



UK Health
Security
Agency

Remote Health Advice Syndromic Surveillance System Bulletin (England) 2025 Week 39

Key messages

Data reported to: 28 September 2025

During week 39, NHS 111 triaged calls and online assessments for acute respiratory infections stabilised in children aged up to 14 years but increased in the adult age groups. There was a small increase in online assessments for vomiting, in line with the seasonal expectations.

Syndromic indicators at a glance

Table 1: The current trend (based on previous weeks, not only the current week) and the level (compared to the expected baseline), of each indicator included in this bulletin.

Indicator	Trend ¹	Level
Total NHS 111 triaged calls (Figure 1)	No trend	No baseline
Total NHS 111 online assessments (Figure 2)	No trend	No baseline
Acute respiratory infections triaged calls (Figure 3)	Increasing	Below baseline
Acute respiratory infections online assessments (Figure 4)	Increasing	Similar to baseline
Diarrhoea triaged calls (Figure 5)	Decreasing	Above baseline
Diarrhoea online assessments (Figure 6)	No trend	Above baseline
Vomiting triaged calls (Figure 7)	No trend	Above baseline
Vomiting online assessments (Figure 8)	Increasing	Similar to baseline
Eye problems triaged calls (Figure 9)	No trend	Above baseline
Eye problems online assessments (Figure 10)	No trend	Above baseline

¹ trend reports on the trend seen over most recent and earlier weeks.

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About this syndromic surveillance system

This bulletin presents data from the UK Health Security Agency (UKHSA) remote health advice syndromic surveillance system.

Syndromic surveillance can be used to:

- assess current trends
- assess current trends and levels compared to historical baselines
- compare trends between age groups/areas

Syndromic surveillance should not be used to:

- estimate total burden or number of 'cases' of a condition (see **Notes and caveats**)
- compare levels between age groups/areas

Fully anonymised, daily NHS 111 triaged call and NHS 111 online assessment data are analysed and reported here, to identify and describe trends for a variety of syndromic indicators:

- syndromic indicators include groupings such as cold/flu, fever and diarrhoea
- syndromic indicators are based on:
 - symptoms (known as the Symptom Group or Pathway) identified from both NHS 111 triaged calls and NHS 111 online assessments respectively
- **Key messages** describes any notable trends nationally (England), by age group and/or by geographical area (based on UKHSA Regions)
- the full list of syndromic indicators reported here, along with their current level and trend, are summarised in **Table 1**
- charts are provided for each syndromic indicator on a national basis, by age group and by geographical area (UKHSA Region). Each chart includes a year of data with:
 - 7-day moving averages (adjusted for weekends and bank holidays) to aid in the identification of trend
 - statistical baselines (where available) to aid in the assessment of level compared to historical expectations

For further information please see the **Notes and caveats** section.

Previous weekly bulletins from this system are available [here](#).

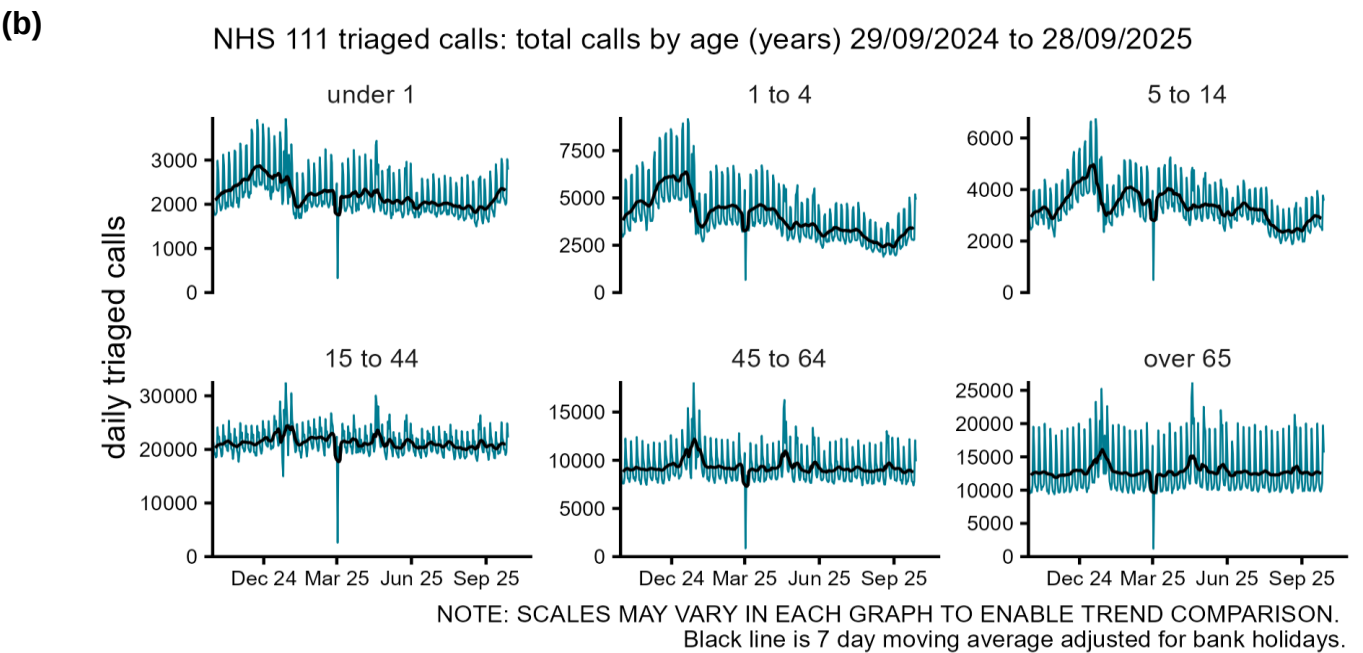
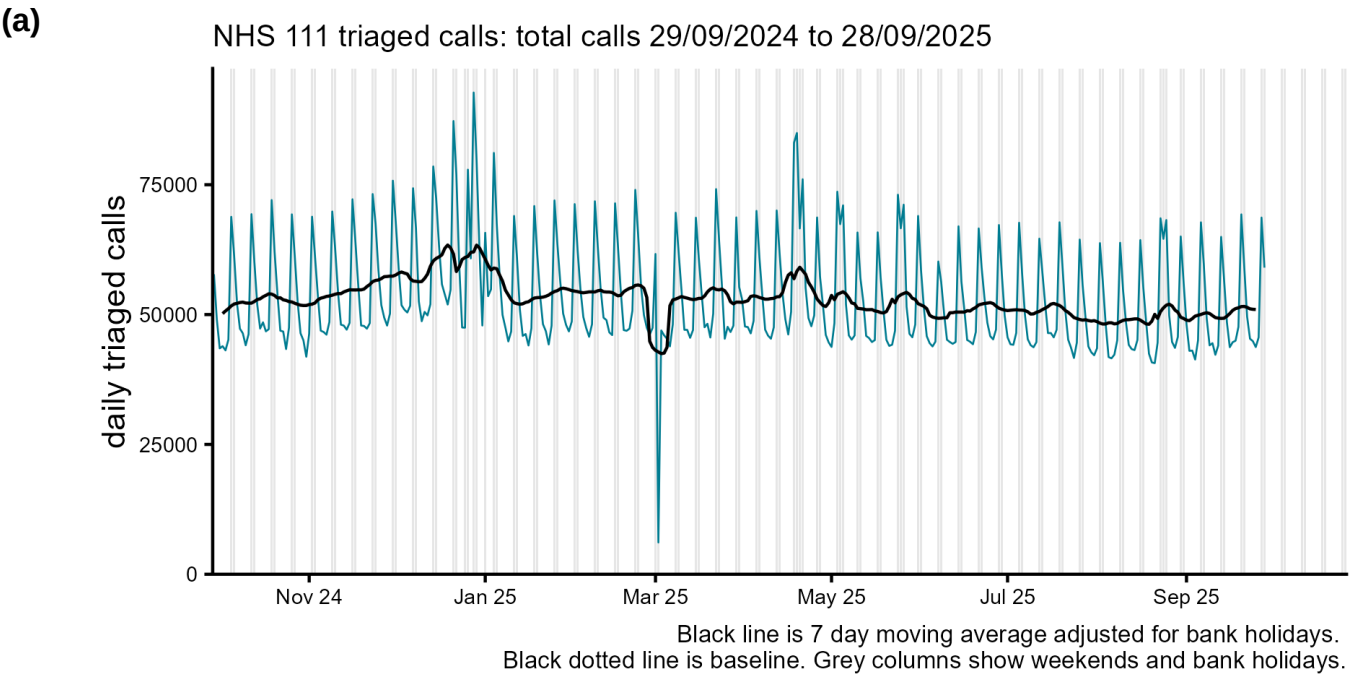
Data quality issues of note this week

Please note: we are currently investigating a potential data quality and coding issue within NHS 111 online assessments across selected indicators in the South East region. Therefore, recent trends in online assessment data for the South East should be interpreted with some caution; this has particularly affected the 'vomiting', 'acute respiratory infections' and 'eye problems' indicators in recent weeks, impacting the national trend, especially in adults aged 45 years and over.

Total contacts

NHS 111 triaged calls

Figure 1: Daily number of NHS 111 triaged calls (with 7-day moving average adjusted for bank holidays) recorded in this syndromic surveillance system in England (a) nationally, (b) by age and (c) by UKHSA Region.



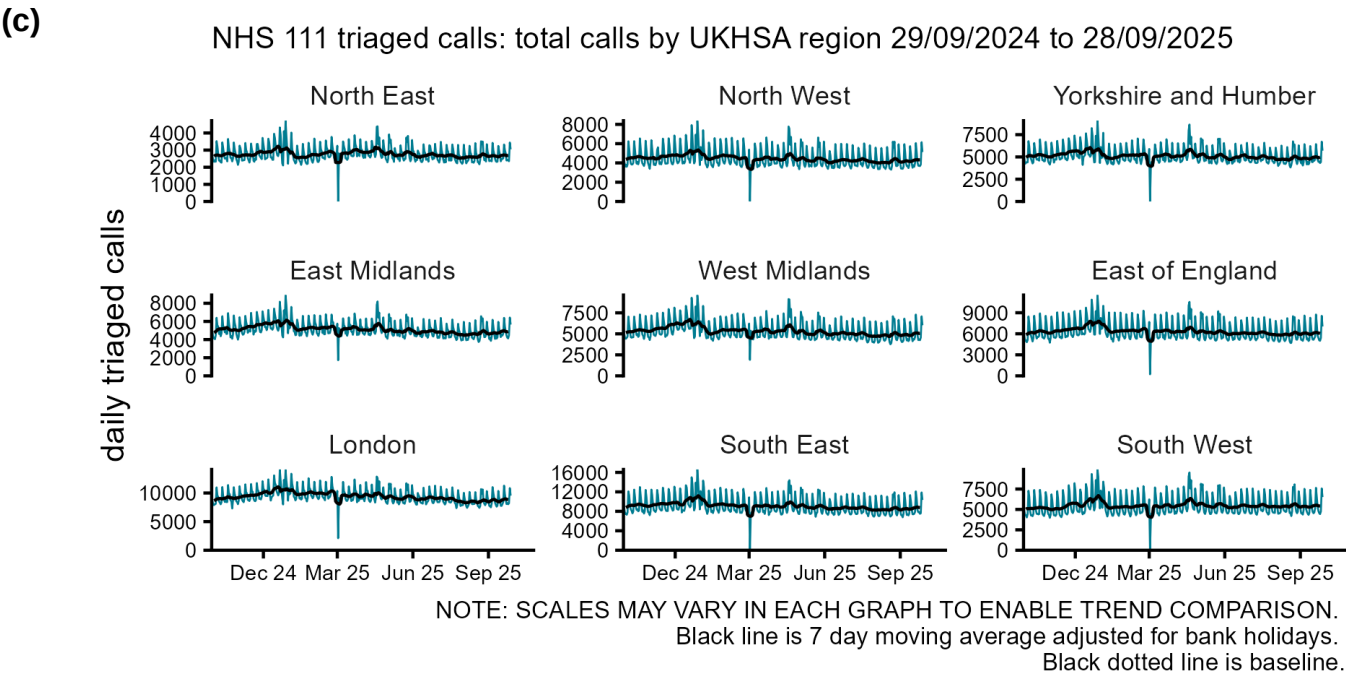
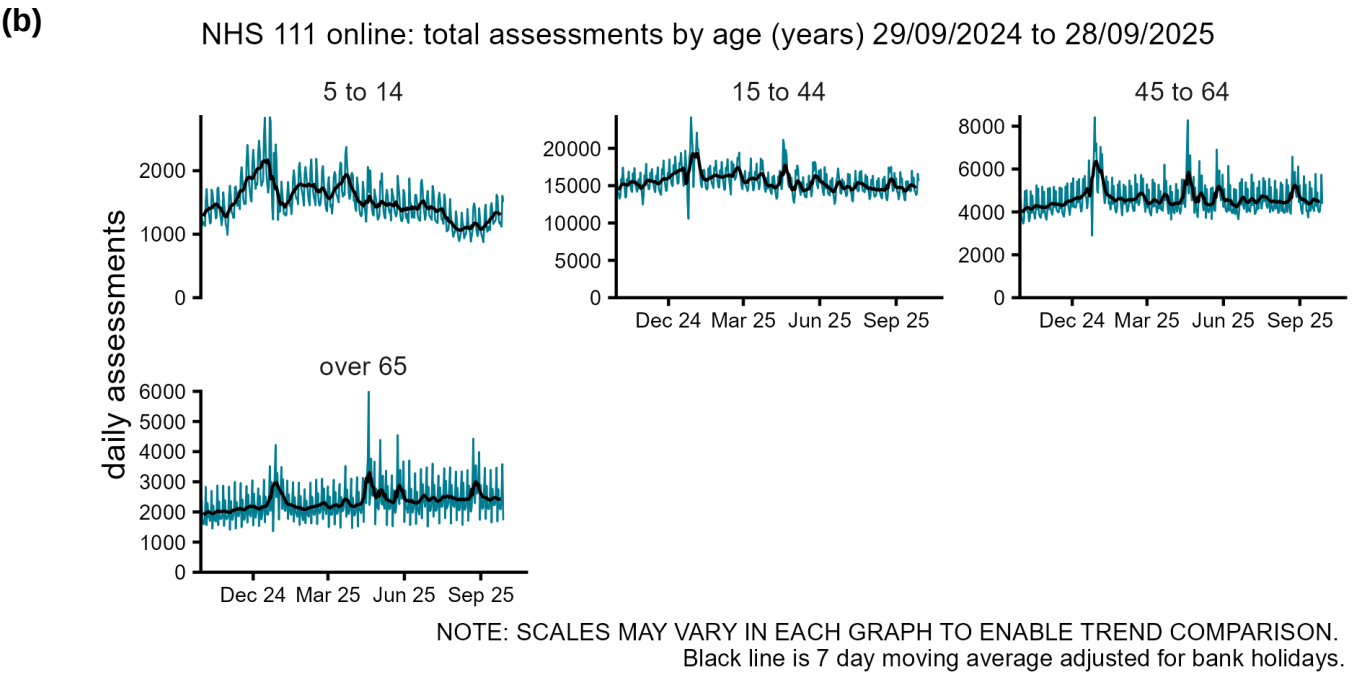
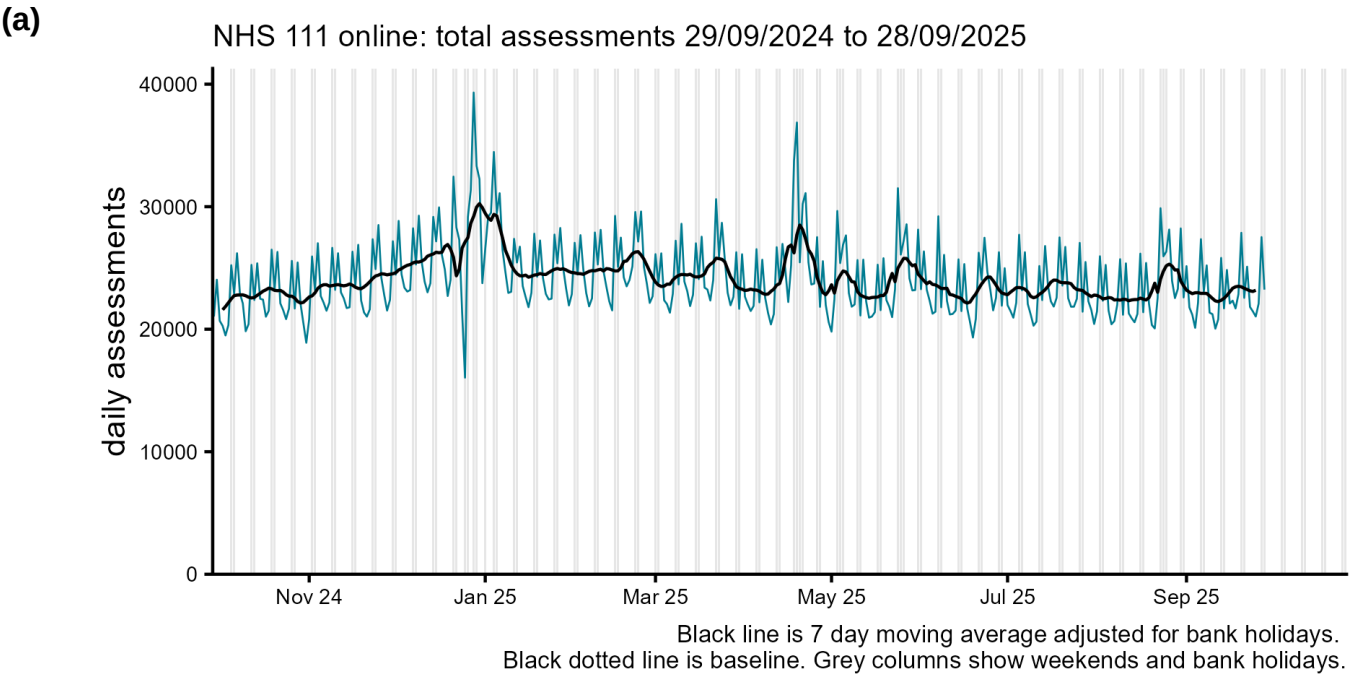


Table 2: The number of NHS 111 triaged calls in England recorded each day in the most recent week.

Date	Number of triaged calls
22 September 2025	49,866
23 September 2025	45,620
24 September 2025	45,117
25 September 2025	43,975
26 September 2025	45,851
27 September 2025	68,988
28 September 2025	59,306

NHS 111 online

Figure 2: Daily number of completed NHS 111 online assessments (with 7-day moving average adjusted for bank holidays) recorded in this syndromic surveillance system in England (a) nationally, (b) by age and (c) by UKHSA Region.



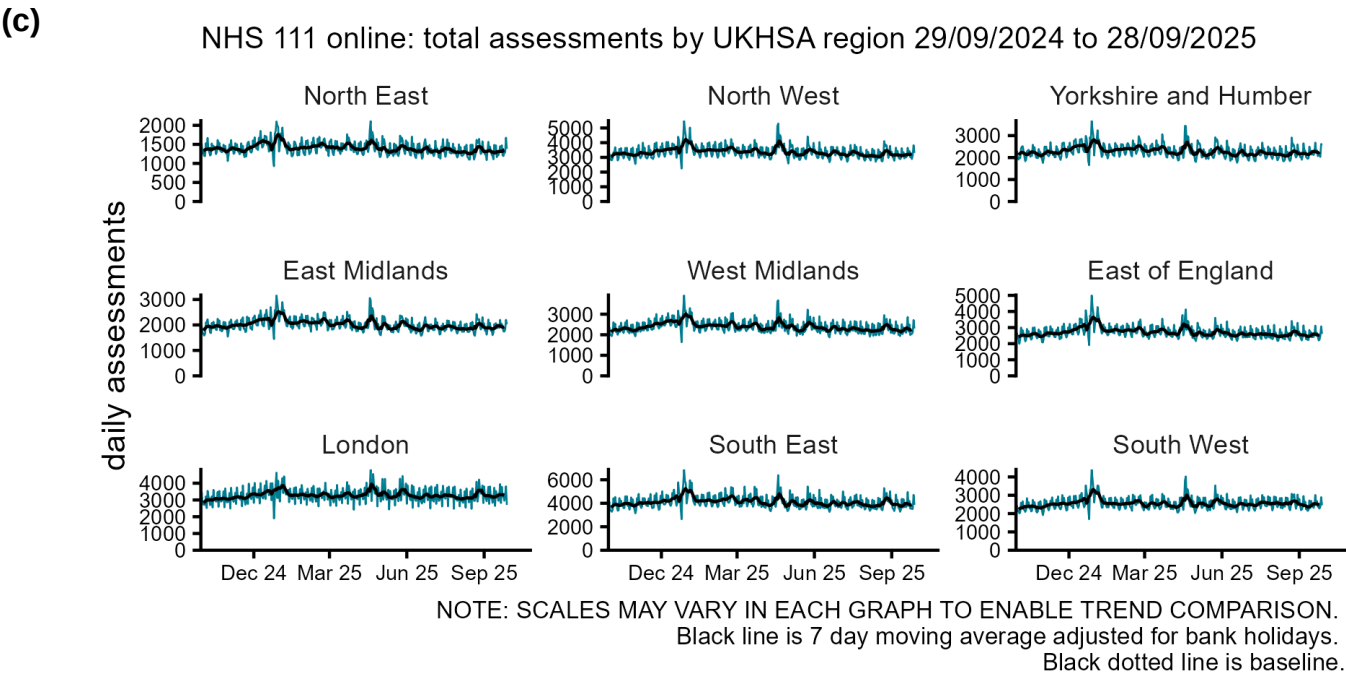


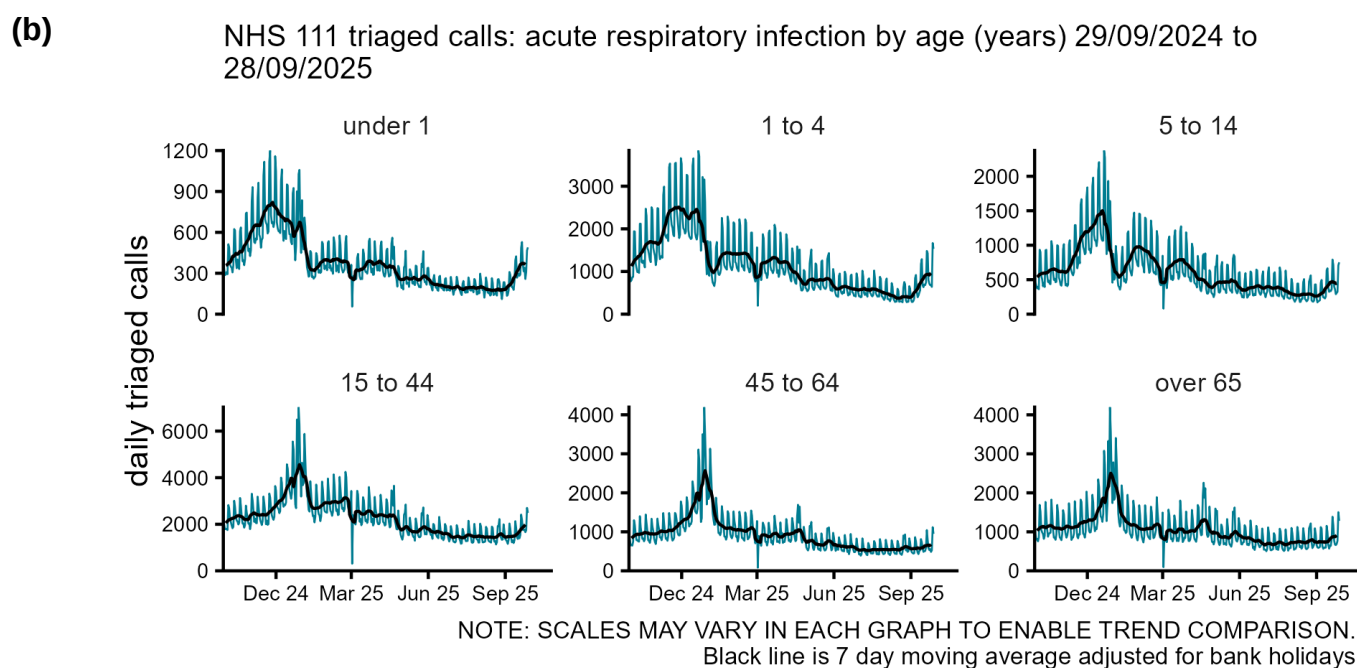
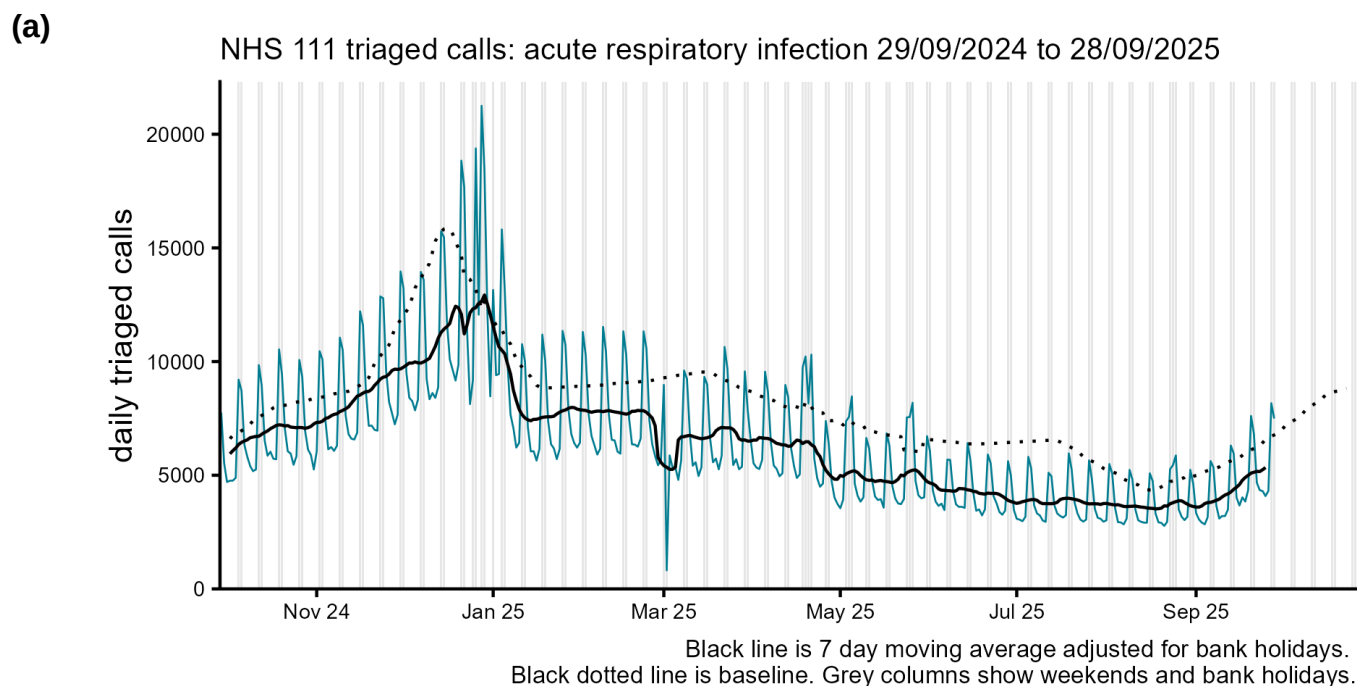
Table 3: The number of completed NHS 111 online assessments in England recorded each day in the most recent week.

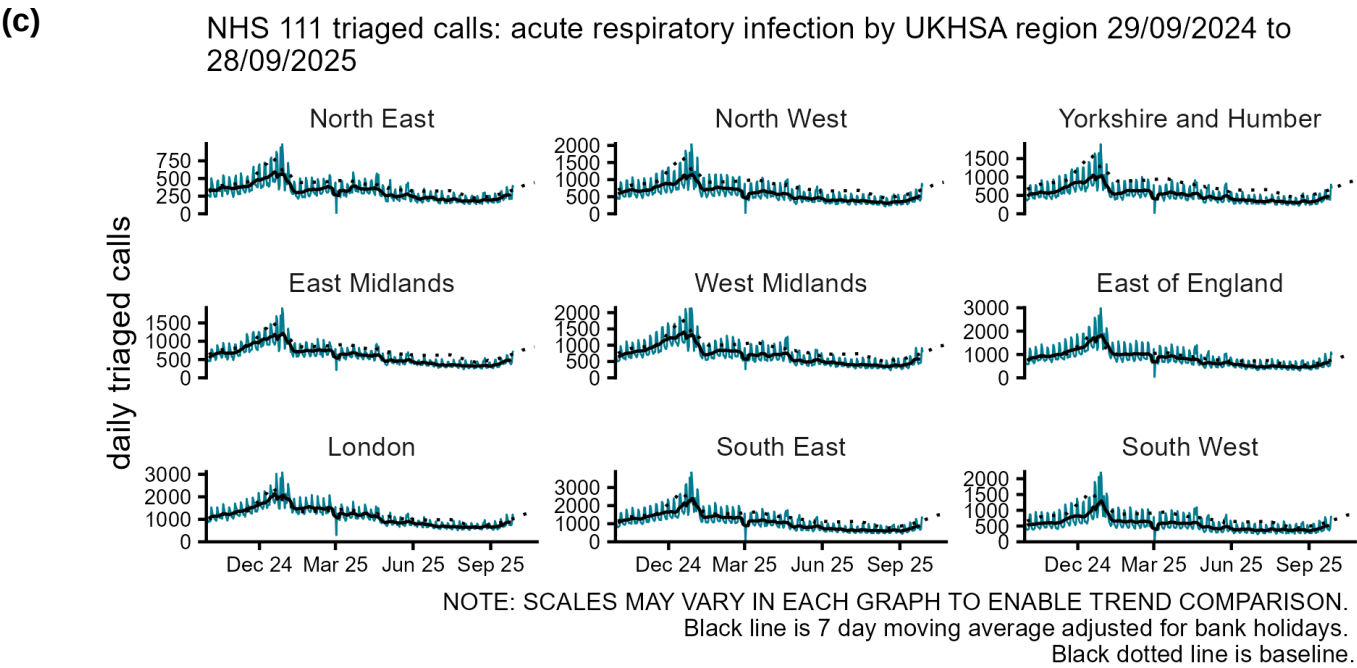
Date	Number of completed assessments
22 September 2025	25,221
23 September 2025	21,888
24 September 2025	21,536
25 September 2025	21,103
26 September 2025	22,189
27 September 2025	27,703
28 September 2025	23,342

Respiratory conditions

Acute respiratory infections NHS 111 triaged calls

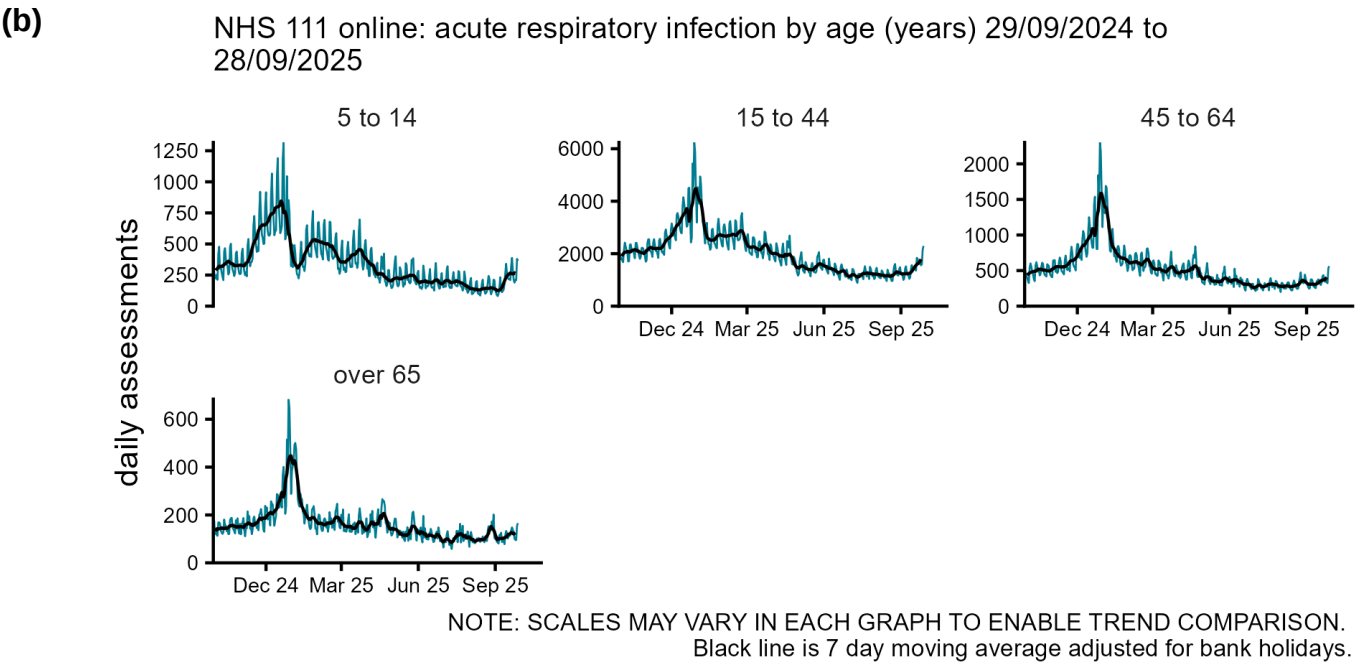
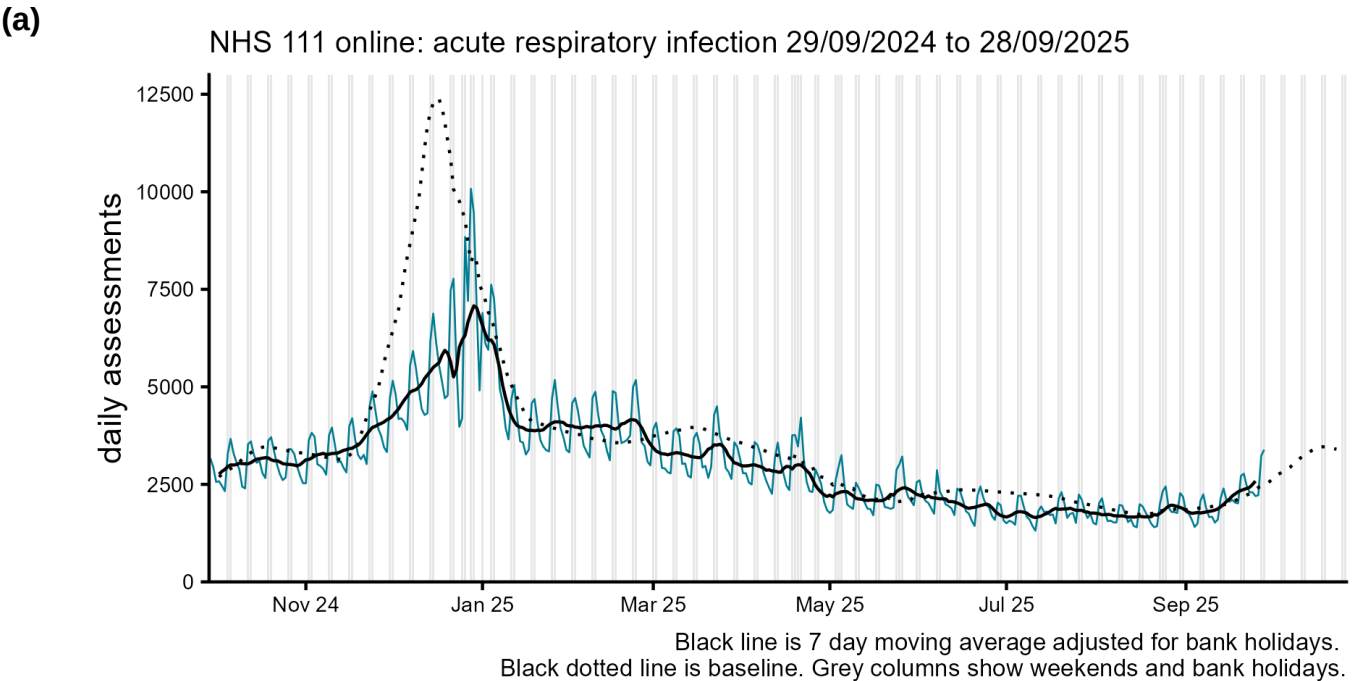
Figure 3: Daily number of NHS 111 triaged calls (and 7-day moving average adjusted for bank holidays) for acute respiratory infections, England (a) nationally, (b) by age and (c) by UKHSA Region.

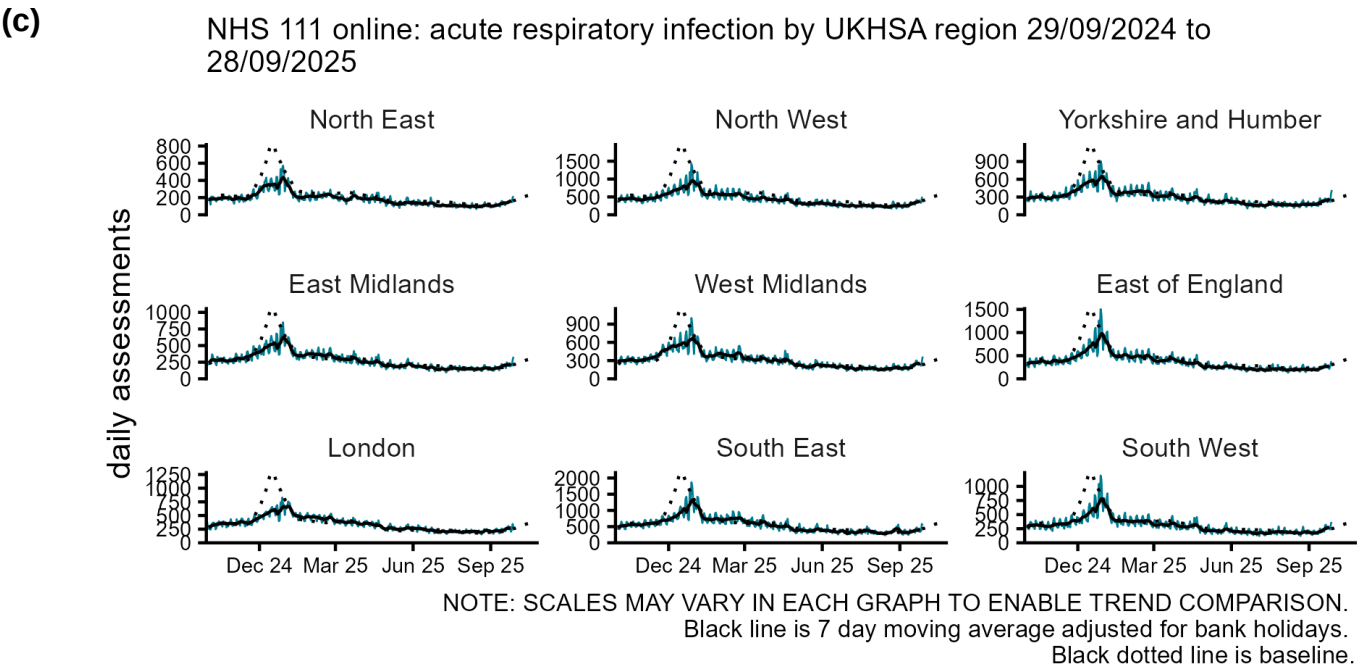




Acute respiratory infections NHS 111 online

Figure 4: Daily number of completed NHS 111 online assessments (and 7-day moving average adjusted for bank holidays) for acute respiratory infections, England (a) nationally, (b) by age and (c) by UKHSA Region.

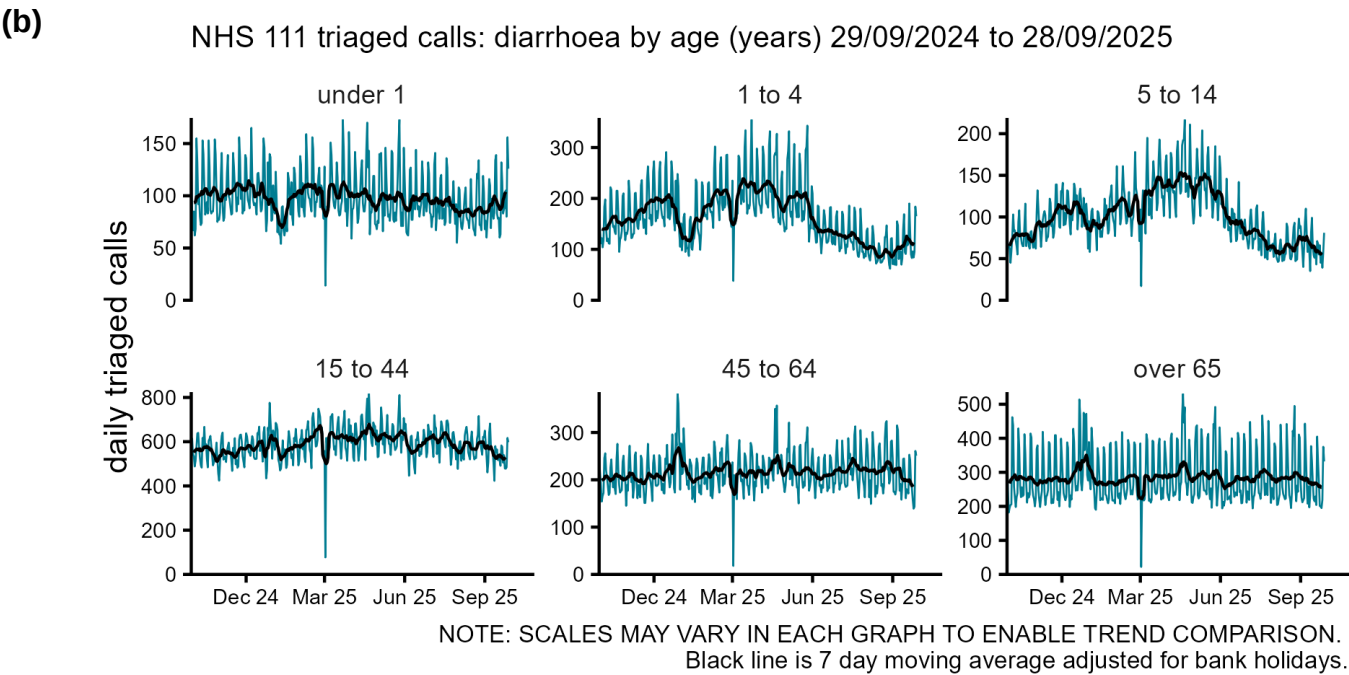
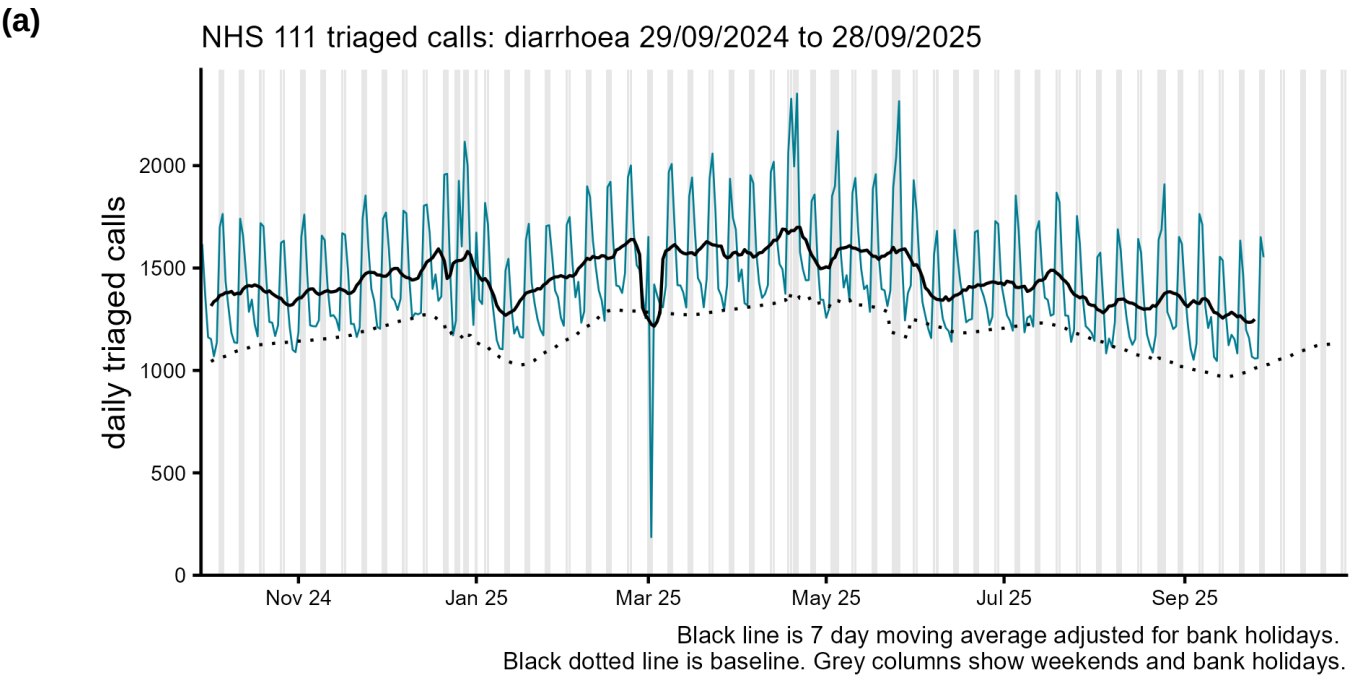




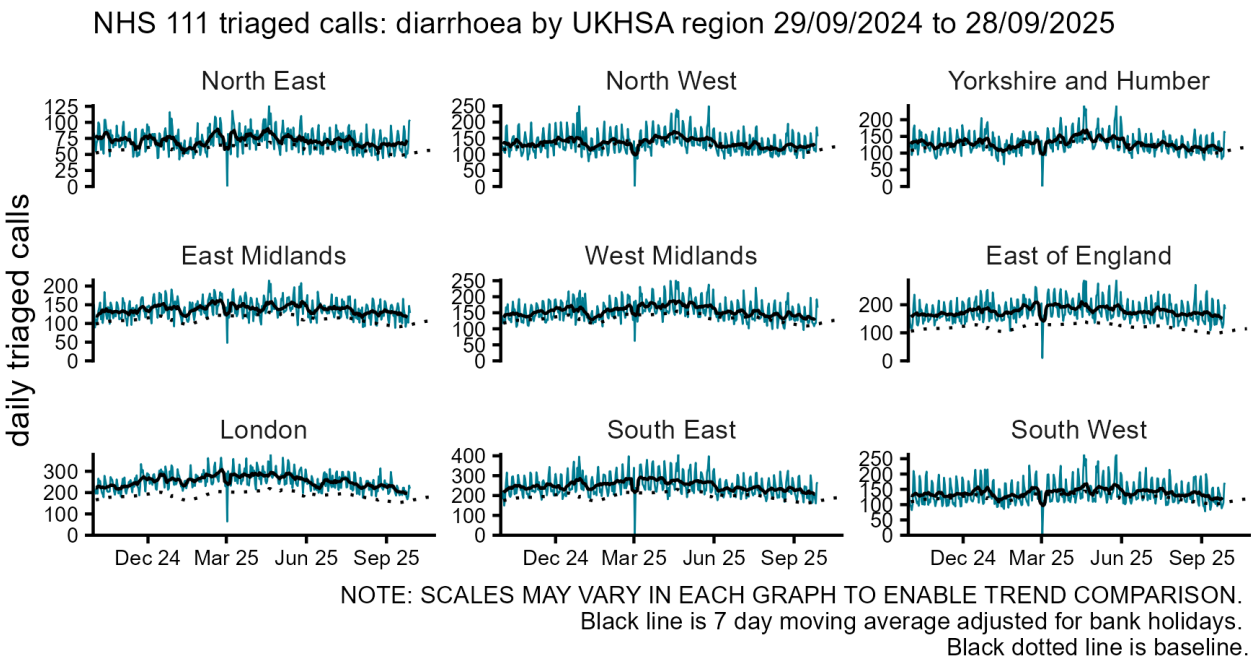
Gastrointestinal conditions

Diarrhoea NHS 111 triaged calls

Figure 5: Daily number of NHS 111 triaged calls (and 7-day moving average adjusted for bank holidays) for diarrhoea, England (a) nationally, (b) by age and (c) by UKHSA Region.

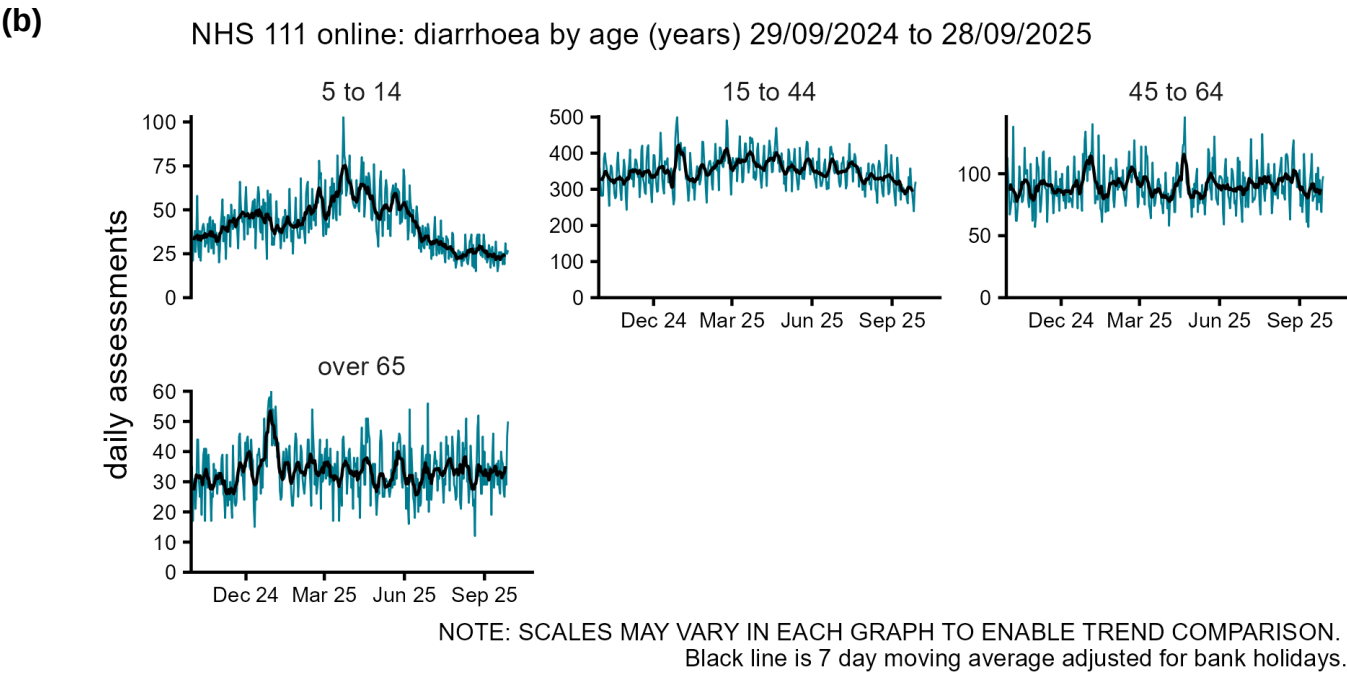
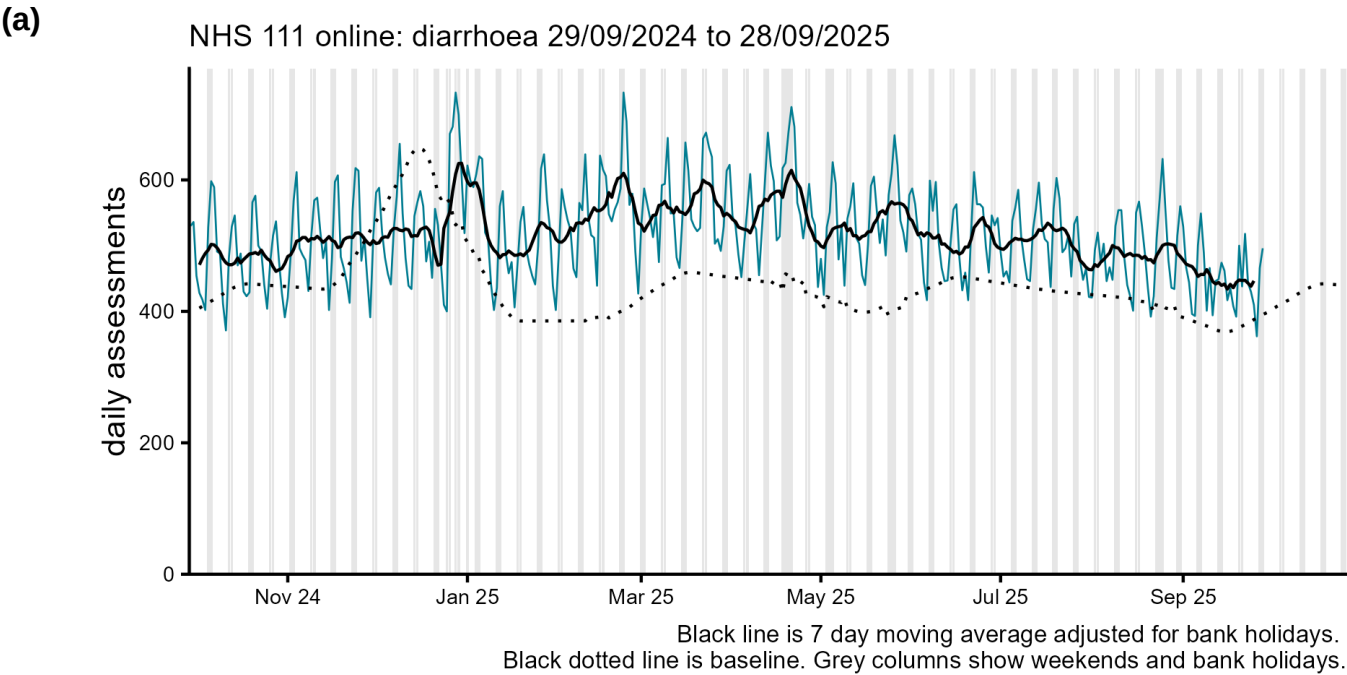


(c)



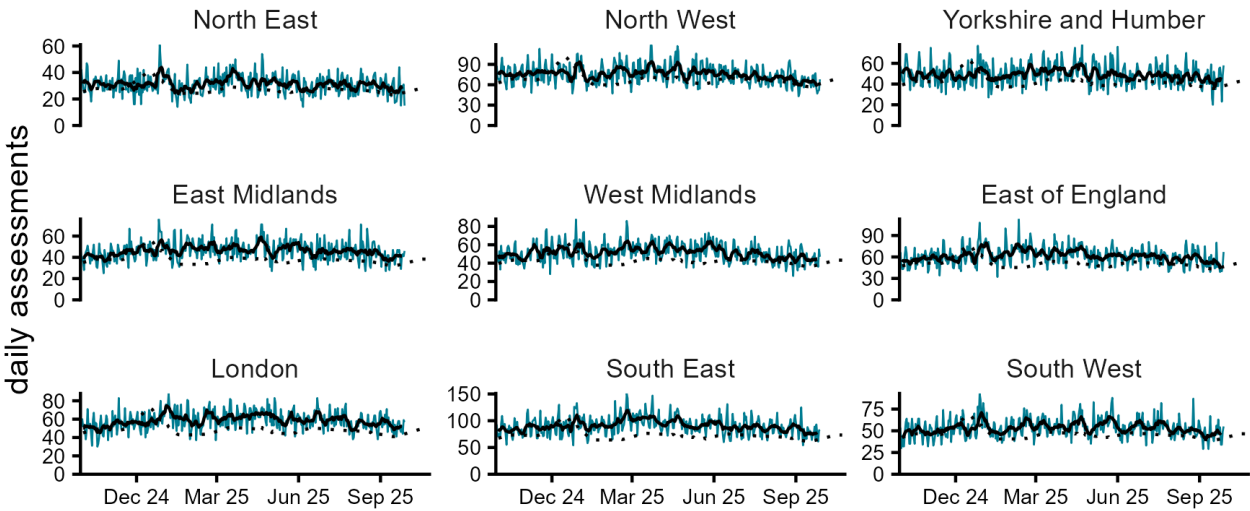
Diarrhoea NHS 111 online

Figure 6: Daily number of completed NHS 111 online assessments (and 7-day moving average adjusted for bank holidays) for diarrhoea, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

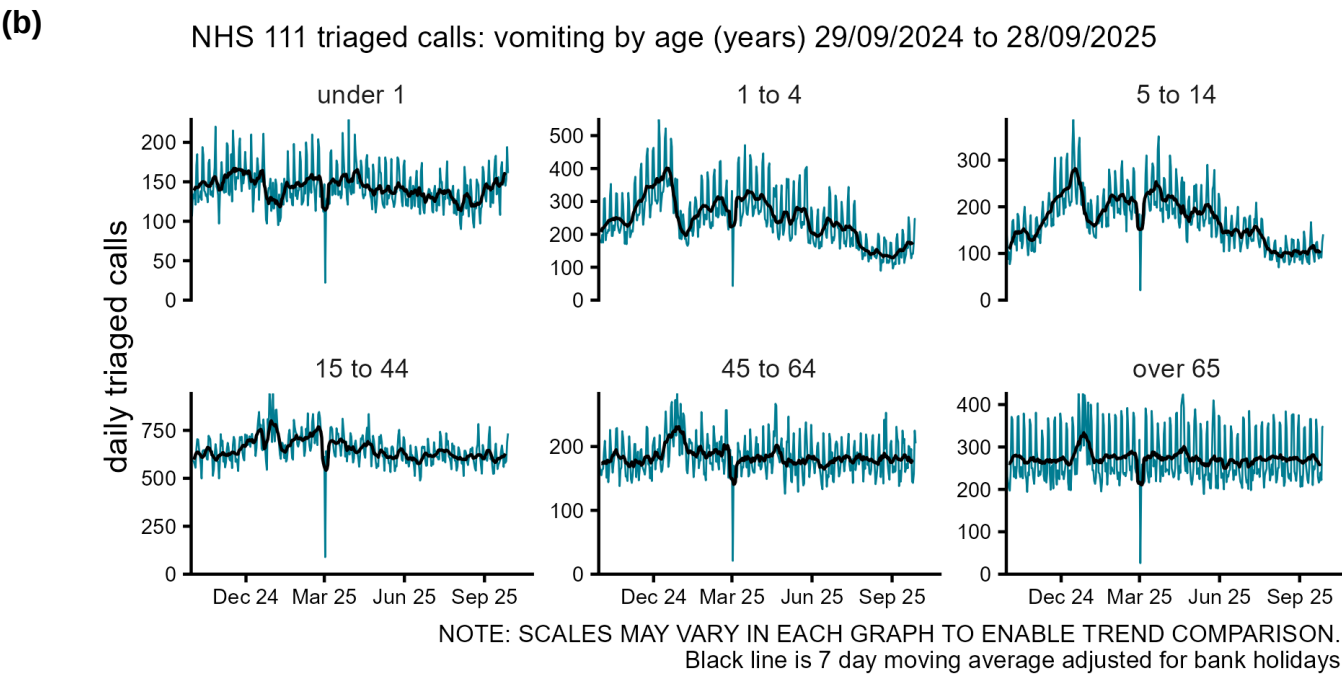
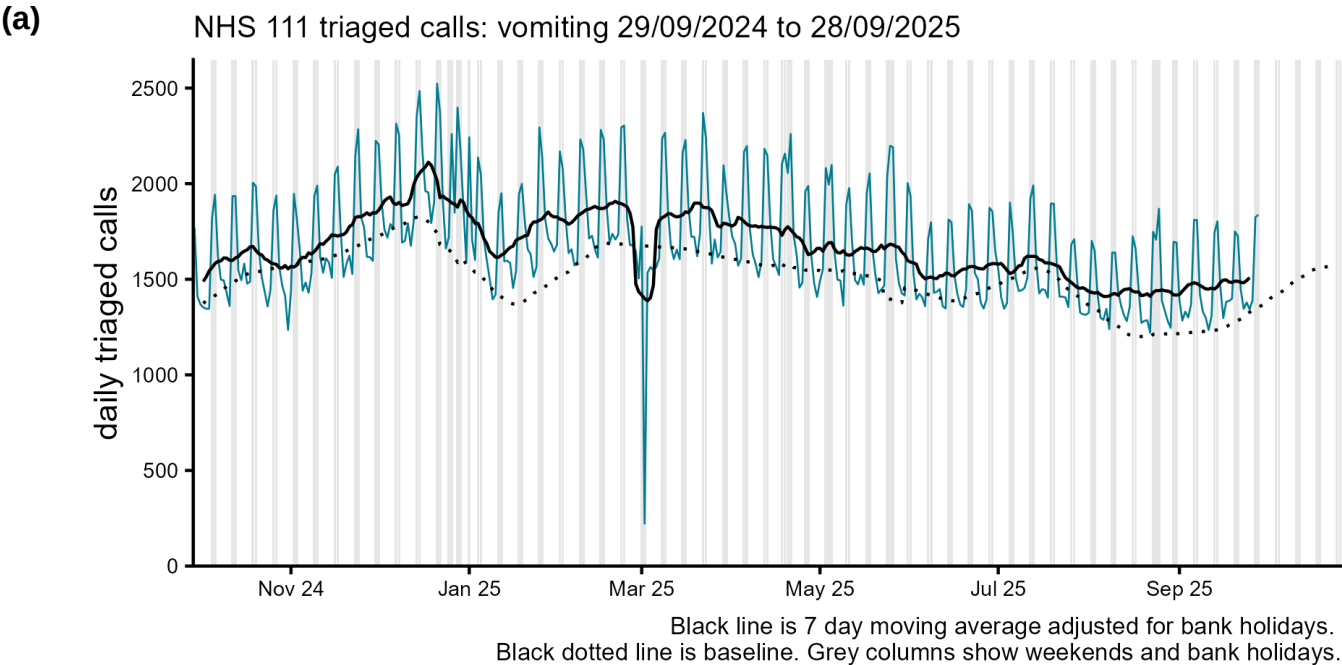
NHS 111 online: diarrhoea by UKHSA region 29/09/2024 to 28/09/2025



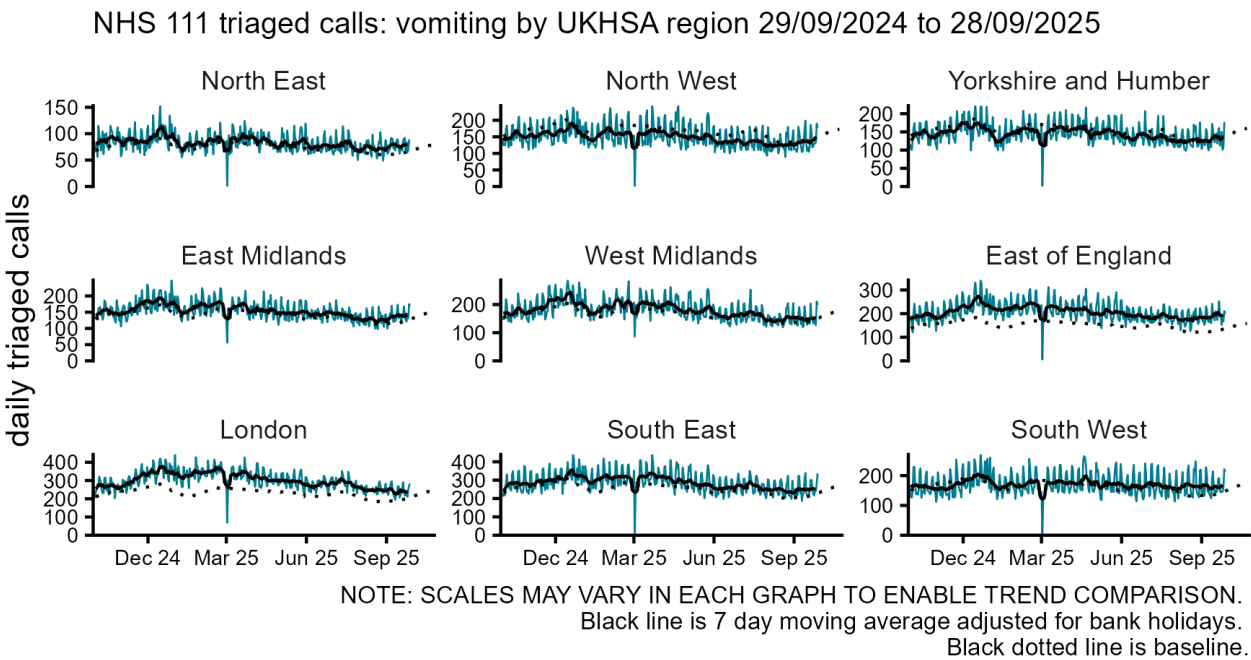
NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Vomiting NHS 111 triaged calls

Figure 7: Daily number of NHS 111 triaged calls (and 7-day moving average adjusted for bank holidays) for vomiting, England (a) nationally, (b) by age and (c) by UKHSA Region.

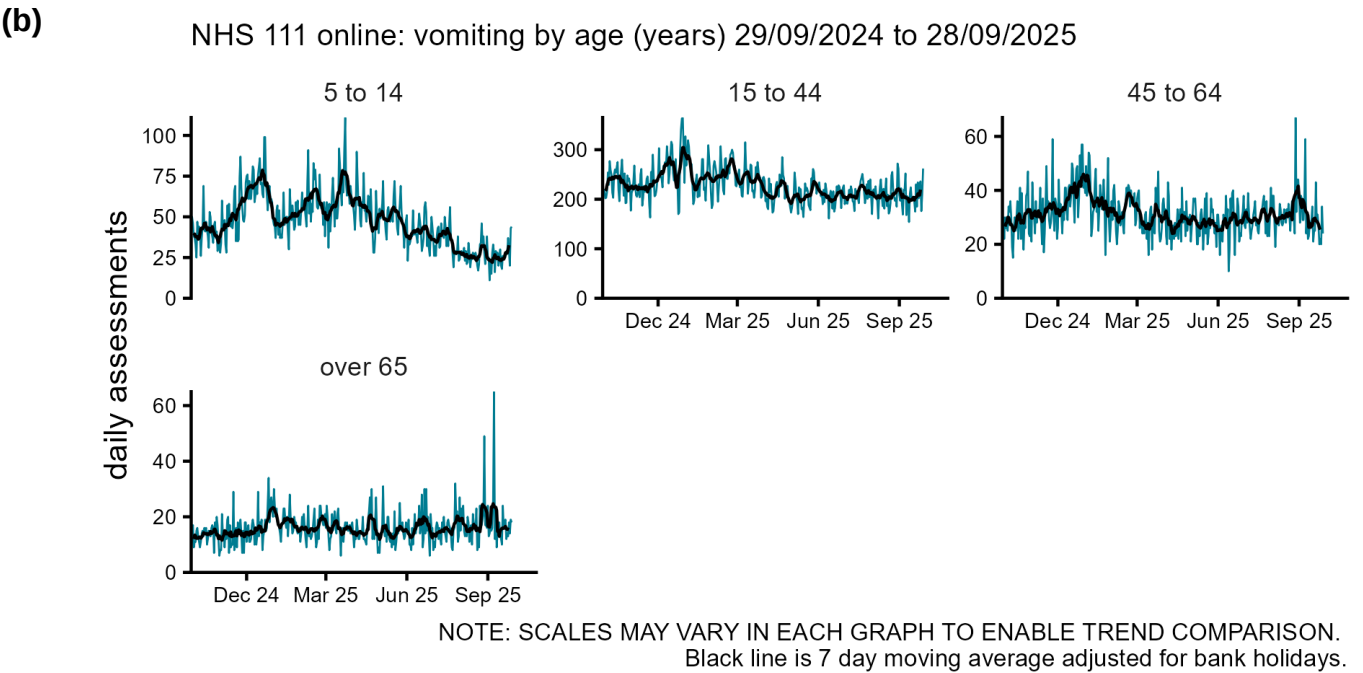
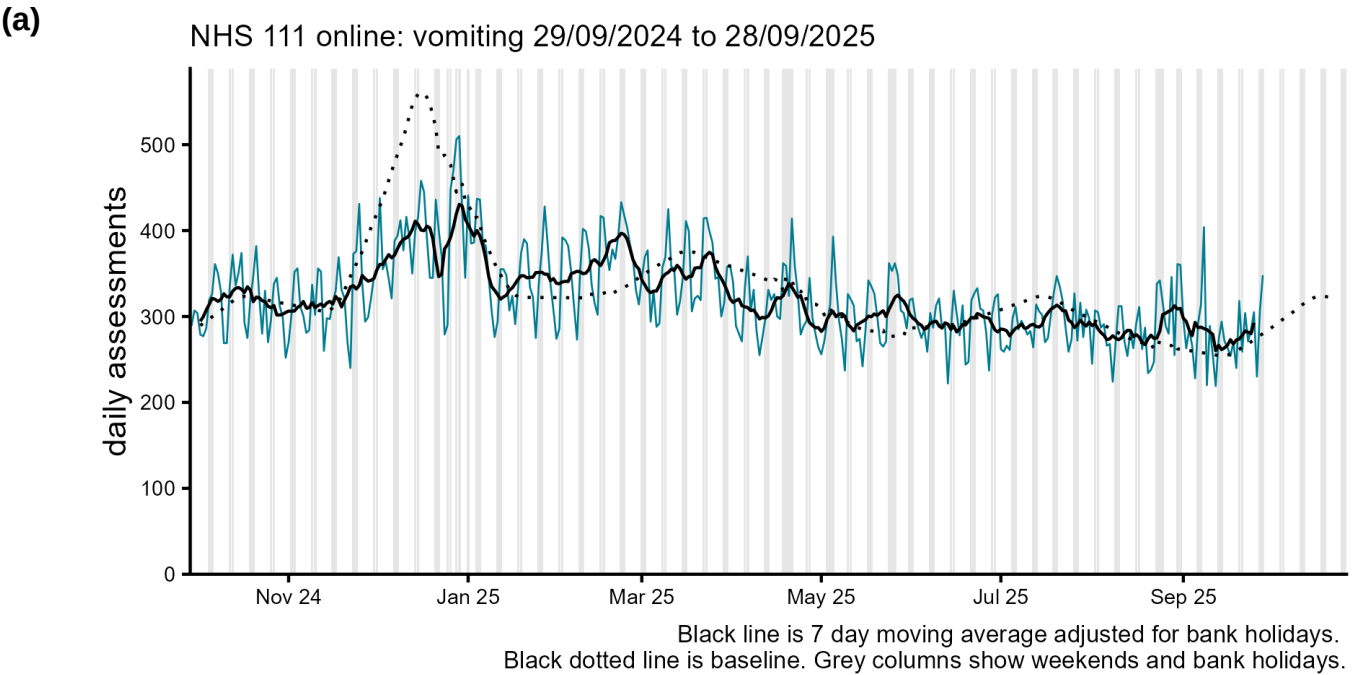


(c)



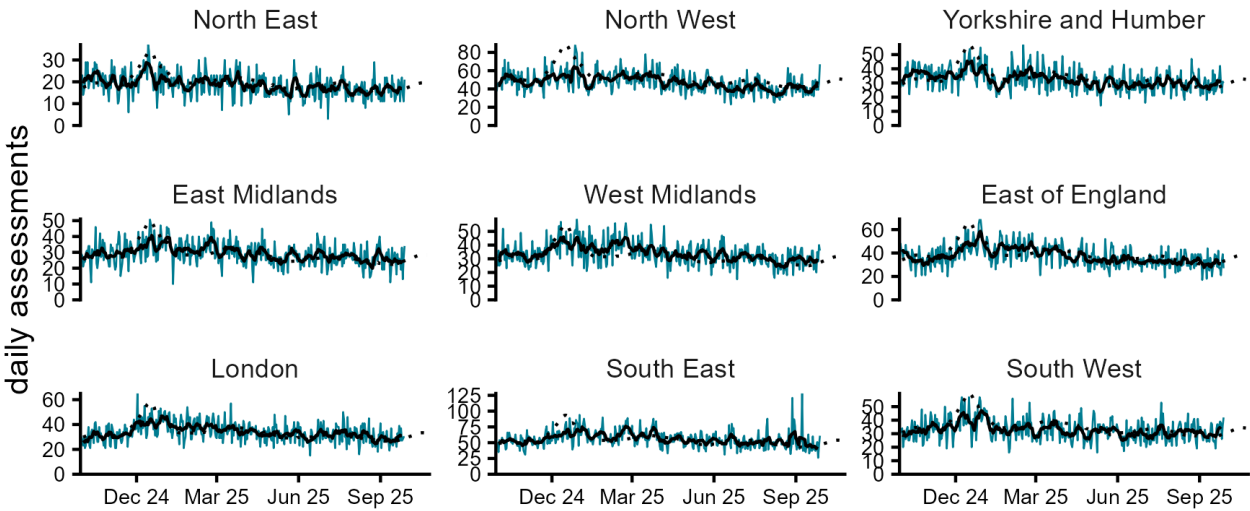
Vomiting NHS 111 online

Figure 8: Daily number of completed NHS 111 online assessments (and 7-day moving average adjusted for bank holidays) for vomiting, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

NHS 111 online: vomiting by UKHSA region 29/09/2024 to 28/09/2025



NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Seasonal environmental conditions

UKHSA and the Met Office operate a weather-health alert system that includes both heat and cold weather alert periods. Syndromic indicators are used to monitor the impact of both extreme hot and cold weather in England during these periods and will be routinely included below (where an appropriate syndromic indicator is available).

[Cold weather alert](#) period: 1 November to 31 March

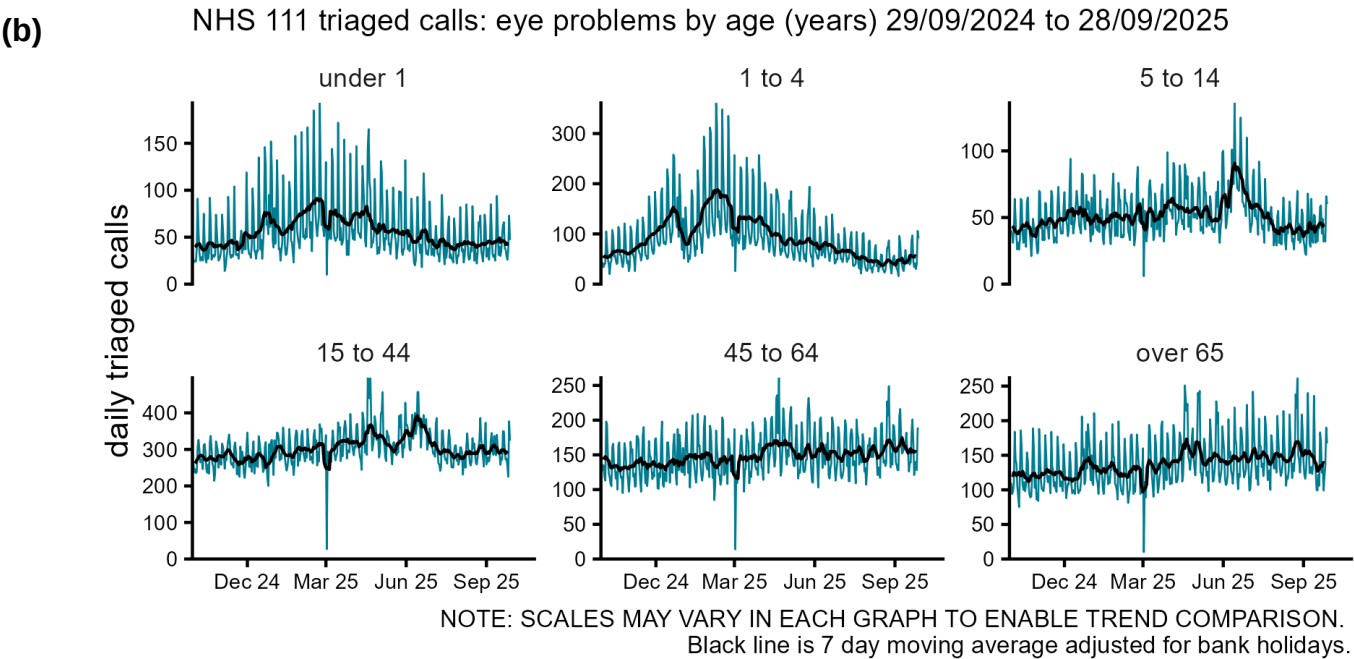
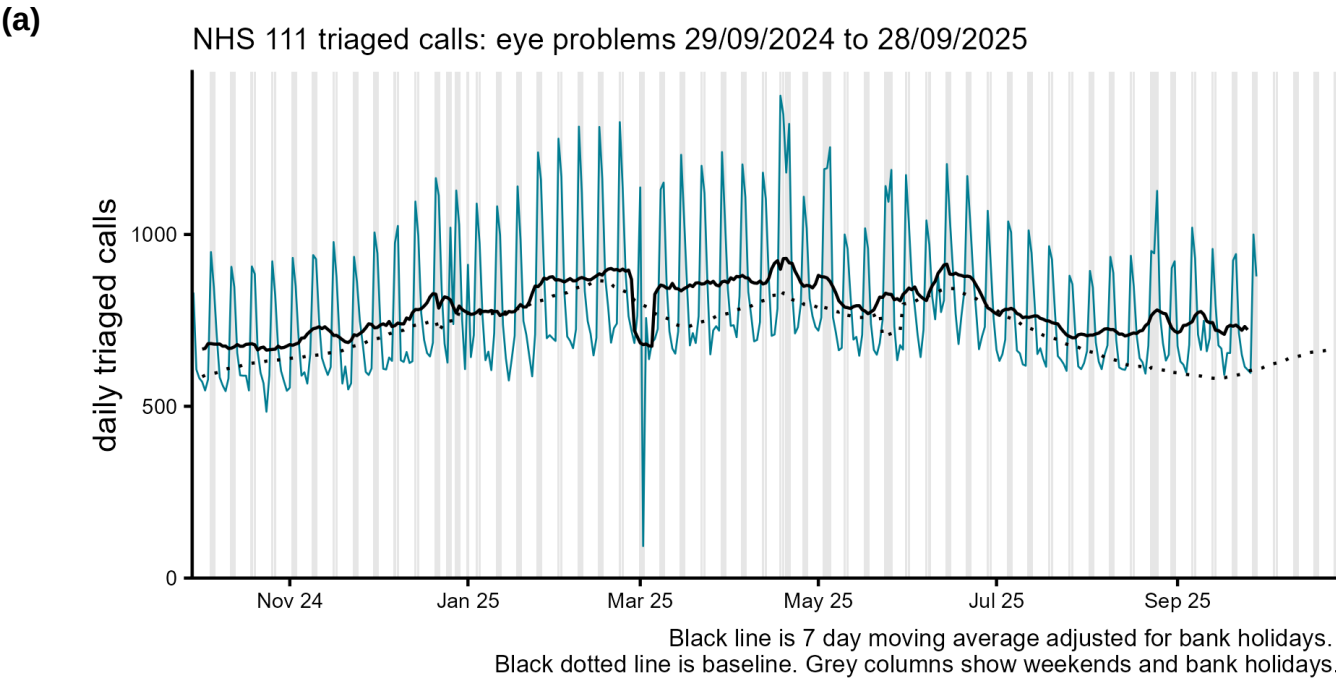
[Heat-Health Alert](#) period: 1 June to 30 September

Highest weather alert level during the current reporting week:

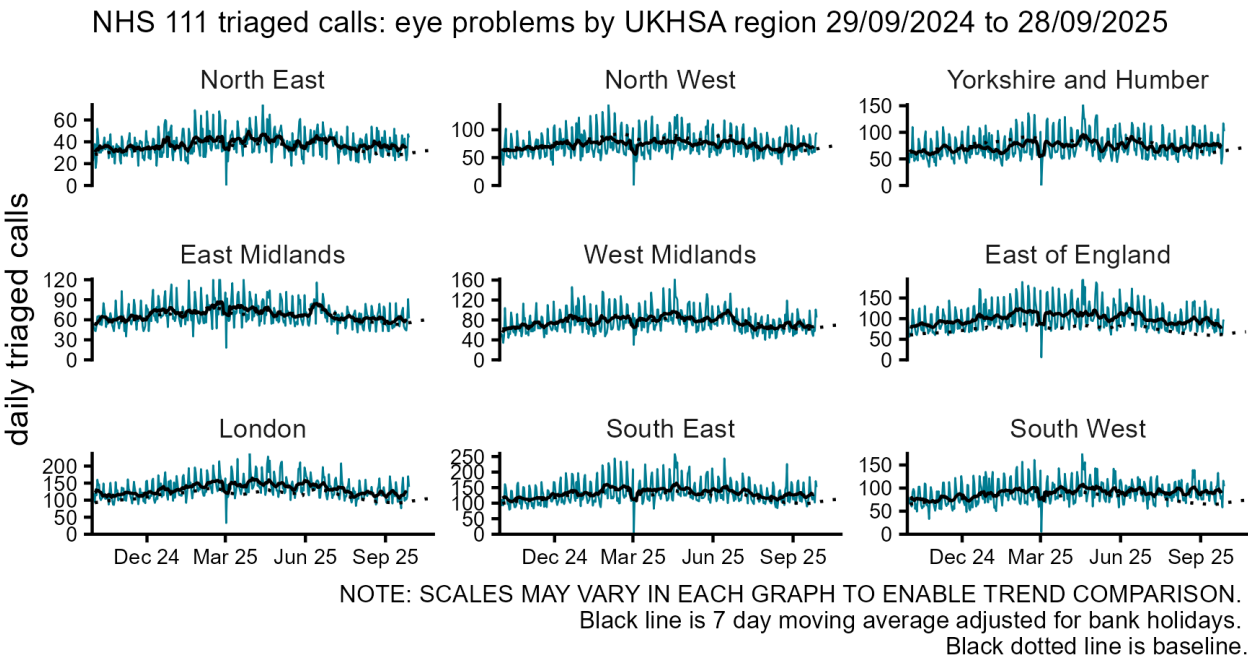
No alerts issued

Eye problems NHS 111 triaged calls

Figure 9: Daily number of NHS 111 triaged calls (and 7-day moving average adjusted for bank holidays) for eye problems, England (a) nationally, (b) by age and (c) by UKHSA Region.

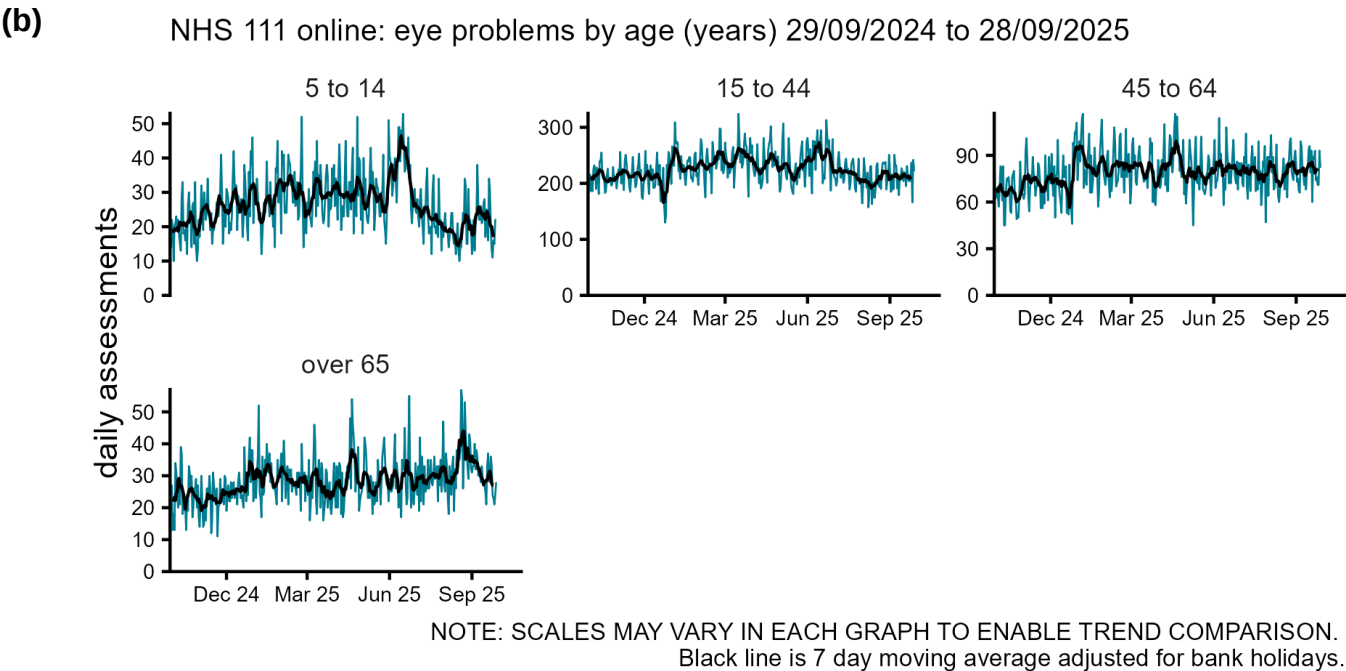
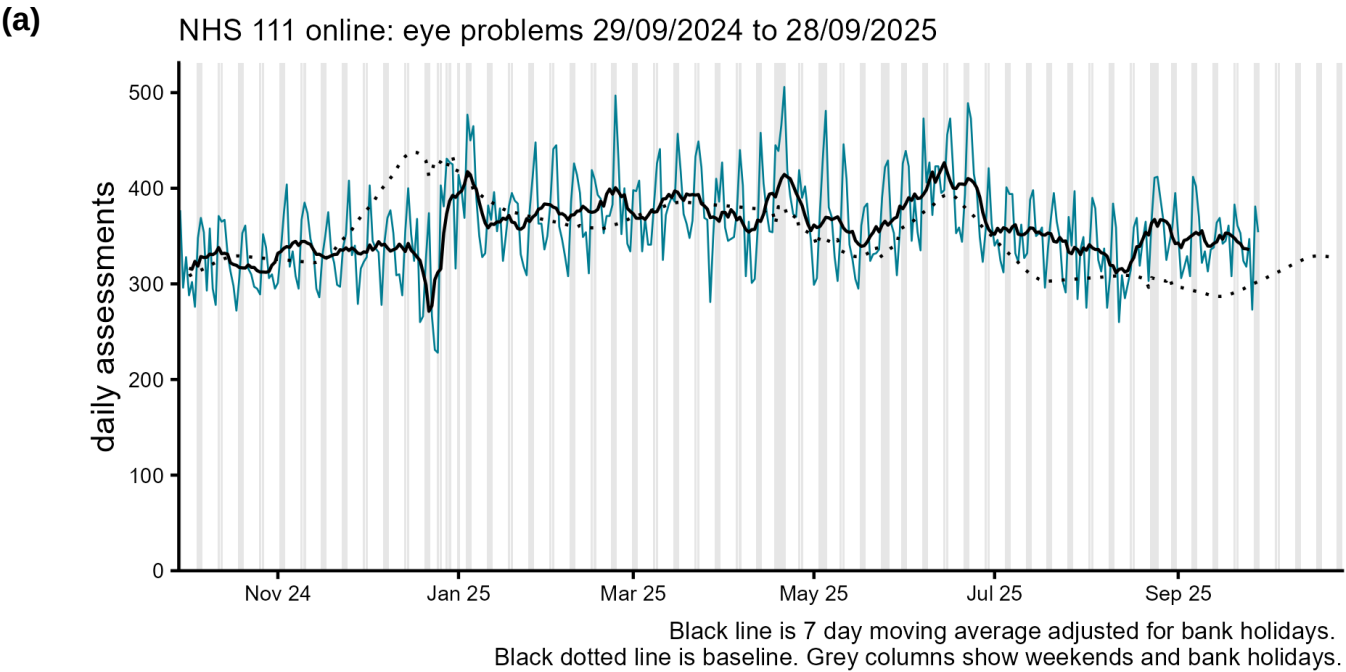


(c)



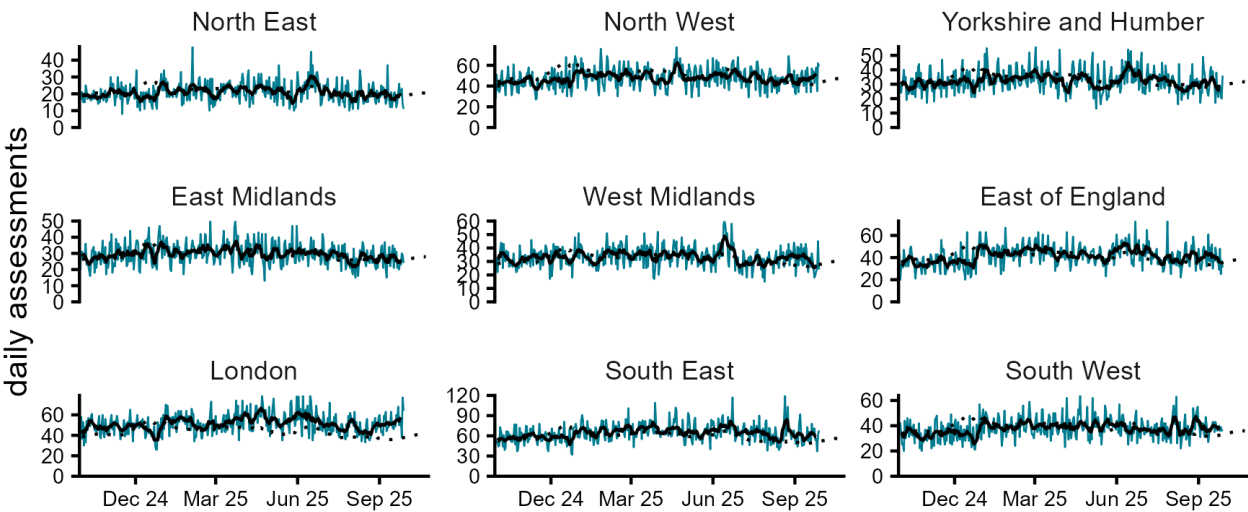
Eye problems NHS 111 online

Figure 10: Daily number of completed NHS 111 online assessments (and 7-day moving average adjusted for bank holidays) for eye problems, England (a) nationally, (b) by age and (c) by UKHSA Region.



(c)

NHS 111 online: eye problems by UKHSA region 29/09/2024 to 28/09/2025



NOTE: SCALES MAY VARY IN EACH GRAPH TO ENABLE TREND COMPARISON.
Black line is 7 day moving average adjusted for bank holidays.
Black dotted line is baseline.

Notes and caveats

The following additional caveats apply to the UKHSA remote health advice syndromic surveillance system:

- during the period November 2023 to April 2024, NHS Pathways system updates (NHS Pathways Releases 41 and 42) have resulted in updates to the clinical triage of certain NHS 111 calls and online assessments
 - These Pathways updates have had a significant impact on the number of syndromic NHS 111 triaged calls and online assessments presented in respiratory indicators in this bulletin
 - Due to challenges interpreting the NHS 111 respiratory triaged calls, from week 17 2024 all respiratory indicators routinely reported in this bulletin have been replaced with an 'acute respiratory infections' calls and online assessments indicator
 - The 'acute respiratory infections' indicator is based on a broad group of symptoms/provisional diagnoses that may be indicative of acute respiratory infections including, for example, influenza-like illness, otitis media, pharyngitis
 - Individual calls and online assessment respiratory indicators will be reintroduced later in the year once the new reporting levels have been established and baselines adapted to those new levels
- data presented should be used to monitor trends rather than numbers of 'cases':
 - NHS 111 calls are monitored using the NHS 111 Intelligent Data Tool, a repository of data on NHS 111 triaged calls used by NHS England, UKHSA and service commissioners. The volume of triaged calls for each syndromic indicator may be different to the call volumes presented in syndromic reports before week 20 2023, when a different data repository was used for syndromic surveillance purposes. However, trends remain similar to those previously reported
 - NHS 111 triaged calls data may not include the most urgent calls which are rapidly redirected to ambulance services
 - any user that launches an online assessment may access the service multiple times and can change their answers and follow multiple journeys through the online system: only complete assessments are included here
 - an individual may use both the NHS 111 online and NHS 111 telephony services; counts from the two services cannot be considered as distinct counts of individuals
 - NHS 111 online assessment data does not include children under 5 years of age

- baselines:
 - were last remodelled January 2024
 - are constructed from historical data since January 2018
 - represent seasonally expected levels of activity
 - take account of any known substantial changes in data collection, population coverage or reporting practices and consequently may vary slightly from week to week (and will rescale) if there are substantial changes in call/online activity
 - the COVID-19 pandemic period is excluded
- as NHS 111 systems evolve to meet service needs, we continue to work with NHS 111 and NHS England to ensure that:
 - changes impacting on syndromic indicators reported in this bulletin are identified and accounted for as far as possible
 - changes are described in: **Data quality issues of note this week**
- further information about NHS 111 can be found [here](#)

Acknowledgements

We are grateful to NHS 111 and to NHS England for their assistance and support in providing the anonymised data that underpin this system.

About the UK Health Security Agency

UKHSA is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation health secure.

[UKHSA](#) is an executive agency, sponsored by the [Department of Health and Social Care](#).

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