

Introductory pack
2025



Sharing the Well Centre Model

Improving primary care for young people



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Welcome to the Well Centre

The Well Centre is a young person's health hub, providing bespoke, easy access to mental and physical healthcare for 11-21 year olds. Managed by general practitioners (GPs), it is a unique, innovative approach to improving the primary care offer to young people.

The Well Centre has been delivering services in South London since 2011. In recent years we have developed a new vision to expand the model and create a national network of adolescent health hubs. The Well Centre Charity was formed in 2024 to lead this process of spread and scale, helping primary care services to improve their offer to young people. This is facilitated through easy access to healthcare, counselling support, social prescribing, signposting to community activities and support from health and wellbeing practitioners.

The Well Centre approach can support Integrated Care Systems improve health outcomes for young people and provides a clear roadmap for better prevention and early intervention with this age group. It also has an important role to play in tackling health inequalities, by improving services for young people who may be finding it more difficult to access support.

This document is designed to help you decide if the Well Centre model is right for your practice/area, and to provide you with a sense of the implementation process. It introduces the important features of the model, and will help GPs, local commissioners and practice staff and partners to understand the ethos and aim of the service.

We look forward to working with you.



John Poyton OBE
Well Centre Charity CEO



Dr Stephanie Lamb
Well Centre Clinical Lead

Introducing the Well Centre model

The Well Centre model helps primary care services to support staff in order to provide dedicated and expert adolescent health services within the usual GP service delivery model. It builds a hub and spoke model to ensure young people have an equitable experience of local services and can attend in ways that suit them. The aim is that their needs are met in a holistic way that protects their future health and solves their immediate problems.

My experience with the Well Centre has been incredibly positive, and far better than other places. I really appreciate how kind the staff are. I really feel it's helped me a lot.

Young person

Each young person accessing the Well Centre for the first time gets a holistic biopsychosocial assessment ('The Teen Health Check') either with a GP or, if initially presenting with less complex needs, one of the Health and Wellbeing Practitioners (HWPs). The young person has an opportunity to discuss any concerns they may have and a plan is jointly developed to support their ongoing care.

The majority of support and engagement at the Well Centre is provided by the HWPs – they are the heart of the service. They combine the talents of youth work and engagement with additional training in counselling skills and social prescribing. They will see young people at the hub, in local schools, in local voluntary sector organisations, at other GP practices or their own homes. They liaise with parents, schools and social services where appropriate.

It's like a big light bulb's gone off – if we start engaging with your young people now, we'll be able to prevent (when they older) them having 10 different chronic diseases and obesity and all the other things that cost the healthcare system huge amounts of money.

Stakeholder

Evidence from young people, commissioners and stakeholders show that the Well Centre is a highly valued service (see resources at the end of this document)¹. A recent evaluation found improvements in ratings of wellbeing, high satisfaction rates among young people, and testimonials highlighting transformative experiences.

A key element of the success is that the service is built into existing structures, networks and services in the local community, rather than being parachuted in as a stand-alone solution.

¹ Hagell A (2024) *Developing an innovative model of holistic primary care to young people through the Well Centre: Current successes and challenges*. London: Association for Young People's Health.



The key components of the Well Centre model

The key components of the Well Centre model include the general approach, the key services, the use of particular resources such as the Teen Health Check, and the characteristics of the workforce.

The **general approach** is integrated and holistic. Young people's health issues are understood in the context of their lives, their experiences and the daily pressures they face. The response to each young person will be personalised and unique, depending on their needs and will consider physical and mental health as intertwined. The service is part of the broader landscape of provision for the age group in the local area and is well connected to social care, education and the voluntary sector.

Another crucial aspect of the general approach is that the Well Centre is an integral part of the host GP practice or network, so that governance, safeguarding and risk are all managed in exactly the same way as they are for regular GP appointments. This is important for allowing the service to see clients who may be too 'high risk' for local voluntary sector organisations. In this respect, commissioners have described the Well Centre as equivalent to a '2.5 tier' adolescent mental health service.

The key services include (a) a range of ways to visit, and (b) a range of responses or interventions. In terms of ways to visit, the current services (based in Wandsworth and Lambeth in South London) offer dedicated young people's clinics at the hub surgery (including drop-in sessions) and also at other GP practices in the

borough, specialist workshops, school visits, outreach work at youth centres and a primary care support offer to local youth offending teams and other organisations working with the age group. In addition, HWPs work with four local hospital trusts to provide services to young people with diabetes as they transition to adult services.

In terms of the service, young people may be seen in one off sessions with GPs or HWPs or may receive a series of appointments for the purposes of receiving, for example a mental health intervention. They may also be put in touch with local social prescribers and other statutory services and follow up contact made to support their engagement with these additional services.

The Well Centre workforce is led by GPs and includes a large team of Health and Wellbeing Practitioners, supported by Child And Adolescent Mental Health Services (CAMHS) professionals and service managers. There is no accredited training for the HWPs, but the coordinating GPs run internal, bespoke training for new staff including the principles of youth friendly service delivery, motivational interviewing, solution focused therapy and social prescribing. A key feature of the workforce is the strong partnerships with youth justice, schools, and local organisations.

The Teen Health Check

A key resource underpinning the work of the Well Centre is the 'Teen Health Check' (sometimes also referred to as the 'Teen Health Talk'), developed by Stephanie Lamb as a biopsychosocial health assessment for adolescents in primary care.²

The Teen Health Check shares a family resemblance to existing screening instruments for use with this age group such as the HEADSS, but unlike them is not framed primarily as a risk assessment. Instead, it has been developed as a conversation aid; a way of introducing important topics in an approachable way in order to improve communication and disclosure by adolescents.

At the Well Centre the Teen Health Check has been translated into a local EMIS template although other ways of using it would be possible, for example by developing a SystemOne template.

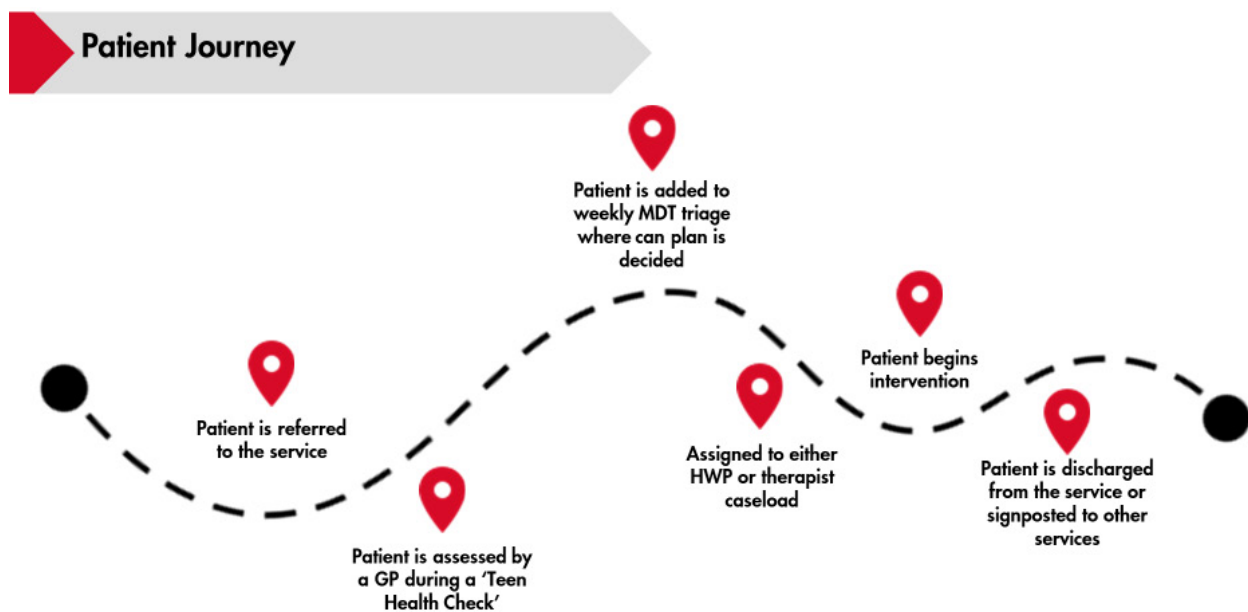
Topics covered include any significant past medical history, current medication, risk taking behaviours, sleep and mental health, the education situation, safeguarding and living arrangements.

² Hagell A (2025) Improving the primary care offer to young people: Successes and challenges in implementing the Well Centre Model. *Journal of Family and Child Health*, 2(3) 126-129.

The patient journey

The patient journey through the Well Centre service varies hugely depending on young people's needs, but we have drawn an 'average' pathway in the figure below.

The journey begins with referral. Referral to the Well Centre is intentionally very open, in that referrals can come in from other health services, social services, voluntary sector organisations or through self-referral or family contact. The principle of open access is hard wired into the service and valued by commissioners. In practice however, there inevitably has to be an element of managing throughput as an open and valued service that offers help with mental health problems for young people can easily get overwhelmed.



Once accepted the young person meets a GP for a 'Teen Health Check' which takes, on average, around 40 minutes. Some patients may have their Teen Health Check with a HWPs as previously described. The results of this assessment are brought to a weekly multidisciplinary triage meeting where a care plan is decided. This might involve one or more sessions with a GP or an in-house intervention from an HWP. The young person will be reviewed by a GP where necessary and will be discharged or referred on to other services where appropriate. People are always welcome to return at any time.



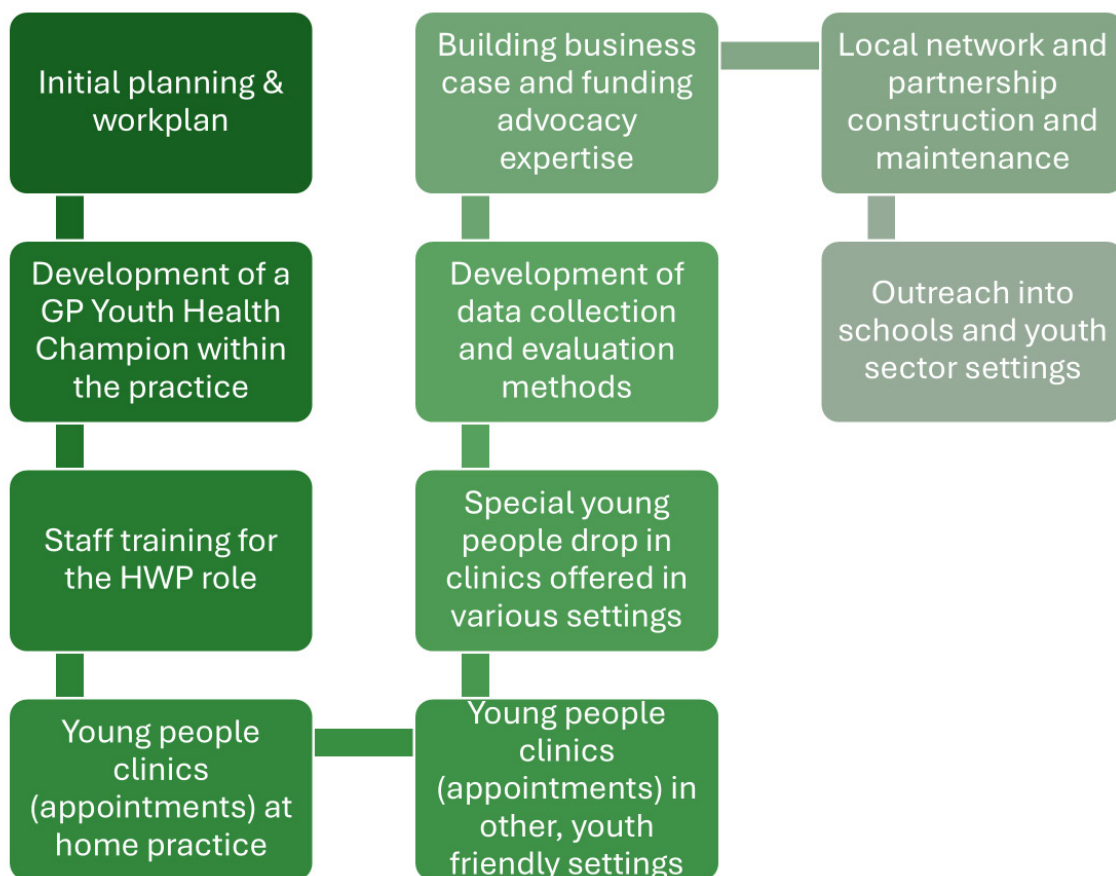
The average age of patients in the Lambeth and Wandsworth services is around 15 years old, and the most common reasons for presenting are anxiety and depression. Cases can be very complex, and young people have often failed to get help through other routes. The clinics see a significant number of young people who need support with challenges posed by neurodiversity, emotionally based school avoidance, and current or previous childhood trauma, as well as those at risk of being involved in violence.



Steps to setting up a Well Centre

If you are considering improving the health service offer to adolescents in your area the Well Centre model offers a stepped, incremental way to build up a more youth-friendly health service model. The partnership of the Well Centre clinical service and the Well Centre Charity can provide support for this process. That includes providing training, tools and resources to support implementation, help in building business cases and advocating for funding from commissioners and others. Advice is available on developing stakeholder engagement and community outreach.

The Well Centre Charity staged and modular approach to implementation of the model is set out below. Not all the steps have to be followed in this particular order, but the aim is to build up layers of expertise and confidence within the practice and to gradually introduce more youth-centred elements as the service develops. Key skills such as developing and maintaining local partnerships, incorporating data collection and evaluation, and building the business case and advocacy tools form essential building blocks along the way.



Well Centre pilot sites

The Well Centre Charity has funding from the National Lottery Community Fund to pilot spread and scale of the model over the next couple of years. This involves identifying pilot sites that would like to work with the Charity to test how best to implement the model.



Pilot sites would have to commit to adopting the Well Centre framework, to participating in training and data collection and for impact measurement, and to actively engage in co-production with young people and stakeholders. They would need to have funding available at their end to support the clinical element of the work (expected to be from local commissioners or grant funding).

The Well Centre Charity would provide initial setup guidance and training, access to a range of tools (the Teen Health Check and advice on evaluation), and ongoing mentorship and peer learning opportunities.

If your practice may be interested in being a Well Centre pilot, see the 'For more information' box at the end of this document.



Examples of well Centre client case studies³

There is a huge range of young people using the Well Centre's service, and these cases illustrate some of the variety of issues and challenges they face, and the flexible way in which the service can respond to them.

Daniella is a 14 year old young woman of mixed ethnicity. She was struggling with school attendance, and this, together with social anxiety, were the reasons for the referral from her own home GP. She was experiencing poor sleep, a stressful journey to school, worry about attainment and social stress. She was seen in a series of six virtual sessions focusing on managing anxiety, and on promoting coping strategies. The HWP also helped Daniella to improve her communication techniques as she found it hard to effectively communicate her negative emotions such as sadness and anger. In the first instance the focus was on helping Daniella get back to regular school attendance, which she successfully did. In the longer term a referral was made for an ADHD assessment so that she could be better supported during her GCSEs.

Finlay is a 14 year old white British young man, brought to the service by his mother. He was experiencing growing anger and frustration, and as a result of his frustration around responsibilities and rules at home he was disengaging from family life. He was seen for 9 face to face sessions and the HWP also spoke online to his parents to support the work being done with him in the clinic. The intervention focused on exploring his relationships with the family, helping him understand and manage his emotions. His parents were supported to provide more positive feedback. His anger significantly reduced and the whole family was positive about the outcome.

³Cases are composites of clients; details have been changed to ensure cases are not identifiable.

Ahmed is a 17 year old Somalian young man referred by his GP because of trauma relating to his asylum seeker status. His experiences had impacted him practically, physically and emotionally. As a result, he was struggling with confidence, motivation, overthinking, sleeping and social anxiety. The intervention focused on recognising and validating emotions and processing them to reduce overthinking. Fears and anxieties were acknowledged and explored, and coping strategies introduced in a safe, non-judgemental space. He was supported to bond with his grandmother, find an internship and plan for university. The Well Centre also provided some advocacy support for the practical side of the asylum seeker journey and referred Ahmed to youth clubs designed for people in his situation.



Jamila is a 18 yr old young woman of South Asian heritage. She arrived in the UK earlier in her teens to live with her grandparents following a history of familial physical and emotional abuse. She was referred to the Well Centre due to concerns of unsafe behaviour and eating disorders. In her assessment by the GP, she disclosed past sexual abuse and significant substance use. She received screening, counselling and advice in relation to safe sex and contraception, substance misuse and eating behaviours. She was then referred to the senior Well Centre therapist who diagnosed post traumatic stress disorder and she has commenced trauma-based therapy, as well as continuing to see the GP for monitoring.

Resources and support

A number of resources are available explaining the Well Centre model and assessing its impact. This includes websites, articles, reports and blogs, the current Care Quality Commission report, and a selection of videos and podcasts.

Websites

[Well Centre clinical service website](#)

[Well Centre Charity website \(for spread and scale\)](#)

Articles, reports and blogs

[‘Improving youth primary care’](#) Ann Hagell, Children and Young People Now (January 2025)

[‘Improving the primary care offer to young people: Successes and challenges in implementing the Well Centre model’](#). Ann Hagell, Journal of Family and Child Health 2(3)

[‘G524 The teen health talk – a feasibility study in the use of a biopsychosocial assessment tool for adolescents in primary care’](#), Ann Hagell, Stephanie Lamb and Ingrid Wolfe, (2020) Archives of Disease in Childhood ;**105**:A185.

[‘Caring for those who fall through the cracks’](#) Nishma Manek Pulse (2017)

[‘Developing an integrated primary health care and youth work service for young people in Lambeth: learning from the Well Centre’](#) Ann Hagell & Stephanie Lamb, Journal of Children’s Services (2016)

[‘How we set up a youth health centre for local teenagers’](#) Stephanie Lamb, Pulse (2011)

Care Quality Commission

[The Well Centre Quality Report](#) (2017, reviewed 2023)

Videos and podcasts

[The Well Centre and Teen Health Checks](#) (video)

[Social prescribing for children and young people: The Well Centre](#) (video)

[What to expect at the Well Centre](#) (video)

[The Teen Health Talk](#) (animation)

[Supporting young people’s mental health](#) (podcast by Stephanie Lamb)



Thank you for your interest in the work of the Well Centre

To find out more about how to build the Well Centre approach into your own primary care service, please contact John Poyton, CEO, Well Centre Charity john.poyton@wellcentrecharity.org

Visit the Well Centre Charity's website wellcentrecharity.org.uk



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