

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

28 December 2016	Year: 2016 Week: 51
Syndromic surveillance national summary:	Reporting week: 19 to 25 December 2016 During week 51 there were further increases in respiratory indicators across all systems, for all age groups 5 years and over.
	Click to subscribe to the weekly syndromic surveillance email
Remote Health Advice:	Cold/flu calls continued to increase in week 51 across all age groups but remain below levels expected for this time of year (figures 2 & 2a). NHS 111 calls for diarrhoea and vomiting continued to decrease during week 51 and are
	now at levels expected for this time of year (figures 7 & 8).
	Click to access the Remote Health Advice bulletin
GP In Hours:	There were further small increases in GP consultations for respiratory infections, including influenza-like illness during week 51, however levels remain within seasonally expected limits (figure 2).
	There was an increase in consultations for asthma during week 51, particularly in adults (figures 10 & 10a).
	Click to access the GP In Hours bulletin
Emergency Department:	ED attendances for respiratory conditions, including acute respiratory infection continued to increase in all age groups 5 years and older during week 51 (figures 7 and 8).
	Click to access the EDSSS bulletin
GP Out of Hours:	There were further increases in GP out of hours consultations for acute respiratory infections during week 51 (figure 2); increases were recorded across all age groups aged 5 years and over (figure 2a).
	Gastroenteritis and vomiting consultations decreased slightly in week 51 but remain above seasonally expected levels (figures 7 & 9).
	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 upor different case mix of patients.
	 Access to the full version of each syndromic surveillance bulletin is available through th Syndromic Surveillance website found at: (<u>https://www.gov.uk/government/collections/</u> <u>syndromic-surveillance-systems-and-analyses</u>); reports will be made available on Thursday afternoons.
	Further weekly and annual reports are available from the RCGP Research and Surveillance web pages: <u>http://www.rcgp.org.uk/clinical-and-research/our-programmes</u> 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 unschedule 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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	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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	syndromic surveillance systems and analyses

syndromic-surveillance-systems-and-analyses