

PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

07 October 2015	Year: 2015 Week: 40
Syndromic surveillance national summary:	Reporting week: 28 September to 4 October 2015 There were further increases in selected respiratory indicators; levels remain within seasonally expected levels. Levels of asthma/wheeze/difficulty breathing continued to decrease in the 1-4 and 5-14 years age groups during week 40.
Remote Health Advice:	NHS 111 cough calls continued to rise in week 40, particularly in children aged <1 & 1-4 years (figure 4a). There were decreases in difficulty breathing calls in children aged 1-4 and 5-14 years (figure 5a). Click to access the Remote Health Advice bulletin [intranet] [internet]
GP In Hours:	There were further increases in GP consultations for selected respiratory indicators during week 40 within seasonally expected levels. From week 40 the GPIH bulletin includes a map appendix illustrating influenza-like illness (ILI) for England and each PHE centre. Please refer to the notes section for further information on these maps including the methods used to calculate the threshold levels. Click to access the GP In Hours bulletin [intranet] [internet]
Emergency Department:	There were further increases in acute respiratory infection attendances, including those for acute bronchitis/ bronchiolitis during week 40 (figures 8, 9). There were further decreases in attendances for asthma/wheeze/difficulty breathing across all age groups (figures 15 and 16).
GP Out of Hours:	Consultations for acute respiratory infection continued to increase during week 40 in line with seasonal expectations (figure 2). There were further decreases in difficulty breathing/wheeze/asthma consultations during week 40, particularly in children (figures 5, 5a).
RCGP Weekly Returns Service:	Click here to access reports from the RCGP website [external link]

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 http://www.rcgp.org.uk/clinical-and-research/research-and-surveillance-centre.aspx
yndromic	Remote Health Advice
surveillance systems	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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	College of Emergency Medicine
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	 QSurveillance[®]; University of Nottingham; EMIS/EMIS practices; ClinRisk[®]
	 TPP, ResearchOne and participating SystmOne GP practices
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