# Essential EMIS Codes for All-Age Safeguarding and Carers

## NEL interim quick guide while safeguarding templates are being updated (October 26)

**How to use this guide**

Use this as an interim all-age coding and recording aid while local templates are updated. Add concise free text for context, risk, consent or the rationale for sharing without consent, actions, professionals involved, contact details, outcomes and review dates. Keep active safeguarding or statutory-status codes visible while current and add an appropriate ended or "no longer" code when the status changes; do not delete the historical record.

Resources Safeguarding – North East London and excellent guidance on Course: Safeguarding Hub | RCGP Learning

### 1. Initial concern and referral

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| A child is currently causing safeguarding concern | Child is cause for safeguarding concern | 836881000000105 |
| The concern relates to a child in the patient's family | Child in family is safeguarding concern | 1064961000000107 |
| An unborn baby is causing safeguarding concern | Unborn child is cause for safeguarding concern | 878111000000109 |
| A referral is made to MASH/MAST/children's social care | Referral to Child Safeguarding Team | 514341000000108 |

**Safeguarding red-flag visibility**

"Child is cause for safeguarding concern", "Subject to child protection plan" and "Looked after child" should raise the safeguarding red flag/clinical alert in the practice system. For every child subject to a Child in Need plan, also add "Child is cause for safeguarding concern" so the safeguarding alert is visible to clinicians.

### 2. Information requested and reports sent

| | | |
|---|---|---|
| A safeguarding report has been prepared by the GP | Safeguarding report | Existing NEL LIS EMIS code – SCTID to be confirmed |
| **Use when…** | **EMIS/SNOMED term** | **SNOMED CT ID** |
| GP SG report is completed – SG LIS payment | Safeguarding report | This is the payment code for the SG LIS |
| A MASH/social care enquiry is received or a social worker is known to be involved | Social worker involved | Existing EMIS term – confirm displayed SCTID in EMIS |
| A child protection conference report is sent | Child Protection Conference Report Submitted | 1036511000000100 |
| Child protection conference minutes are received | Child Protection Conference Minutes received | 1659091000000100 |
| A strategy discussion or strategy meeting has taken place | Strategy discussion | Existing EMIS term – confirm displayed SCTID in EMIS |

**Social worker involved -**

Record the social worker's name, team, telephone and email as free text alongside "Social worker involved". Record reason for request, narrative risks and actions in free text. Online invisibility, proxy-access review and CP-IS checks should be considered; removal of existing proxy/online access for those who are becoming looked after.

**Strategy discussion**

Record key information discussed, outcome or decision from the THGPCG template.

**NEL LIS safeguarding report**

Use "Safeguarding report" when a safeguarding report has been prepared by the GP.

### 3. Current plan or care status, including removal codes

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| Also add for every active Child in Need case to ensure the safeguarding alert is visible | Child is cause for safeguarding concern | 836881000000105 |
| The child is subject to a Child in Need plan | Subject of child in need plan | 836931000000102 |
| The Child in Need plan has ended | Child no longer in need | 135890008 |
| The child is subject to a Child Protection Plan | Subject to child protection plan | 342191000000101 |
| The Child Protection Plan has ended | No longer subject to child protection plan | 342891000000105 |
| An unborn baby is subject to a Child Protection Plan | Unborn child subject to child protection plan | 818901000000100 |
| The unborn Child Protection Plan has ended | Unborn child no longer subject to child protection plan | 1025431000000104 |
| The child is looked after by a local authority | Looked after child | 764841000000100 |
| The child is no longer looked after | No longer subject of looked after child arrangement | 764951000000107 |
| The child is an unaccompanied child asylum seeker | Unaccompanied child asylum seeker | 748241000000103 |

### 4. MDT discussion

**MDT coding and recording**

Use the EMIS code **"Shared care: health visitor and general practitioner"** when a child is discussed at the practice safeguarding MDT or in a shared-care discussion with the health visitor.

Also record in free text:

- Reason for discussion and current safeguarding concerns
- Professionals involved
- Agreed actions and plan
- Review or follow-up date
- Relevant sibling or family records that also need updating

### 5. Was Not Brought

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| A child was not brought to a health appointment | Child not brought to appointment | 901441000000108 |

**CNBA review**

The code records the missed health encounter. Also document the reason, impact on the child, pattern of missed care, safeguarding review, action taken, rebooking/re-referral and review date. A code alone is not a safeguarding review – please see guidance flow chart- Child-Not-Brought-to-Appointment-CNBA-guidance-flow-chart-TH-primary-Sept-2025.docx

### 6. Domestic abuse and MARAC

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| Domestic abuse is part of the patient's | History of domestic abuse | 429746005 |

| | | |
|---|---|---|
| history | | |
| The patient/family is subject to MARAC | Subject of Multi-Agency Risk Assessment Conference | 758941000000108 |
| A referral is made to a domestic abuse service | Referral to Domestic Abuse Agency | 758599003 |
| A referral is made to MARAC | Referral to Multi-Agency Risk Assessment Conference | 978091000000105 |

**MARAC referral reminder**
Make a MARAC referral for high-risk domestic abuse cases. Use the SafeLives DASH risk checklist to assess risk and support the referral decision. All cases involving non-fatal strangulation should be referred to MARAC Guidelines for clinical management of non-fatal strangulation in acute and emergency care services - Institute for Addressing Strangulation

## 7. Female genital mutilation

**FGM coding and family review**
Use the appropriate EMIS FGM codes, including:

- **Female genital mutilation**
- **History of female genital mutilation**
- **Family history of female genital mutilation**
- The relevant FGM type, where known and available in EMIS

When FGM is identified or suspected, document the risk assessment, clinical findings, safeguarding concerns, referrals, actions and follow-up plan. Review and risk assess female children and siblings FGM Professional Guidance Forms, and code relevant family records appropriately. If FGM is recorded in a mother's new-birth notification, consider coding both the mother's and child's records and reviewing other female siblings TH-FGM-flow-chart-V2-October-25.pdf
For a patient under 18 with confirmed FGM, follow the mandatory reporting duty and make an urgent referral to the police and children's social care. FGM_Mandatory_Reporting_-_procedural_information_nov16_FINAL.pdf If a child may be at risk, complete a safeguarding risk assessment and refer through the local children's social-care pathway. Consider online visibility and third-party information before filing documentation

## 8. Record safety and online access

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| A safeguarding document contains third-party information | Record contains third party information | 888931000000108 |
| Automatic online access may create risk and enhanced review is needed | Enhanced review indicated before granting access to own health record | 1364731000000104 |
| Enhanced review is no longer indicated | Enhanced review not indicated before granting access to own health record | 1364751000000106 |

## 9. Adult safeguarding and Section 42

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| An adult is currently causing safeguarding concern | Adult is cause for safeguarding concern | 766561000000109 |
| A safeguarding referral is made to the local authority | Referral to adult safeguarding team | Confirm current term and SCTID in EMIS/CEG template |
| The local authority confirms that a statutory safeguarding enquiry is being undertaken | Subject to Section 42 safeguarding enquiry | Confirm current term and SCTID in EMIS/CEG template |
| The Section 42 enquiry has ended | Section 42 safeguarding enquiry completed/no longer active | Confirm current term and SCTID in EMIS/CEG template |

**Adult safeguarding referral guidance**
Refer through the local adult safeguarding pathway where the adult has care and support needs, is experiencing or at risk of abuse or neglect, and because of those needs may be unable to protect themselves. The local authority decides whether the Section 42 duty is met; do not delay referral while trying to establish this yourself. Record immediate safety action, capacity, the adult's wishes, consent or the proportionate rationale for sharing without consent, advocacy needs, other people at risk, the agency contacted, outcome and review date. Use emergency services where there is immediate danger or urgent medical need.

## 10. Unpaid carers: adults, young carers and young adult carers

| Use when… | EMIS/SNOMED term | SNOMED CT ID |
|---|---|---|
| The patient is an unpaid carer (adult or young carer) | Patient themselves providing care | 224484003 |
| A child under 18 provides informal unpaid care | Child providing informal care | 204091000000106 |
| A carer has an emergency or contingency plan | Carer contingency plan in place | 1365991000000102 |

**Coding note:** NHS England recommends **Patient themselves providing care** as the core unpaid-carer code and states that it includes adult and young carers. For clearer identification of a patient under 18 in EMIS **Child providing informal care .** Practices may use both where locally agreed, but the child-specific code should not be replaced by a vague free-text label. Please do not confuse with ' has a carer' for those with formal paid caring arrangements .

**Referral and support guidance**

- **Young carers:** refer to the local children's social care or young-carers pathway for a young carer's needs assessment. Consider education, health, emotional wellbeing, excessive or inappropriate caring, and whether a whole-family assessment is needed.
- **Adult and young adult carers:** offer referral to adult social care for a carer's assessment and signpost to the local carers service. Consider this particularly where caring affects physical or mental health, safety, relationships, education or employment, finances, sleep, ability to attend healthcare, or ability to continue caring. Please record when a carer's assessment has been offered .
- **Review and escalation:** The ability to care for another may change – consider asking about the caring role during long-term condition, severe mental illness, frailty, hospital discharge and safeguarding reviews. Record who is cared for, the nature and intensity of care and whether there is appropriate support. If the caring arrangement is breaking down or creates risk to a child, adult or dependent person, make the appropriate safeguarding or social-care referral.

## Important recording reminders

- Use more than one code where appropriate. A child may have a statutory status code and several relevant contextual entries.
- Add a brief safeguarding summary explaining why services are involved, the current plan, professionals involved and GP actions.
- When a plan ends, add the appropriate "no longer" code rather than deleting the history.
- For safeguarding documents, consider third-party information, online visibility and proxy access before filing.
- For active Child in Need cases, use both "Subject of child in need plan" and "Child is cause for safeguarding concern" so the child's plan and safeguarding-alert visibility are both recorded.

## Sources used for verification

- NHS England, Coding for unpaid carers: SNOMED CT, updated September 2026 — core code 224484003 includes adult and young carers.

- Care Act 2014 and Care and support statutory guidance for carers' assessments and adult safeguarding duties.
- NHS Digital SNOMED CT Browser: verify current local display terms and identifiers before circulation.
- RCGP Safeguarding Toolkit: essential safeguarding codes.
- NHS safeguarding coding list used for workflow codes including referrals, information requested/shared, conference reports, MARAC and CNBA.
- NHS Digital guidance for online-access codes 104 and 106.
- Current NEL Child Safeguarding CEG template and NEL safeguarding LIS material.