



# CLEVELAND LMC

Cleveland Local Medical Committee

## Cleveland LMC Bulletin: Tuesday 15 April 2025

### **Heales Medical**

Staff working in primary care who sustain a sharps/needlestick injury can call Heales Medical helpline to obtain advice and follow-up blood testing (if it is required), the practice does not need to be registered for Heales Medical to process their case. I've attached the Needle Stick Injury Helpline poster which contains further details including the telephone number. This service is fully funded via ICB.

You can contact Heales Medical support team on [nhsengland@heales.com](mailto:nhsengland@heales.com) or 03333 449 089 if you have any queries that are not covered by the information provided on their website at <https://www.heales.com/index.php/type-of-organisation/nhs-occupational-health>

It is worth noting that the referral of a case by a practice will automatically incur a charge. For example, management referral (sickness absence) cases are automatically sent to our triage team as soon as they are referred, so the triage cost of £18.70 (+VAT) would apply, even if we do not ultimately arrange an appointment. Further costings are provided after the triage has taken place. In Health Surveillance (i.e. for vaccination status checks for existing employees) and/or Pre-employment cases, the system automatically shares online questionnaires with the employee, and for that we charge £5.70 (+VAT) even if they do not complete the questionnaire. Where the questionnaire is completed, there is usually also a £25.10 (+VAT) charge for the clinical review of their responses and advice on further action (such as vaccinations or blood test). Again, further costings would be provided upon receipt of a completed online questionnaire.

Practices wishing to register for the services can do so by visiting <https://www.heales.com/tl/nhsenglandnorth>, practice will need to enter their ODS Code, complete the online forms, and accept the terms.

### **Butterwick Hospice - Update from the North Tees Palliative Care Team:**

We would like to inform you that Butterwick Hospice, Stockton, is now able to admit patients from the community for symptom management or end of life care.

Currently, the assessment and arrangements for admission are organised via the North Tees and Hartlepool Specialist Palliative Care Team. We cannot accept direct referrals from Primary Care teams at this time due to the evolving nature of this service model and the need to ensure that the patients' needs can be safely met in the hospice.

To refer a patient for consideration of a hospice bed for symptom control and/or end of life care please refer the patient to the Specialist Palliative Care team via the S1 referral dashboard, or if the patient is already known to the specialist palliative care team feel free to ring / task to further discuss an admission."

### **Good Mental Health in General Practice Conference**

This is a one-day conference on Tuesday 10<sup>th</sup> June at York Racecourse, 9am-3pm.

The day will include keynote speakers, clinical workshops on suicide prevention, personality disorder, learning disability, children&young people.



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There will be a focus on practitioner well-being, with the following workshops on offer: burn-out free working, yoga, mindfulness, poetry.

Guest Speakers are:

- Dr Richard Duggins -Consultant Psychiatrist in Medical Psychotherapy, North East and North Cumbria Staff Mental Health and Wellbeing Hub
- Dr Katharine Peterson – GP Partner, Forum Family Practice, Cramlington, Strategic clinical lead for mental health, learning disability, neurodivergence and wider determinants, Parity of esteem group chair for North East and North Cumbria Integrated Care Board
- Representatives from Cahms

For further info please click [here](#).

To register for this event please click [here](#).

## **National Updates**

### **PLG Symposium 2024: '5,289 men per year – Breaking the silence on men's mental health and suicide'**

Wednesday 30 April 2025, 9:30am – 1:30pm

Virtual event via Microsoft Teams

Registrations can be made here: <https://events.bma.org.uk/plg25/reg>

With 5,289 men lost to suicide in England, Scotland and Wales in 2023, we will explore the gaps in the health and social care system, how factors such as neurodiversity, deprivation, and intergenerational

experiences intersect with mental health, the stigma around masculine identity and seeking help, and what actions could drive meaningful change.

The symposium will include keynote speakers, panel discussions and networking opportunities. The event aims to bring together people with lived experience and professionals from different sectors and disciplines to discuss the topic. Attendees will include representatives from patient and community organisations, Royal Medical Colleges, BMA, NHS, and public, voluntary and charity sectors. Speakers on the day will include:

- Mark Brooks OBE, Senior Policy Adviser: Men's Health and Inclusion
- Dr Samir Shah, Consultant Psychiatrist
- Kelly Stewart, PhD researcher and UKCP-accredited psychotherapist (MA)
- Dr Umit Cetin, Senior Lecturer in Sociology
- Melinda Raker MBE DL, Founder Patron of YANA (You Are Not Alone)
- Keith Leslie, Chair, Samaritans in UK and Ireland; Former Chair of Mental Health At Work and Former Chair of the Mental Health Foundation; Author of 'A Question Of Leadership' (Bloomsbury 2021); Former partner at McKinsey and Deloitte.

Please contact [confunit@bma.org.uk](mailto:confunit@bma.org.uk) for further information.



## Local action: Stay safe, stay organised, stay united

GPC England's national dispute with Government may be over, following the acceptance of the 2025/26 contract, but the importance of local action to resolve ongoing commissioning gaps continues. Read our latest local action guidance [on our GP campaign page](#)

We continue to strongly advocate for [safe working](#) and encourage practices to identify unfunded and underfunded work in their areas and to engage in local action to address commissioning gaps. When locally commissioned pathways fail or there are service gaps, practices should initiate re/negotiations, via their elected LMC representatives, with ICBs to secure appropriate resourcing.

Practices who are undertaking under/unfunded work should either be fully resourced, to ensure patient care – for some of the most vulnerable people in society – is sustainable, or, with the support of their LMC, consider serving notice to ICBs. LMCs are integral to facilitating fair and effective local agreements between practices and commissioners – supported by our national advice and resources. This is simply business as usual local action, coordinated by your LMCs, which has been happening for many years.

Our [safe working guidance](#) continues to be GPC England policy and is regularly updated. New planned 2025/26 contractual asks, such as patient access to e-consultations for routine care as well as requesting fit notes or medication queries, does not mean GP practices must offer unlimited capacity that jeopardises patient or staff safety. The safe working guidance includes [template letters](#) which help practices manage workload and limit capacity to deliver safe, high-quality care.

All colleagues are encourage to read [GPC England's guidance on the 2025/26 contract changes](#), where further additional related guidance will be added in the coming days and weeks.

## GP Contract Webinars 2025

All colleagues are invited to join us to hear the GPC England Officer team discuss the detail of the changes in the GP Contract and its funding for 2025/26. After the presentation there will be time for questions and answers.

- Wednesday 23 April 19:00-21:00 Register [here](#)
- Thursday 24 April 12:30-14:30 Register [here](#)

Read more about the contract changes, our advice and the webinars: [GP contract 2025/26 changes](#)

## National Insurance Contributions Bill

The Government has continued to reject Lords amendments to the [National Insurance Contributions \(Secondary Class 1 Contributions\) Bill](#) which would potentially exempt GPs from ENICs (Employers National Insurance Contributions) increases. They have used the reason that the Lords Amendment 'interferes with the public revenue' which is inappropriate as the elected chamber The Commons has final say on tax and financial issues (a position dating from the Parliament Act 1911) and has used its majority to push the Bill through. The Bill will now receive Royal Assent, becoming law on 3 April 2025.