

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

11 February 2015 Year: 2015 Week: 6

Syndromic surveillance national summary:

Reporting week: 2 to 8 February 2015

Nothing new to report during week 6.

There was a small increase in GP consultations for upper respiratory tract infection during week 6, however, in general most respiratory indicators remained stable.

Remote Health Advice:

There were slight increases in NHS 111 calls for cold/flu during week 6; these increases were particularly in the 45-64 years age group (figures 2-2a). Other respiratory indicators remained stable.

There were increases in NHS 111 calls for diarrhoea (figure 8) and vomiting (figure 9) however these increases were within or below seasonally expected levels.

Click to access the Remote Health Advice bulletin [intranet] [internet]

GP In Hours:

There were further small increases in GP consultation rates for upper respiratory tract infection during week 6, mainly in children aged less than 15 years (figures 1-1a).

There was also a further increase in GP consultations for conjunctivitis, particularly in the <1 and 1-4 years age groups; these increases were within seasonally expected levels (figures 13-13a).

Click to access the GP In Hours bulletin [intranet] [internet]

Emergency Department:

Nothing new to report during week 6.

Respiratory attendance indicators including acute respiratory infection (figure 8), influenza-like illness (figure 12) and pneumonia (figure 13) remained stable during week 6.

Click to access the EDSSS bulletin [intranet] [internet]

GP Out of Hours:

There were slight increases in consultations for influenza-like illnesses during week 6, particularly in the 45-64 years age group (figures 3 & 3a). Other respiratory indicators remained stable during week 6 (figures 2, 4 & 5).

There were small increases in consultations for gastroenteritis and vomiting during week 6 (figures 8, 10).

Click to access the GPOOHSS bulletin [intranet] [internet]

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/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

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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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