



25 March 2015

Year: 2015 Week: 12

**Syndromic  
surveillance national  
summary:**

## Reporting week: 16 to 22 March 2015

GP consultations for scarlet fever remain elevated but stable during week 12; highest rates remain in the 1-4 years age group, despite a small decrease over the last week.

There were small increases in GP consultations for URTI, acute respiratory infection and NHS 111 cough calls. These increases coincide with current influenza B activity.

**Remote Health  
Advice:**

NHS 111 calls for cough increased during week 12, across all age groups aged under 65 years (figures 4 & 4a).

There were further small increases in vomiting calls, which were predominantly in the 1-4 years age group (figures 9 & 9a).

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

**GP In Hours:**

GP consultations for scarlet fever remained elevated but stable during week 12 (figure 4). The highest consultation rates remained in the 1-4 years age group despite a slight fall in rates during week 12 (figure 4a).

There was a small increase in GP consultations for upper respiratory tract infections (figure 1) particularly in age groups <15 years (figure 1a).

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

**Emergency  
Department:**

Nothing new to report during week 12.

A new ED commenced EDSSS reporting during week 12 (20/03/2015). Data from the new ED will be presented in charts following a 14 day data validation.

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

**GP Out of Hours:**

During week 12 there were small increases in GP out of hours consultations for vomiting (figure 9).

Acute respiratory infection increased slightly during week 12 (figure 2); other respiratory indicators remained stable or decreased.

**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

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### 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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## 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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