Notification of infectious disease (NOIDs)

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Public Health Agency

GPNI update
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Overview

- What is a NOID
- Public Health Act 1967
- Importance of reporting
- Current list of NI notifiable diseases
- Reporting pathways
- New eNOIDs system
- Surveillance dashboard

What is a NOID

- NOIDs are suspected cases of certain infectious diseases that may present a risk to human health and for which action may be required to protect public health
- A list of NOIDS in Northern Ireland is defined under the Public Health (NI) Act 1967
- Under the Act, all registered medical practitioners have a statutory duty to notify suspected cases of NOIDs to the Health Protection Service, Public Health Agency
- Also part of Good Medical Practice

'*every medical practitioner attending on a person shall, as soon as he becomes aware, or has reasonable grounds for suspecting, that the person is suffering from a notifiable disease, send to the medical officer of health for the area in which the examination took place a certificate stating:*

- *The name, age, sex and address of the patient*
- *The address of the building in which the examination took place and*
- *The notifiable disease from which, in the opinion of the medical practitioner, the patient is, or may be, suffering.'*

What is a NOID

- In Northern Ireland, laboratories also voluntarily report positive test results of NOIDS (GPs will be familiar with this through calls from PHA Duty Room about positive bloods for Hep B & C or positive stool cultures for gut pathogens)
- Unlike the rest of the UK, reporting of diseases is not a mandatory requirement for laboratories
- Voluntary laboratory reporting of NOIDs is **NOT** a replacement for registered medical practitioner's mandatory requirement to report suspected cases
- You should not wait for laboratory confirmation of the disease- NOID is based on reasonable clinical suspicion rather than tests

Importance of reporting

- Reporting suspected cases of infectious disease to the PHA protects public health
- The aim of notification is to identify the risks and institute appropriate control measures as early as possible
- Awaiting laboratory confirmation could delay the public health and infection control response for both the patient and their contacts
- The PHA Health Protection Team use your information to manage outbreaks and prevent further infections. For example, they:
  - provide public health advice to reduce the spread of infection
  - carry out contact tracing
  - send additional diagnostic test kits
  - identify disease trends and risks

List of Notifiable Diseases

Acute encephalitis/meningitis: bacterial
Acute encephalitis/meningitis: viral
Anthrax
Chickenpox
Cholera
Coronavirus disease (COVID-19)
Diphtheria
Dysentery
Food Poisoning
Gastro-enteritis (persons under 2 years of age only)
Hepatitis A
Hepatitis B
Hepatitis C
Hepatitis unspecified: viral
Legionnaire's Disease
Leptospirosis
Malaria
Measles
Meningococcal septicaemia
Monkeypox
Mumps
Paratyphoid fever
Plague
Poliomyelitis: acute
Rabies
Relapsing fever
Rubella
Scarlet fever
Smallpox
Tetanus
Tuberculosis: pulmonary and non-pulmonary
Typhoid fever
Typhus
Viral haemorrhagic fevers
Whooping cough
Yellow fever

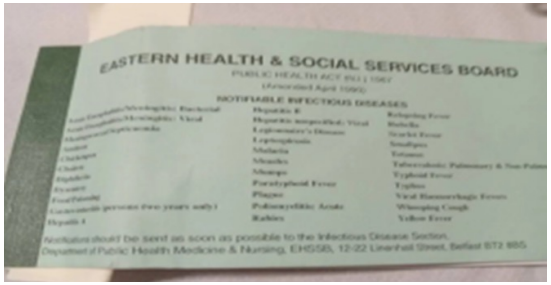
https://www.legislation.gov.uk/apni/1967/36/schedule/1 The Public Health (Notifiable Diseases) Order (Northern Ireland) 2022

Please be aware- NI list differs from England

How to report

There are currently several routes to report NOIDs to the PHA:

- Telephone report to PHA duty room
- E-mail report to PHA duty room
- Paper stub NOID books supplied by BSO
- GP templates within GP clinical system which generate letters



- However, there are issues with many of these routes including, lack of integration with GP systems and NIECR and postal delays
- We have therefore developed an electronic notification for NOIDs through the CCG referral route to replace email and paper-based reporting

Urgent NOID notification

- Timeframe to report NOIDS is stated ***as soon as you become aware*** of the suspected notifiable disease
- Whilst all NOIDS present a risk to public health, **some require urgent public health action**
- PHA have agreed a list of NOIDs that you should continue to report urgently (within 24 hours) by telephone to the PHA Health Protection Service to allow assessment and prompt action to protect public health
- GPs reporting NOIDS though the CCG referral route should follow-up with a phone call to:
  - 9-5pm Monday to Friday: Health Protection acute response PHA Duty Room (**0300 555 0119**)
  - Out-of-hours: Public Health on call team via Southern HSC Trust switchboard on **028 3833 8410.** Select Option 1 – for Craigavon Area Hospital, then Option 7 – to speak to an operator
- If you are not sure if a case is urgent, please telephone the PHA acute response duty room for advice

List of Notifiable Diseases

Acute encephalitis/meningitis: bacterial	Acute encephalitis/meningitis: viral	Anthrax	Chickenpox
Cholera	Coronavirus disease (COVID-19)	Diphtheria	Dysentery
Food Poisoning	Gastro-enteritis (persons under 2 years of age only)	Hepatitis A	Hepatitis B
Hepatitis C	Hepatitis unspecified: viral	Legionnaire's Disease	Leptospirosis
Malaria	Measles	Meningococcal septicaemia	Monkeypox
Mumps	Paratyphoid fever	Plague	Poliomyelitis: acute
Rabies	Relapsing fever	Rubella	Scarlet fever
Smallpox	Tetanus	Tuberculosis: pulmonary and non-pulmonary	Typhoid fever
Typhus	Viral haemorrhagic fevers	Whooping cough	Yellow fever

Red= Urgent

List of Notifiable Diseases

Public Health Agency

Certain circumstances also warrant urgent notification:

Dysentery	Usually Routine. **Urgent if infectious bloody diarrhoea**
Food Poisoning	Usually Routine. **Urgent if part of a cluster or outbreak**
Hep A,B,C & unspecified	Usually Routine. **Urgent if acute presentation**
Malaria	Usually Routine. **Urgent if acquired in UK**
Tetanus	Usually Routine. **Urgent if associated with injecting drug use**
Whooping cough	**Urgent if diagnosed in acute phase**. Routine in later diagnosis
Yellow fever	Usually Routine. **Urgent if acquired in UK**

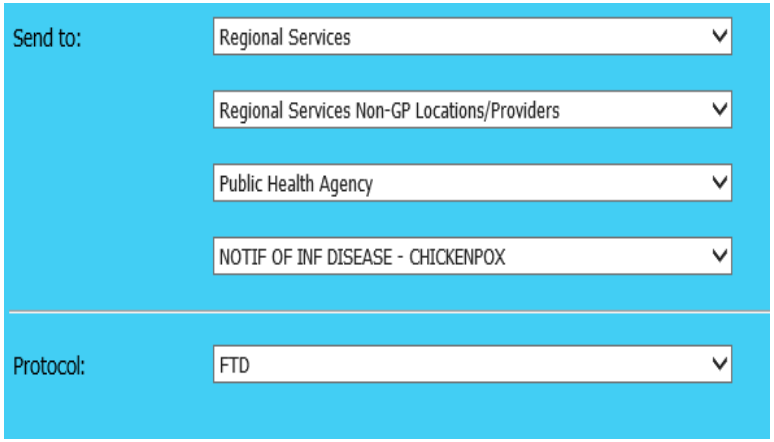
Electronic NOIDs system via CCG

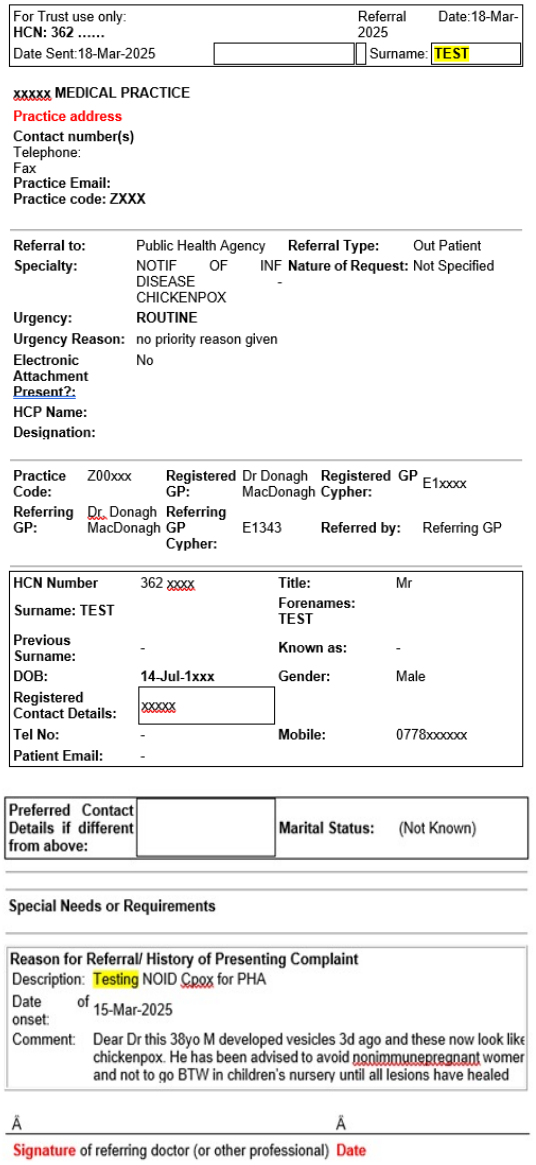
- **New CCG referral route for NOID reporting by GPs**
  - live from 26th September 2025
- Designed to be easier to use, providing more complete data to generate output trends and reports
- Slimmed-down template that includes mandatory dataset for reporting: *name, age, sex and address of patient, GP surgery and address, and the notifiable disease from which the patient is, or may be, suffering*
- Includes free text facility to include other relevant information (e.g. date of symptom onset, vaccination status, **travel history**)
- Applying usual clinical judgement to include this information will avoid unnecessary call backs or need for separate templates
- Summary medications and morbidities will not auto populate for NOIDs in line with principles of data minimisation

Key operational details

- Notification of Infectious Disease will appear in the '**Regional Services'** tab on CCG
- Each NOID has its own destination (NOTIF OF INF DISEASE – *infection name*)
- NOIDs listed are those in the Public Health (NI) Act 1967
- The template to be completed is common to all NOIDS

- For CCG NOIDs to writeback to EMIS a code needs to be applied; the suggested code is "**refer to public health**" (read code **8H6B)**
- If errors are made (e.g. wrong diagnosis, wrong patient) raise a supportteam@hscni.net ticket for rectification
- Ensure **GP cypher code** populated- needed for payment




For Trust use only: Referral Date:18-Mar-2025
HCN: 362 ..... Date Sent:18-Mar-2025 Surname: TEST

xxxxx MEDICAL PRACTICE
Practice address
Contact number(s)
Telephone:
Fax
Practice Email:
Practice code: ZXXX

Referral to:	Public Health Agency	**Referral Type:**	Out Patient
Specialty:	NOTIF OF INF DISEASE CHICKENPOX	**Nature of Request:**	Not Specified
Urgency:	**ROUTINE**		
Urgency Reason:	no priority reason given		
Electronic Attachment Present?:	No		
HCP Name:			
Designation:			

Practice Code:	Z00xxx	**Registered GP:**	Dr Donagh MacDonagh	**Registered GP Cypher:**	E1xxxx
Referring GP:	Dr Donagh MacDonagh	**Referring GP Cypher:**	E1343	**Referred by:**	Referring GP

HCN Number	362 xxxx	**Title:**	Mr
Surname: TEST		**Forenames: TEST**	
Previous Surname:	-	**Known as:**	-
DOB:	**14-Jul-1xxx**	**Gender:**	Male
Registered Contact Details:	xxxxx		
Tel No:	-	**Mobile:**	0778xxxxxx
Patient Email:	-		

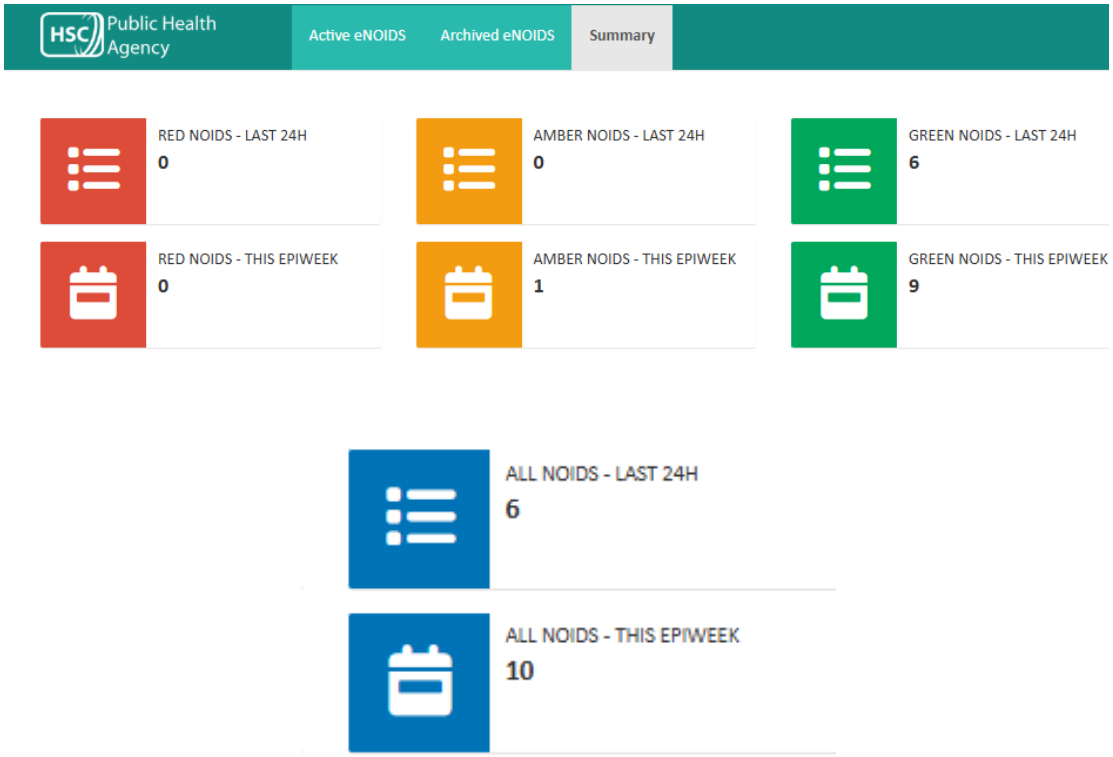
Preferred Contact Details if different from above: **Marital Status:** (Not Known)

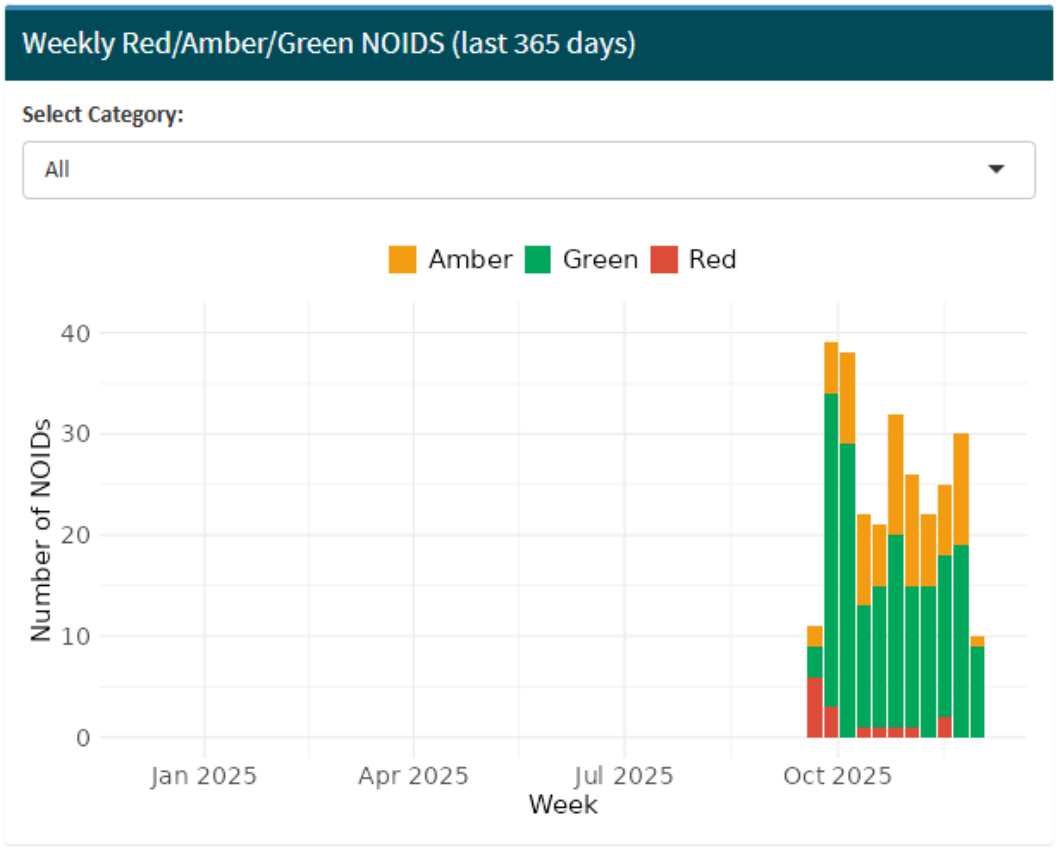
Special Needs or Requirements

Reason for Referral/ History of Presenting Complaint
Description: Testing NOID Cpox for PHA
Date of onset: 15-Mar-2025
Comment: Dear Dr this 38yo M developed vesicles 3d ago and these now look like chickenpox. He has been advised to avoid nonimmunepregnant women and not to go BTW in children's nursery until all lesions have healed

Signature of referring doctor (or other professional) Date

eNOIDS dashboard





eNOIDS dashboard

