QSurveillance practice consent information

Purpose of document

We are pleased to invite EMIS Web and LV practices to join QSurveillance®

What is QSurveillance?

QSurveillance® is a near real time surveillance scheme which collects, analyses and reports of rates of infectious diseases and vaccine uptake (e.g MMR, flu vaccine and pneumococcal vaccine).

QSurveillance® has the capability of providing timely data in the face of emerging public health problems (e.g. flu epidemic or gastroenteritis which could result from widespread flooding). It was used to provide critical information during the recent swine flu pandemic in 2009. QSurveillance can also respond to chemical incidents, concerns about safety of medication or report in extreme weather conditions (e.g. during a heat wave) to help estimate the scale of the problem and plan a response.

QSurveillance® summary data has also been designed so that it can rapidly assess the safety and effectiveness of new medications (for example, a newly developed flu vaccine developed rapidly during a pandemic or where there is an unexpected public health issue).

Who is running QSurveillance and who is the clinical custodian?

QSurveillance® is run as a collaboration between the University of Nottingham, EMIS and ClinRisk Ltd (medical software company). Professor Julia Hippisley-Cox (Professor of General Practice at the University of Nottingham and medical director of ClinRisk Ltd) is the clinical custodian of the summary data. The scheme is supported by the EMIS National User Group and the British Medical Association.

If you are a practice contributing to QSurveillance® and have any questions then please contact julia.hippisley-cox@nottingham.ac.uk.

What data is extracted and analysed?

QSurveillance® only extracts summary data which is aggregated by age and sex (i.e. counts of patients who have the conditions of interest in a given time period). No individual patient data is extracted. There is no risk to patient confidentiality. The reports are run at midnight each night and extracted onto a central server at EMIS and from there to a secure server based in Nottingham University.

What indicators are included in QSurveillance?

The indicators which are currently included in QSurveillance® can be found here. These are likely to evolve in response to developing needs for public health surveillance. This list will be revised accordingly.

How are decisions about additional data taken and implemented?

Professor Julia Hippisley-Cox is the clinical custodian of QSurveillance® responsible to the practices, profession and the public for use and disposition of QSurveillance® data. In the event of an unexpected urgent public health situation requiring increased surveillance, we will discuss the additional data items with the relevant government authority. For example, for infectious disease or chemical incidents, this will be the Health Protection Agency. For medication safety it will be the Department of Health or Medicine Health Regulatory Authority.

Representatives of the University of Nottingham, BMA, EMIS and the National EMIS User Group will be consulted and Trent MREC where appropriate. The additional indicators will be added to the table on the website which lists all the current indicators.

The EMIS patch system will be used to notify practices of the reason for the extraction (for example, the floods in the South West) and the additional data items needed in advance of the extraction. Practices can opt out at any point without giving a reason.

All analyses will be independently undertaken, scientifically reviewed where appropriate and publically available in accordance with our research governance framework.

Is there any risk to practice or patient confidentiality?

No patient level data or identifiable data is extracted and there is no risk to patient confidentiality. As an additional safeguard, we suppress counts where there are fewer than 5 patients in an age/sex cell.

No practices can or will be identified in published reports since only summary data are reported and the identity of practices contributing data to QSurveillance® is not released to the Health Protection Agency. Reports at PCT level are only produced where there are at least 3 practices contributing data to the QSurveillance® database.

We analyse and report on other data for infectious diseases at PCT level and summary reports will be sent to the Health Protection Agency for inclusion in their weekly or daily bulletins.http://www.hpa.org.uk/infections/topics_az/primary_care_surveillance/QResearch.htm

Information on uptake of flu, pneumococcal and MMR vaccine by risk category is submitted to the Immunisation Division of the Department of Health. This information is practice identifiable and is used to monitor the uptake of vaccines during infectious disease outbreaks eg during seasonal or pandemic flu.

How is QSurveillance funded?

QSurveillance® receives funding from the Health Protection Agency (HPA) in respect of the weekly and daily bulletin service and from the Department of Health for the vaccine uptake reports.

Do practices receive any payments for taking part in QSurveillance?

Practices are not paid for taking part and do not need to pay to join. The data are not used to determine practice payments or measure performance. In 2010/2011 practices contributing to QSurveillance® will be able to compare their practice indicators with other anonymised practices via the QFeedback Practice Portal.

Consenting and activating QSurveillance in EMIS Web

If you are an EMIS Web practice that would like to contribute to QSurveillance, please contact EMIS Customer Fulfilment on 0845 125 5529 or email your regional POD mailbox. EMIS will then perform the necessary background activation activities within 10 days. Once complete you will receive an email informing you how to activate this in EMIS Web by activating the EMAS Manager. Please note EMIS must perform the necessary background activation for your practice to start contributing to data to QSurveillance.

Practices can also activate/deactivate QSurveillance transmissions within EMIS Web.

To activate/deactivate QSurveillance transmissions:

1. To access EMAS Manager, do one of the following:

    - Click , point to **System Tools**, and then select **EMAS Manager**.

    - If you have customised the quick access toolbar, click .

    - If you are already in the System Tools section, click the **EMAS Manager** tab or press ALT and then press E.

    - From anywhere else in the system, press **ALT**, press **E**, press **O**, and then press **E**.

    - On the homepage, click the link, if configured.

    The EMAS Manager screen is displayed.

2. In the navigation pane, if not already selected, select the **EMIS** tab.

3. In the navigation pane, select **QSurveillance Messaging**.

4. On the ribbon, click **Activate Application** or **Deactivate Application**, as required.

    QSurveillance transmissions are activated/deactivated.

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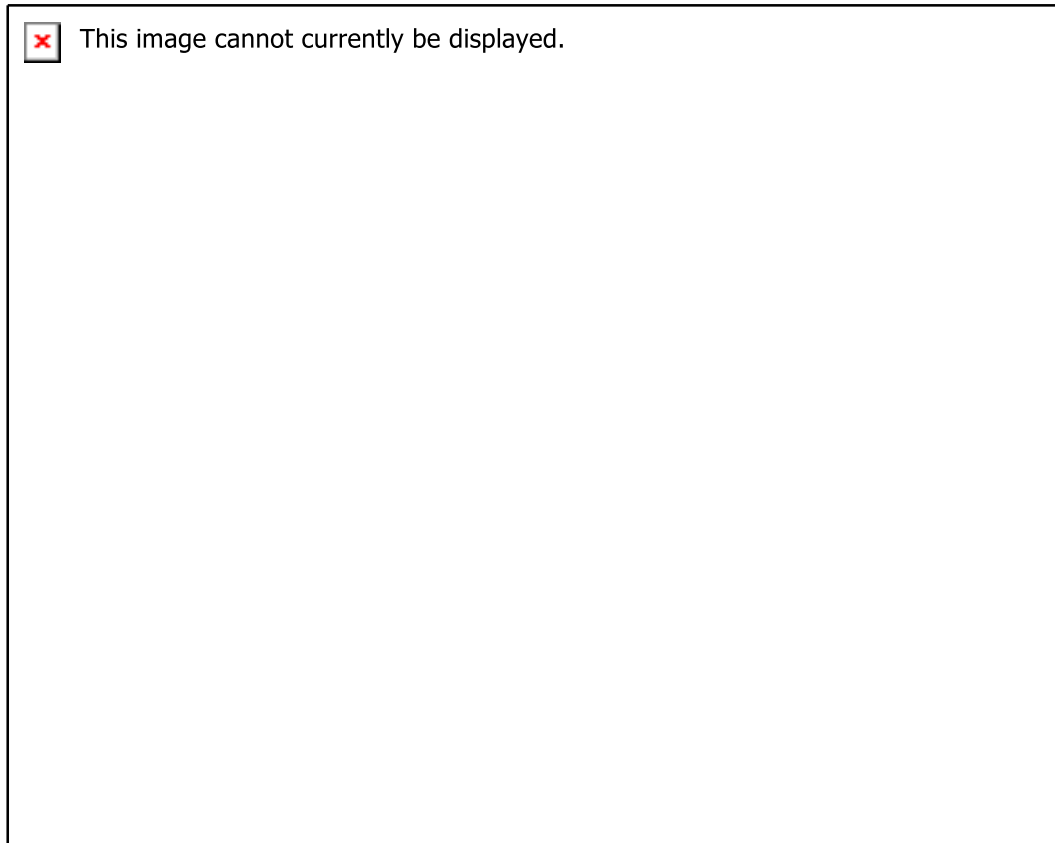
EMAS Manager screen with new QSurveillance option activated and circled in red

Note: To use EMAS Manager, you must have Role Based Access Control (RBAC) activity B0062 Local System Administration in your role profile (configured in Organisation Configuration). For more information about RBAC, refer to UG148 EMIS Web Organisation Configuration.

To view QSurveillance reports in EMIS Web:

1. Access Enquiry Manager by doing one of the following:

   - Click , point to **Reporting**, and then click **Enquiry Manager**.

   - If you have customised the quick access toolbar, click

   - If you are already in Reporting, click the **Enquiry Manager** tab or press **ALT** and then press **Q**.

   - From anywhere else in the system, press **ALT**, press **E**, press **S**, and then press **Q**.

   - On the homepage, click the link, if configured.

   The Enquiry Manager screen is displayed.

2. In the navigation pane, click the **QSurveillance** tab.

   The QSurveillance screen is displayed.

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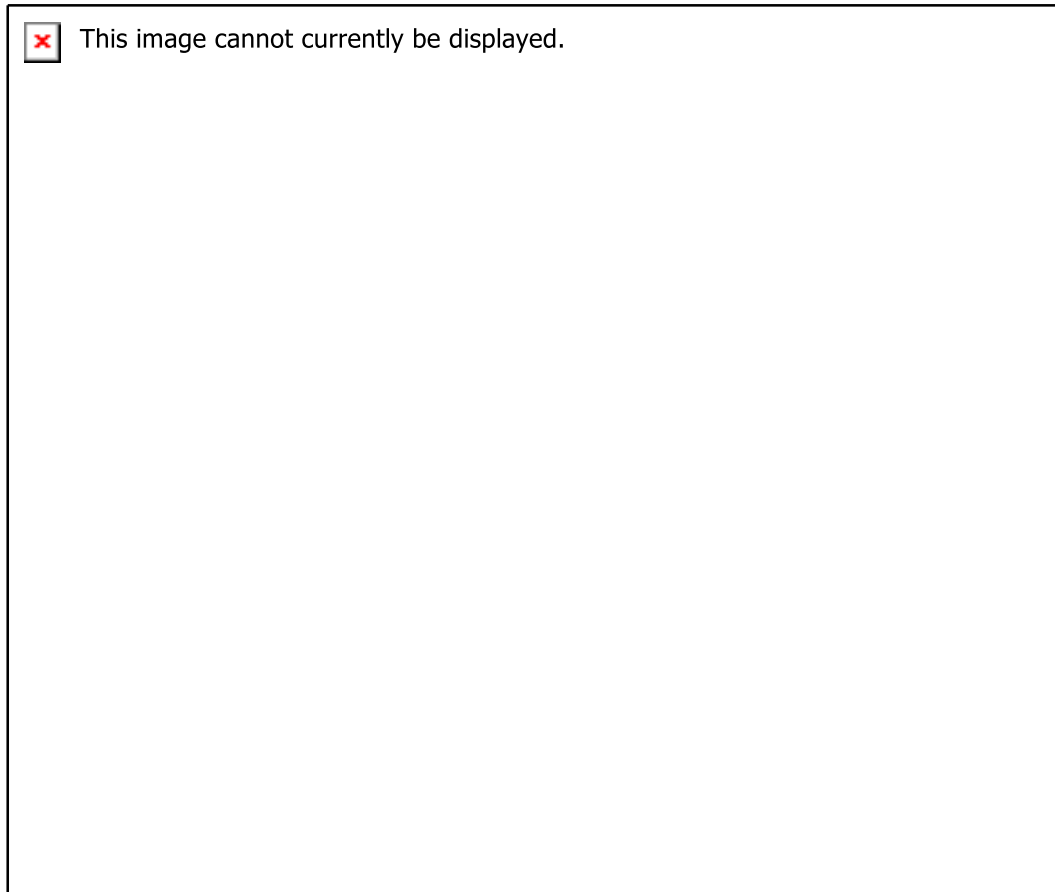
Enquiry Manager screen with QSurveillance activated

Tip: To log onto the QSurveillance QFeedback site website from EMIS Web, on the ribbon click **Login to QSurveillance Site**.

For further information on QSurveillance, please see www.qsurveillance.org

If you are having problems activating QSurveillance in your EMIS Web system, please contact 0845 122 2333.

If you have any other queries about QSurveillance please email the following with your CDB number

qsurveillance@qsurveillance.org

Appendix – data in QSuvreillance

An up to date list of data items extracted from GP systems for the QSurveillance database is maintained at the following website. It is reproduced here for ease of reference

http://www.qsurveillance.org/QSurveillance/Indicators.html

- Number of registered patients by age and sex
- influenza and influenza like illness
- influenza plus antivirals
- Pneumonia +/- antibiotics
- At risk of flu +/- flu vaccination
- Flu vaccination
- Pneumococcal vaccination
- Flu or pneumo vaccine by risk group (chronic lung, heart, kidney, liver, neurological problems, malignancy, immunosuppressed and pregnancy)
- Total emergency hospital admissions
- Total GP and nurse consultations
- Deaths
- Deaths from flu
- Wheeze or breathlessness
- Lower respiratory tract infection
- Upper respiratory tract infection
- Severe asthma
- Myocardial infarction
- Chickenpox
- Conjunctivitis
- Allergic rhinitis
- Herpes zoster
- Pharyngitis/scarlet fever +/- antibiotics
- Cellulitis +/- antibiotics
- Vomiting
- Mumps
- Gastroenteritis
- Diarrhoea +/- oral rehydration therapy
- Impetigo
- Measles
- Rubella
- Pertussis
- heat stroke
- Measles
- MMR