



18 November 2015

Year: 2015 Week: 46

**Syndromic
surveillance national
summary:**

Reporting week: 09 November to 15 November 2015

During week 46 there were further increases in a number of respiratory indicators in children aged <1 year across all syndromic surveillance systems. These increases are in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

**Remote Health
Advice:**

NHS 111 cough calls continued to increase in the <1 year age group during week 46 (figure 4a). Difficulty breathing calls increased in week 46 and remain higher in the under 5 years age groups than at this time last year (figure 5a). These increases are within seasonally expected levels and in line with recent reported increases in respiratory syncytial virus (RSV) activity.

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

GP In Hours:

GP consultation rates for respiratory indicators stabilised during week 46.

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

**Emergency
Department:**

Attendances for acute respiratory infection and bronchitis/bronchiolitis continue to increase in young children (figures 9 & 11). These increases are within seasonally expected levels and in line with recent reported increases in respiratory syncytial virus (RSV) activity.

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

GP Out of Hours:

There have been further increases in bronchitis/bronchiolitis consultations during week 46, particularly in the <1 year age group (figures 4 and 4a). Consultations for acute respiratory infection and difficulty breathing increased, notably in the childhood age groups (figures 2, 2a, 5 and 5a). These increases are within seasonally expected levels and in line with recent reports of increasing respiratory syncytial virus (RSV) activity.

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:

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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®; University of Nottingham; EMIS/EMIS practices; ClinRisk®
 - TPP, ResearchOne and participating SystemOne GP practices
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PHE Real-time Syndromic Surveillance Team

Public Health England, 6th Floor, 5 St Philip's Place, Birmingham, B3 2PW

Tel: 0344 225 3560 > Option 4 > Option 2

Fax: 0121 236 2215

Web: <https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>

Contact ReSST:
syndromic-surveillance
@phe.gov.uk