

# PHE Syndromic Surveillance Summary

Produced by the PHE Real-time Syndromic Surveillance team

06 April 2016 Year: 2016 Week: 13

Syndromic surveillance national summary:

# Reporting week: 28 March to 03 April 2016

Selected respiratory indicators have decreased during week 13, though remain above seasonal baseline levels across all systems.

GP consultations for scarlet fever decreased during week 13.

Remote Health Advice:

There were small decreases in NHS 111 cold/flu calls during week 13; levels remain higher than expected for the time of year (figure 2). These decreases were particularly noted in the 5-14 and 15-44 years age groups (figure 2a).

There were also decreases in NHS 111 calls for fever, cough, difficulty breathing and sore throat during week 13 (figures 3-6).

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

**GP In Hours:** 

Consultations for scarlet fever decreased in week 13 (week 4 & 4a)

Influenza-like illness continued to decrease during week 13 but remains above seasonally expected levels (figure 2); the highest rates were observed in the south west (figure 2b & appendix map).

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

**Emergency Department:** 

During week 13 there were no further increases in attendances for respiratory conditions (figure 7), though there was an increase in attendances for pneumonia over the weekend 2-3 April.

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

**GP Out of Hours:** 

GP out of hours consultations for influenza-like illness remained stable across all age groups during week 13 (figure 3 & 3a).

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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#### 06 April 2016

#### **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.rcqp.org.uk/clinical-and-research/our-programmes/ 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<sup>®</sup>; University of Nottingham; EMIS/EMIS practices; ClinRisk®
- TPP, ResearchOne and participating SystmOne GP practices

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