

GP OOHSS

GP Out-of-Hours Surveillance System: England

10 September 2014

Year: 2014 Week: 36

In This Issue:

Key Messages. Weekly summary. Total contacts. Syndromic indicators. Notes and caveats. Further information. Acknowledgements.

Syndromic indicators at a glance:

Number of contacts and percentage of Read coded contacts.

Key messages

Data to: 07 September 2014

There were further small increases in difficulty breathing/wheeze/asthma contacts during week 36 (figure 5).

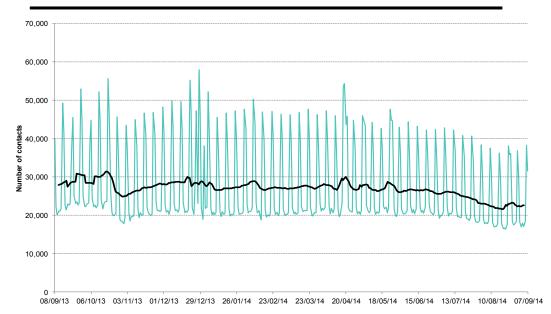
Following reported increases in diarrhoea contacts over recent weeks there was a decrease during week 36 (figure 7). This decrease was most noticeable in the <1 years age group (figure 7a).

A Heat-Health Watch system operates in England from 1 June to 15 September each year. As part of the Heatwave Plan for England, the PHE Real-time Syndromic Surveillance team will be routinely monitoring the public health impact of hot weather using syndromic surveillance system during this period.

Heat-health watch level (current reporting week): level 1 Summer preparedness http://www.metoffice.gov.uk/weather/uk/heathealth/

Key indicator	No. of contacts	% Week 36	% Week 35	Trend*
All OOH contacts, all causes	158,466			
Acute respiratory infection	8,415	10.23	10.71	←→
Influenza-like illness	98	0.12	0.09	←→
Bronchitis/bronchiolitis	84	0.10	0.12	←→
Difficulty breathing/wheeze/asthma	1,699	2.07	2.02	^
Gastroenteritis	3,951	4.80	5.15	$\mathbf{\Psi}$
Diarrhoea	1,038	1.26	1.49	$\mathbf{\Psi}$
Vomiting	1,350	1.64	1.69	←→
Myocardial infarction	865	1.05	1.08	←→
Pharyngitis	64	0.08	0.10	←→
Heatstroke	-	0.00	0.00	←→

*Trend: reports on the trend seen over previous weeks in the percentage of Read coded contacts.



1: Total out-of-hours contacts:

Daily total number of out-of-hours and unscheduled contacts and 7 day average (adjusted for bank holidays).

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Public Health England

2: Acute Respiratory Infection daily contacts.

Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

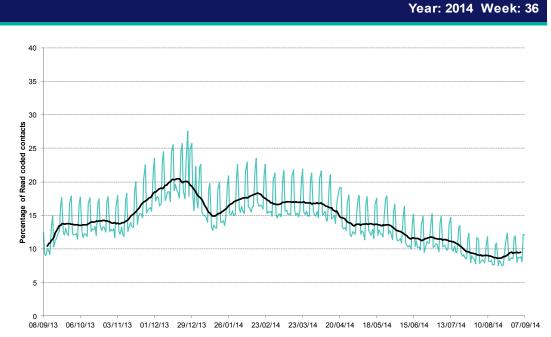
3: Influenza-like illness daily contacts.

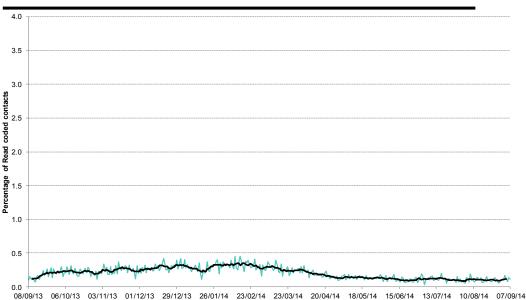
Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

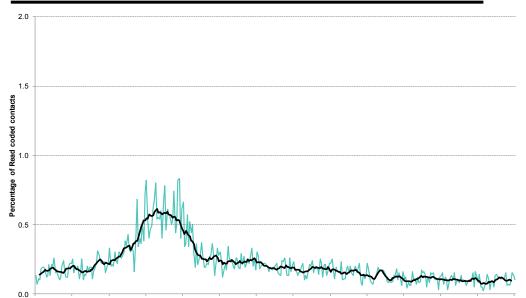
4: Bronchitis/ bronchiolitis daily contacts.

Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

*7-day moving average adjusted for bank holidays.







08/09/13 06/10/13 03/11/13 01/12/13 29/12/13 26/01/14 23/02/14 23/03/14 20/04/14 18/05/14 15/06/14 13/07/14 10/08/14 07/09/14

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5: Difficulty breathing/ wheeze/asthma daily contacts.

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Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

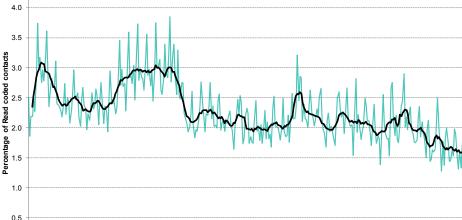
6: Gastroenteritis daily contacts.

Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

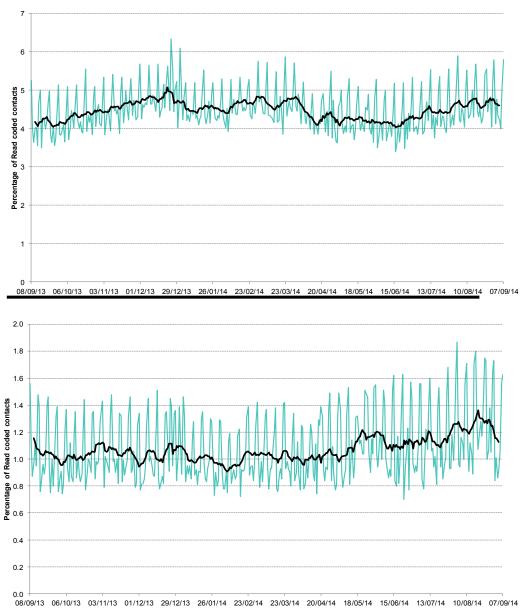
7: Diarrhoea daily contacts.

Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

*7-day moving average adjusted for bank holidays.







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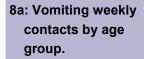
WWW Public Health England

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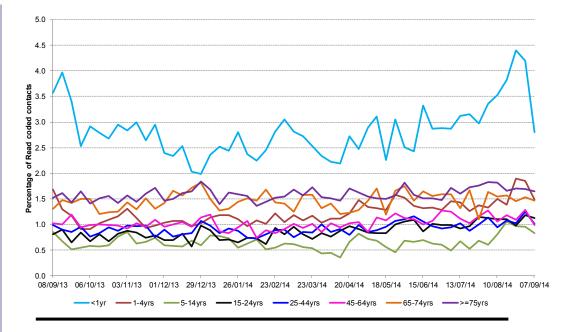
7a: Diarrhoea weekly contacts by age group.

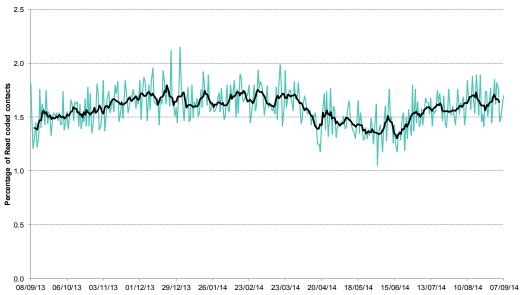


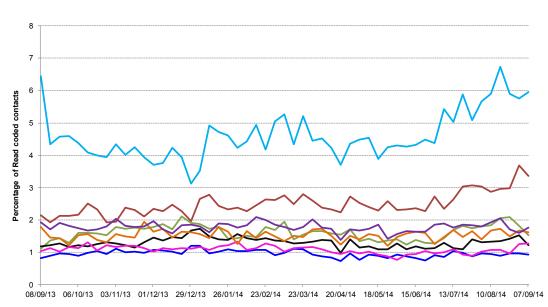
Shown as a percentage of the total contacts with a Read code and as a 7 day average*.



*7-day moving average adjusted for bank holidays.



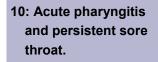




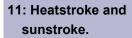
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9: Myocardial Infarction daily contacts.

Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

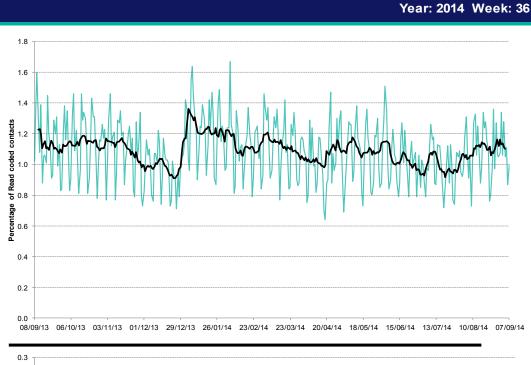


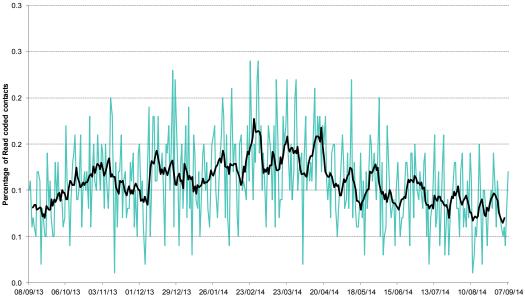
Shown as a percentage of the total contacts with a Read code and as a 7 day average*.

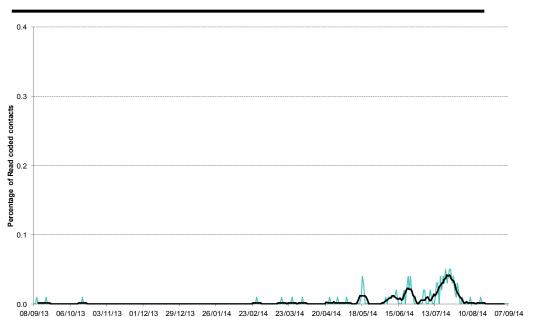


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*7-day moving average adjusted for bank holidays.







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Notes and caveats:	 This bulletin presents data from the Public Health England (PHE) GP Out-of- hours\Unscheduled Care Surveillance System (GP OOHSS).
	 Fully anonymised data from GP out-of-hours (OOH) and unscheduled care service providers in England are being transferred to the PHE for analysis and interpretation by the PHE Real-time Syndromic Surveillance Team (ReSST).
	 This new system supplements existing PHE syndromic surveillance systems by monitoring data on general practitioner consultations outside of routine surgery opening times (evenings, weekends and bank holidays) and unplanned contacts within NHS primary care.
	 The key indicators presented within this bulletin are derived by grouping selected Read coded consultations.
Further information:	The GP Out-of-Hours Surveillance System Bulletin can also be downloaded from the PHE Real-time Syndromic Surveillance website which also contains more information about syndromic surveillance:
	https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses
Acknowledgements:	We are grateful to Advanced Health and Care and the GP out-of-hours and unscheduled care service providers who have kindly agreed to participate in this system.
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	Produced by: PHE Real-time Syndromic Surveillance Team
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syndromic.surveillance	Web: https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-

analyses