



19 September 2018

Year: 2018 Week: 37

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Key messages

Data to: 16 September 2018

ED attendances for respiratory conditions, particularly bronchiolitis and asthma increased during week 37 (figures 4 & 7).

The **national EDSSS**, based on the newly introduced NHS England [Emergency Care Data Set](#), is still under development and reports only from April 2018. Future bulletins will include further epidemiological analyses and, where possible, baselines constructed using previous surveillance data from the **sentinel EDSSS** (up to March 2018).

This bulletin only includes Type 1 EDs reporting with sufficient timeliness and frequency for **weekly** analysis. Full details of inclusion criteria can be found on page 6.

Diagnostic indicators at a glance:

Further details on the syndromic indicators reported can be found on page 6.

Indicator	Current trend
Respiratory	increasing
Acute Respiratory Infection	increasing
Bronchiolitis	increasing
Influenza-like Illness	no trend
Pneumonia	no trend
Asthma	increasing
Gastrointestinal	no trend
Gastroenteritis	no trend
Cardiac	no trend
Myocardial Ischaemia	no trend

EDSSS weekly report statistics

Only Type 1 EDs meeting the weekly reporting criteria are included (see page 6 for details).

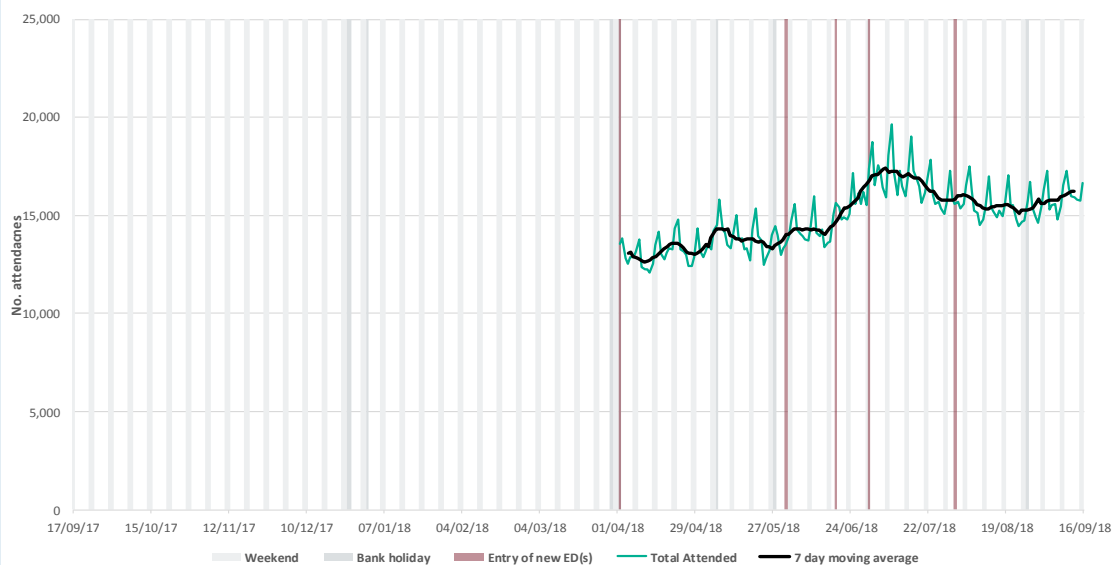
*max EDs included across full time period reported in charts, individual days may include fewer EDs.

Date	Total Attendances	Diagnoses Coded		Type 1 EDs Included
		Number	%	
10/09/2018	17,266	13,893	80.5%	66
11/09/2018	16,364	12,818	78.3%	66
12/09/2018	15,990	12,515	78.3%	66
13/09/2018	15,922	12,374	77.7%	66
14/09/2018	15,824	12,458	78.7%	66
15/09/2018	15,774	12,341	78.2%	64
16/09/2018	16,627	12,773	76.8%	63
Total	113,767	89,172	78.4%	(max)* 66

1: Total attendances.

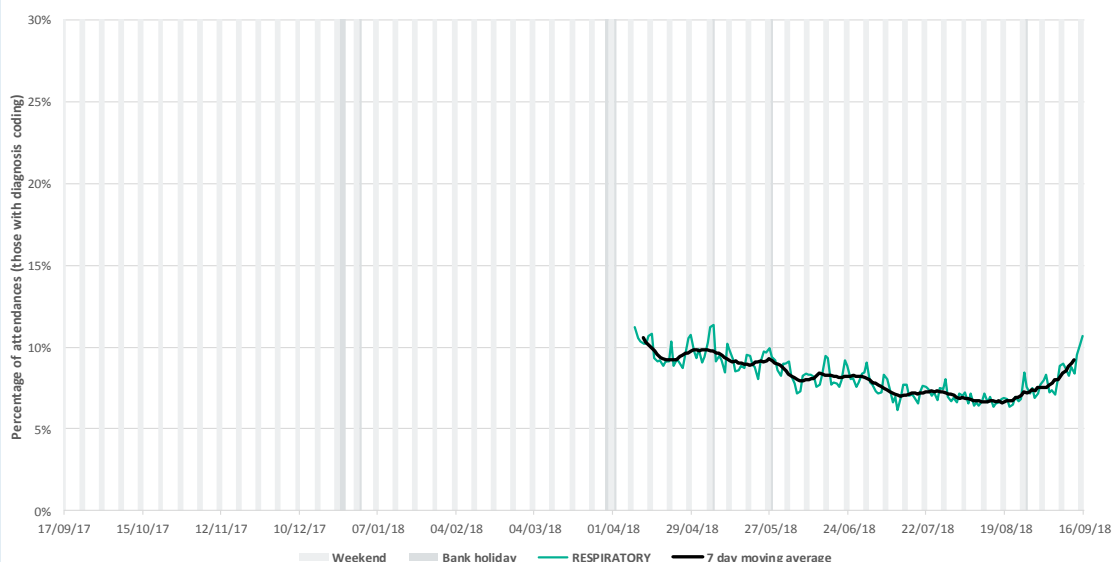
Daily number of total attendances recorded, across the EDSSS network.

The entry of new ED(s) is marked by a vertical red line (see page 6 for inclusion criteria).



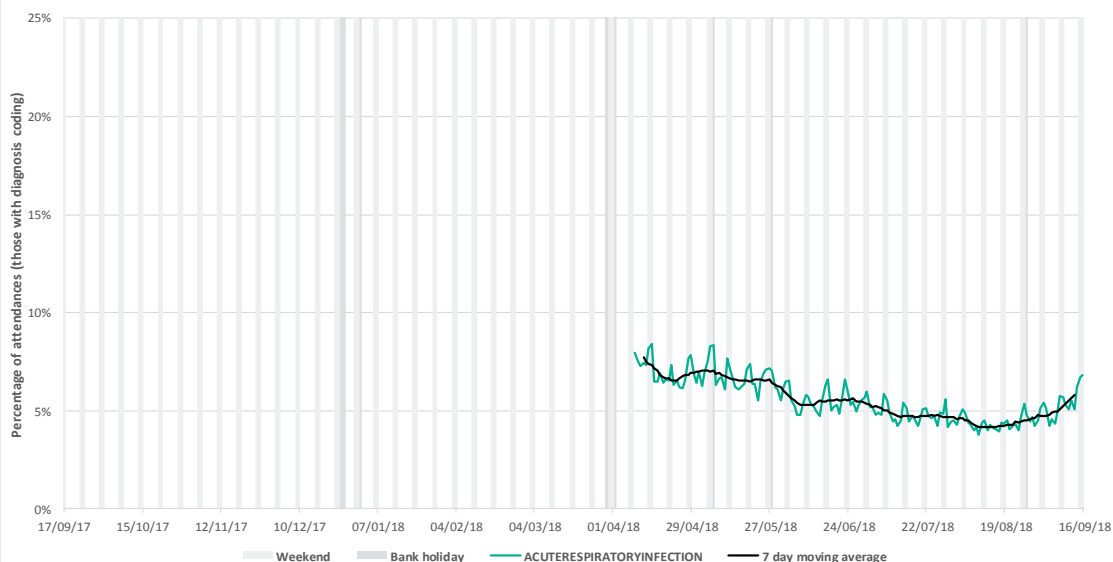
2: Respiratory.

Daily percentage of all attendances recorded as respiratory attendances across the EDSSS network.



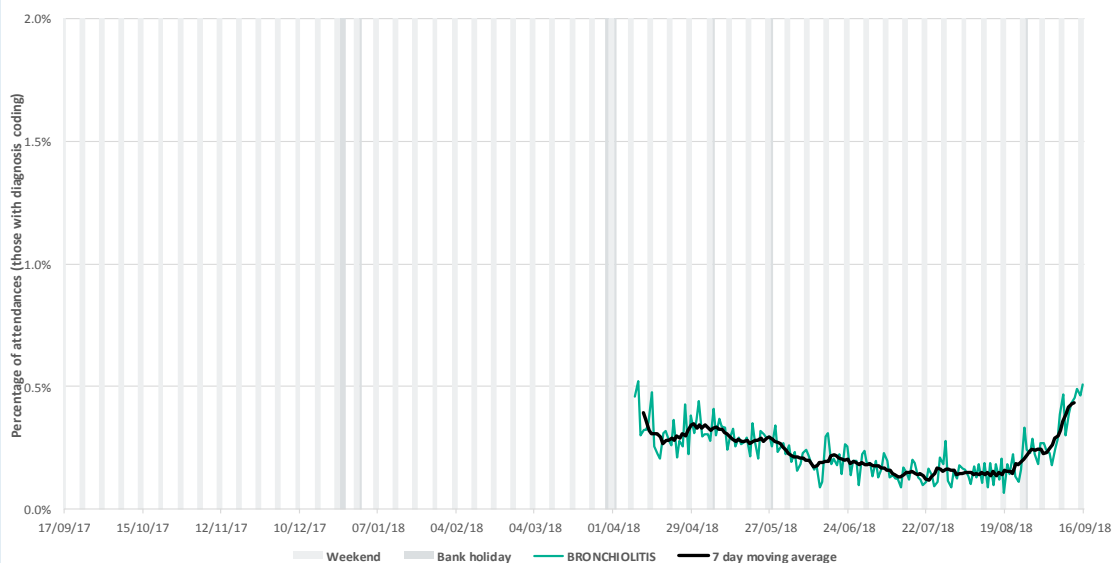
3: Acute Respiratory Infection.

Daily percentage of all attendances recorded as acute respiratory infection attendances across the EDSSS network.



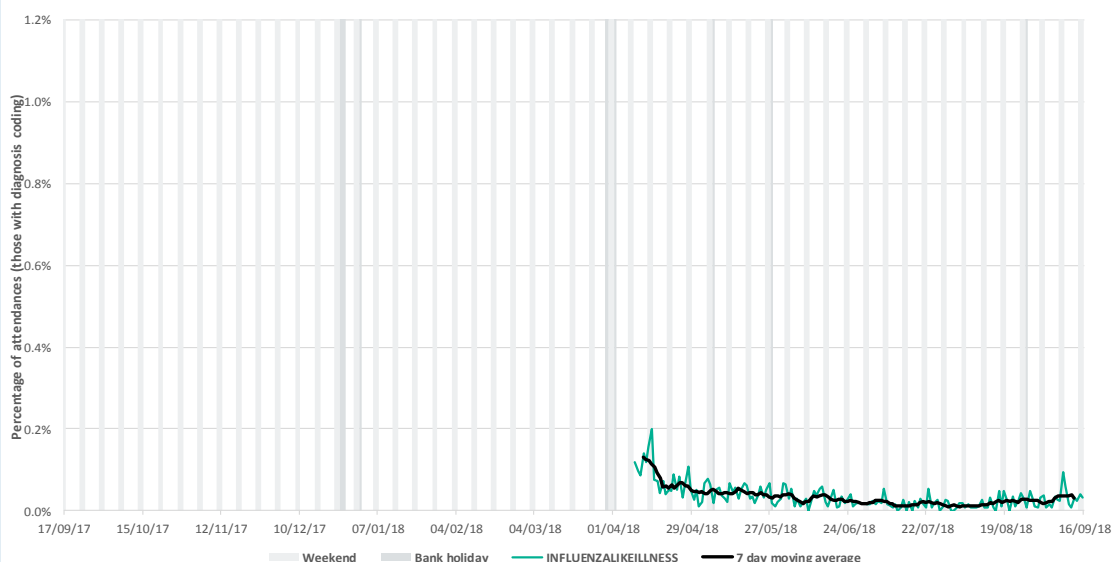
4: Bronchiolitis.

Daily percentage of all attendances recorded as bronchiolitis/ acute bronchitis attendances across the EDSSS network.



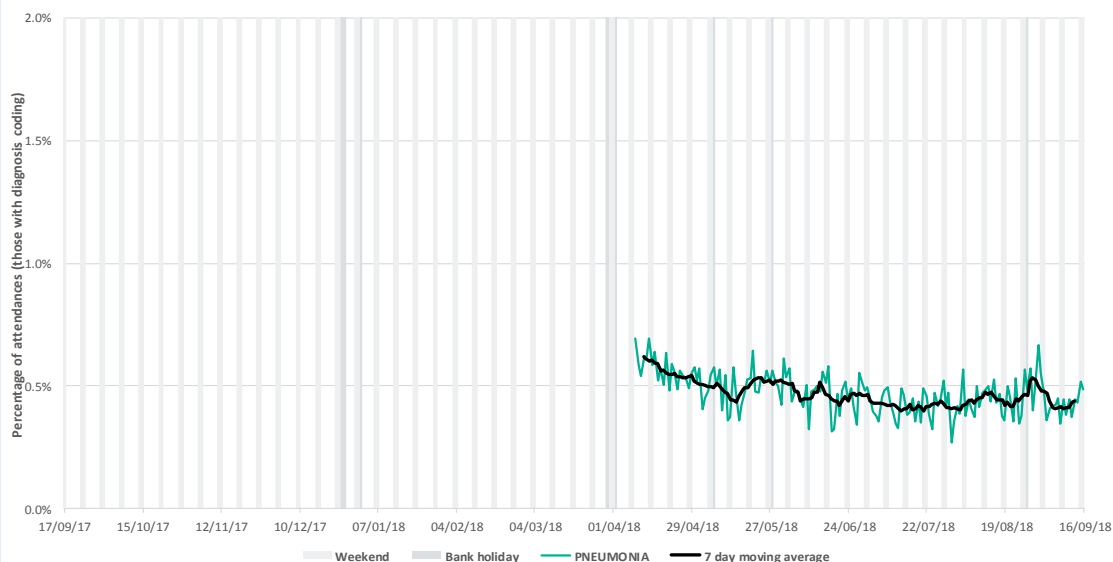
5: Influenza-like Illness.

Daily percentage of all attendances recorded as influenza-like illness attendances across the EDSSS network.



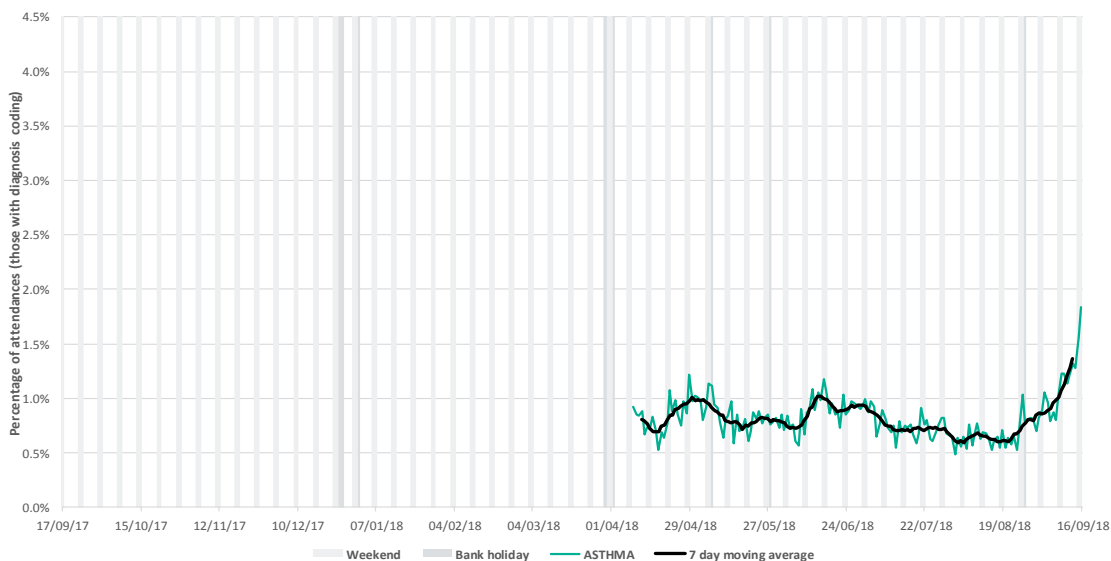
6: Pneumonia.

Daily percentage of all attendances recorded as pneumonia attendances across the EDSSS network.



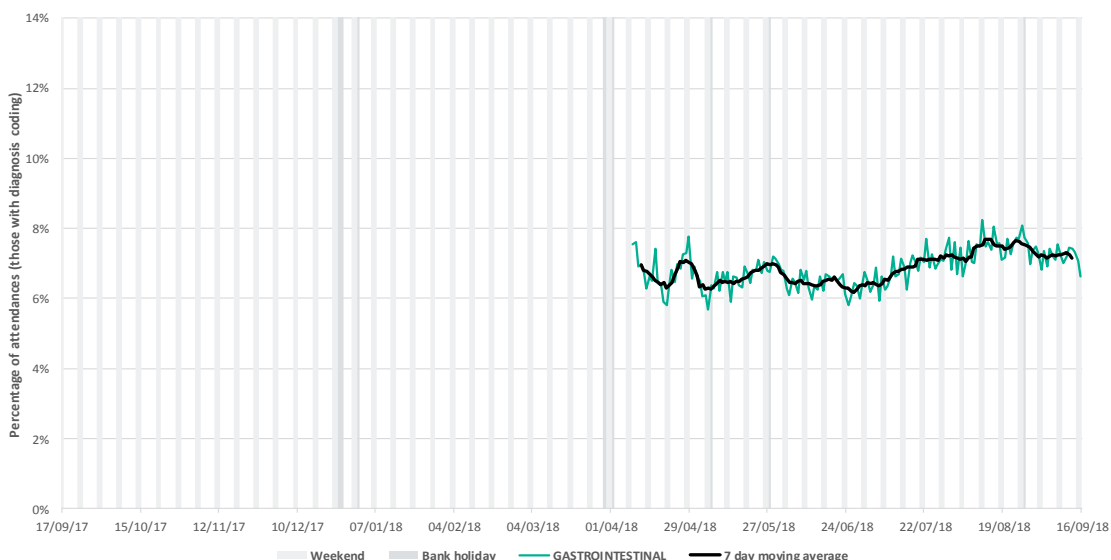
7: Asthma.

Daily percentage of all attendances recorded as asthma/wheeze/difficulty breathing across the EDSSS network.



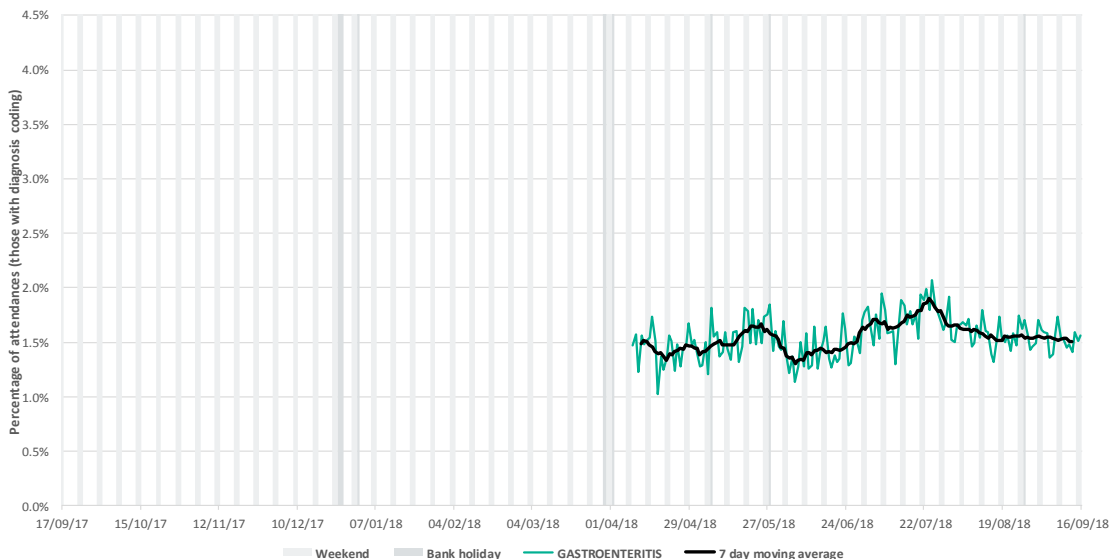
8: Gastrointestinal.

Daily percentage of all attendances recorded as gastrointestinal across the EDSSS network.



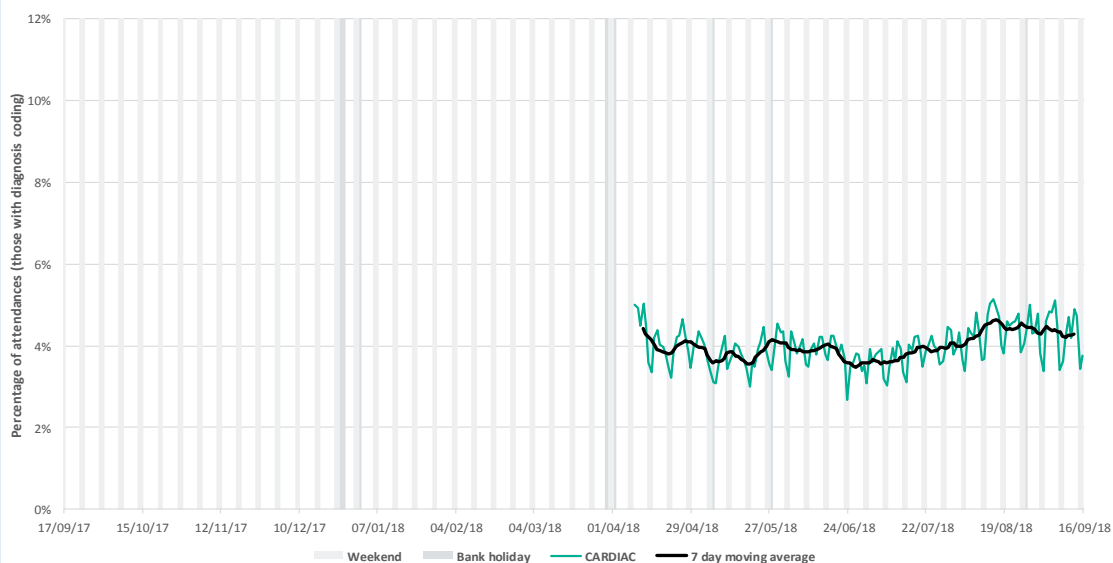
9: Gastroenteritis

Daily percentage of all attendances recorded as gastroenteritis attendances across the EDSSS network.



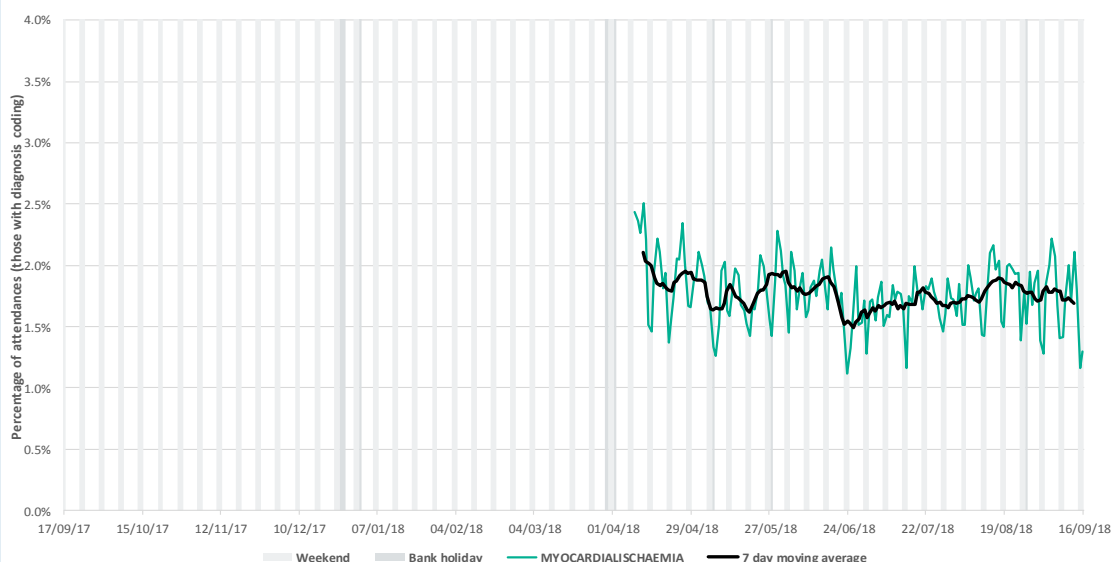
10: Cardiac.

Daily percentage of all attendances recorded as cardiac attendances across the EDSSS network.



11: Myocardial Ischaemia.

Daily percentage of all attendances recorded as myocardial ischaemia attendances across the EDSSS network.



12: Intentionally left blank

Notes and caveats:

- ▶ **National EDSSS** began operating in April 2018
- ▶ Following the introduction of the Emergency Care Data Set (ECDS) the national reporting of secondary care activity data through the commissioning data sets mechanism from EDs to NHS Digital became a daily feed:
<https://www.england.nhs.uk/ourwork/tsd/ec-data-set/>
- ▶ EDSSS receives an automated daily transfer of anonymised ED data from NHS Digital

- ▶ The number of EDs reporting through ECDS continues to increase
- ▶ Not all EDs currently provide data through ECDS on a daily basis
- ▶ EDs are eligible for inclusion in this report only where the **weekly EDSSS reporting criteria** have been met during the surveillance week reported:
 - Data relates to attendances at a type 1 ED
 - Data for 4 of the 7 days was received by PHE
 - Data for those days was received within 2 calendar days of the patient arrival
- ▶ Where an ED meets these criteria, all data received from that ED previous to the current surveillance week is included.
- ▶ EDs eligible for inclusion is likely to change each week, which will in turn affect the historical data inclusion

- ▶ Individual EDs will not be identified in syndromic surveillance reporting in these bulletins

- ▶ All EDs report diagnoses to EDSSS using SnomedCT codes. Where Snomed codes are not used the ED is excluded from indicator analysis
- ▶ The syndromic indicators presented in this bulletin are based on the SnomedCT diagnosis codes reported by EDs:
Respiratory: All respiratory diseases and conditions (infectious and non infectious).
Acute Respiratory Infections (ARI): All acute infectious respiratory diseases.
Asthma: As indicated by title.
Bronchiolitis/ bronchitis: As indicated by title (excluding 'chronic').
Influenza-like Illness (ILI): As indicated by title.
Pneumonia: As indicated by title.
Gastrointestinal: All gastrointestinal diseases and conditions (infectious and non infectious).
Gastroenteritis: All infectious gastrointestinal diseases.
Cardiac: All cardiac conditions.
Myocardial Ischaemia: All ischaemic heart disease.

- ▶ **Sentinel EDSSS** 2010 to March 2018, collected data through a bespoke, voluntary network of EDs across England and Northern Ireland
- ▶ **Sentinel EDSSS** reports be found in bulletins up to and including week 13 2018:
<https://www.gov.uk/government/collections/syndromic-surveillance-systems-and-analyses>

Acknowledgements:

We are grateful to the clinicians in each ED and other staff within each Trust for their continued involvement in the EDSSS.

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Emergency Department Syndromic Surveillance System Bulletin.

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