

RSC Communicable and Respiratory Disease Report for England

Week Number / Year

25 / 2025

Population

16,851,422

Dates

16/06/2025 - 22/06/2025

No. Practices

1,653

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) have decreased slightly in all regions, remaining at or below the seasonal average, page 7.

Overall rates of COVID-19 are increased slightly from last week, page 6.

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

Other comments:

• 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 ($^{\diamond}$ or $^{\diamond}$), while a change of more than 10% is marked with a double arrow ($^{\diamond}$ or $^{\diamond}$). A flat line ($^{\leftarrow}$) indicates the rate was stable, changing less than 5%.

Region Breakdown

	Acute	respirato (AR	ory infections (I)	Influ	nfluenza-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	131.1	140.9	∨ -9.9	1.4	2.4	> −1.0	7.4	8.5	> −1.1		
Midlands And East	166.2	181.1	∨ -14.9	1.1	1.3	> −0.1	13.5	13.7	- -0.2		
North	204.7	218.0	∨ -13.4	1.7	2.1	> −0.4	18.4	21.3	> −2.9		
South	143.8	155.8	∨ -12.0	0.9	1.7	> −0.8	11.5	12.0	 -0.5		
National	161.3	172.3	∨ -11.0	1.2	1.8	⇒ -0.6	12.8	13.7	∨ -0.9		
		er respira	atory tract s (LRTI)	Upper res	spiratory (URT	tract infections T)		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	29.6	32.6	∨ -3.0	96.1	102.2	∨ -6.1	1.9	1.4	☆ 0.6		
Midlands And East	51.8	58.0	> −6.2	105.3	115.6	∨ -10.3	1.1	1.1	- 0.0		
North	69.3	75.0	∨ -5.7	124.6	129.6	 -5.0	1.5	1.8	> −0.3		

91.1

103.6

99.2

110.3

∨ -8.1

∨ -6.8

1.8

1.6

1.6

1.5

☆ 0.3

^ 0.1

Age Group Breakdown

50.1

All ages

54.0

∨ -3.9

47.0

50.1

50.6

54.0

∨ -3.6

∨ -3.9

South

National

	Acute respiratory 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	735.0	705.8	- 29.2	2.1	0.0	☆ 2.1	0.0	0.0	- 0.0	
1-4yrs	549.4	532.0	 17.4	1.2	0.5	☆ 0.7	1.7	1.6	- 0.1	
5-14yrs	179.3	185.3	 -6.0	1.0	1.2	> −0.2	4.3	3.7	☆ 0.5	
15-64yrs	119.5	129.5	∨ -10.0	1.4	2.1	> −0.7	9.4	9.9	- -0.4	
65+yrs	190.8	218.0	> −27.2	0.8	1.5	> −0.8	33.9	37.8	> −3.8	
All ages	161.3	172.3	∨ −11.0	1.2	1.8	⇒ -0.6	12.8	13.7	∨ -0.9	
	Lower re	espiratory (LRT	tract infections I)	Upper re	espiratory (URT	tract infections T)	COVID-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	
<1yr	119.0	115.7	- 3.2	651.5	628.4	- 23.0	12.0	5.4	☆ 6.7	
1-4yrs	71.4	66.6	^ 4.9	503.7	497.8	- 5.9	1.1	0.3	☆ 0.7	
5-14yrs	19.1	18.0	^ 1.1	161.0	168.8	 -7.8	0.3	0.2	☆ 0.1	
15-64yrs	35.5	37.9	∨ -2.4	77.7	84.8	∨ -7.1	1.5	1.2	☆ 0.2	
65+yrs	115.8	130.7	> −15.0	47.5	57.1	> −9.6	2.6	3.3	> −0.8	

110.3

∨ -6.8

1.6

1.5

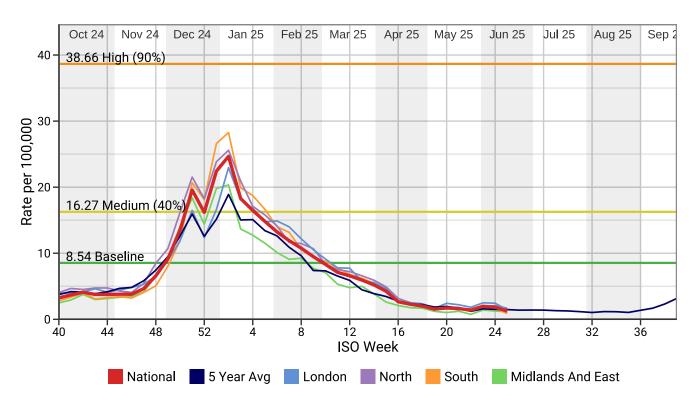
^ 0.1

103.6

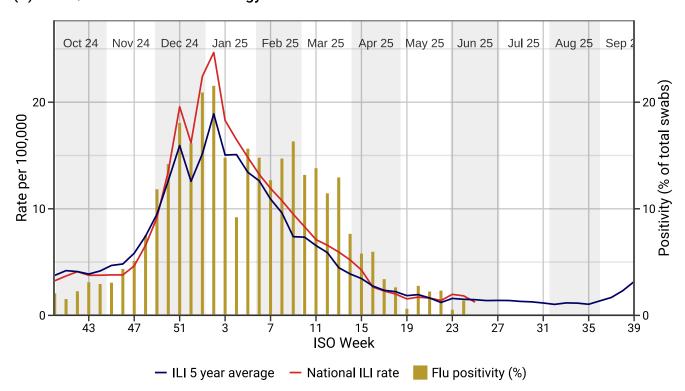
2024/25 Focus

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

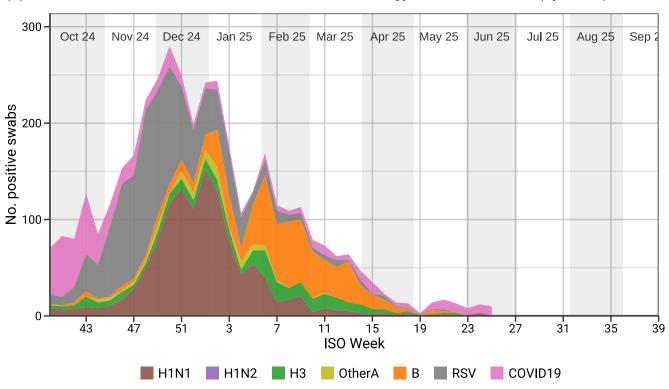
The horizontal lines in the following graph are thresholds derived from the Moving Epidemic Method (MEM) model. See p20 for more information.



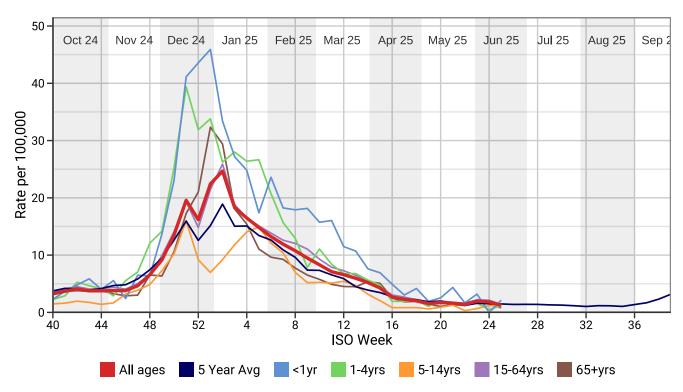
(B) RCGP/UKHSA influenza virology swab surveillance



(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

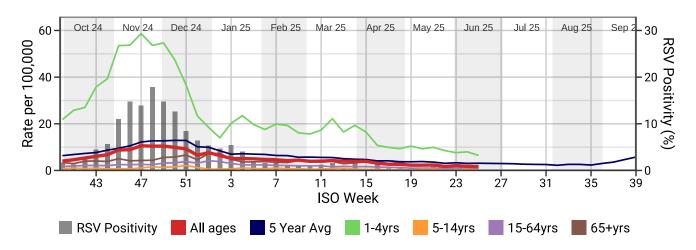
This table shows the level of intensity of ILI by age band. MEM thresholds have been calculated separately for each age band - thresholds are shown in the second table. Refer to page 19 for more information.

	42	43	44	45	46	47	48	49	50	51	52	1	2	3	3	4	5	6	7
1-4yrs	5.3	4.7	4.1	2.9	5.5	7.1	12.1	14.2	25.3	39.4	31.9	33.8	26.2	28.0)	26.4	26.6	20.7	15.7
5-14yrs	2.0	1.7	1.4	1.7	3.2	3.9	4.9	7.3	10.2	16.0	9.2	7.0	9.2	11.8	3	14.0	14.9	12.1	10.4
15-64yrs	4.5	4.1	4.2	4.4	4.1	5.1	6.6	9.9	14.1	19.4	14.8	21.5	25.9	18.8	3	16.5	15.1	13.8	12.6
65+yrs	3.8	3.7	3.8	3.3	2.9	3.0	6.5	6.4	10.6	17.3	21.0	32.3	29.4	18.1	1	15.4	11.1	9.6	9.3
All ages	4.1	3.8	3.8	3.8	3.8	4.6	6.6	9.2	13.5	19.6	16.2	22.4	24.7	18.3	3	16.5	14.8	13.2	11.9
		8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1-4yrs	12.	9	7.9	11.1	8.4	6.7	6.8	5.6	4.8	1.9	1.9	2.1	1.0	2.0	1.5	1.6	1.6	0.5	1.2
5-14yrs	7.	0	5.2	5.2	5.1	5.4	4.7	3.2	2.0	0.8	0.8	0.8	0.6	0.9	1.3	0.3	0.7	1.2	1.0
15-64yrs	12.	.0 1	11.1	9.3	7.9	7.3	6.5	5.5	4.4	3.0	2.7	2.2	1.8	2.0	1.7	1.6	2.2	2.1	1.4
65+yrs	7.	7	6.5	5.8	4.9	4.5	4.5	5.4	5.1	2.5	1.8	1.9	1.4	1.0	1.3	1.2	2.0	1.5	0.8
All ages	10.	8	9.5	8.3	7.1	6.6	5.9	5.2	4.3	2.7	2.3	2.0	1.5	1.7	1.6	1.4	2.0	1.8	1.2

	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.

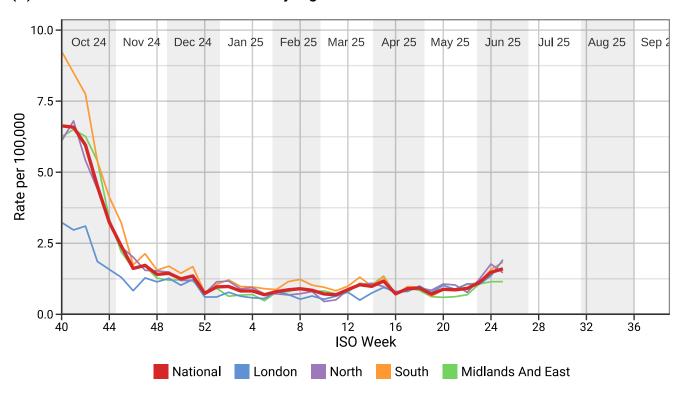


Weekly incidence rates of influenza-like illness, and acute bronchitis and bronchiolitis (per 100,000)

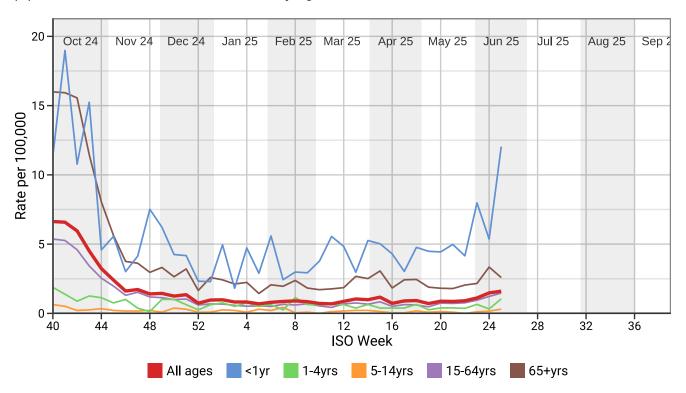
	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
<1yr	2.1	59.5
1-4yrs	1.2	6.5
5-14yrs	1.0	0.3
15-24yrs	1.3	0.2
25-44yrs	1.7	0.8
45-64yrs	1.1	0.8
65-74yrs	0.9	1.9
75-84yrs	0.7	2.4
85+yrs	0.5	1.9
All ages	1.2	1.6

	Influenza-like illness (ILI)	ARI-Bronchitis and Bronchiolitis
London	1.4	1.1
Midlands And East	1.1	1.4
North	1.7	1.9
South	0.9	1.8
National	1.2	1.6

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

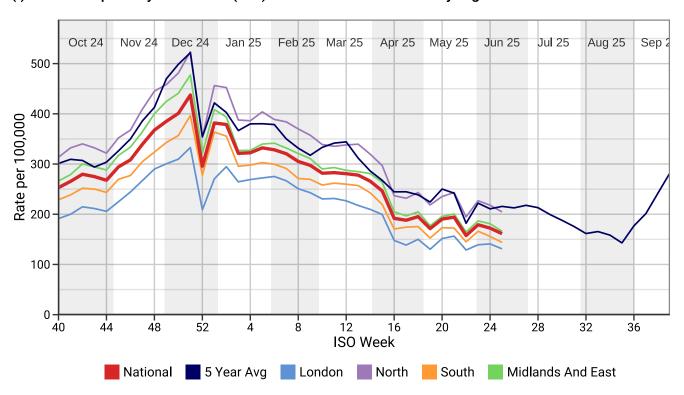


(H) COVID-19: national incidence rate by age band

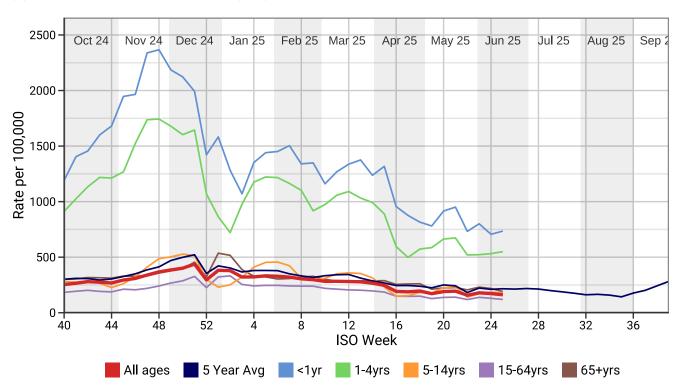


1. Respiratory Infections

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

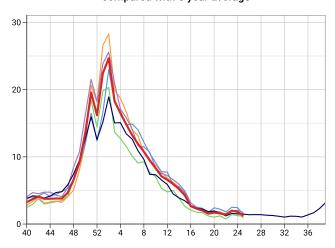


(J) Acute Respiratory Infections (ARI): national incidence rate by age band

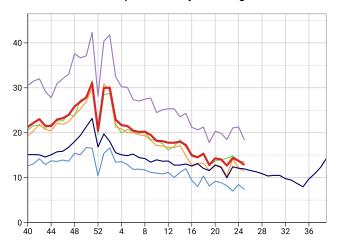


National London South 5 Year Avg North Midlands And East

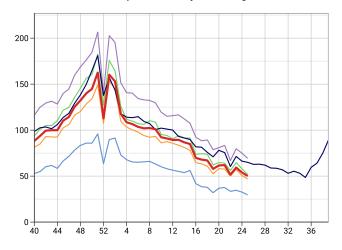
Influenza-like illness (ILI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



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

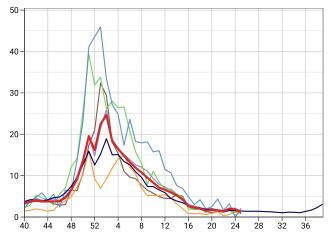


Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average

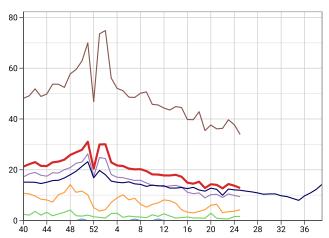




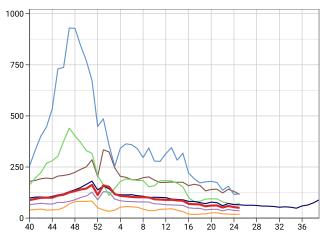
Influenza-like illness (ILI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



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

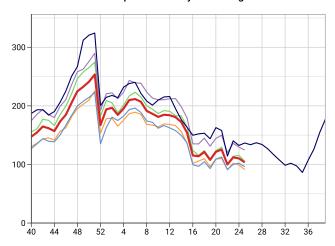


Lower Respiratory Tract Infections (LRTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average

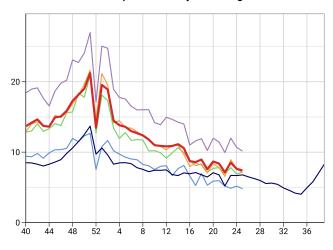




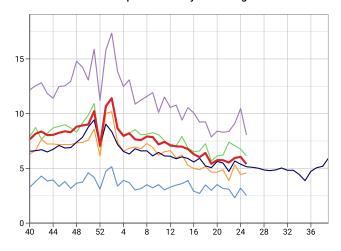
Upper Respiratory Tract Infections (URTI) Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



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



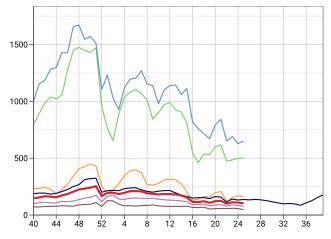
ECLD - COPD Exacerbations Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



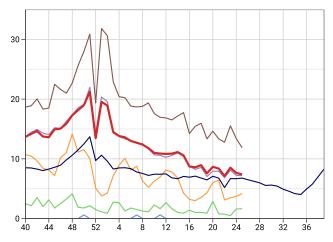
Respiratory Infections - by age band



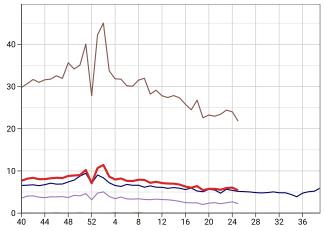
Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by age band for
2024/25 compared with 5 year average



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

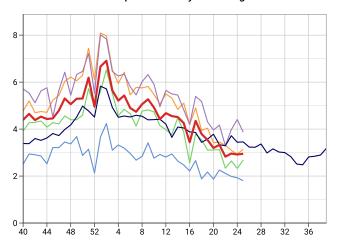


ECLD - COPD Exacerbations
Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average

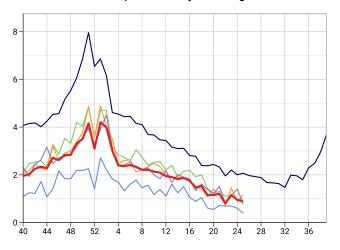


National London South 5 Year Avg North Midlands And East

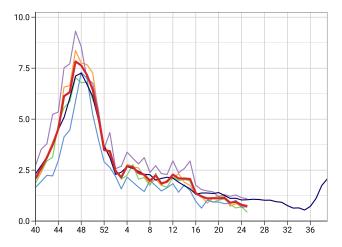
LRTI - Pneumonia Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



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

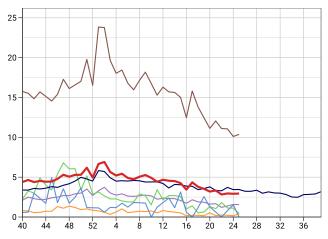


LRTI - Bronchiolitis Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average

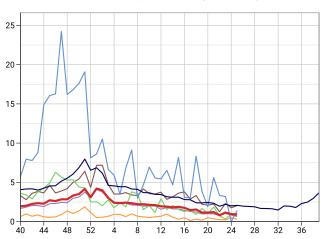




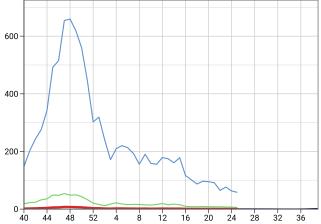
LRTI - Pneumonia Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



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

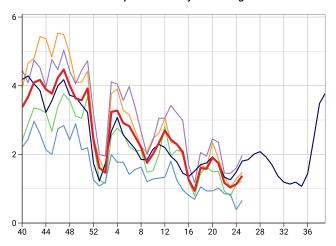


LRTI - Bronchiolitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average

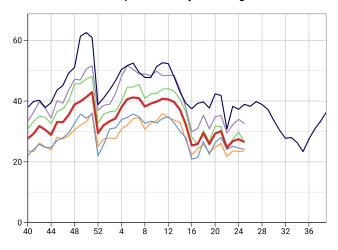


National London South 5 Year Avg North Midlands And East

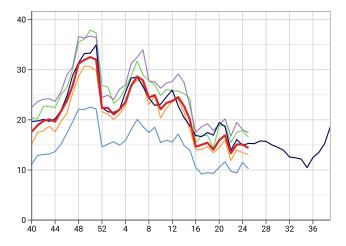
URTI - Croup Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



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

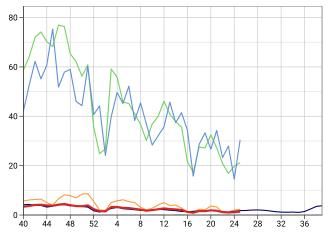


URTI - Otitis Media Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average

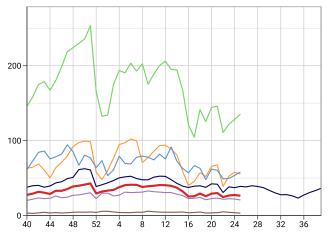




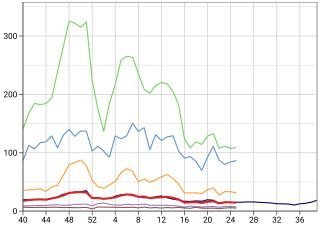
URTI - Croup Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



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

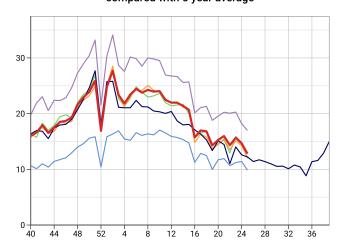


URTI - Otitis Media Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average

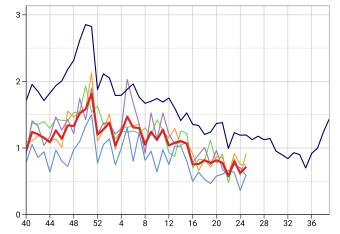


National London South 5 Year Avg North Midlands And East

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

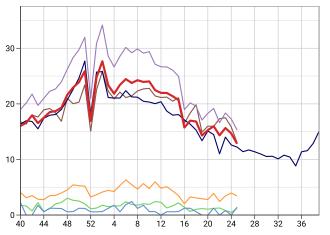


URTI - Laryngitis
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average

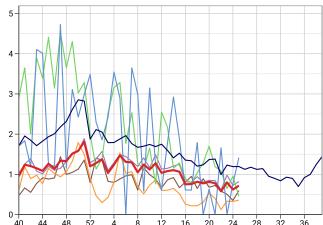




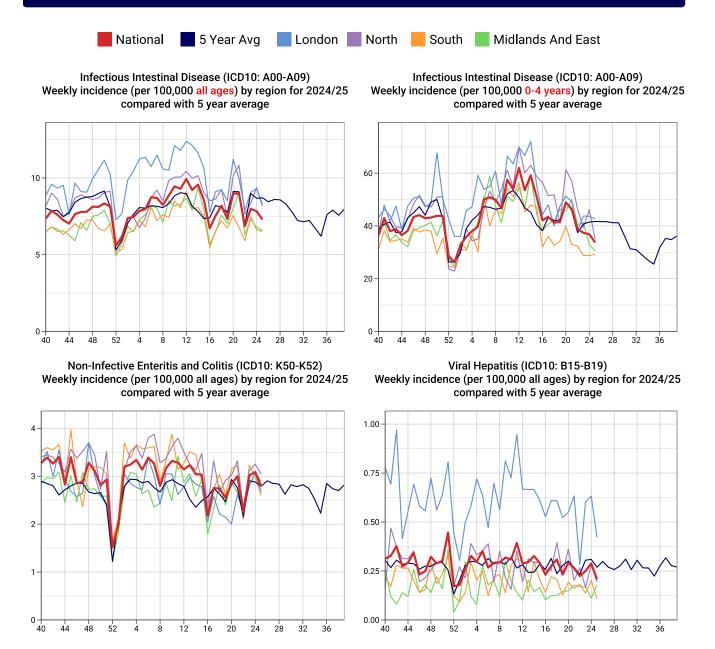
URTI - Sinusitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



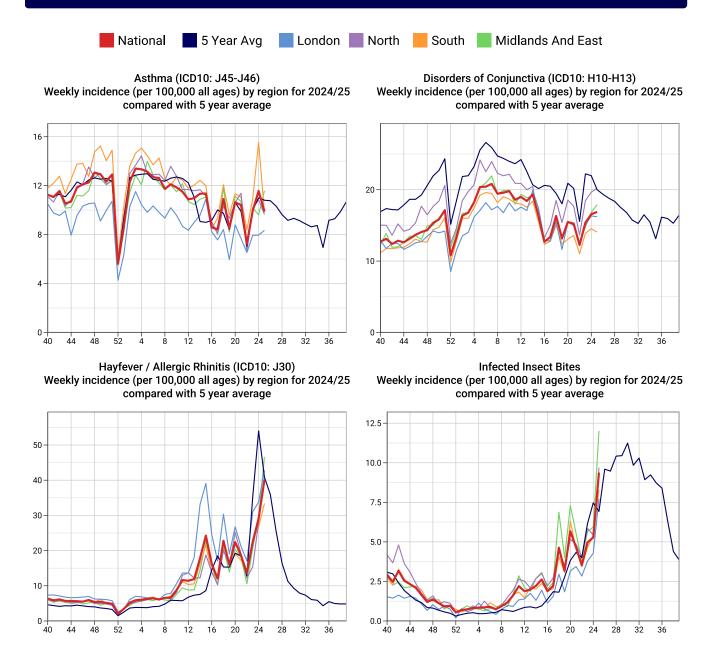
URTI - Laryngitis Weekly incidence (per 100,000 all ages) by age band for 2024/25 compared with 5 year average



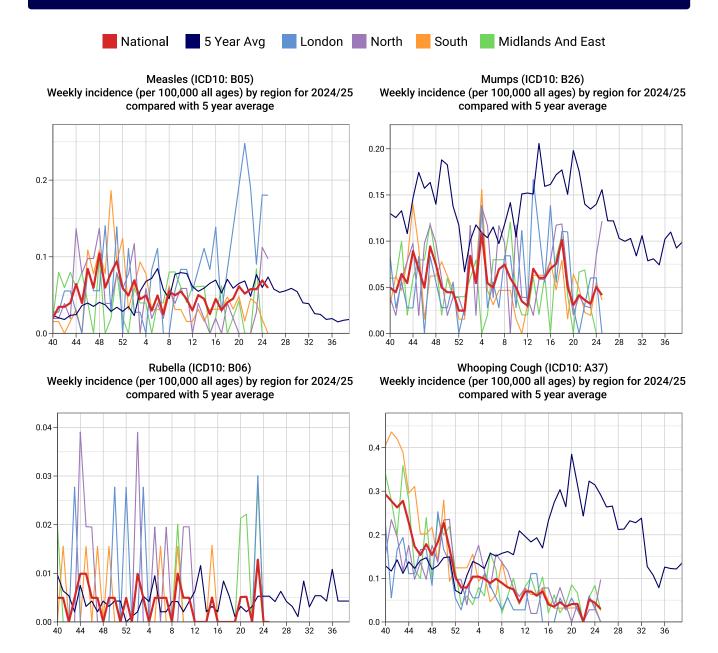
2. Water and Food Borne Disorders



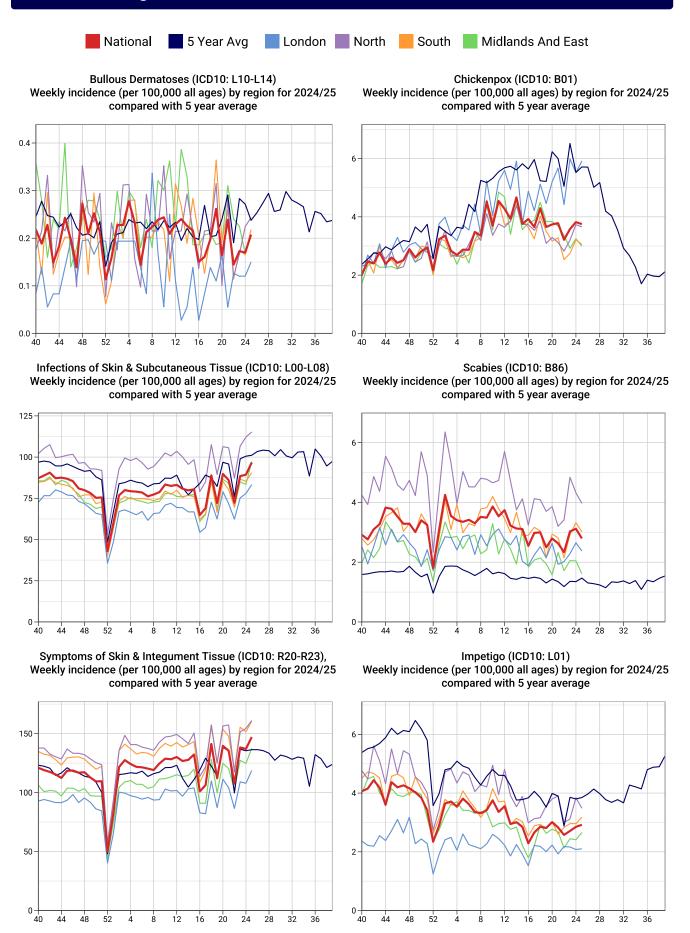
3. Environmentally Sensitive Disorders

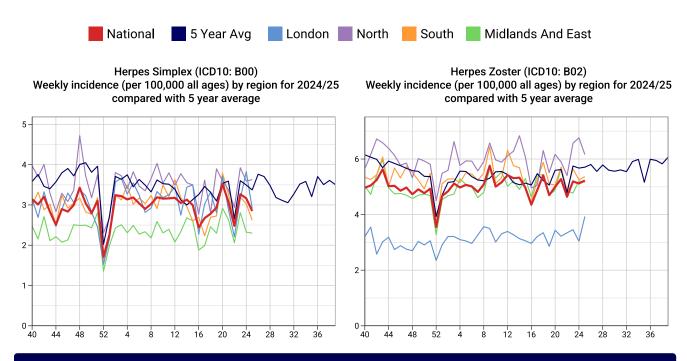


4. Vaccine Sensitive Disorders



5. Skin Contagions

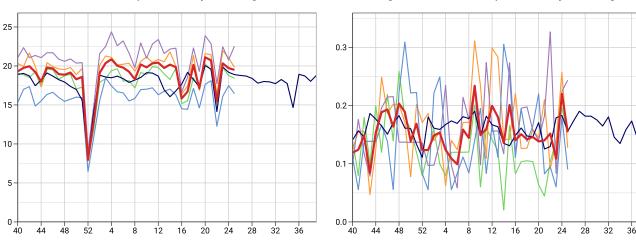




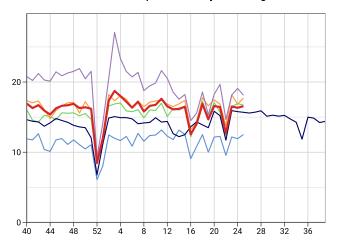
6. Disorders Affecting the Nervous System

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



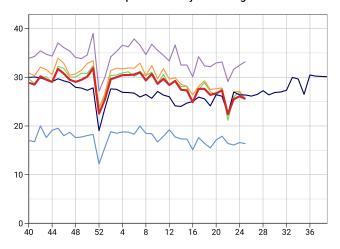
Symptoms of Nervous & Musculoskeletal Systems (ICD10: R25-R29), Weekly incidence (per 100,000 all ages) by region for 2024/25 compared with 5 year average



7. Genitourinary System Disorders

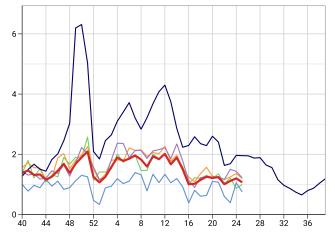


Urinary Tract Infection/Cystitis (ICD10: N30,N390)
Weekly incidence (per 100,000 all ages) by region for 2024/25
compared with 5 year average

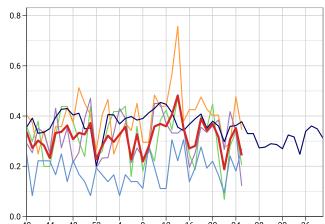


8. Other Disorders

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 22	Week 23	Week 24	Week 25
Dates	26/05/2025 - 01/06/2025	02/06/2025 - 08/06/2025	09/06/2025 - 15/06/2025	16/06/2025 - 22/06/2025
Population	13,829,074	15,612,234	15,899,124	16,851,422
Practice Count	1,368	1,519	1,546	1,653

	Wee	ek 22	Wee	ek 23	Wee	k 24	Wee	ek 25
Disease	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Acute Bronchitis	0.8	112	1.2	180	1.0	152	0.9	148
Acute Respiratory Infections (ARI)	157.5	21,781	179.1	27,954	172.3	27,399	161.3	27,187
Allergic Rhinitis	13.6	1,884	22.5	3,512	29.1	4,627	40.1	6,757
Asthma	7.2	1,002	10.0	1,554	11.6	1,839	9.9	1,666
Bronchiolitis	0.9	125	0.9	147	8.0	127	0.7	124
Bullous Dermatoses	0.1	20	0.2	27	0.2	27	0.2	35
COVID-19	0.9	126	1.1	174	1.5	235	1.6	270
Chickenpox	3.2	444	3.6	559	3.8	607	3.8	632
Conjunctival Disorders	12.2	1,694	15.4	2,404	16.6	2,633	16.9	2,846
Croup	1.2	162	1.0	162	1.1	180	1.4	232
ECLD - COPD exacerbations	5.5	765	6.0	929	6.1	962	5.4	907
ECLD - asthma exacerbations	7.1	987	8.5	1,330	7.6	1,214	7.4	1,247
Exacerbations of chronic lung disease (ECLD)	12.7	1,756	14.4	2,248	13.7	2,184	12.8	2,162
Herpes Simplex	2.5	343	3.3	510	3.2	503	2.8	480
Herpes Zoster	4.6	642	5.2	811	5.1	814	5.2	881
Impetigo	2.6	356	2.7	423	2.8	453	2.9	492
Infected Insect Bites	3.5	487	5.0	776	5.3	840	9.4	1,581
Infectious Intestinal Diseases	6.9	949	8.0	1,247	7.8	1,245	7.3	1,229
Infectious Mononucleosis	0.2	26	0.3	48	0.4	56	0.2	41
Influenza-like Illness (ILI)	1.4	193	2.0	308	1.8	291	1.2	209
Laryngitis	0.6	80	0.8	125	0.6	99	0.7	121
Lower respiratory tract infections (LRTI)	51.6	7,138	59.3	9,265	54.0	8,579	50.1	8,443
Measles	0.1	8	0.1	9	0.1	11	0.1	10
Meningitis and Encephalitis	0.2	21	0.1	17	0.2	35	0.2	26
Mumps	0.0	5	0.0	5	0.1	8	0.0	7
Non-infective Enteritis and Colitis	2.3	313	3.0	471	3.1	491	2.8	470
Peripheral Nervous Disease	15.5	2,142	20.3	3,175	19.7	3,136	19.5	3,286
Pneumonia	2.8	391	3.0	462	2.9	464	2.9	497
Rubella	0.0	0	0.0	2	0.0	0	0.0	0
Scabies	2.3	323	3.0	473	3.1	496	2.8	471
Sinusitis	14.3	1,983	15.7	2,444	14.7	2,334	12.8	2,160
Skin and Subcutaneous Tissue Infections	72.3	9,997	88.5	13,812	89.3	14,203	96.7	16,299
Strep Throat and Peritonsillar Abscess	1.0	139	1.1	174	1.2	191	1.1	180
Symptoms involving Skin and Integument Tissues	107.6	14,876	138.3	21,586	137.0	21,785	147.1	24,792
Symptoms involving musculoskeletal	12.7	1,761	16.5	2,578	16.3	2,596	16.6	2,791
Tonsillitis and Pharyngitis	24.7	3,410	26.8	4,184	27.4	4,364	26.5	4,470
Upper respiratory tract infections (URTI)	100.0	13,827	112.1	17,507	110.3	17,539	103.6	17,451
Urinary Tract Infections	22.4	3,098	25.5	3,981	26.1	4,149	25.6	4,309
Viral Hepatitis	0.2	31	0.2	39	0.3	46	0.2	35
Whooping Cough	0.0	0	0.1	8	0.0	7	0.0	5

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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