



CLAHRCBITE

Brokering Innovation Through Evidence



September 2019

Implementation of GENIE: a Social Network Mapping and Social Prescribing Intervention in Lancaster and Morecambe

Background

What we do, and who we spend our time with, has a fundamental impact on our health and wellbeing (Marmot 2010). Social prescribing, or linking people with activities within their communities, can promote health and wellbeing and the NHS Long Term Plan has committed to its scale up (NHS England 2019). However there are large gaps in the evidence base of the various models of social prescribing programmes (Bickerdike et al. 2017).

One intervention, Generating Engagement in Network Involvement (GENIE), was developed by Wessex CLARHC and involves a facilitator working with a service user to map their social network using an online tool, and linking with individualised local community resources. It was found to improve quality of life and blood pressure (Kennedy et al. 2016).

How did we involve people?

Meetings were held with a range of local stakeholders across health and social care, as well as the third sector. A public advisor was also recruited for the project.

Opinions were gathered in order to complete the CFIR readiness for change assessment, and to evaluate whether the GENIE intervention would be possible to implement locally.

What was the aim of the project?

The aim of my project was to implement GENIE, a social prescribing intervention, within the Morecambe Bay area.

What did we do?

In order to assess the readiness for change to implement GENIE within Morecambe Bay an assessment was completed using the Consolidated Framework for Implementation Research (CFIR) (Damschroder et al. 2009).

However it was not possible to implement GENIE within the region.

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What we found and what does this mean?

We found that social prescribing generally was very well supported by stakeholders and national policy which was a key facilitator for change.

However there were barriers due to governance complexity – social prescribing interventions cross organisational boundaries including health & social care which can create challenges surrounding who the decision makers are for implementing new innovations.

Additionally commissioning uncertainty & short termism made it challenging for organisations to consider committing to new interventions.

A key challenge in terms of implementing GENIE was that new interventions and technological innovations have been developed since its creation. Technology appears to be developing faster than the evidence base for digital solutions to support social prescribing.

It was not possible to implement GENIE within the area. However changes are being made to social prescribing delivery locally which provides key opportunities for robust evaluation to add to the growing evidence base for approaches to social prescribing.

University Hospitals 
of Morecambe Bay
NHS Foundation Trust

Lancaster 
University

Bay Health & Care Partners 
delivering

What next?

We plan to conduct a retrospective evaluation of the implementation of GENIE within a different CLAHRC region to investigate the factors which can facilitate the implementation of a social prescribing intervention.

Additionally it is hoped that it will be possible to conduct a robust evaluation of social prescribing changes within the region moving forwards.

What is NIHR CLAHRC / ARC North West Coast?

The Applied Research Collaboration North West Coast (ARC NWC) superceded CLAHRC NWC in September 2019. It is a partnership between universities, NHS, public, etc. Its mission is to undertake applied research to improve public health, wellbeing, quality of care & reduce health inequalities across the North West Coast region.

<https://arc-nwc.nihr.ac.uk/>