



## CASE STUDY

# GROUP CLINICS

WELLbeing Works  
Neighbourhood Health Group  
Clinics in North Sedgemoor,  
Somerset



### 1 THE CHALLENGE



Using population health management through Somerset Eclipse prescribing data, we identified people living with heart failure who required medicines optimisation and were at high predicted risk of unplanned admission. This group was prioritised due to clinical complexity, risk, and opportunity for improved activation, wellbeing, and reduced admissions. We chose a programme of three monthly face-to-face Group Clinics combining clinical review and medicines optimisation, exercise practice, coaching, and social prescribing to deliver whole-person, community-led care closer to home.

### 2 GROUP CLINIC DESIGN



We identify and recruit participants through prescribing data and AI risk stratification. Patients are invited and directed to the programme [website](#) and [promotional video](#). Our integrated Group Clinics bring together occupational therapy and frailty ACPs, primary care, SASP coaching, and VCFSE. Patients contribute their goals and experiences and track progress using “4Ms metrics”: Movement, Mood, Motivation, and “Matters to Me”. Each session includes clinical assessment, medication optimisation, exercise practice, reflection, and behaviour change coaching. A topic board guides conversations on a variety of topics, and other issues that matter to individuals. Clinicians and SASP staff co-facilitate and support the creation of personalised care and support plan. This is stored on Somerset’s shared record system. We evaluate biometric measures, wellbeing and activation scores, track confidence, and qualitative feedback. Ongoing peer relationships are encouraged through a patient led WhatsApp group.

### 3 OUR RESULTS / TOPIC BOARD



- Getting moving
- My medicines
- My people & pets
- My hobbies & interests
- Sleep and fatigue
- Money, housing & environment
- Asking for the support I need
- Anything else that matters



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### 4 EFFICIENCY AND ACCESS



### 5 CLINICAL AND SOCIAL IMPACT



- We free up significant clinical and travel time previously spent on repetitive 1:1 reviews and multiple home visits.
- The Group Clinic enables clinicians, SASP staff, and social prescribing partners to address needs collectively in one session—efficiencies not possible in traditional appointments.
- The model improves workforce productivity and provides a flexible MDT structure.

### 6 WORKFORCE DEVELOPMENT



- Provides leadership opportunities among staff, supporting them to work at the top of their skillset.
- Strengthens relationships, trust, and psychological safety, enabling more cohesive working and accelerating integrated team development.
- Creates space to free creativity and restore joy in practice, improving engagement and professional fulfilment.
- Enables higher-quality, diffused leadership, distributing responsibility and ownership across the team.



“People [staff] have stopped seeing themselves as separate agencies and started seeing themselves as one [workforce] team.”

