Genie

Importance:

By linking users to social care networks, GENIE creates connections and unlocks new resources and activities to manage long-term conditions and allow users to self manage their care while reducing use of unnecessary costly services; thus it generates savings and improves health and independence. Genie has been proven to improve health outcomes and quality of life for conditions including high blood pressure, COPD, diabetes, kidney disease and mental health[2324]. It also improves community collective efficacy not just that of the individual[25].

Innovation:

A digital platform to link people, especially those with long-term care conditions, with health and wellbeing activities in their community to fight loneliness and improve health outcomes and the ability to self manage care.

What is it:

It is a digital platform that was developed by social care experts using peer-reviewed research as its basis. It works on three levels.

1) It creates network maps to prompt reflexive engagement of individuals with the nature of their current network.

2) It identifies gaps, needs and preferences for social support and engagement.

3) It navigates to on-line and off-line resources tailored to user preferences, personal circumstances, network structure, and negotiation of network involvement.

Peer-reviewed research

Creates network maps
to prompt reflexive engagement

Genie

How it creates impact:

GENIE generates user involvement, engagement, and connections with existing and new social network members. It draws on both online and offline resources. It aims to improve people's connections and access to a range of untapped resources and activities useful for managing a long-term condition. Through new contacts and thinking differently about how to interact with existing network members, individuals can improve their capacity to self-manage. The intervention has the potential to reduce inappropriate use of costly services where they are of limited use in providing support capacity to navigate and negotiate relationships and resources.

GENIE helps to maximise individual and network engagement; build individual awareness of network structure and sources of support; and enhance people's capacity to navigate and negotiate relationships and resources.

Admin Management:

Has been implemented in many different communities in the UK successfully including Southampton, Hampshire, Liverpool and Portsmouth. It has seen use in Canada and Australia as well. It has reduced the administrative burden in these communities by allowing patients the ability to self care through this platform. It also integrates with the existing directory of service. Depending on the facilitation model chosen, there is potentially some admin staff needed in facilitating the initial use of the platform but volunteers have also been trained successfully.

Costs:

In two randomised control trials, GENIE demonstrated NHS savings of between £170 and £400 per user of GENIE. These are mainly derived from decreased use of NHS services such as hospital stays, A&E and GP appointments (Reeves et al, 2014; Blakeman et al. 2015, Welch et al. 2020).

Patient Benefit:

Evaluations have been conducted on GENIE's impact on people with COPD and diabetes. These studies have demonstrated a positive impact in terms of health and quality of life, diet, and social engagement. This impact is driven by patients linking to resources in order to improve health outcomes.

Provider/Carer Benefit:

GENIE reduces the administrative time service providers spend on preparing to meet patients, allowing them more contact time with users (Kennedy et al. 2016, Vassilev et al. 2019, James et al. 2020). It links providers to potential patients with no cost to them as well as lowers the burden on providers as there is less need for resource intensive interventions.

[23] Welch, L., Orlando, R., Lin, S.X. et al. Findings from a pilot randomised trial of a social network self-management intervention in COPD. BMC Pulm Med 20, 162 (2020).

[24] Bloom, Ilse, Welch, Lindsay, Vassilev, Ivaylo, Rogers, Anne, Jameson, Karen, Cooper, Cyrus, Robinson, Sian and Baird, Janis (2020)Findings from an exploration of a social network intervention to promote diet quality and health behaviours in adults with COPD: a feasibility study. Pilot and Feasibility Studies, 6 (1), [15].

[25] Vassilev I, Rogers A, Kennedy A, Oatley C, James E. Identifying the processes of change and engagement from using a social network intervention for people with long-term conditions. A qualitative study. Health Expect. 2019 Apr;22(2):173-182.