



22 October 2014

Year: 2014 Week: 42

**Syndromic
surveillance national
summary:**

Reporting week: 13 to 19 October 2014

There was nothing new to report during week 42.

There were further increases in a number of respiratory indicators across all syndromic surveillance systems in line with seasonally expected levels.

**Remote Health
Advice:**

NHS 111 calls for cough continued to increase during week 42 in line with seasonally expected levels (figure 4). These increases are most marked in the <1 and 1-4 years age groups (figure 4a).

Vomiting calls in children aged less than 5 years remained at levels higher than recorded last year (figure 7a).

Click to access the Remote Health Advice bulletin [\[intranet\]](#) [\[internet\]](#)

GP In Hours:

Respiratory indicators including upper respiratory tract infection (figure 1) and lower respiratory tract infection (figure 4) continued to increase during week 42, all within seasonally expected levels.

There have been further increases in GP consultations for vomiting (figure 7) have also shown further increases during week 42, particularly in infants (figure 7a).

Click to access the GP In Hours bulletin [\[intranet\]](#) [\[internet\]](#)

**Emergency
Department:**

There were continued increases in attendances within the 'all respiratory' and acute respiratory infection indicators during week 42 (figures 7, 8 & 9).

There was a data transfer problem in one ED (covering the period 15/10 - 19/10/14); we are working to resolve this issue.

Click to access the EDSSS bulletin [\[intranet\]](#) [\[internet\]](#)

GP Out of Hours:

GP out of hours consultations for acute respiratory infection continue to rise in line with seasonally expected levels (figure 2).

Vomiting consultations in children aged less than 5 years remain at levels higher than at the same time last year (figure 10a).

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

Acknowledgements:

We thank and acknowledge the contribution of all data providers including:

- 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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