



Routines for Wellbeing (RFW): Commissioner summary

OVERVIEW

Routines for Wellbeing is a licensed, evidence-led 6-week group prevention programme designed by a doctor-turned-occupational therapist to help adults who fall through the gaps rebuild routine, confidence, and self-management. It is built for NHS and primary care teams that want a structured alternative to repeated short clinical episodes and loose signposting.

Credibility

Dr Joanna Byers is a dual-qualified medical doctor and occupational therapist with 15+ years across NHS and international healthcare. She has already designed and delivered Routines for Wellbeing across 5 cohorts in 3 Cambridge GP practices and facilitates public health and behavioral change teaching at University of Cambridge. She brings a rare mix of clinical credibility, service design, and practical behaviour-change experience.

Why RFW matters

Brief clinical episodes and medication alone do not rebuild daily functioning. RFW offers a practical group pathway that helps people regain routine, confidence, peer support, and participation, using existing primary care and community workforce.

It is delivered by existing workforce, including OTs, AHPs, social prescribers, or GPs, using around 3.5 hours per week of practitioner time for a 6 to 12 person cohort. The programme is designed to sit between primary care and community support, and aligns with NHS priorities for personalised care, prevention, social prescribing, and supported self-management, and is designed to deliver scalable, system-level impact.

Financial case modelled; Licence pricing

A cohort can generate around a £26,000 per year in primary care capacity value, with an estimated return of £3.90 to £11.50 per £1 invested depending on group size. These savings are modelled from estimated reductions in non-medical GP contacts and will be validated locally during a pilot using practice-level utilisation data alongside validated patient outcomes.

- Single practitioner, £4,595, unlimited cohorts for 12 months
- Two-practitioner team, £7,000, unlimited cohorts for 12 months

This is not signposting. It is a structured, outcome-driven protocol delivered with fidelity.



DEEPER DIVE FOR PEOPLE WHO ARE INTERESTED.

Delivery model

Routines for Wellbeing (RFW) is an evidence-informed, 6-week group self-management programme for adults who fall through the gaps. It is designed to support participation, confidence, and daily routines, and to complement, never replace, existing health, care, and community services. What the organisation is buying is the full delivery system: pathway, training, fidelity, and support.

It is delivered by existing primary care or community practitioners, including OTs, AHPs, social prescribers, or GPs, working within their own organisational governance and insurance. The practitioners who will deliver the programme locally are the ones trained, so the organisation is buying both the pathway and the capability to run it with fidelity. For a one-practitioner licence, delivery requires around 3.5 hours per week per cohort, with the equivalent agreed time for a two-practitioner team depending on cohort size and licence type.

All programme delivery is undertaken by licensed practitioners working within their own organisations, governance arrangements, professional registration, safeguarding frameworks, and insurance cover. The licence allows unlimited cohorts within the 12-month period from purchase, with renewal at the end of that period. The programme is not suitable for people experiencing acute mental health crisis or primary psychosis, so clear eligibility and exclusion criteria are recommended to protect participant safety.

Session themes

- **Routine and structure**, mapping a week, spotting one realistic anchor habit, and planning for energy dips so routine becomes doable rather than idealised.
- **Confidence and self-efficacy**, setting a person-defined goal, breaking it into steps, and reviewing barriers and wins so progress feels achievable.
- **Participation and connection**, using the group to problem-solve isolation, rehearse asking for support, and build peer accountability.
- **Self-management in practice**, turning ideas into small changes that can be sustained between sessions and after the programme ends.

Evidence so far

Participant feedback has been consistently positive, for example: "Can't thank you enough, it's been a lifeline." We also see signals of sustainability, including peer-led WhatsApp support continuing beyond the end of sessions. Quantitatively, we use validated measures including ONS4 and MYCAW.



Case study

One participant came into Routines for Wellbeing with upside-down sleep, isolation, and low mood. As the main carer for her son, she was often awake through the night and sleeping in the day. Over the 6 weeks, she began to build kinder self-talk, push beyond her comfort zone, and plan small achievable actions into her day, including having a shower, getting dressed, and going out.

She described feeling better in herself, with stronger self-esteem and self-belief, and said the group helped her feel heard, more able to talk and interact with others, and more confident taking small steps forward. She also valued the peer connection, saying the group made her feel “fabulous” and that she was “winning.”

The outcome was reflected in MYCAW, with Concern 1 improving from 6 to 3, Concern 2 improving from 6 to 3, and Wellbeing improving from 6 to 2, alongside clear qualitative gains in confidence, routine, and social connection.

Implementation

A local adoption phase would train 1 to 2 practitioners, deliver 2 to 3 cohorts over 6 months, and measure outcomes plus service utilisation before and after delivery. The buying case should also state who covers the 3.5 hours per week of staff time and who holds clinical oversight after the 6 weeks ends.

Best fit buyers

PCNs, GP practices, commissioners and primary care teams that want to provide a structured, quality-assured preventative pathway rather than loose signposting.

Routines for Wellbeing offers a structured, licensed, and scalable way developed by experienced clinicians for primary care teams. It helps people who fall through the gaps rebuild routine, confidence, and self-management with clear quality assurance and local oversight.