

SNOMED Guidance FAQ Document

National Clinical Audit of
Psychosis

MAY 2026



NCAP
NATIONAL
CLINICAL AUDIT
OF PSYCHOSIS

This document should be read alongside the NCAP SNOMED Coding Guidance. While the main guidance outlines the required SNOMED CT codes for NCAP reporting, this FAQ provides additional clarification on how these codes are interpreted in practice, how data is extracted via the MHSDS, and how compliance with NCAP standards is determined.

SNOMED code specific questions

Do physical health intervention SNOMED codes need to be recorded only when the initial assessment identifies a need (e.g. the person is a smoker)?

Yes. Record an intervention code only where a need is identified.

However, you must still record the outcome of the assessment even if no intervention is required. If no outcome code is submitted, NCAP cannot determine whether an intervention was needed, and the standard may not be met.

Example: Record a code confirming a person is a non-smoker to show that no intervention was required.

Can a single SNOMED code for a full physical health check (e.g. annual or 3-month review) be used instead of recording each component separately?

No. You must record the specific SNOMED codes listed in NCAP guidance.

This is because NCAP assesses whether all seven required areas have been completed individually:

- Smoking
- Alcohol use
- Substance misuse
- BMI
- Blood pressure
- Cholesterol
- Glucose

You must also record interventions where indicated.

Codes for a “complete check” are not sufficient because they do not confirm that each required element and its outcome has been recorded.

Where can I find definitions and further information on SNOMED codes?

Refer to NHS England resources:

- [SNOMED CT guidance \(NHSE\)](#)
- [SNOMED CT browser for searching codes](#)

What is the minimum set of SNOMED codes required to meet NCAP standards?

You must record enough SNOMED detail for NCAP to determine whether each standard is met.

Minimum requirements:

- Psychosocial interventions: one relevant SNOMED code (or expression)
- Physical health:
 - one code per assessment to record the outcome
 - plus an intervention code where a need is identified
- Outcome measures:
 - a SNOMED code and score for each question
 - across two different measures
 - each recorded at two timepoints

NCAP data extraction and analysis questions

If another team within the Trust provides an intervention (e.g. physical health or psychosocial), will NCAP capture this data if it is recorded elsewhere?

NCAP recognises that responsibility for delivering interventions may sit with other teams within a Trust. This is particularly common for physical health, where screening and/or interventions may be provided outside the EIP service. It may also apply where psychosocial interventions are delivered by another service following referral.

In these situations, EIP teams should not record that they have delivered an intervention if it has been provided by another service.

At present, NCAP is only able to extract data linked to the EIP referral within the MHSDS. This means that interventions recorded elsewhere in the Trust under a different referral are not consistently captured in NCAP analyses.

This is a recognised limitation of the current routine data methodology. NCAP is actively exploring options to improve data linkage across services and referrals within a Trust and updates will be shared as further developments are made.

If IPS or other non-EIP services record activity under a separate referral, will this be included?

Not currently. Activity recorded under a different referral is not captured.

NCAP is exploring future linkage options so teams can continue recording activity in their existing systems.

What timeframe is used for outcome measures data?

NCAP uses the two most recent assessments.

- Ideally: baseline and follow-up
- Primary timeframe: within the last 12 months of reporting period
- Where needed, an older assessment outside 12 months may be used

Example:

- if a patient had assessments at 2, 6 and 12 months ago, NCAP would use the 2 month and 12 month assessments to show change across the year.
- If a patient had assessments 2 months and 14 months ago, both scores would be used.

In practice, NCAP selects the most appropriate pair of assessments to demonstrate change over time, rather than always using the two most recent.

Are datasets updated after later MHSDS submissions (e.g. full-year refreshes)?

No. NCAP datasets are not retrospectively updated.

Data reflects what was submitted by the cut-off date for that extraction.

Later resubmissions are only included in future datasets.

Example: For the December 2025 extraction, the dataset includes data submitted to MHSDS by 22 December 2025 (covering performance month November 2025).

If a trust submits updated or backdated data after this cut-off, it will not be reflected in that dataset but may be captured in a later extraction (e.g. the June dataset, which includes end-of-year resubmissions up to May).

NCAP is currently reviewing whether retrospective updates could be incorporated in future.

If a patient is treated by both CAMHS and EIP, which data is used?

Only the EIP record is included.

NCAP removes duplicates and keeps the EIP record as the primary dataset.

General audit questions

What thresholds determine when a physical health intervention is needed?

NCAP uses the [Lester Tool](#) ('red zone' thresholds) to determine when a physical health intervention is required.

Please note:

- For cholesterol, NCAP applies a QRISK threshold of >10% and Total cholesterol HDL ratio of >9 within the audit
- There is no threshold for HDL cholesterol alone, as this is considered insufficient information without other lipid measures

Does a patient declining assessment or treatment affect compliance?

It depends on the standard:

- Physical health and clozapine: based on offer

- Psychosocial interventions: based on uptake

If a patient declines physical health assessment or intervention, the standard can still be met because it was offered.

Full details on standards requirements can be found in the [NCAP methodology document](#).

Are additional measures planned for ARMS services?

Not currently. Current measures include:

- CBT for ARMS
- Outcome measures

Any future changes will be communicated to teams.