

**08 October 2025**

## **Neurology Recall (2016-2025)**

### **1. Equality & Human Rights duties**

**All Equality Screenings, EQIAs, Human Rights Impact Assessments (or equivalents) undertaken by or for Belfast Trust regarding the neurology recall (2016–2025) — including screening templates and reasons for any “screened out” decisions.**

No Equality Screenings, EQIAs or Human Rights Impact Assessments were undertaken by Belfast Trust in relation to the Neurology Recall. The purpose of the Neurology Recall was to ensure that patients were receiving the care and treatment they required. As is in all outpatient clinics, the purpose of the Recall was to ensure patients were on the correct treatment pathway for their neurological condition

### **2. Classification / labelling policies during recall**

**Any Trust guidance, SOPs, memos or training materials directing or advising clinicians on the classification/recording of recall patients’ symptoms (including use of functional/psychological labels like “FND”), patient-facing communication templates, and referral/follow-up pathways for patients labelled with FND.**

For Cohort 1 of the Neurology Recall the patient’s primary diagnosis was recorded. For Cohort 2 and 3, the International Classification of Diseases (ICD 10) was used. Patients with a diagnosis of a functional neurological condition (FND) were offered different forms of support from written literature, information available on the internet and onward referral, where this was appropriate.

### **3. Activity / counts (anonymised)**

**Annual counts (CSV) for 2016–2025 of recall patients who: were labelled FND, referred to FND/neuropsychiatry, seen, and discharged without FND follow-up.**

It is not possible to give an exact number of recall patients who were given a diagnosis of FND, who were referred to FND/neuropsychiatry, reviewed or discharged without FND follow-up. This information is not held centrally and would require a manual review of all patient records.

Belfast Trust considers that the cost of retrieving the information would be above the ‘Appropriate Limit’, as defined by the Freedom of Information Act under Section 12. Section 12 of the Freedom of Information Act makes provision for public authorities to refuse requests for information where the cost of dealing with them would exceed the appropriate limit. The limit has been specified as £450 for public authorities such as Belfast Trust. This represents the cost of one or more persons

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spending 18 hours in determining whether we hold the information, locating, retrieving and extracting this information.

#### **4. Governance papers**

**Any Trust steering/oversight group papers relevant to recall pathways/triage/classification (ToR, membership, meeting dates, minutes).**

There was no Trust steering/oversight group relevant to recall pathways/triage/classification. The last neurology clinic letter was used to triage patient conditions. Pathways for Neurology Recall patients were expedited such as diagnostic testing, to ensure patients had a secure diagnosis, or diagnoses, that a proper management plan was in place and that prescribing was appropriate.