Routines for Wellbeing (RFW)

Programme Information Pack

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VITAL ADAPTATION: *Navigating Health, Promoting Participation*

Routines for Wellbeing (RFW) – Programme Information Pack

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Routines for Wellbeing (RFW) – Summary

What It Is

Routines for Wellbeing (RFW) is a six-week, evidence-based programme designed to support adults in building confidence, resilience, and structure in daily life. Grounded in wellbeing, self-management, and participation principles, RFW uses guided group sessions, reflection, creative exercises, and practical goal setting to help participants reconnect with meaningful routines, reduce isolation, and strengthen self-efficacy. Delivered entirely in an educational and non-clinical context, the programme is designed for practitioners working within their own organisations, under existing governance and insurance.

Who It's For

RFW is aimed at adults who need structured guidance to enhance wellbeing—people facing low motivation, chronic health conditions, fatigue, fluctuating symptoms, or social isolation. Practitioners delivering RFW include occupational therapists, mental health practitioners, allied health professionals, and social prescribers working within NHS Trusts, local authorities, PCNs, or community organisations. Participants remain under their own professional governance; RFW supports skills, knowledge, and confidence without transferring clinical responsibility.

Costs & Licensing

- **Single Practitioner Licence:** £4,595 – unlimited cohorts for 12 months
- **Two-Practitioner Team Licence:** £7,000 – unlimited cohorts for 12 months
  Licensing provides all session materials, training, ongoing support, and outcome frameworks, enabling organisations to deliver RFW safely and consistently while demonstrating measurable impact.

Benefits

- **For participants:** Build self-confidence, daily structure, coping strategies, and social connection. Reduce distress and improve functional wellbeing.
- **For organisations:** Provide a structured, scalable, low-risk pathway that complements existing services, supports prevention, reduces unnecessary GP or support worker demand, and generates measurable outcomes.
- **For practitioners:** Deliver RFW confidently and creatively, extend your professional impact beyond your usual role, gain ongoing peer support, and contribute to meaningful change across your organisation and the wider UK.

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Why RFW Matters

RFW fills a critical gap for people who fall between traditional health and community services, providing practical tools for daily living that complement clinical care. Practitioners enjoy the programme because it is structured yet flexible, evidence-informed, and rewarding—they see participants progress week by week. The mindset is one of **curiosity, creativity, and proactive support**: you are joining an enhanced way of working, shaping the programme, and making a real difference.

Our Ethos & Journey

Together, we are building something bigger than any single session. Your work will feed into a national network of practitioners, monthly reporting fosters honesty, companionship, and trust, and your experience will help evolve the programme. RFW is more than a course—it's a journey of impact, innovation, and collaboration, allowing you to extend your influence, grow your skills, and be part of a movement that transforms wellbeing delivery across the UK.

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1. Introduction

RFW is a six-week, evidence-based self-management programme supporting adults who need help with wellbeing, confidence, motivation, and daily routine. Designed by clinicians, RFW strengthens confidence and self-efficacy, reduces isolation, and helps participants rebuild structure and resilience in everyday life.

RFW achieves:

- Measurable improvements in wellbeing, confidence, and self-efficacy
- Reductions in GP attendance, non-urgent contacts, and crisis demand
- A compassionate, structured group model suitable for mixed mental & physical health needs
- A cost-effective, scalable preventative intervention aligned to NHS and Local Authority priorities

Licensing gives organisations or practitioners training, support, materials, and evaluation tools, enabling unlimited cohort delivery for 12 months.

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2. Programme Overview

RFW supports adults aged 18 and over who would benefit from **structured guidance to improve their wellbeing, confidence, and daily routines.** Participants often face challenges such as low motivation, difficulties managing everyday life, chronic physical or mental health conditions, fatigue, fluctuating symptoms, or social isolation. Many are seeking **practical tools and strategies** to rebuild routine, strengthen resilience, and enhance their ability to manage their own health and wellbeing.

Participants are **usually referred through GP practices, social prescribing link workers, community mental health teams, local authority programmes, or voluntary and community sector organisation**s. RFW is specifically designed to reach **adults who may fall through the gaps in traditional services**—those who need additional support to reconnect with daily life in a structured, group-based environment.

The programme works in a wide range of settings and can be delivered by occupational therapists, mental health practitioners, and other allied health professionals within GP practices and PCNs, community teams, and VCSE organisations. This flexibility ensures that RFW can be embedded within existing services while reaching the people who will benefit most.

Programme Structure

- **Length:** 6-week programme
- **Session duration:** 90 minutes
- **Group size:** 6–14 participants
- **Method:** Guided facilitation using reflection, creative exercises, and practical goal setting

Themes Covered Across the Six Weeks

1. **Building strong foundations for routine**
2. **Self-care and reconnecting with meaningful activity**
3. **The Five Ways to Wellbeing**
4. **Mindfulness, rest, and healthy sleep habits**
5. **Change, motivation, and developing achievable goals**
6. **Bringing everything together and planning for the future**

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3. Licence Options

Licence Type	Fee	Access
Single Practitioner	**£4,595**	**Unlimited cohorts for 12 months**
Two-Practitioner Team	**£7,000**	**Unlimited cohorts for 12 months**

Independent practitioners supporting NHS or local authorities can contact us for tailored options.

Be sure to include the cost of printing and materials—such as folders, worksheets, and handouts—within your overall programme budget.

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4. RFW & Frequent Attender Pathways

Frequent attenders represent around **40% of all GP appointments** (University of Manchester, 2023). RFW offers a practical way to support this group by addressing underlying reasons for repeat attendance, such as:

- Low confidence
- Limited self-management skills
- Chronic conditions
- Fatigue or fluctuating symptoms
- Social isolation

RFW helps stabilise these challenges by giving people tools, structure, and confidence to manage their day-to-day lives more effectively.

Integration into Existing Pathways

Referrals can be made through social prescribing link workers, GP teams, or community mental health services.
Organisations can monitor changes in wellbeing, confidence, self-efficacy, and service use to demonstrate impact and return on investment.

Benefits of RFW

For participants, the programme helps build confidence, resilience, and self-efficacy, while strengthening daily routines and coping strategies. It reduces anxiety and emotional distress and provides meaningful peer support and connection. Participants also gain practical, personalised tools that can be applied immediately in everyday life.

For organisations, RFW offers a clear, structured prevention pathway that helps reduce GP appointments, support-worker input, and crisis episodes. It is a scalable model supported by quality assurance, which delivers a demonstrable return on investment through validated outcomes.

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5. Evidence & Outcomes

Evaluation data (2024–2025):

Measure	Average Change	Impact
WEMWBS	+8	Higher emotional wellbeing and optimism
OSA (Qualitative)	–	Increased independence and self-efficacy
ONS4	+2 / −3	Greater life satisfaction; reduced anxiety
MyCAW	−1.5	Lower distress regarding personal concerns

Qualitative measures

RFW also uses **visual tools** to gather qualitative feedback, offering a simple, human way for participants to express emotional change and personal progress. Alongside quantitative measures, these visuals enable people to share how they feel without needing complex language, making them especially valuable for those who find written feedback difficult. They **highlight individuality and diverse experience**, showing where someone feels they started and where they are now.

Professional Feedback

- *"It's interesting for my professional development, provides companionship, and enhances my level of expertise."*
- *"If only this existed earlier!"*

Participant Feedback

- *"It's given me the framework to rebuild my life."*
- *"Having this group to attend has been a lifeline, I can' thank you enough"*
- *"It's got such power to move people forwards."*
- *"This is different from other mental health courses – I felt safe and cared for."*

Participant Outcomes

As a result of attendance at Routines for Wellbeing, individuals made a **wide variety of meaningful lifestyle changes**, including beginning to attend community events and group walks after long periods of being housebound; enrolling in an art course and taking up regular volunteering; visiting a brother's grave after many years; returning to swimming for the first time in decades; establishing daily walking routines; moving out of temporary accommodation; and arranging a social worker review and house clearance.

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A rap for RFW – written by a participant

A new routine for a week of five,
Turned up then I had to leave,
Missed about boundaries,
As I felt not thrive.

Routines for Wellbeing,
Week two I'm back now ready,
Self-care and goals in pants
The benefits now I'm seeing.

In between ups and downs,
Recovering and rest
Getting back on life's track
Gentle smiles instead of frowns.

I enjoy the group as we go,
New words, experiences,
Positive impact,
Understanding we know.
.
To the what's up next,
Will be just the sessions,
Of interest, good and all connect,
More fun than plain text.

I seem to write when inspired,
Something deep, good or bad,
So, this is a good sign,
Of results desired.

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6. Cost Effectiveness & ROI

Typical NHS savings:

- **£2,200–£2,300 per participant per year**
- **£26,000+ per 12-person cohort**

Example – "Alex" (fictional case)

Service	Before RFW	After RFW	Estimated Savings
GP visits	18/yr	6/yr	£360–£480
CMHT contact	Weekly	Fortnightly	£600
Support worker	2×/week	1×/week	£750
Crisis episodes	1/yr	0/yr	£500

Total annual savings: £2,200–£2,300 per participant

These outcomes relate to participants' engagement with structured wellbeing support and are illustrative of programme impact, not indicative of clinical intervention.

Extensive NHS policy, NICE guidance, and national implementation data confirm that supported self-management and wellbeing interventions address core unmet needs, reduce unnecessary demand, and align with personalised care frameworks.

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7. Licensing Model

Licensing ensures **safe, consistent, evidence-based delivery** while building internal capacity and competence.

Having two licensees instead of one enables faster skill development, the capacity to **run more cohorts, improved quality through co-delivery, built-in mutual support and safer practice, greater resilience during staff absence, and smoother logistics**—especially when an HCA or support worker can act as the second person in delivery.

What Licensing Provides

- Practitioner training and competency development*
- **All session plans & participant materials**
- Monthly support and QA
- **Programme outcome tools** and evaluation frameworks
- Updates throughout the licence year
- **Unlimited cohort delivery for 12 months**
- Clinically led, nationally scalable model
- Periodic evaluation summaries for commissioners

**Competency refers to understanding and delivering RFW content and processes within a professional, educational context—not clinical skills or certification.*

Funding options

RFW can be funded through multiple commissioning and grant routes, including **Prevention Programmes, Mental Health Transformation funds, Primary Care Networks (PCNs) and Social Prescribing budgets, Public Health initiatives, Innovation or pilot funding, and Voluntary, Community, and Social Enterprise (VCSE) partnerships.** Commissioners can integrate RFW into existing pathways to enhance wellbeing, reduce service demand, and deliver measurable outcomes. Flexible licensing allows cost-effective, scalable delivery with trained practitioners, while ROI is demonstrated through reduced GP visits, crisis interventions, and improved participant wellbeing. Funding decisions can align with local priorities for preventative mental health and community resilience.

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8. Practitioner Training

Training Structure

A two-day programme delivered over two weeks, focusing on practical skills and real-world implementation.

Training Focus

- Facilitating group sessions and managing dynamics
- Collaborative working
- Problem-solving and adapting within guidelines
- Recruitment, risk management, and cohort preparation
- Early cohort planning

Eligible Practitioners

- Occupational Therapists
- Allied Health Professionals (3+ years' experience)
- Mental health practitioners with group work skills - registered with HCPC *or deemed appropriate qualified practitioners by health trust e.g. a member of **Additional Roles Reimbursement Scheme (ARRS) workforce**

Training Outcomes

Practitioners will:

- Deliver RFW confidently and competently
- Understand setup, delivery, and evaluation workflows
- Access ongoing supervision and peer support

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Remaining 2026 Dates (Provisional)

COHORT 2

Dates provisional and subject to change at the provider's discretion.

Discovery Calls

- Monday 13th April — 11:45–12:30
- Monday 4th May — 11:45–12:30
- Wednesday 8th June — 15:30–16:15

Closing Date for Applications: 10th June
Closing Date for Recruitment & Onboarding: 17th June

Session 1 — Wednesday 1st July (09:00-16:30)

Session 2 — Monday 6th July (09:00-16:30)

Ongoing Support Calls

- First Monday of each month, 11:00–12:30

Day 1 — *(sample timetable)*

- Onboarding: 9:00–10:00
- Sessions 0–2: 10:00–13:00 (break 11:00–11:20)
- Delivering Your Sessions – Discussion: 14:00–15:30
- Setting Up Further Support: 15:30–16:00
- Q&A: 16:00–16:30

Day 2 *(sample timetable)*

- Sessions 3–4: 9:00–11:00
- Delivering Your Sessions – Completion: 11:20–13:00
- Sessions 5–6 + What's Next: 14:00–16:00
- Q&A: 16:00–16:30

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COHORT 3

Dates provisional and subject to change at the provider's discretion.

Discovery Calls

- Wednesday 2nd September — 15:30–16:15
- Monday 5th October — 11:45–12:30
- Monday 26th October — 11:45–12:30

Closing Date for Applications: 14th October
Closing Date for Recruitment & Onboarding: 21st October

Session 1 — Wednesday 4th November (09:00-4:30)

Session 2 — Monday 9th November (09:00-4:30)

Ongoing Support Calls

- First Monday of each month, 11:00–12:30

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9. Implementation & Operational Support

Time Commitment

Around **2.5 hours per week**, plus admin and evaluation (total ~3.5 hours/week per cohort). Managerial/clinical supervision should be arranged separately.

Support Provided

- Step-by-step implementation pathway
- Risk management guidance
- Recruitment support
- Integration advice for Social Prescribing/Multi-disciplinary team (MDT) pathways
- Evaluation framework
- Monthly peer support sessions
- Organisational guidance for smooth cohort setup

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10. Licensing FAQs

Who can participate?
RFW is designed for adults who would benefit from support with wellbeing and self-management. It is not suitable for individuals in acute crisis or experiencing primary psychosis.

What is the cohort size?
Each group is designed for 6 to 14 participants to ensure a supportive, interactive environment where everyone can engage fully.

Can multiple workshops be run?
Yes. Licence holders can deliver an unlimited number of cohorts throughout the 12-month licence period, allowing organisations to meet local demand and expand reach.

How are outcomes evaluated?
Participant outcomes are measured using validated tools including the MyCAW (Measure Yourself Concerns and Wellbeing). These measures provide reliable data on changes in wellbeing, confidence, life satisfaction, and functional self-efficacy, helping organisations demonstrate the programme's impact.

Is this a Train-the-Trainer model?
No. The focus of licensing is on competent, safe, and consistent delivery of the educational programme. We provide ongoing support throughout the year, not just initial setup. This includes regular group discussions and access to peer learning to ensure practitioners maintain high-quality delivery and continue to develop professionally.

Can volunteers assist?
Volunteers may play a supportive role if qualified health care professionals are present. All volunteer involvement must be supervised by licensed practitioners to maintain safety and quality assurance.

What is the return on investment (ROI)?
Based on typical delivery, organisations can expect to run around six cohorts per year. Each cohort generates measurable outcomes and cost savings, providing a clear return on investment in both participant wellbeing and reduced demand on health services.

Can the programme be delivered virtually?
No. The programme is designed to be delivered in person to ensure safety, engagement, and effective group dynamics.

Can the programme be adapted?
Adaptations to the content are not permitted. The licensing provides guidance on the programme as designed to ensure quality assurance and consistent delivery. Each setting is unique, and while we provide advice on running the programme effectively, modifications to the core content are not allowed.

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Are ongoing updates and support provided?
Yes. Licence holders receive regular updates throughout the licence year. This goes beyond simple content updates: it includes guidance on best practice, learning from other licensed practitioners, and practical advice on delivery. These opportunities contribute to continuing professional development (CPD), help build practitioner competency, and ensure alignment with best practice across the UK.

Do participants need to attend every session?
No. The programme is designed so that each session can stand alone, and participants can still benefit even if they do not attend every session. However, we recommend attending Session 0 and/or Session 1 to build confidence and complete registration. After that, attending a minimum of two additional sessions is advised to maximise understanding and application of the course material.

Are the costs of training and resources included in the pack?
No. You are expected to provide your own workshop materials. Each participant will have their own pack, provided in PDF format, which you can print and co-brand with your own health trust logo. Our pack will display our logo at the top, and you can add your logo at the bottom with the text "delivers in conjunction with…".

Will the programme content change over time?
Yes. The programme evolves based on learning, new evidence, and real-world experience. Updates and refinements are incorporated to improve effectiveness, respond to emerging needs, and share best practice. This is part of a twelve-month development and embedding cycle, ensuring that knowledge is refreshed, learning is embedded, and delivery continues to improve.

Why is the licence agreement important?
The licence agreement protects participants and licensees by maintaining high standards of delivery. It ensures that the programme is delivered consistently and effectively across cohorts. By following the programme as laid out, licensees guarantee that all participants receive the full, evidence-based benefits of RFW while safeguarding programme quality and integrity.

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11. About Vital Adaptation

Vital Adaptation delivers **holistic, evidence-based wellbeing programmes** grounded in occupational therapy, behaviour change, and compassionate practice. Our mission is to strengthen participation, resilience, and community connection through practical, scalable interventions that make a real difference in people's lives.

What We Do

We **support individuals, carers, organisations, and health professionals** to overcome barriers and thrive in daily life. Our work focuses on:

- Helping people participate fully, connect with others, and live meaningful lives
- Removing obstacles to everyday activities and engagement
- Providing practical, evidence-based strategies for self-management and wellbeing
- Supporting both individuals and organisations to implement sustainable, high-quality programmes

Specialisms

Vital Adaptation works **with health trusts, care providers, and community organisations** to **develop innovative programmes that address complex health and social needs**. Our expertise includes:

- Supporting people with **long-term physical and mental health conditions**
- Delivering interventions for **mental health and cognitive challenges**
- Promoting **inclusion and accessibility** for minority or underserved groups
- **Integrating services** across health and social care pathways

Another example of our innovative approach is the **Wellbeing Ceilidh**, a programme that combines music, movement, and social engagement to improve mental and physical wellbeing. This programme complements our wider suite of interventions, helping participants build confidence, resilience, and social connection in a fun and culturally engaging way.

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12. About the Founder – Dr Joanna Byers

Dr Joanna Byers is **a dual-qualified medical doctor and occupational therapist** with over 15 years of experience across NHS and international healthcare settings. She specialises in designing and implementing **participation-focused health programmes**, improving service delivery, and integrating community wellbeing initiatives with **practical self-management interventions**.

Joanna has extensive expertise in **developing innovative approaches** to support wellbeing in the UK, and works closely with health trusts, care providers, and community organisations to create **high-quality, evidence-based programmes** that enhance participation, resilience, and self-management skills.

Her work spans building networks of integrated services, leading group interventions, and embedding cost-effective, outcome-focused approaches into health and social care systems. Through programmes like RFW, Joanna applies her clinical insight and occupational therapy principles to create **practical, sustainable solutions** that empower individuals and strengthen communities.

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13. Appendices

Appendix A: Key References for Policy, Guidance & National Implementation

Source / Organisation	Relevance to Self-Management, Wellbeing Courses, Social Prescribing & Personalised Care
NHS England – "Comprehensive Model of Personalised Care" / "Universal Personalised Care"	Defines the national model for personalised care, including *Supported Self-Management* alongside shared decision-making, social prescribing and personal health budgets. Establishes self-management and wellbeing support as core components of mainstream NHS care.
NHS England – "Social Prescribing" (web guidance) & PCN Link Worker National Rollout	Confirms that *Social Prescribing & Community-Based Support* is one of the six pillars of personalised care. Provides national legitimacy for non-medical, community-led wellbeing and self-management courses as part of routine care for long-term conditions, mental health and social needs.
NICE Guideline NG56: "Multimorbidity: Clinical Assessment and Management"	Recommends person-centred care plans for people with multiple long-term conditions, emphasising treatment burden, quality of life, individual preferences, and the need for self-management support. Encourages holistic, integrated care over disease-specific pathways.
NICE NG56 – Rationale & Context (Multimorbidity)	Highlights the high burden of uncoordinated care for people with multimorbidity (polypharmacy, multiple appointments, increased adverse events). Reinforces the need for coordinated self-management and wellbeing support as essential rather than optional.
National Social Prescribing Data (2019–2023)	Evidence shows 9.4 million GP consultations involving social prescribing over four years, 5.5 million referrals, and 1.3 million people referred in 2023 alone. Demonstrates that social prescribing — including wellbeing/self-management interventions — is being delivered at significant scale across England.
Population-Level Evaluation of Social	Shows that adding one full-time link worker per 50,000 population is associated with increased confidence in

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Prescribing Link Workers (2023)	managing long-term conditions (≈47,000 people) and improved GP experience (≈132,000 people). Provides empirical evidence that embedding link workers strengthens self-management capability and reduces pressure on primary care.
NHS Long Term Plan (2019) – Commitment to Personalised Care	Commits NHS England to a national rollout of personalised care, embedding social prescribing and supported self-management across all Primary Care Networks. Confirms that community-based wellbeing courses are a central, strategic element of sustainable care for long-term conditions, mental health and population wellbeing.

Appendix B: Programme Outcome Measures - example

MyCAW – Measure Yourself Concerns and Wellbeing

Purpose

A patient-centred outcome measure capturing the concerns that matter most to each participant and the impact of the intervention on these concerns.

How It Works

- Participants identify 1–2 personal concerns.
- Each concern is rated 0–6 (higher = greater concern/distress).
- A general wellbeing score is also recorded.
- At follow-up, concerns are re-rated to measure change.

Scoring

- Change = Baseline − Follow-up
- Negative change (e.g., −1.5) = improvement/reduced distress
- Positive change = worsening concern

Why It's Useful

- Highly individualised and meaningful to participants.
- Sensitive to small changes in wellbeing.
- Complements standardised measures by highlighting personal progress.

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