

#### Influenza and COVID-19 surveillance graphs

UKHSA publishes a national influenza and COVID-19 surveillance report which summarises the information from the surveillance systems which are used to monitor influenza, COVID-19, and other seasonal respiratory viruses in England.

Additional figures based on these surveillance systems are included in this slide set.

The figures presented in this slide set are based on data from week 50 (between 8 December 2025 and 14 December 2025).



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- 2) Respiratory DataMart system (England)
- 3) Primary Care surveillance
- 4) Secondary Care surveillance
- 5) Preceding, co- and secondary infections in persons with COVID-19 and influenza in England



## Laboratory-confirmed cases (England)

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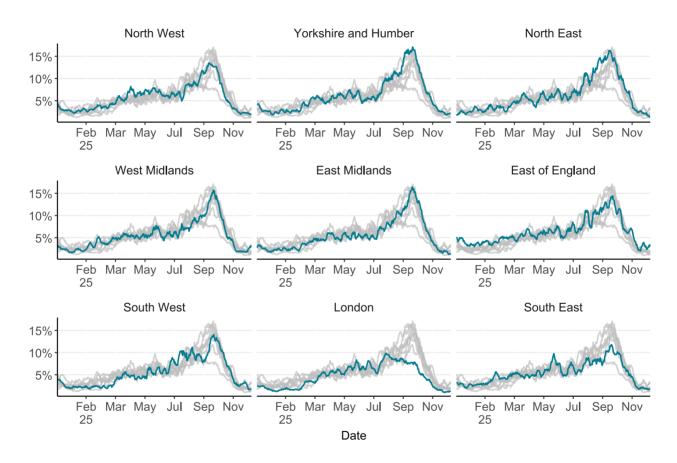
#### Confirmed COVID-19 episodes in England

#### **Data information**

- From the week 47 2025 report onwards, case rates have been updated to use the latest Office for National Statistics (ONS) population estimates for mid-2024. Previously, case rates were calculated using the mid-2020 population estimates.
- From the week 47 2025 report onwards, rates by ethnicity and IMD quintile have been updated to use the latest Office for National Statistics (ONS) population estimates for mid-2021. Previously, case rates were calculated using the mid-2019 population estimates.
- From 11 January 2022 the requirement for <u>confirmatory PCR testing in individuals who test positive using a lateral flow device was temporarily removed.</u>
- From 31 January 2022, UKHSA moved all COVID-19 case reporting in England to use a new episode-based definition which includes
  possible reinfections. Each infection episode is counted separately if there are at least 91 days between positive test results (PCR or
  LFD). Each infection episode begins with the earliest positive specimen date. Further information can be found on the <u>UKHSA data</u>
  <u>dashboard</u>.
- Since 1 April 2022, free universal symptomatic and asymptomatic testing for the general public in England is no longer available, as outlined in the plan for <u>living with COVID-19</u>. As such, there will be a reduction in the reporting of data obtained through Pillar 2 from April 2022 onwards. Data in this report should be interpreted in the context of this change to testing. <u>Public health guidance</u> remains in place for cases and their close contacts. Additionally, further changes in <u>testing policy</u> are in effect since 1 April 2023, which may affect case rates and positivity rates.
- As of 30 October, a data quality issue has been identified in the SGSS surveillance system, affecting COVID-19 case counts and case rates between 19 March 2025 and 28 July 2025. 1,225 positive COVID-19 cases have been excluded from the dataset and are currently under investigation. This affects slides 6 and 8 in this slideset which use the weekly number of COVID-19 cases.



## 7-day rolling average PCR positivity (%) of confirmed COVID-19 cases tested under Pillar 1 by UKHSA region

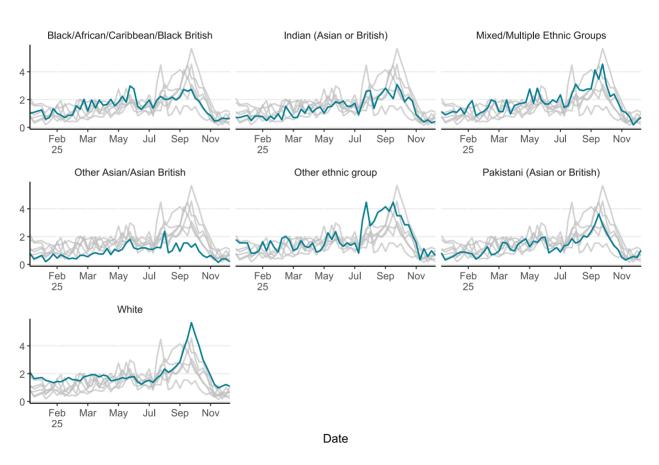


The highlighted line corresponds to the region in the subplot title, grey lines correspond to all other regions

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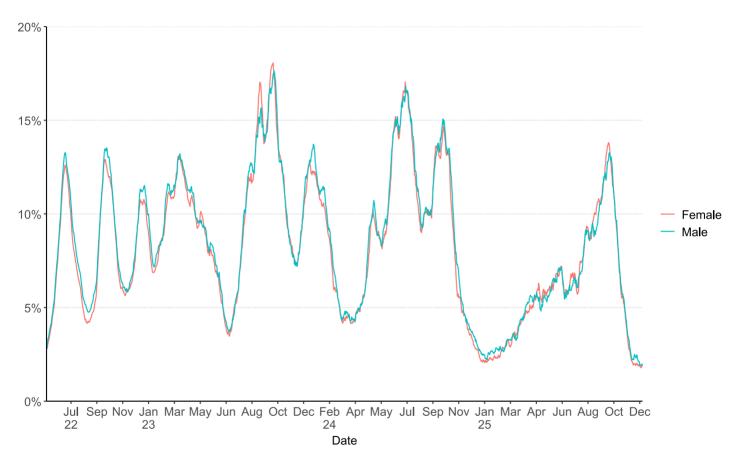
### Weekly incidence of confirmed COVID-19 cases per 100,000 population by ethnicity (Pillar 1), England



The highlighted line corresponds to the ethnicity in the subplot title, grey lines correspond to all other ethnicities

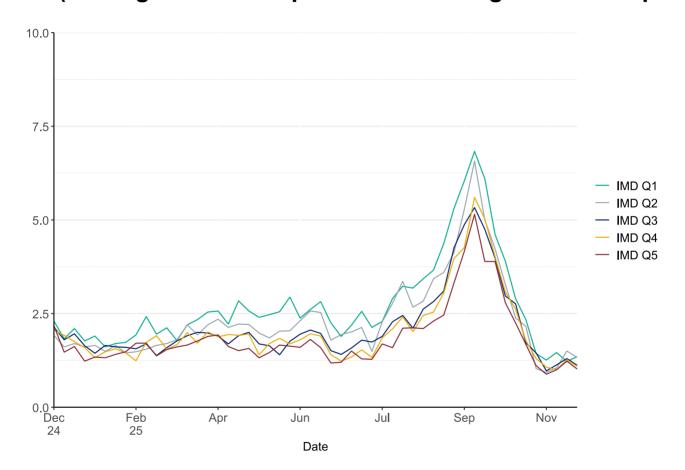


### 7-day rolling average PCR positivity (%) of confirmed COVID-19 cases tested by sex under Pillar 1



UK Health Security Agency

# Weekly COVID-19 rate tested under Pillar 1, y per 100,000 population by Index of Multiple Deprivation (IMD) quintile (1 being the most deprived and 5 being the least deprived)

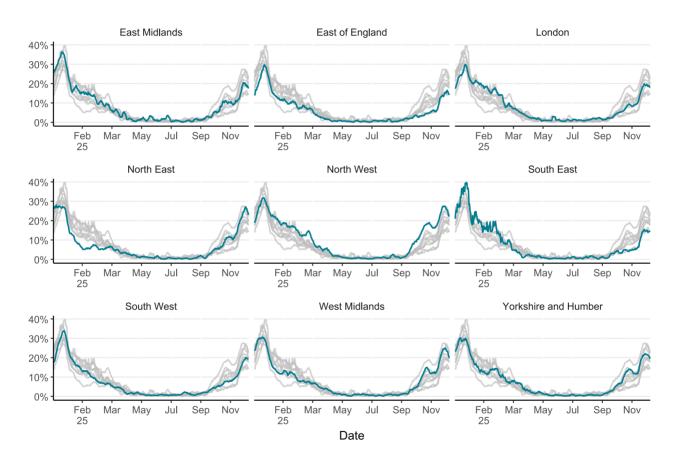


<sup>\*</sup>incidence rates have been calculated using the mid-2019 ONS population estimates

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### 7-day rolling average PCR positivity (%) of confirmed influenza cases tested under Pillar 1 by UKHSA region



<sup>\*</sup>Please note that due to changes in laboratory reporting systems prior to April 2025, South East regional data before this date should be interpreted with caution.

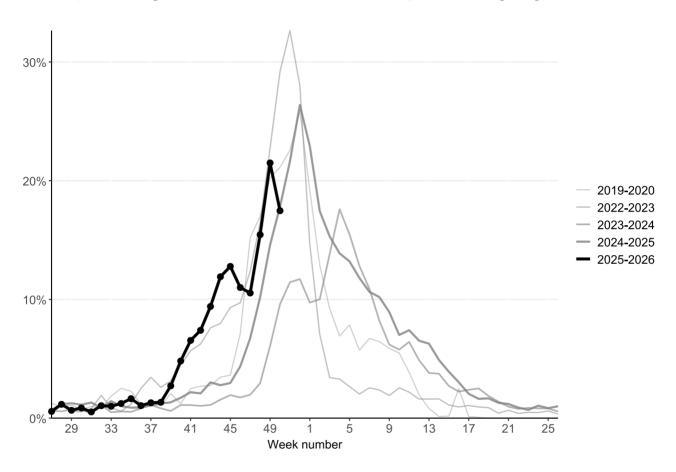
The highlighted line corresponds to the region in the subplot title, grey lines correspond to all other regions



## Respiratory DataMart system (England)



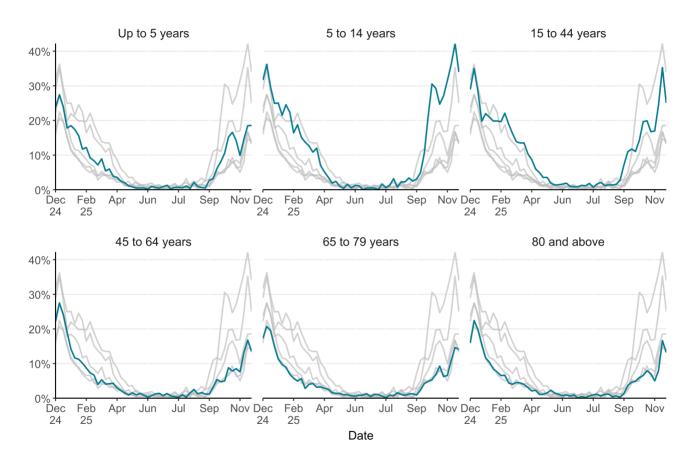
#### Respiratory DataMart - influenza positivity by seasons



Data from seasons 2020 to 2021 and 2021 to 2022 has been removed as there was low activity throughout these seasons



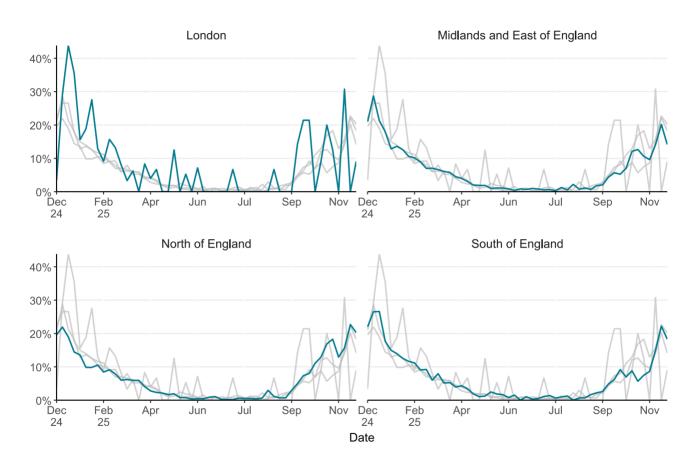
### Respiratory DataMart - weekly positivity (%) for influenza by age, England



The highlighted line corresponds to the age group in the subplot title, grey lines correspond to all other age groups



### Respiratory DataMart - weekly positivity (%) for influenza by UKHSA region

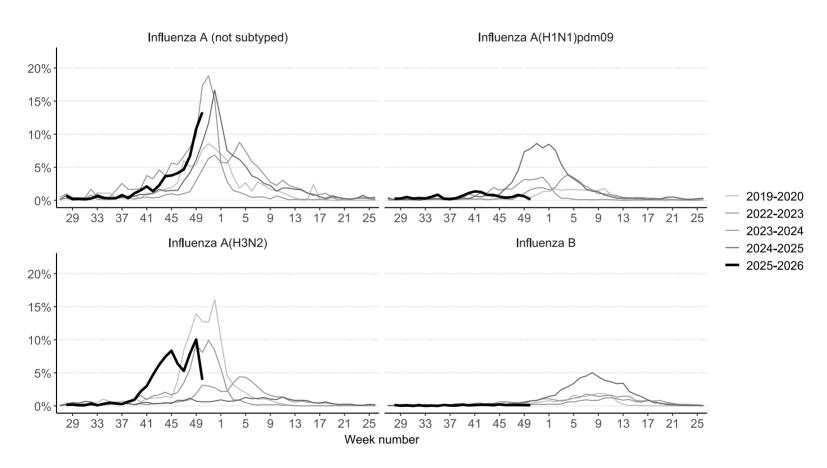


Changes in positivity in London should be interpreted with caution as there was a low number of samples this week and is subject to retrospective updates

The highlighted line corresponds to the region in the subplot title, grey lines correspond to all regions



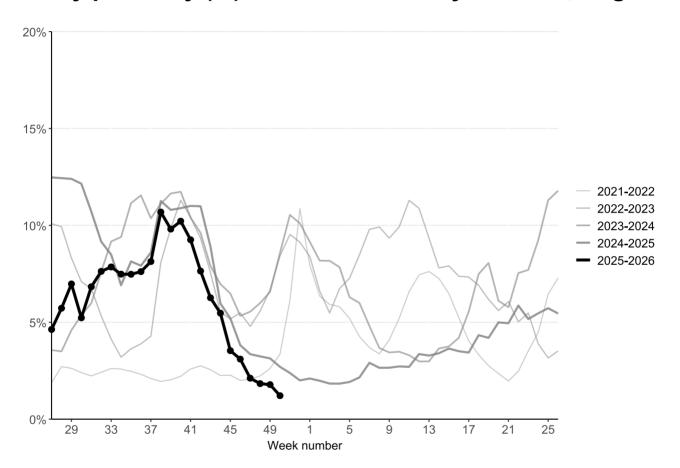
#### Respiratory DataMart – influenza subtype positivity



Data from seasons 2020 to 2021 and 2021 to 2022 has been removed as there was low activity throughout these seasons

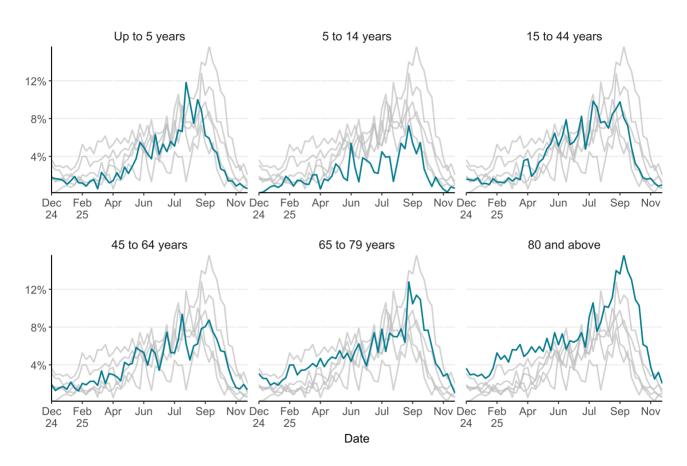


### Respiratory DataMart – weekly positivity (%) for SARS-CoV-2 by seasons, England





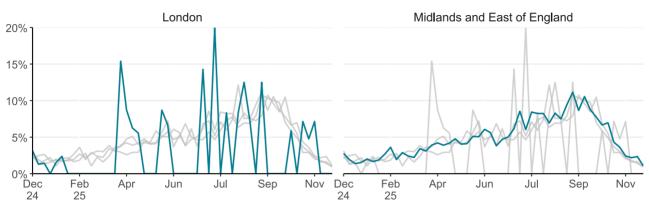
### Respiratory DataMart – weekly positivity (%) for SARS-CoV-2 by age, England

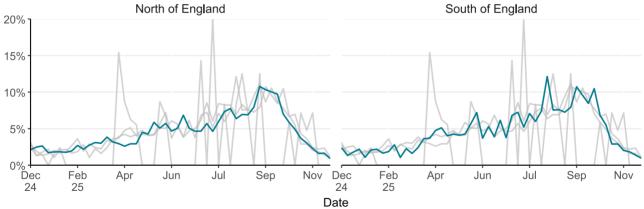


The highlighted line corresponds to the age group in the subplot title, grey lines correspond to all other age groups



### Respiratory DataMart – weekly positivity (%) for SARS-CoV-2 by UKHSA region



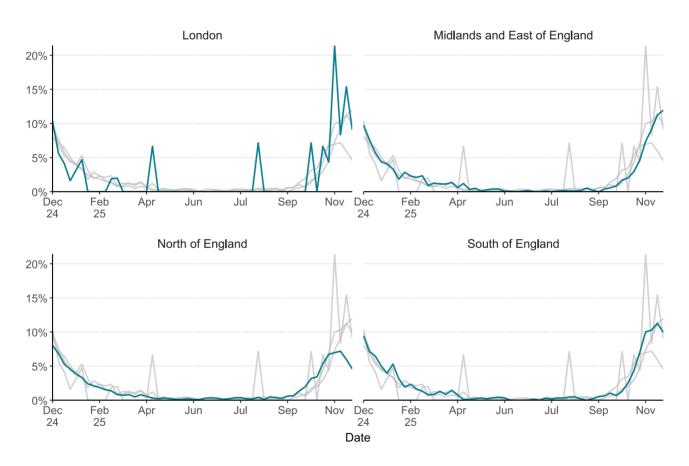


Changes in positivity in London should be interpreted with caution as there was a low number of samples this week and is subject to retrospective updates

The highlighted line corresponds to the region in the subplot title, grey lines correspond to all other regions



### Respiratory DataMart – weekly positivity (%) for respiratory syncytial virus (RSV) by UKHSA region

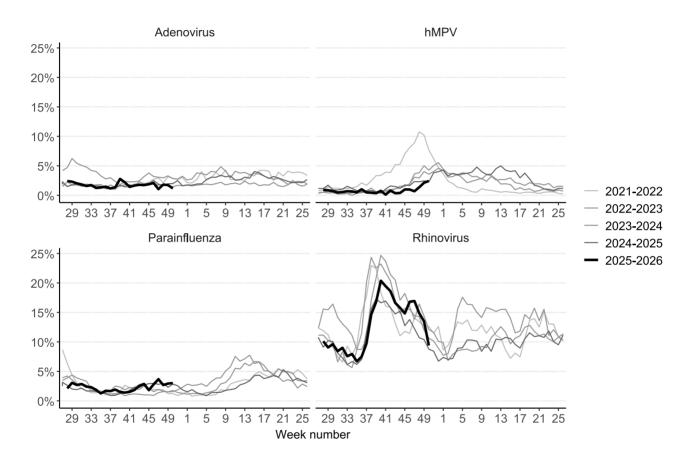


Changes in positivity in London should be interpreted with caution as there was a low number of samples this week and is subject to retrospective updates

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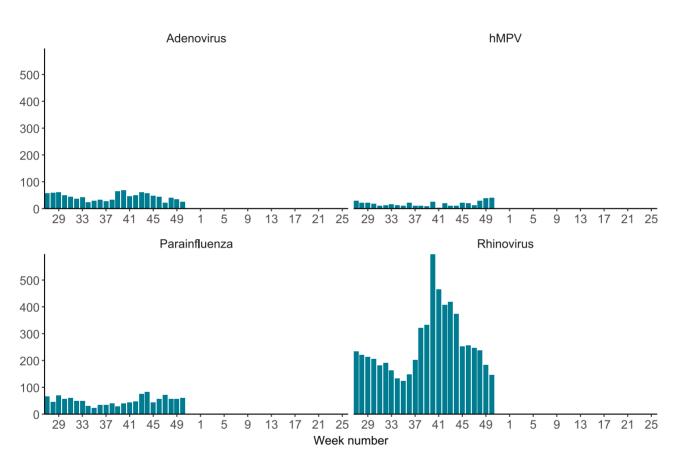


#### Respiratory DataMart – other viruses positivity (%)



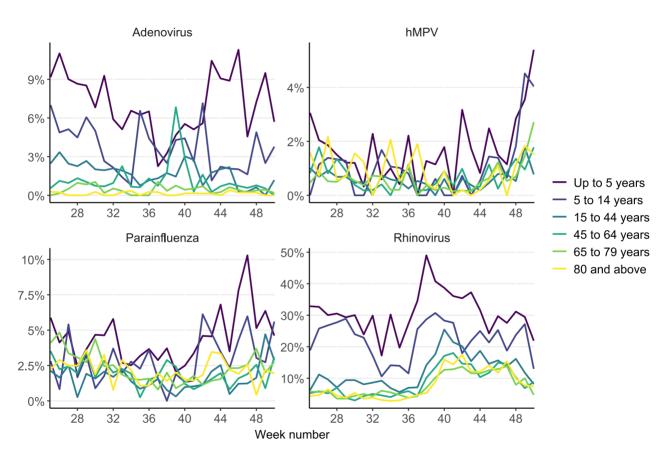


#### **Respiratory DataMart – other respiratory viruses**





### Respiratory DataMart – weekly positivity (%) for respiratory viruses by age, England



Please note y-axis uses different scales across graphs

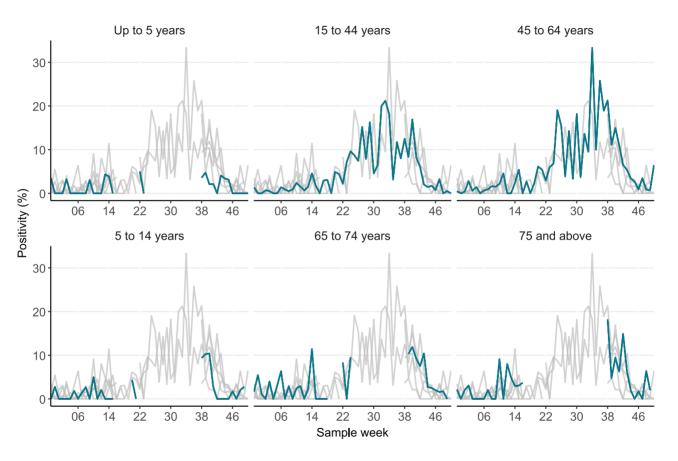
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### **Primary care surveillance**



### Weekly positivity (%) for SARS-CoV-2 by age group in England, GP sentinel swabbing scheme

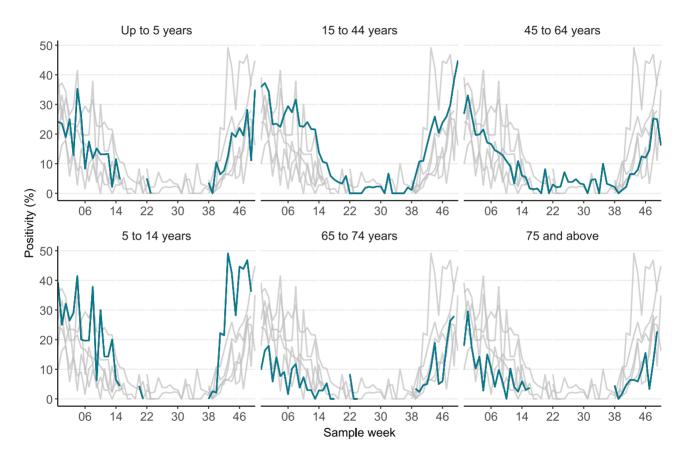


Weeks where fewer than 20 samples were tested in the age group are omitted

The highlighted line corresponds to the age group in the subplot title, grey lines correspond to all other age groups



### Weekly positivity (%) for influenza by age group in England, GP sentinel swabbing scheme

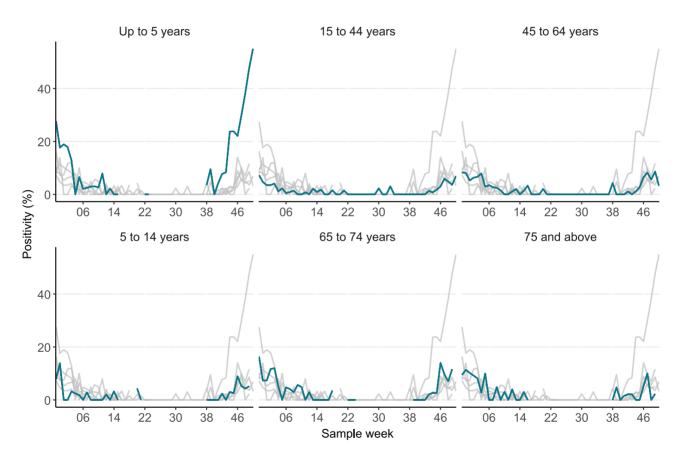


Weeks where fewer than 20 samples were tested in the age group are omitted

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# Weekly positivity (%) for respiratory syncytial virus (RSV) by age group in England, GP sentinel swabbing scheme

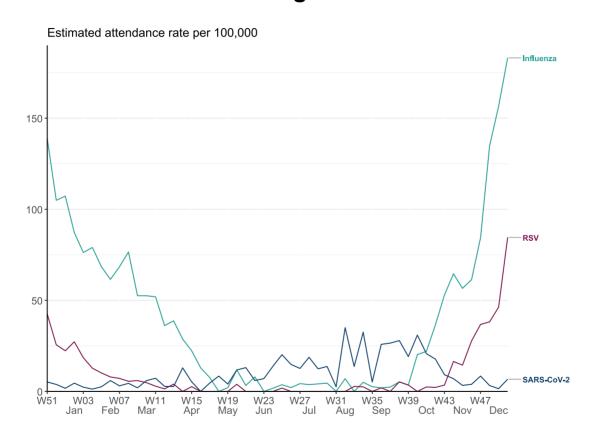


Weeks where fewer than 20 samples were tested in the age group are omitted

The highlighted line corresponds to the age group in the subplot title, grey lines correspond to all other age groups



## Weekly primary care influenza, RSV and SARS-CoV-2 attendances per 100,000 (proxy) in GP sentinel practices, England



This is an experimental metric used as a proxy for the incidence of primary care attendances per 100,000 population calculated by multiplying the weekly ARI rate per 100,000 population by the weekly positivity among the ARI presentations. The ARI rate is calculated within the <a href="RCGP">RCGP</a> and <a href="RSC">RSC</a> network</a>. The positivity is from a subset of the GP practices which participate in the virology swabbing surveillance. This approach is described in the <a href="WHO pandemic influenza severity assessment framework">WHO pandemic influenza severity assessment framework</a>.

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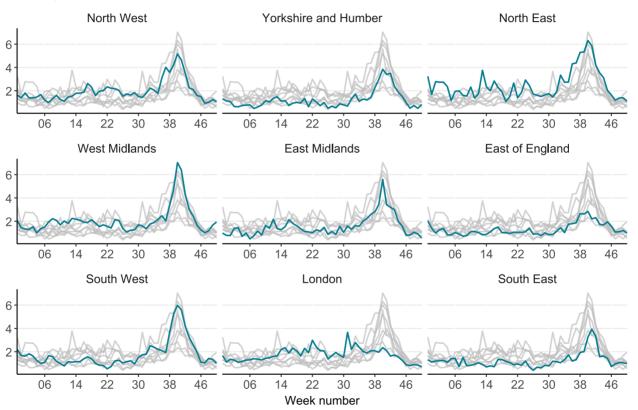


#### **Secondary care surveillance**



## Weekly hospital admission rate by region for new COVID-19 positive cases, SARI Watch mandatory surveillance

Weekly Hospitalisation rate per 100,000 trust catchment population

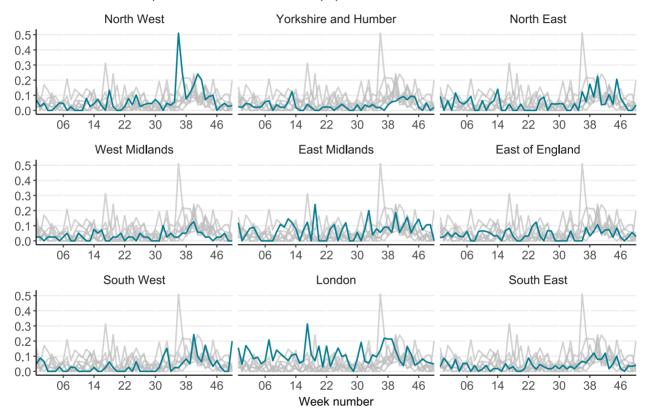


The highlighted line corresponds to the region in the subplot title, grey lines correspond to all other regions



#### Weekly COVID-19 ICU or HDU admission rate by UKHSA region for new COVID-19 positive cases reported through SARI Watch mandatory surveillance

ICU admission rate per 100,000 trust catchment population

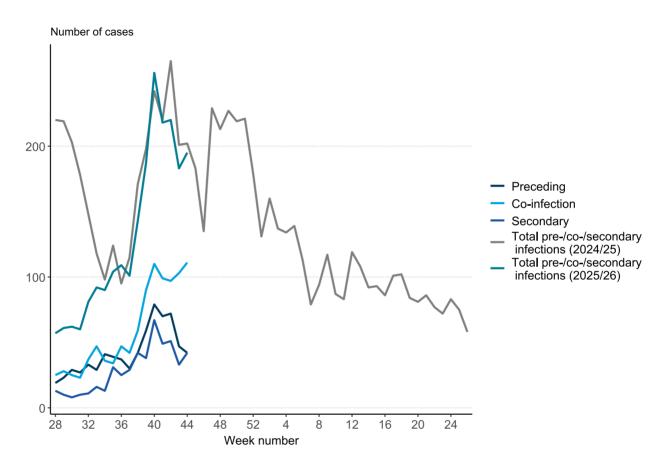


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#### HCAI, Fungal, AMR, AMU & Sepsis Division

Preceding, co- and secondary infections in persons with COVID-19 and influenza in England

#### UK Health Bacterial, fungal or respiratory viral infections in persons with **COVID-19 in England**

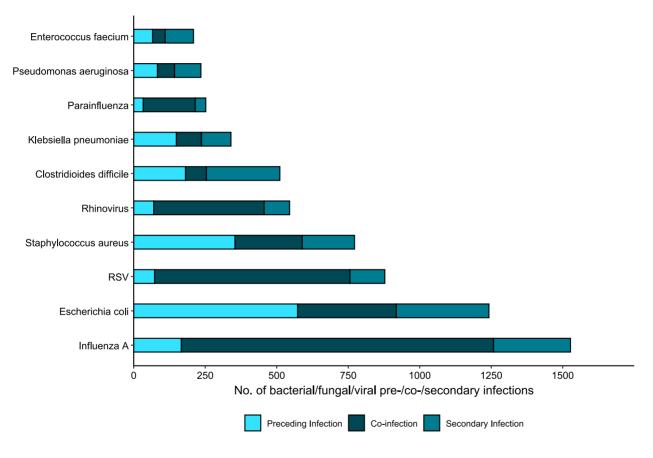


Data are between week 27 2024 and week 44 2025

Definitions and methodology can be found in the Data Quality Report



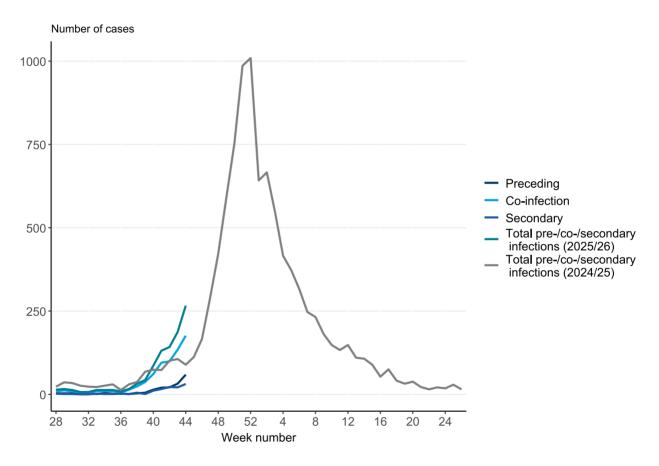
### Most frequent bacterial, fungal, and viral specimens, by timing of diagnosis, in persons with COVID-19 in England



Data are cumulative totals from week 40 2024 to week 44 2025

Definitions and methodology can be found in the Data Quality Report

#### UK Health Bacterial, fungal or respiratory viral infections in persons with influenza in England

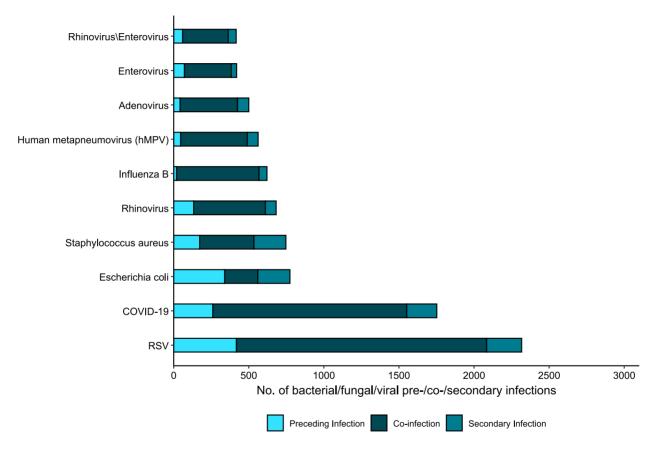


Data are between week 27 2024 and week 44 2025

Definitions and methodology can be found in the Data Quality Report



### Most frequent bacterial/fungal/respiratory viral infections, by timing of diagnosis, in persons with influenza in England



Data are cumulative totals from week 40 2024 to week 44 2025

Definitions and methodology can be found in the Data Quality Report

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