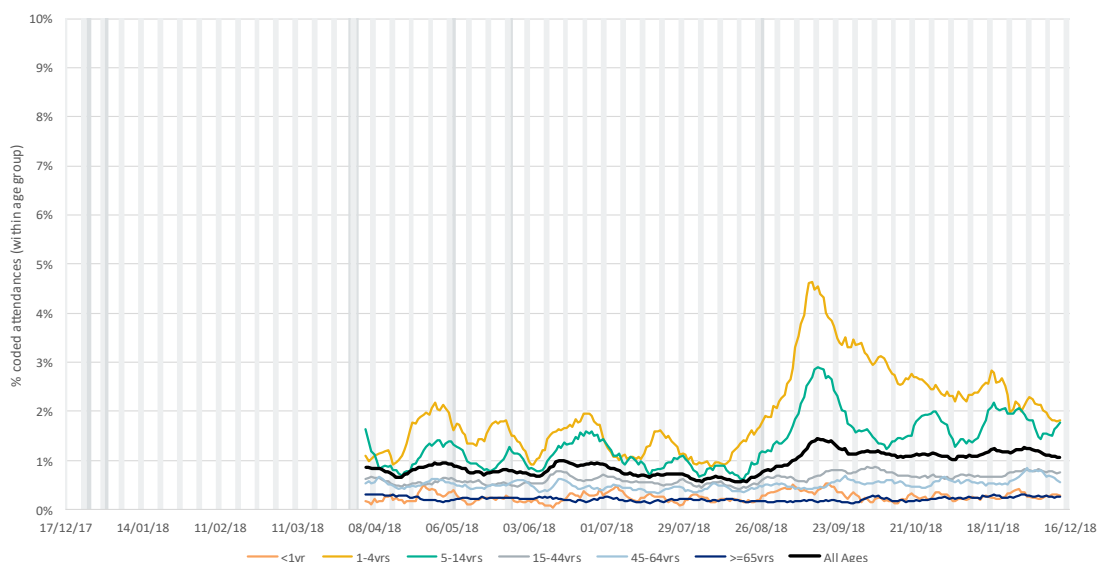
**9: Asthma.**

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



**9a: Asthma by age group.**

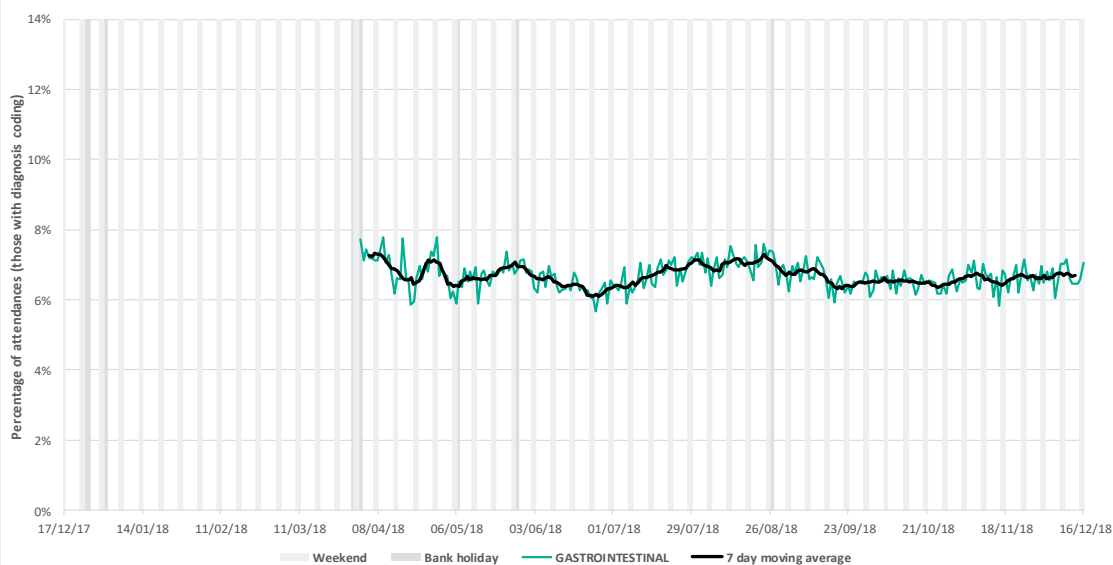
7 day moving average of asthma/wheeze/difficulty breathing attendances presented as a proportion of the attendances within each age group.



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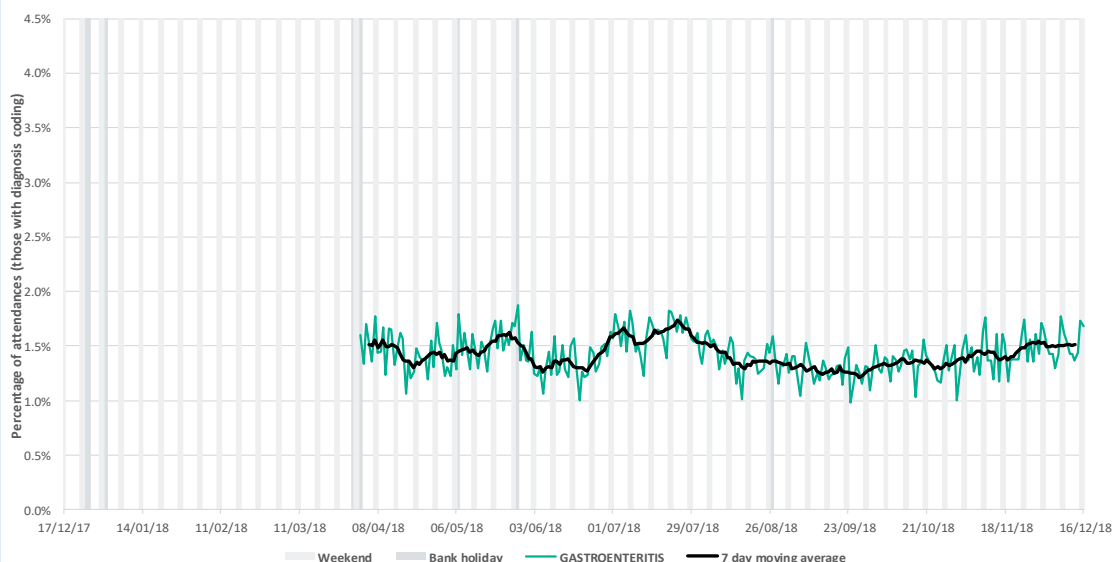
**10: Gastrointestinal.**

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



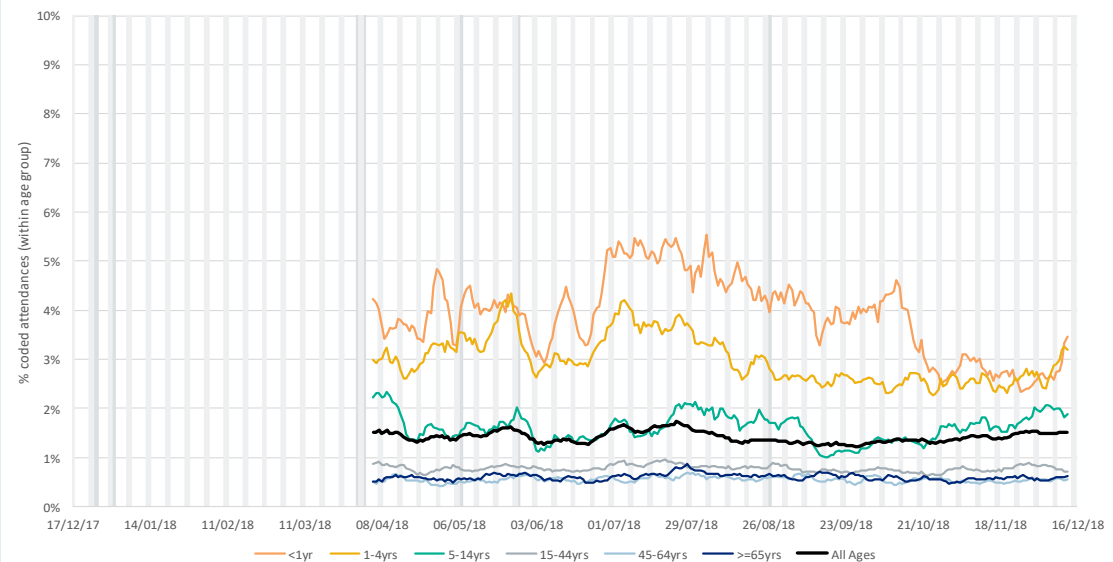
**11: Gastroenteritis**

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



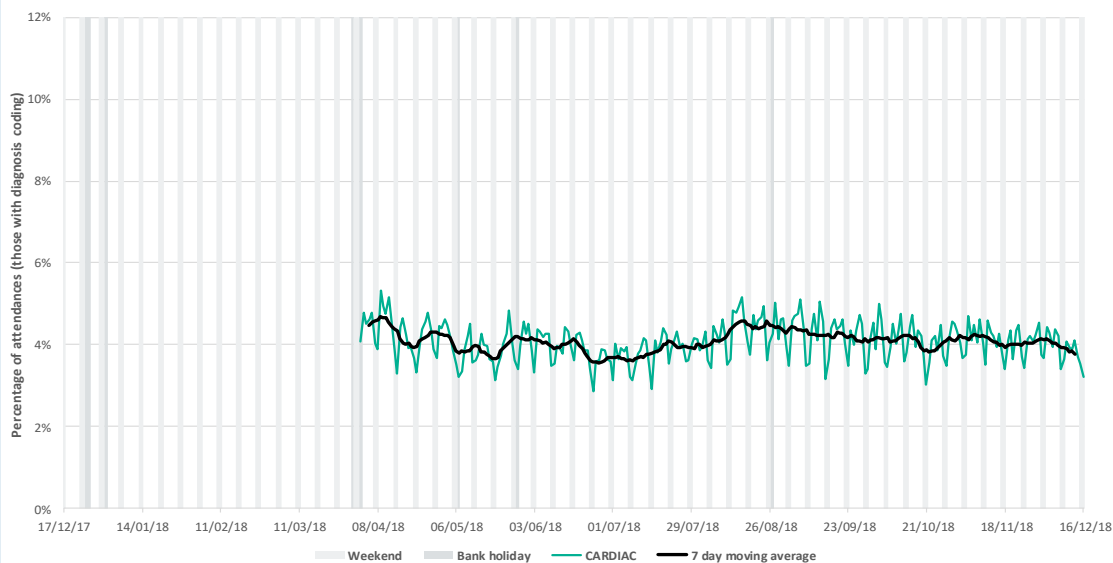
**11a: Gastroenteritis by age group.**

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



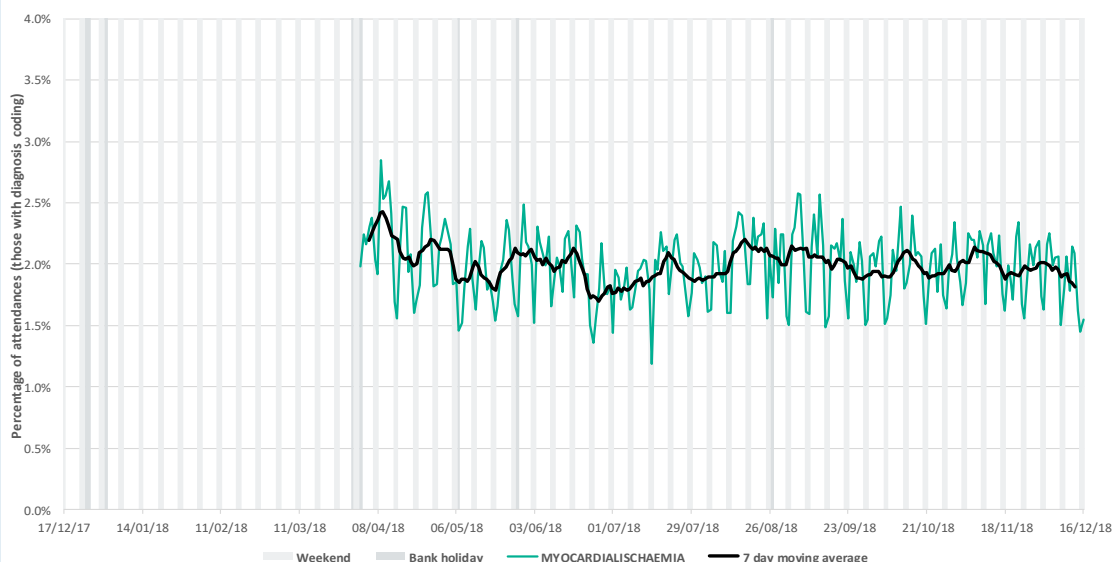
**12: Cardiac.**

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:**

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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.

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**Emergency Department Syndromic Surveillance System Bulletin.**

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