

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

11 October 2016 Year: 2016 Week: 40

Syndromic surveillance national summary:

Reporting week: 03 to 09 October 2016

During week 40 respiratory conditions remained in line with seasonally expected activity.

Click to subscribe to the weekly syndromic surveillance email

Remote Health Advice:

During week 40 calls for cold/flu, cough and sore throat continued to increase but at expected seasonal levels (figures 2, 4, 6). There were also increases in the number of NHS 111 diarrhoea and vomiting calls, particularly noted in the under 5 years age group (figures 7 & 7a, 8 & 8a). These are also within expected levels.

Click to access the Remote Health Advice bulletin

GP In Hours:

During week 40 GP consultations for respiratory conditions including upper and lower respiratory tract infections continued to increase, but remain within seasonally expected levels (figures 1 and 5). Consultations for asthma remain high, although there has been a decrease in the 5-14 years age group (figures 10 and 10a). Consultations for vomiting are increasing, mainly in the under 5 years age group (figures 8 and 8a).

Click to access the GP In Hours bulletin

Emergency Department:

During week 40 there were no further increases in respiratory attendances, including bronchitis/broncholitis (figures 7, 10).

There was a decrease in attendances for asthma/ wheeze/ difficulty breathing, mainly in children aged 0-14 years (figures 15, 16).

Click to access the EDSSS bulletin

GP Out of Hours:

During week 40 GP out of hours consultations for respiratory conditions continued to increase, but remain within seasonally expected levels.

Click to access the GPOOHSS bulletin

RCGP Weekly Returns Service:

Click here to access reports from the RCGP website [external link]



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Syndromic surveillance summary notes

- Key messages are provided from each individual system.
- The different syndromic surveillance systems in operation within PHE access data from different areas of the national health care system.
- Each 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 Syndromic Surveillance website found at: (https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses); reports will be made available on Thursday afternoons.
- Further weekly and annual reports are available from the RCGP Research and Surveillance web pages: http://www.rcgp.org.uk/clinical-and-research/our-programmes/research-and-surveillance-centre.aspx

Syndromic surveillance systems

Remote Health Advice

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 UK-based general practitioner surveillance system monitoring daily consultations for a range of clinical syndromic indicators

Emergency Department Syndromic Surveillance System (EDSSS)

A sentinel ED network across England monitoring daily attendances and presenting symptoms/diagnoses

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

RCGP Weekly Returns Service (RCGP WRS)

A sentinel GP surveillance network covering England and Wales monitoring weekly consultations for a range of clinical indicators. This surveillance system is coordinated by the RCGP Research and Surveillance Centre

Acknowledgements:

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- NHS 111 and HSCIC
- Participating EDSSS emergency departments
- College of Emergency Medicine
- Advanced Health & Care and the participating OOH service providers
- QSurveillance[®]; University of Nottingham; EMIS/EMIS practices; ClinRisk®
- TPP, ResearchOne and participating SystmOne GP practices

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