

RSC Communicable and Respiratory Disease Report for England

Week Number / Year

36 / 2025

Population

18,474,622

Dates

01/09/2025 - 07/09/2025

No. Practices

1,762

Notes

All rates in this report are given per 100,000 population presenting in the week of the report. A rolling 5-year average rate is also provided as a historical comparison. Rates are provided for four regions (North, South, Midlands and East, and London). For acute respiratory infections, a breakdown by age group is also provided.

Rates are presented on a weekly basis, using ISO week numbers.

Please see page 20 for further explanatory notes on the data.

Comments

Overall rates of influenza-like illness (ILI) are stable in all regions and are around the seasonal average for this time of year (pages 3 to 5). ILI rates are now below the threshold across all age bands: see Table (E), page 5.

Rates of acute respiratory infections (ARI) increased nationally compared with last week, but remain below the seasonal average, page 7. Of note, there has been concurrent national increase in rates of exacerbation in chronic lung disease (ECLD), page 9 and URTI croup, page 11, although rates remain below the seasonal average. Rates of COVID-19 have increased nationally compared with last week, page 6.

This report includes a respiratory virology update: see Graph (C), page 4.

Other comments:

- Rates of measles (page 15) continue to decline national, and are approaching the seasonal average.
- Rates of scabies (page 16) remain above the seasonal average.

Seasonal Focus

In the "Change since last week" column, a change in rate of 5% to 10% is marked with a single arrow ($^{\wedge}$ or $^{\vee}$), while a change of more than 10% is marked with a double arrow ($^{\wedge}$ or $^{\vee}$). A flat line ($^{-}$) indicates the rate was stable, changing less than 5%.

Region Breakdown

	Acute	respirato (AR	ory infections I)	Influ	enza-like	illness (ILI)	Exacerbations of chronic lung disease (ECLD)			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
London	103.7	86.7	☆ 17.1	2.2	1.4	☆ 0.8	7.5	5.7	☆ 1.9	
Midlands And East	139.6	112.2	☆ 27.4	1.0	0.7	☆ 0.3	11.3	9.4	☆ 1.9	
North	177.0	141.5	☆ 35.5	1.8	1.1	☆ 0.6	17.6	12.7	☆ 4.9	
South	124.7	101.0	☆ 23.7	1.4	1.0	☆ 0.4	10.8	7.8	☆ 3.1	
National	137.1	110.9	☆ 26.2	1.6	1.0	☆ 0.5	12.0	9.0	☆ 3.0	
		er respira	atory tract (LRTI)		er respira	atory tract (URTI)		COVII	D-19	
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
London	24.7	19.7	☆ 5.0	71.5	61.9	☆ 9.6	1.0	1.1	> −0.2	
Midlands And East	43.4	36.1	☆ 7.3	87.7	69.0	☆ 18.7	1.7	1.3	☆ 0.5	
North	60.4	48.0	☆ 12.4	105.0	86.7	☆ 18.3	1.6	1.3	☆ 0.4	
South	42.1	32.5	☆ 9.6	75.7	63.4	☆ 12.3	2.2	1.8	☆ 0.4	

Age Group Breakdown

43.6

34.7

≈ 8.9

National

	Acute re	spiratory	infections (ARI)	Influ	enza-like	illness (ILI)	Exacerbations of chronic lung disease (ECLD)			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week	
<1yr	547.9	443.6	☆ 104.3	3.4	0.6	☆ 2.8	0.0	0.0	- 0.0	
1-4yrs	339.2	271.9	☆ 67.3	0.7	0.7	- 0.0	1.0	1.1	> −0.1	
5-14yrs	109.3	89.7	☆ 19.6	0.7	0.2	☆ 0.6	2.8	1.3	☆ 1.6	
15-64yrs	111.7	89.2	☆ 22.5	1.9	1.2	☆ 0.7	8.6	6.5	☆ 2.1	
65+yrs	185.5	152.7	☆ 32.8	1.0	1.1	∨ -0.1	33.4	25.3	☆ 8.1	
All ages	137.1	110.9	☆ 26.2	1.6	1.0	☆ 0.5	12.0	9.0	☆ 3.0	
	Lower re	espiratory (LRT	tract infections I)	Upper re	spiratory (URT	tract infections T)		COVI)-19	

84.9

70.2

↑ 14.7

1.7

1.4

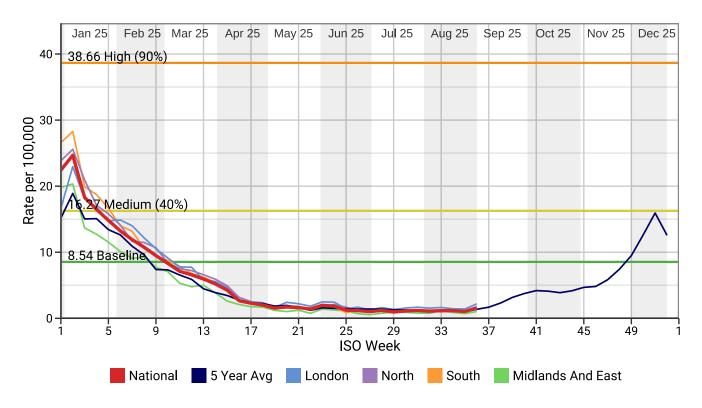
☆ 0.3

		(LRT	TI)		(URT	TI)			
	This week	Last week	Change since last week	This week	Last week	Change since last week	This week	Last week	Change since last week
<1yr	78.3	64.7	☆ 13.6	489.4	391.5	◇ 97.9	10.9	8.8	≈ 2.1
1-4yrs	39.6	32.0	☆ 7.5	316.1	251.9	☆ 64.3	1.0	0.7	☆ 0.3
5-14yrs	10.0	7.7	☆ 2.4	97.7	82.9	☆ 14.8	0.4	0.0	☆ 0.4
15-64yrs	32.3	24.1	≈ 8.2	72.8	60.7	☆ 12.2	1.4	1.1	☆ 0.3
65+yrs	106.0	90.2	☆ 15.8	52.4	41.7	☆ 10.7	3.4	3.1	☆ 0.3
All ages	43.6	34.7	☆ 8.9	84.9	70.2	☆ 14.7	1.7	1.4	☆ 0.3

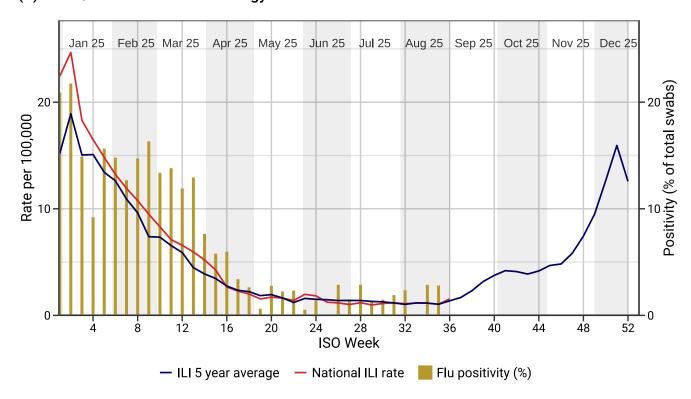
2024/25 Focus

(A) Influenza-like Illness: national incidence rate by region

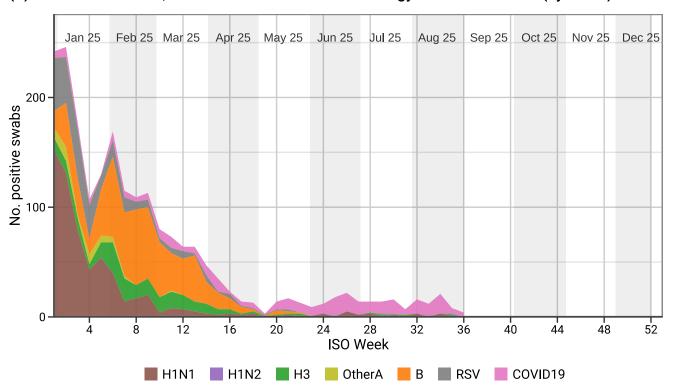
The horizontal lines in the following graph are thresholds derived from the Moving Epidemic Method (MEM) model. See p20 for more information.



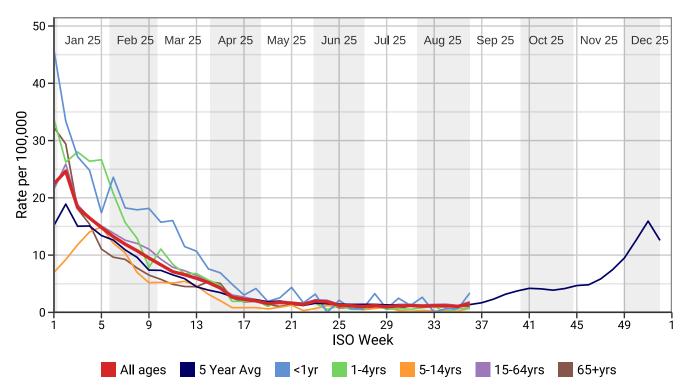
(B) RCGP/UKHSA influenza virology swab surveillance



(C) RCGP/UKHSA RSV, influenza and SARS-CoV-2 virology swab surveilance (by strain)



(D) Influenza-like Illness: national incidence rate by age band



(E) Influenza-like Illness: national incidence rate by age band

This table shows the level of intensity of ILI by age band. MEM thresholds have been calculated separately for each age band - thresholds are shown in the second table. Refer to page 19 for more information.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1-4yrs	33.8	26.2	28.0	26.4	26.6	20.7	15.7	12.9	7.9	11.1	8.4	6.7	6.8	5.6	4.8	1.9	1.9	2.1
5-14yrs	7.0	9.2	11.8	14.0	14.9	12.1	10.4	7.0	5.2	5.2	5.1	5.4	4.7	3.2	2.0	0.8	0.8	0.8
15-64yrs	21.5	25.9	18.8	16.5	15.1	13.8	12.6	12.0	11.1	9.3	7.9	7.3	6.5	5.5	4.4	3.0	2.7	2.2
65+yrs	32.3	29.4	18.1	15.4	11.1	9.6	9.3	7.7	6.5	5.8	4.9	4.5	4.5	5.4	5.1	2.5	1.8	1.9
All ages	22.4	24.7	18.3	16.5	14.8	13.2	11.9	10.8	9.5	8.3	7.1	6.6	5.9	5.2	4.3	2.7	2.3	2.0
	19	20	21	22	23	24	25	26 2	27 2	8 29	30	31	1 ;	32	33	34	35	36
1-4yrs	1.0	2.0	1.5	1.6	1.6	0.5	1.2	0.6).5 1.	3 0.5	0.7	7 0.	5	0.8	1.1	0.0	0.7	0.7
5-14yrs	0.6	0.9	1.3	0.3	0.7	1.2	1.0	0.8	0.5 0.	7 0.9	0.3	3 0.1	2	0.3	0.2	0.3	0.2	0.7
15-64yrs	1.8	2.0	1.7	1.6	2.2	2.1	1.4	1.4	l.3 1.	3 1.1	1.4	1.4	4	1.3	1.4	1.4	1.2	1.9
65+yrs	1.4	1.0	1.3	1.2	2.0	1.5	0.8	0.8	0.6 0.	9 0.7	7 0.6	i 1.		0.9	1.0	1.0	1.1	1.0
001913	1.7	1.0	1.0	1.4	2.0													

	Below Threshold	Threshold to Medium	Medium to High	High to Very High	Above Very High
1-4yrs	<7.9	7.9 to 12.6	12.6 to 26.2	26.2 to 36.1	36.1+
5-14yrs	<5.4	5.4 to 10.7	10.7 to 26.6	26.6 to 39.9	39.9+
15-64yrs	<9.8	9.8 to 17.9	17.9 to 43.0	43.0 to 63.4	63.4+
65+yrs	<9.3	9.3 to 15.0	15.0 to 38.8	38.8 to 59.0	59.0+
All Ages	<8.54	8.54 to 16.27	16.27 to 38.66	38.66 to 56.68	56.68+

(F) Acute Bronchitis and Bronchiolitis: national incidence rate by age band

Children under 1 year old are omitted from the following graph.

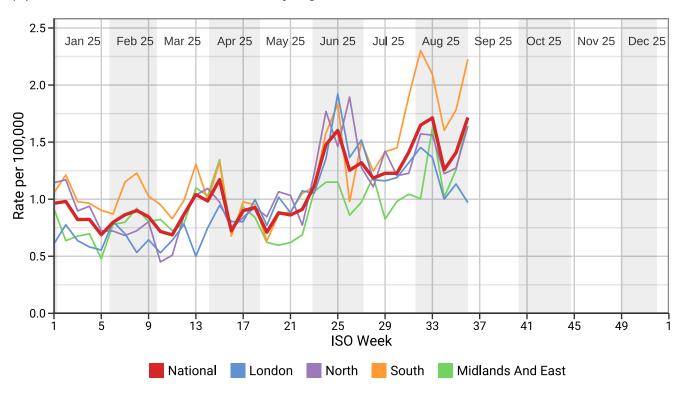


Weekly incidence rates of influenza-like illness, and acute bronchitis and bronchiolitis (per 100,000)

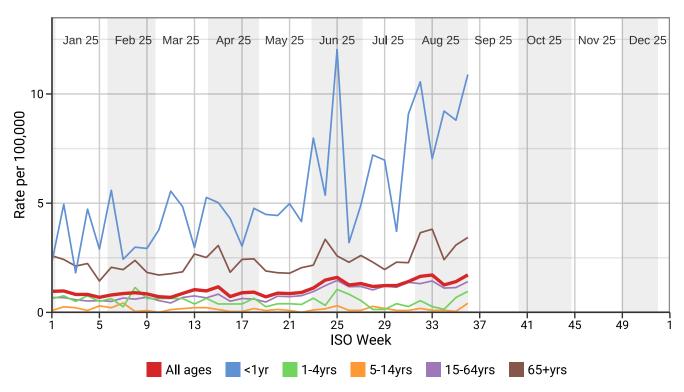
	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
<1yr	3.4	41.5
1-4yrs	0.7	5.9
5-14yrs	0.7	0.3
15-24yrs	1.7	0.4
25-44yrs	2.0	0.5
45-64yrs	1.8	1.1
65-74yrs	1.2	1.4
75-84yrs	0.9	1.7
85+yrs	0.6	1.7
All ages	1.6	1.3

	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
London	2.2	1.3
Midlands And East	1.0	1.3
North	1.8	1.6
South	1.4	1.2
National	1.6	1.3

(G) COVID-19: national incidence rate by region

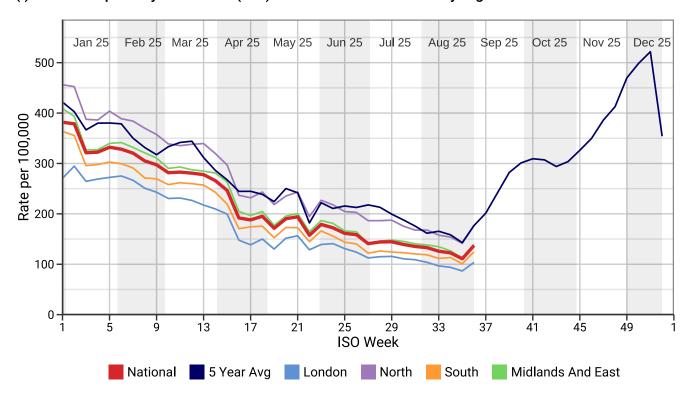


(H) COVID-19: national incidence rate by age band



1. Respiratory Infections

(I) Acute Respiratory Infections (ARI): national incidence rate by region



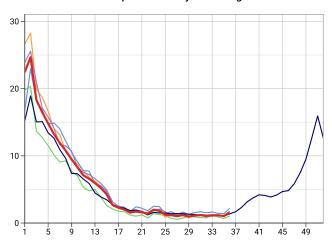
(J) Acute Respiratory Infections (ARI): national incidence rate by age band



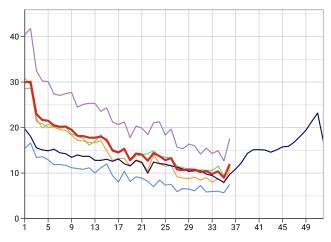
Respiratory Infections - by region



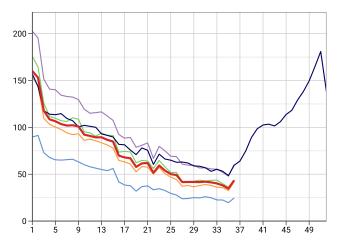
Influenza-like illness (ILI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



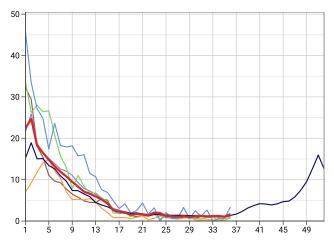
Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



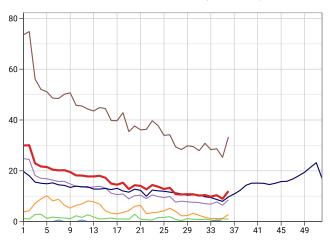
Respiratory Infections - by age band



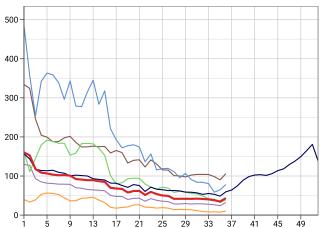
Influenza-like illness (ILI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



Exacerbations of Chronic Lung Disease (ECLD)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



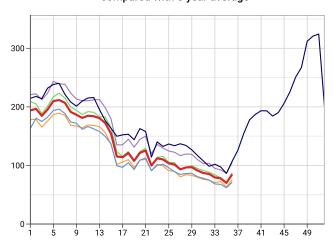
Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



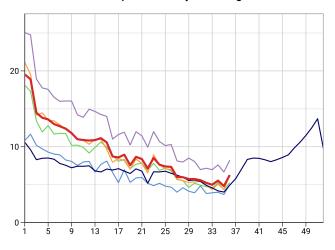
Respiratory Infections - by region



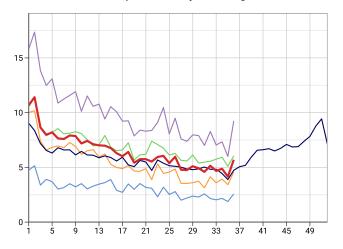
Upper Respiratory Tract Infections (URTI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



ECLD - Asthma Exacerbations Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



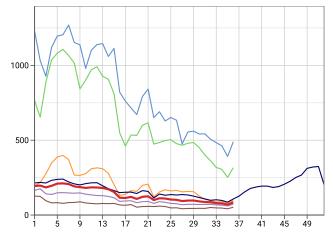
ECLD - COPD Exacerbations Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



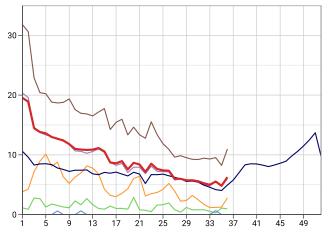
Respiratory Infections - by age band



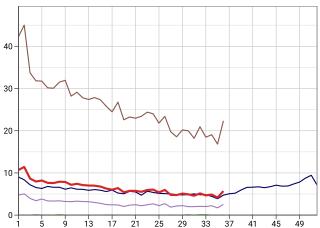
Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



ECLD - Asthma Exacerbations Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



ECLD - COPD Exacerbations Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



Respiratory Infections - by region Respiratory Infections - by age band National London South All ages 5-14yrs 65+yrs 5 Year Avg North Midlands And East 5 Year Avg 1-4yrs 15-64yrs LRTI - Pneumonia LRTI - Pneumonia Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for compared with 5 year average 2024/25 compared with 5 year average 25 20 15 10 2 25 **LRTI - Acute Bronchitis LRTI - Acute Bronchitis** Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average compared with 5 year average 25 29 37 41 **LRTI - Bronchiolitis LRTI - Bronchiolitis** Weekly incidence (per 100,000 all ages) by region for 2024/25 Weekly incidence (per 100,000 all ages) by age band for compared with 5 year average 2024/25 compared with 5 year average 300 200 100

17 21 25 29 33

13

25

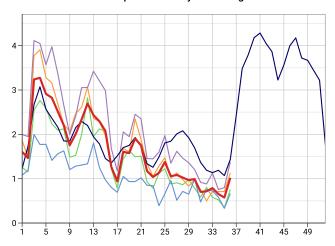
29 33

21

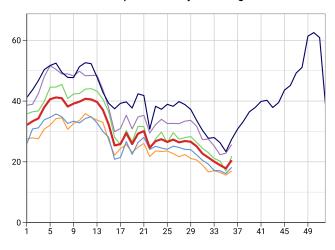
Respiratory Infections - by region

National London South 5 Year Avg North Midlands And East

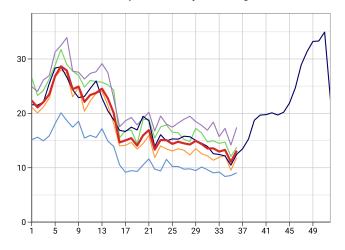
URTI - Croup Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



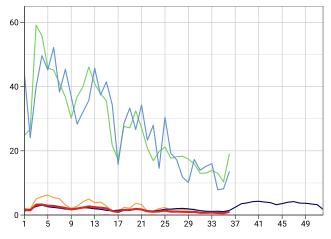
URTI - Otitis Media Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



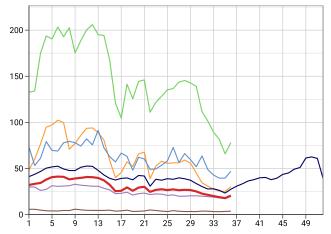
Respiratory Infections - by age band



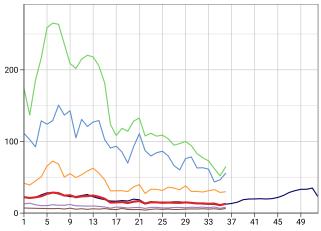
URTI - Croup Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



URTI - Tonsillitis/Pharyngitis
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



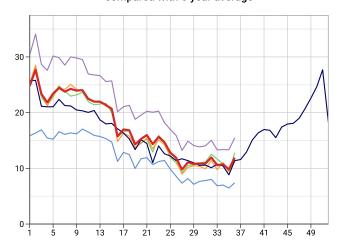
URTI - Otitis Media
Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



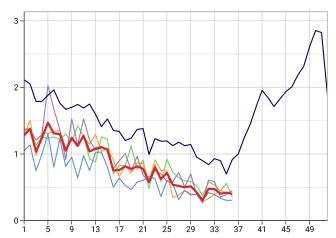
Respiratory Infections - by region

National London South 5 Year Avg North Midlands And East

URTI - Sinusitis Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



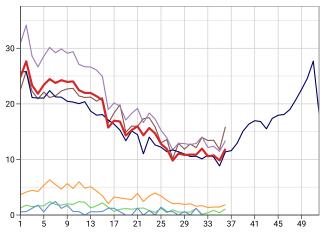
URTI - Laryngitis
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



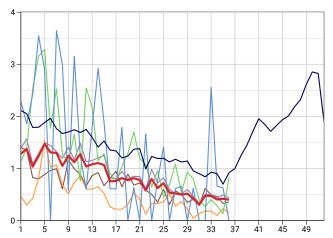
Respiratory Infections - by age band



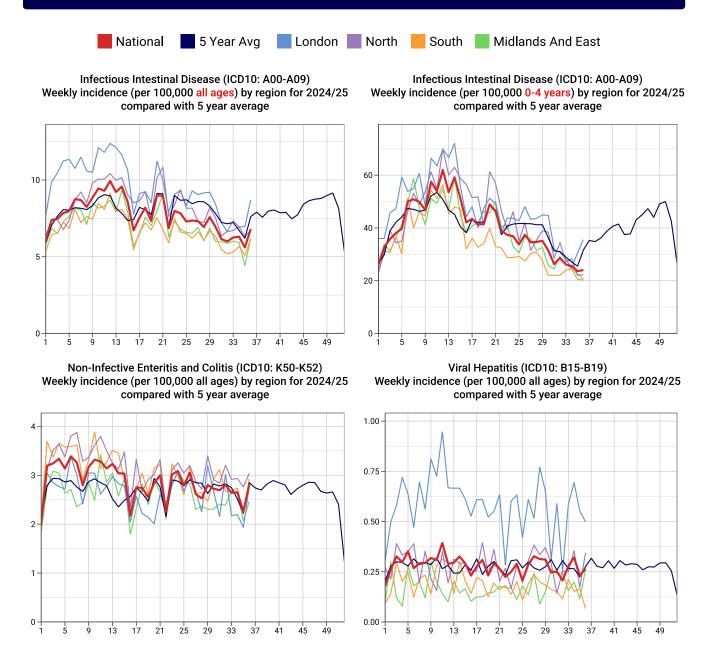
URTI - Sinusitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



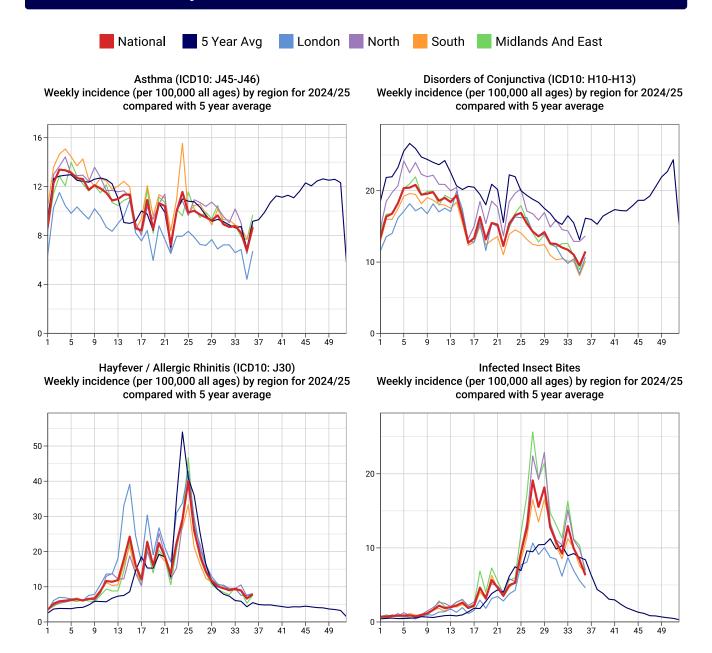
URTI - Laryngitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



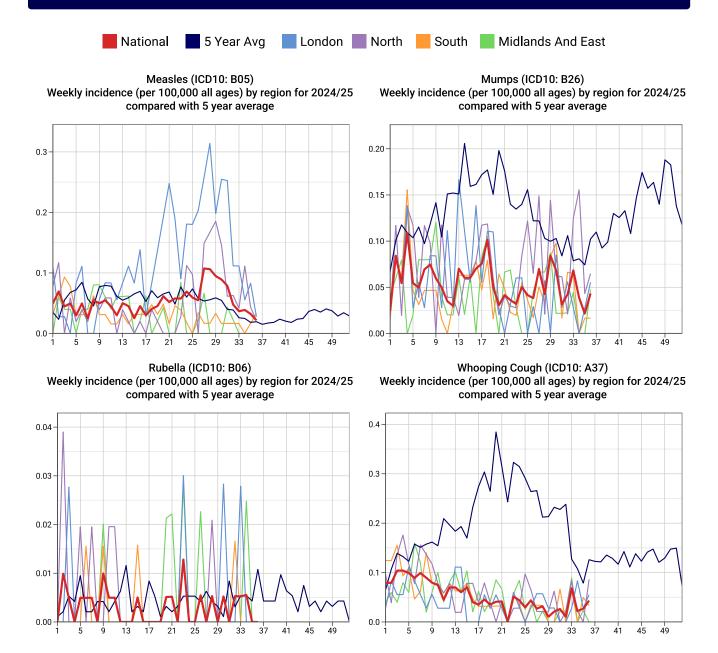
2. Water and Food Borne Disorders



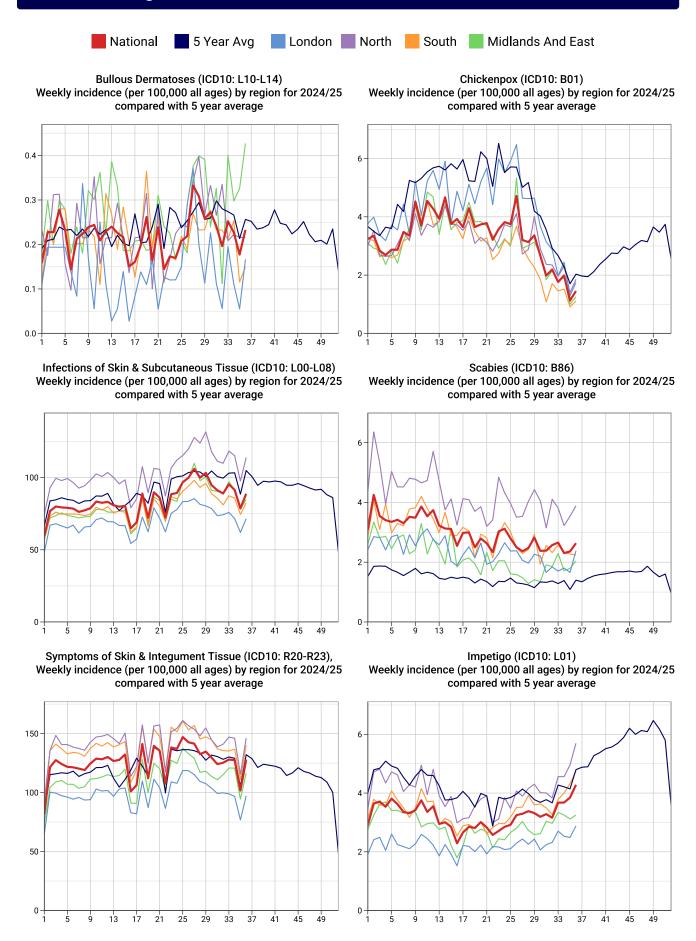
3. Environmentally Sensitive Disorders

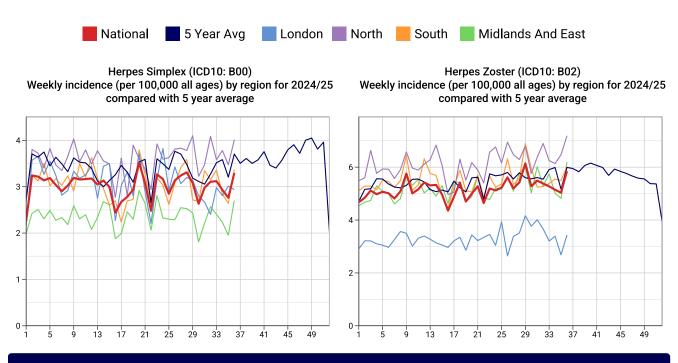


4. Vaccine Sensitive Disorders



5. Skin Contagions

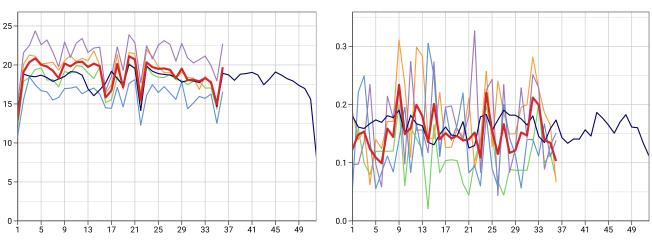




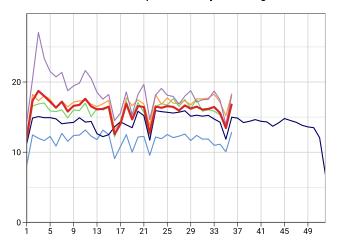
6. Disorders Affecting the Nervous System

Disorders of Peripheral Nervous System (ICD10: G50-G64,G70-G72), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average

Meningitis/Encephalitis (ICD10: A170-A171,A390,A38-A85,A87,G00-G05), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



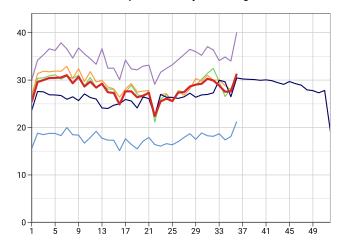
Symptoms of Nervous & Musculoskeletal Systems (ICD10: R25-R29), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



7. Genitourinary System Disorders

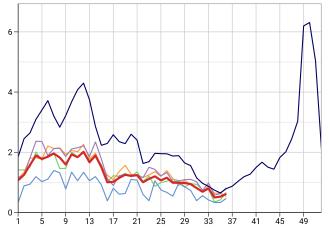


Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average

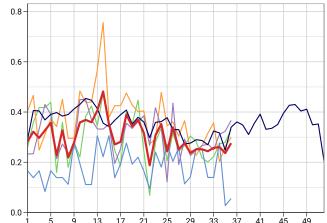


8. Other Disorders

Strep Sore Throat, Scarlatina and Peritonsillar Abscess (ICD10: A38,J020,J36), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



Infectious Mononucleosis (ICD10: B27)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average



9. Tabular Summary by Disease

	Week 33	Week 34	Week 35	Week 36
Dates	11/08/2025 - 17/08/2025	18/08/2025 - 24/08/2025	25/08/2025 - 31/08/2025	01/09/2025 - 07/09/2025
Population	19,039,700	18,049,399	18,611,122	18,474,622
Practice Count	1,811	1,731	1,780	1,762

	Wee	ek 33	Wee	ek 34	Wee	k 35	Wee	ek 36
Disease	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Acute Bronchitis	0.7	138	0.7	126	0.6	103	0.8	146
Acute Respiratory Infections (ARI)	125.9	23,966	122.6	22,121	110.9	20,641	137.1	25,334
Allergic Rhinitis	9.4	1,792	9.0	1,618	6.7	1,238	7.9	1,457
Asthma	8.8	1,670	8.2	1,487	6.8	1,258	8.7	1,605
Bronchiolitis	0.5	100	0.3	63	0.4	79	0.5	100
Bullous Dermatoses	0.3	48	0.2	41	0.2	33	0.2	43
COVID-19	1.7	326	1.3	227	1.4	262	1.7	317
Chickenpox	1.8	336	2.0	359	1.1	210	1.5	269
Conjunctival Disorders	11.7	2,232	11.0	1,992	9.5	1,774	11.5	2,118
Croup	0.8	150	0.7	118	0.6	107	1.0	188
ECLD - COPD exacerbations	4.7	890	4.9	880	4.1	772	5.7	1,052
ECLD - asthma exacerbations	5.0	950	5.5	999	4.8	896	6.3	1,158
Exacerbations of chronic lung disease (ECLD)	9.8	1,864	10.4	1,875	9.0	1,669	12.0	2,215
Herpes Simplex	3.1	594	2.9	529	2.8	514	3.3	609
Herpes Zoster	5.3	1,004	5.1	929	5.0	937	5.9	1,081
Impetigo	3.7	699	3.7	664	3.8	716	4.3	791
Infected Insect Bites	12.9	2,464	9.9	1,791	8.4	1,561	6.3	1,164
Infectious Intestinal Diseases	6.3	1,190	6.3	1,138	5.6	1,044	6.8	1,257
Infectious Mononucleosis	0.3	49	0.3	47	0.2	44	0.3	51
Influenza-like Illness (ILI)	1.2	221	1.2	209	1.0	194	1.6	287
Laryngitis	0.5	90	0.4	73	0.4	78	0.4	74
Lower respiratory tract infections (LRTI)	40.2	7,660	38.1	6,885	34.7	6,460	43.6	8,055
Measles	0.0	7	0.0	7	0.0	6	0.0	4
Meningitis and Encephalitis	0.2	38	0.1	25	0.1	25	0.1	19
Mumps	0.1	13	0.0	7	0.0	4	0.0	8
Non-infective Enteritis and Colitis	2.6	503	2.7	479	2.3	421	2.8	521
Peripheral Nervous Disease	18.3	3,488	17.8	3,209	14.9	2,779	19.7	3,641
Pneumonia	2.5	479	2.2	395	2.3	425	2.6	482
Rubella	0.0	1	0.0	1	0.0	0	0.0	0
Scabies	2.7	506	2.3	416	2.4	439	2.6	487
Sinusitis	10.6	2,012	10.7	1,939	9.8	1,827	11.9	2,201
Skin and Subcutaneous Tissue Infections	95.3	18,152	91.4	16,503	78.7	14,639	88.8	16,397
Strep Throat and Peritonsillar Abscess	0.8	152	0.5	90	0.5	98	0.6	115
Symptoms involving Skin and Integument Tissues	128.0	24,365	127.6	23,024	101.7	18,926	128.0	23,640
Symptoms involving musculoskeletal	16.4	3,131	15.6	2,815	13.4	2,502	16.9	3,124
Tonsillitis and Pharyngitis	20.1	3,824	18.9	3,414	17.8	3,319	20.5	3,793
Upper respiratory tract infections (URTI)	79.6	15,153	77.9	14,062	70.2	13,065	84.9	15,689
Urinary Tract Infections	28.8	5,492	27.5	4,972	27.6	5,139	31.3	5,791
Viral Hepatitis	0.3	53	0.3	58	0.2	43	0.3	49
Whooping Cough	0.1	13	0.0	4	0.0	5	0.0	8

Further Information

Focus on winter respiratory infections and infections with epidemic or pandemic infection

A key role of the RSC is to monitor conditions that cause winter pressures on the NHS, as well as provide early warnings of outbreaks, epidemics, and pandemics. The RSC has been collecting data on infections since 1957, conducting sentinel surveillance since 1967 (with virology added in 1993), and serosurveillance from 2000.

Pages 2-6 of this report focus on influenza-like illness (ILI), virology data, and acute respiratory infections (ARI). ILI is the name given to clinically identified flu cases, around half of which will be due to the influenza virus (the other half will be due to other viruses).

Measuring the level of circulating influenza

The level of influenza-like illness (ILI) is reported using intensity thresholds (Graph A, page 2 and Table E, page 4). These are calculated using the Moving Epidemic Method (MEM). MEM works by identifying seasonal epidemic peaks and then calculating a baseline threshold and intensity levels based on pre- and post-epidemic rates. This provides a better measure of severity of ILI than simply comparing it to the five-year average rate.

The MEM intensity levels for ILI are defined as follows:

Threshold to Medium Below 40% percentile

Medium to High From 40% to below 90% percentile
High to Very High From 90% to below 97.5% percentile

Above Very High At or above 97.5% percentile

The MEM methodology is used by the UK Health Security Agency (UKHSA) and by the European Centre for Disease Prevention and Control (ECDC) to standardise reporting of influenza activity.

More information about MEM can be found at:

https://www.ecdc.europa.eu/en/news-events/acute-respiratory-infections-eueea-epidemiological-update-and-current-public-health

Rate of monitored conditions

Our monitored conditions are reported as the number of new cases each week per 100,000 population. We refer to this as the 'weekly incidence'. All conditions are shown with males and females combined.

The report's population, also called the denominator, is the registered population of RSC practices who share anonymised data for this report. The denominator varies weekly as patients register and deregister; additionally, a practice's data may not be included if there is an issue with data extraction.

Five-year averages

In addition to weekly incidence rates, we plot a five-year average for most conditions. Previously a ten-year average was used, but this window was shortened to reflect faster changes in seasonal variations and therefore enable a more meaningful comparison to relevant historic trends. COVID-19 pandemic years are excluded from this calculation for some conditions.

Regional rates of monitored conditions

In addition to a national rate, we present regional rates for all monitored conditions for four regions of England. The four RSC regions are aggregated NHS regions:

North NHS North East and Yorkshire, and North West regions

Midlands and East NHS East of England and Midlands regions

South NHS South East and South West regions

London NHS London region

Reporting of acute respiratory infections (ARI) by age band

In addition to regional rates, we report rates by age band for ARI. We display five age bands: those aged under 1 year, 1-4 years, 5-14 years, 15-64 years, and those aged 65 years and over. We subdivide ARI into four categories:

- influenza-like illness (ILI);
- exacerbations of chronic lung disease (ECLD), mainly asthma and chronic obstructive pulmonary disease (COPD);
- lower respiratory tract infections (LRTI), including bronchitis and pneumonia;
- upper respiratory tract infections (URTI), including tonsilitis and sinusitis.

More information about our classification of ARI can be found at:

https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2024.29.35.2300682

About the RCGP Research and Surveillance Centre (RSC)

What we do

Established in 1957, the Oxford-Royal College of General Practitioners (RCGP) Research and Surveillance Centre (RSC) is an internationally renowned source of information, analysis and interpretation concerning the onset, patterns, prevalence and trends over time of morbidity in primary care. The RSC provides weekly reports about health and disease: the Weekly Returns Service (WRS). The WRS has been produced since 1967, in collaboration with the UK Health Security Agency (UKHSA) and its predecessor bodies. The University of Oxford currently provides the WRS on behalf of RCGP and UKHSA.

The RSC is active in research and surveillance. In addition to the WRS, the RSC contributes data to UKHSA's Syndromic Surveillance system, and supports vaccine effectiveness studies. The role of general practice members of the RSC is set out in an annual commissioning letter.

Further information about the RSC can be found on our website:

www.rcgp.org.uk/representing-you/research-at-rcgp/research-surveillance-centre

Our data extraction process and governance

Data are extracted on behalf of the RSC from practice computerised medical record systems, twice a week by Magentus Data Management, or daily by EMIS-X Analytics (EXA).

Data are pseudonymised as close to source as possible. Data are held on secure servers at the Nuffield Department of Primary Care Health Sciences (NDPCHS) at the University of Oxford. Our systems meet the requirements of the General Data Protection Regulation (GDPR). Further information about the NHS England approval of the RSC's data security can be found at:

https://www.dsptoolkit.nhs.uk/OrganisationSearch/EE133863-MSD-NDPCHS

What the data is used for

The WRS monitors the number of patients consulting with new episodes of illness classified by diagnosis in England and provides weekly incidence rates per 100,000 population for these new episodes of illness. It is the key primary care element of the national disease monitoring systems run by the UK Health Security Agency.

In addition to the WRS, the data are used for other research studies. Any other uses of the data for research follow ethical approval or agreement from NIHR proportionate review, and where relevant Health Research Authority Confidential Advisory Group advice that further approval is not needed.

Get in touch

For further information about the work of the RSC, or if you would like to be included on our email notification list, please contact:

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