



UK Health
Security
Agency

What happens to FP investigation Questionnaires and what work undertaken by UKHSA following this

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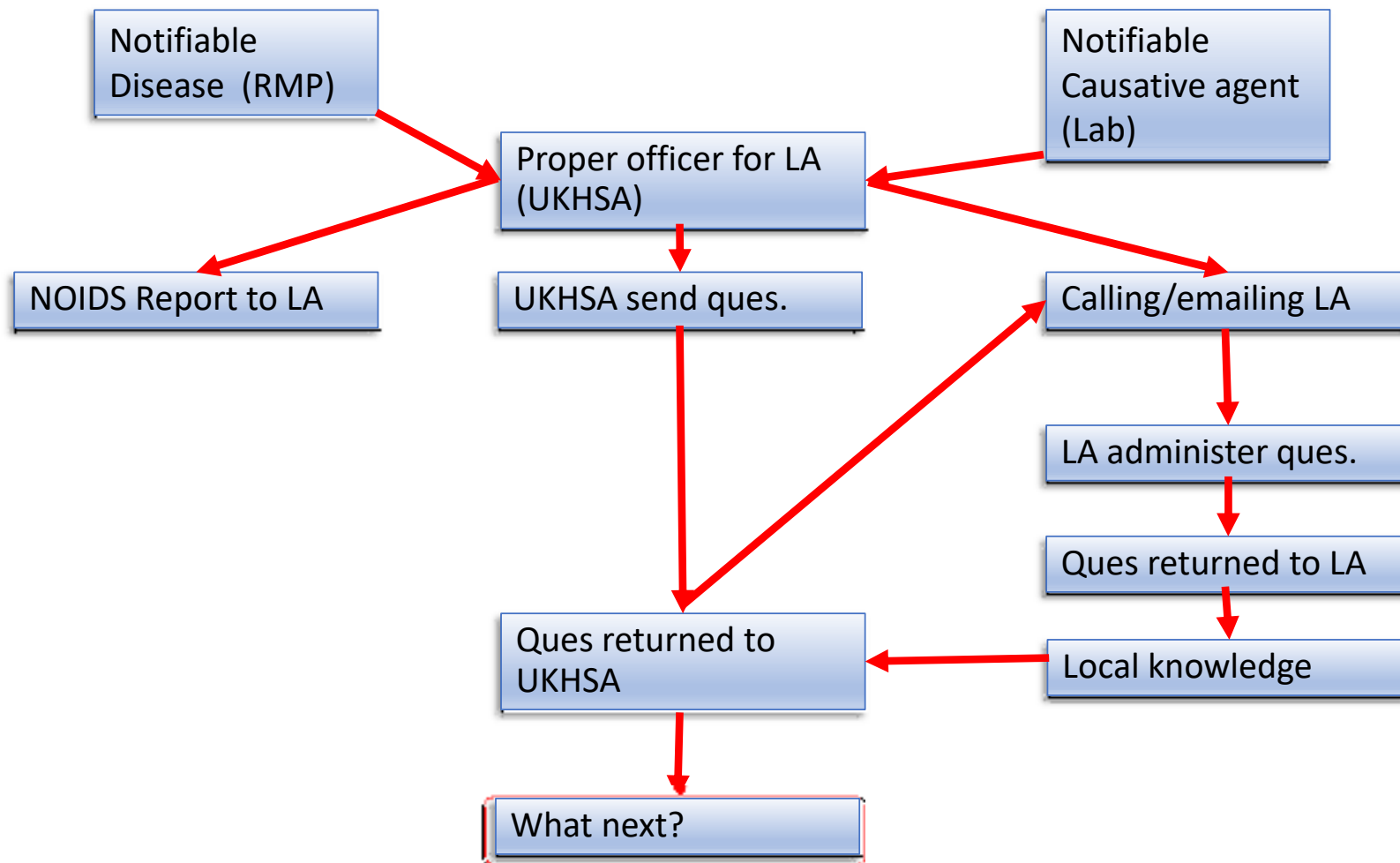
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Background

- Statutory duty:
 - "Registered medical practitioners (RMPs) have a statutory duty to notify the 'proper officer' at their local council or local health protection team (HPT) of suspected cases of certain infectious diseases. All proper officers must pass the entire notification to UKHSA within 3 days of a case being notified, or within 24 hours for urgent cases"
- Proper officer for LAs (HPPs and CCDC/CHPs in UKHSA)
- The UK Health Security Agency (UKHSA, formerly Public Health England) aims to detect possible outbreaks of disease and epidemics as rapidly as possible. Accuracy of diagnosis is secondary (notification on clinical suspicion)

Notification



Local view



Login to HPZONE (Live)

HPZONE: East Midlands North (Privileged Account)

Contexts

	Foreign Country (Travel, Immigration)
	Foreign Location (Travel, Immigration; Province, City, Town or Resort)
	Pre-school Nursery
	School
	College/University
	Hospital (as a possible source of infection)
	Care Home
	Prison or Detention Centre
	Unlisted Managed Context
	Restaurant/Food Outlet
	Workplace (Factory, Plant, Institution, Business premises etc)
	Visitor Attraction
	Congregation (An ad hoc gathering i.e. at an event, in a public space or on a
	Environmental Exposure (Rivers, Lakes, Farms, Animal Populations etc.)

Local actions

- Context to HPZone
 - Identify common venues/situations/premises
- Identify outbreaks/clusters
- Liaise with labs/field services/LAs if concerns
- Information gathering
- Call IMTs
- Support formal action – labs, field services, comms
- Provide expert witnesses where required

Local SNP Clusters

- Questionnaires are linked to the cases and contexts added
- Field Services flag up SNP clusters in region
- Immediate resource in look back of cases – looking for commonalities
- Less likely to have to revisit cases for information

National Questionnaires

[illegible][illegible]


Listen to the experts
Trawling Questionnaire

Please return this completed questionnaire to:
 Confidential Infection & Food Safety (One Health), UKHSA, 61 Colindale Avenue, London NW9 5EQ
 Email: trawling@ukhsa.gov.uk Tel: 020 8257 6443

* Any information supplied will be treated as strictly confidential.
 * Please tick boxes () or write in the spaces () provided.
 * Please use black or dark blue ballpoint.
 * If you are answering on behalf of someone else, please remember that these questions refer to the person that ticks it and **not** yourself.
 * 'Yes' and 'No' answers are not as important as 'Yes' answers. If you have a blood spot on your card, please indicate the blooded area.

WPA/Case Ref No: _____ Interviewer: Patient: _____ Proxy: _____ (relationship to patient): _____
 Date of interview: _____ Interviewer Name and job title: _____

SECTION 1: PERSONAL DETAILS

1.1 Forename (s) _____ 1.2 Surname _____
 1.3 Address _____
 1.4 Postcode _____
 1.5 Current telephone number _____
 1.6 Gender: Male ☐ Female ☐
 1.7 Date of Birth _____ (dd/mm/yyyy) 1.8 Age _____ years
 1.9 Describe your ethnic background (tick all that apply)
 White: ☐ British ☐ Irish ☐ Other (please state) _____
 Mixed: ☐ White/British Caribbean ☐ White/British African ☐ White/Asian ☐ Other (please state) _____
 Asian/Asian British: ☐ Indian ☐ Pakistani ☐ Bangladeshi ☐ Other (please state) _____

1. The following table lists the number of people who have been convicted of a crime in the past 10 years, by age group and gender.			
Age Group	Male	Female	Total
18-24	120	80	200
25-34	150	100	250
35-44	180	120	300
45-54	140	90	230
55-64	100	60	160
65+	80	40	120
Total	670	490	1160

[illegible]

Shigella

National view

- WGS indicates there is a cluster
 - potential epidemiological links indicated in the ESQs
 - assess the next steps;
- Looking over multiple HPTs or UKHSA regions.
- An additional use for the ESQs as a whole in the surveillance database is for other analytical needs during projects and outbreaks; for example, as controls in case-case analyses.

Benefits of questionnaires

- National or local incident or SNP cluster investigations
 - We have the information from the questionnaires to refer to immediately
 - Less likely to have to go back to cases
 - Less likely to miss a situation locally
- Benefit of local knowledge from EHOs with both local and national ques.
- Local surveillance
- National surveillance

Sheep & SNPs

- S typhimurium outbreak in sheep on particular farm
- Linked by WGS to cluster of cases initially in SE area of England and then nationally
- Questionnaires identified that the majority of cases had consumed meat from butchers sourcing their meat from abattoir/s processing animals from farm
- National outbreak later identified from WGS and questionnaire used to identify links to the farm
- Local questionnaires with linked cases identified no obvious link to the meat from the farm, but geographically close to the farm
- Environmental contamination/source?



Thank you

Any questions?