

Annual Lecture Webinar

00:00:03:17	Creating age friendly housing and communities together
00:00:06:21	<p>SUE KAY:</p> <p>Thank you everybody for joining us. A very warm welcome to you all. For this, a replacement along with a series of recorded lectures that we are going to be releasing over the next few weeks. For our long planned and very much look forward to, if only by us, and your lectures.</p>
00:00:23:01	<p>We are really disappointed that we are not meeting in person, although as fate would have it, of course, we would have been able to, just too late to rearrange a whole in-person event again, once the strikes were announced as cancelled. And at some point this year it will be lovely to share a convivial drink with you.</p>
00:00:43:15	<p>We very much hope to be able to do that later in the year with our Early Career Researchers Network.</p>
00:00:49:22	<p>But we have not been able to do this for the last three years as we said, during the Covid years, so we did not want to, yet again, miss the opportunity to share with you the experiences, stories and outcomes of the fantastic work that has been continuing, in spite of the very many challenges of that time.</p>
00:01:09:01	<p>Ollie, could we move to the second slide please?</p>
00:01:12:17	SECOND SLIDE
00:01:14:05	<p>SUE KAY:</p> <p>I just wanted to take the opportunity to take a step back to the Autumn of 2020 when we launched our new look, a new strategic framework and our five year funding priorities.</p>

00:01:25:15	Our starting point for our new strategic priorities was to look back at our charitable objectives which are around research, understanding ageing, treating age related disease and improving health, social care and housing provision for older people.
00:01:40:22	SUE KAY (Cont): But that is quite a big ask. So we set about articulating a more focused but still fairly flexible set of things. More importantly, I think, we agreed to set out some principles which we would try to incorporate in all that we do. And by doing that to make our contribution to influencing the systemic change that is needed -- and I am going to come back to that later.
00:02:03:16	Can I have the third slide, please, Ollie?
00:02:06:19	THIRD SLIDE
00:02:08:08	One of the key themes we chose, which may seem a bit odd to some who think of us as just a medical research funder, was around creating age friendly housing and communities. Why would a historically medical research funder choose to do that?
00:02:23:22	Aside from the fact that our charitable objectives specifically mention housing, many, if not all of us here will be familiar with Professor Michael Marmot and others work on the Social Determinants of Health.
00:02:34:13	One of those social determinants is housing. Poor quality housing harms health and evidence shows that exposure to poor quality housing conditions is strongly associated with poor health, both physical and mental. The longer the exposure to poor conditions, the greater the impact. In summary, if you have suitable housing, you will have better health outcomes. It is odd, I heard somebody say this week, I do not know how factual this is, that your home's EPC rating was a better determinant of your health and your medical record.

00:03:05:09	And of course, there is the growing (budget) of work on the detrimental impact on health of social isolation and loneliness and the importance of community.
00:03:13:14	Slide four please, Ollie.
00:03:17:15	<p>SUE KAY:</p> <p>If anyone is familiar with the City University work on the case of the Whiteley Homes Trust back in 2017, you will know that it found, certainly in the case of Whiteley Village, that community living of the type provided by Whiteley, which is an Almshouse Trust, was capable of combatting the negative effects on health and social wellbeing of lower economic means and isolation. Indicating that certainly the women who live there could expect to live as long as the wealthiest quintile of the population, despite coming from the most economically deprived quintile.</p>
00:03:48:15	We have since funded a larger study Almshouse communities to see if these findings are indeed replicated. And you can hear more about that from Professor Ben Rickayzen, David Smith and Alison Benzimra of the United St. Saviour's Charity, when they launch the results of this fascinating study.
00:04:05:25	You will be able to attend that lecture in person actually on the 20 th April at City University or you can watch the recording when we circulate it as part of this lecture series.
00:04:16:18	Can we have the fifth slide please, Ollie?
00:04:18:21	

00:04:21:02	<p>SUE KAY:</p> <p>In another recorded lecture of our series you will be able to hear from Dr Mark Hammond of Manchester Metropolitan University and Professor Andrew Clark of Salford University, who with their community partners, and there are a number of them, the Greater Manchester Combined Authority, members of the Greater Manchester Housing Providers Network, One Manchester, The Southway Housing Trust, Stockport Homes and Inspiring Communities Together amongst others, are two of the first recipients of our new style research funding awards.</p>
00:04:50:25	<p>PRESENTER (Cont):</p> <p>With community organisations as co-investigator partners, they are going to be discussing with Matthew Winn, National Advisor on Community Health for NHS England, the importance of co-production and community involvement in creating age friendly communities and living environments, the all importance designing of services looking from the other end of the telescope by actually asking the people who experience them.</p>
00:05:13:17	<p>Slide six please, Ollie.</p>
00:05:15:09	
00:05:17:16	<p>SUE KAY:</p> <p>Staying with the theme of creating strong communities and addressing social isolation, we are also due to hear from Sarah Allport, Head of Communities and Governance about our million pound intergenerational linking program which we funded jointly with the National Lottery Community Fund. Part of the #Iwill Campaign, which aims to form a habit for life in young people to volunteer and become involved in community action, this England wide program focused on linking children of primary school age with local care homes.</p>

00:05:48:10	One of our delivery partners was the fantastic My Home Life which was able to make more widely available through this program, its Care Home Friends & Neighbours network, which aims to make it easier for care homes to safely open their doors and develop relationships with their local communities, and help residents to feel that they belong.
00:06:06:21	What we were not to know when we formalised that partnership was that by the time you were ready to go live, the country would be locked down, and that care homes would not be opening their doors.
00:06:16:11	The teams rapidly pivoted their plans and the delivery methods that they were planning to great success, however. And I am going to be making the recording of that end of program celebration event which they held online at the end of last month, available with the other lecture releases so that you can hear more from them and from Sarah there.
00:06:33:17	SUE KAY (Cont): We are indebted to our delivery partners My Home Life and the linking network for their energy, their enthusiasm and their resilience most of all I think throughout this project, which during its three years engaged over 400 young people with 200 elder people in care homes across England. In Bradford alone the engagement has grown from 10 sites to 44 now.
00:06:57:07	Slide 7, please.
00:06:58:23	SLIDE 7
00:07:00:16	SUE KAY: I mentioned earlier that as well as setting out some key themes for our focus, we also set out some principles we want to see running through all of our work. Three of these are: Involvement and engagement with users; Equity diversity and inclusion; and multi-disciplinarity. And I hope you will be able to see these running through all the work that you're going to be hearing about.
00:07:21:19	Slide 8, please.
00:07:23:09	SLIDE 8

00:07:26:06	<p>SUE KAY:</p> <p>As someone who spent two ... Well actually a long time working with engineers, I instinctively knew we needed to take a whole system approach if we were going to play our part in making change. But as a relatively small cog it can sometimes be difficult to see the change you are making. So our fourth principle is around making connections and convening networks. We want to make our contribution to the future where, if all of the services and providers who held a piece of the jigsaw puzzle can come together and collaborate, involving and engage in those who draw on the services, between us we can create the power to make change.</p>
00:08:01:23	<p>And we have some news to share with you later on a topic of collaboration and creating network, so please stay with us.</p>
00:08:08:22	<p>A further contribution we felt we could make which would have the potential for substantial long term impact was in equipping and supporting others to make change, and creating and sustaining capacity and research and evidence building.</p>
00:08:21:25	<p>SUE KAY (Cont):</p> <p>That is why we are keen to support community organisations in developing resilience and supplying evidence of positive scalable change. Again, we have an important announcement about that later, and we want to continue to fund early career researchers through our doctoral and post-doctoral fellowships, in partnership with other funders and with universities who have made a strategic commitment to age related research.</p>
00:08:44:22	<p>And on that point we also know that not everyone who embarks on an academic research career will be able to continue with one. And that's why we want to highlight and provide opportunities where we can support alternative research career paths, so that more of this talent can find its way into commercial product development, policy making, entrepreneurship and service development and delivering.</p>
00:09:06:07	<p>Slide 9 please, Ollie.</p>
00:09:07:24	<p>SLIDE 9</p>

00:09:10:19	<p>SUE KAY:</p> <p>One example of this is that as part of our relatively new agreed impact investment policy which sets out how we intend to make our endowment work harder for us which we published in the Autumn of '21. We've made our first investment in a mission-led precede venture capital fund called Zinc. Zinc exist to build and scale new ways to solve some of our most important societal problems by empowering talented and motivated people to redirect their careers and focus on creating solutions to these problems.</p>
00:09:41:12	<p>And one of the key constituencies that they are looking to attract are the academic and clinical community. One of its key missions being improving the quality of later life. And so we are really delighted that Zinc's chief scientist Dr Rachel Cary has agreed to join us to discuss why we are taking this unique approach and about some of their challenges and successes.</p>
00:10:02:00	<p>SUE KAY (Cont):</p> <p>Again, we'll be circulating the link to her recording in April.</p>
00:10:06:21	<p>So that's a rather breathless run through the thinking behind our strategic framework for this plan period. A few examples of some of the work that our superb ward, holders and partners have been up to and what you can expect to hear in our forthcoming lecture series.</p>
00:10:20:22	<p>We really do urge you to log on to him or our speakers about those things as we release their lectures of the coming weeks.</p>
00:10:28:14	<p>But now I want to turn to the first of those sessions and to give you a bit of background. If you wouldn't mind turning your cameras on now, please, and David Pearson and Roy Sandbach and our Chair, Alison Petch, who are going to be joining me for this session.</p>
00:10:44:16	<p>Slide 10 please, Ollie.</p>
00:10:47:18	<p>SLIDE 10</p>

<p>00:10:50:03</p>	<p>SUE KAY:</p> <p>So in the run-up to launching our strategic framework, and partly as a way to provide some context for it, we funded two major programs of work which departed somewhat from our customary way of working -- the Commission on the Role of Housing in the Future of Care and Support and the Technology for an Ageing Population Panel for Innovation, or TAPPI. In both of these pieces of work we wanted to take a top down and a bottom up approach to influencing the system. That is, to convene multidisciplinary, multiprofessional groups, informed by service users to pull together research and evidence to bring to the attention of policy makers.</p>
<p>00:11:26:13</p>	<p>But importantly, to also provide some resources at the locality level to enable communities to just get on with making change; piloting and testing innovations and ideas, which cannot only directly benefit the localities but to also serve to highlight successful and scalable ideas to policy makers and influence other funders to get involved.</p>
<p>00:11:46:22</p>	<p>SUE KAY (Cont):</p> <p>We also pointed delivery partners to provide us with the deep sectoral knowledge and communications and policy influencing expertise that we needed. For the Commission work this was the Social Care Institute for Excellence. And for TAPPI, the Housing Learning and Improvement network who are building on the approach that they developed in developing the happy principles which were about housing for an ageing population.</p>
<p>00:12:10:00</p>	<p>The Phase 2 of the TAPPI program we brought on board the fabulous TEC Services Association, the industry advisory body for TEC Enabled Care in the UK. And here I want to pay tribute to SCIE's Rebecca Luff, Kathryn Smith, Paul Burstow and a range of others who've worked so hard to bring the work of the Commission and TAPPI to the attention of the revolving doors and ministers in the relevant departments.</p>

00:12:39:03	We saw all of that hard work actually reflected in the social care white paper, people at the Heart of Care, and I am sure we will in the taskforce on older people's housing which we are told is due to be announced quite shortly now.
00:12:52:17	I would also like to thank Jeremy Porteus and his team at Housing LIN for their work and contributions to both TAPPI and the Commission, and particularly to Lois Beech in the delivery of the TAPPI1 report.
00:13:04:23	That report from Phase 1 of the TAPPI program was published in October '21 and proposed a set of 10 TAPPI principles to underpin a framework for commissioning, procurement and product and service development, and these are now being tested in six locality demonstrated sites in Phase 2 of the programme.
00:13:24:11	While on the face of it, these two programs might seem to focus on quite different things -- one on bricks and mortar, one on technology. In fact, they are really interconnected. Both start from the premise of redesigning and rethinking how we prepare a population that is ageing and giving the population choice, independence and ultimately healthier outcomes.
00:13:44:13	SUE KAY (Cont): You can see the full reports and the information and resources from both programs of work on the Housing LIN and SKIE websites and we have posted links to these on the 'new events' section of our website which is now live.
00:13:57:07	I am now going to pause. That is quite enough of me because I want to introduce my three guests here today. We have with us our Chair, Professor Alison Petch, Chair of DMT Board and she says she has now retired from paid work but always seems to be hugely busy with her interest and support of a number of organisations working to improve quality of life for older people. Her research interest during her career have centred around the balance of care and support, across community and institutional settings, and in partnership working across housing, health and care.

00:14:36:06	We also have with us Professor Roy Sandbach, formerly Director of the National Innovation Centre for Ageing at Newcastle University where he remains a visiting Professor, as indeed he is at Cranfield and Central St Martins. He is Vice Chair of Sunderland's Ageing Well Board. Roy spent 31 years and Procter & Gamble, leading innovation programs across the world, and is now, we are very fortunate to have him chairing our TAPPI program.
00:15:06:01	I also would like to ... Do we have Dave ... Is David with us? I cannot see him on my screen. I know he was speaking ...
00:15:15:08	SIR DAVID PEARSON: Yes, I am with you. I am ...
00:15:16:22	SUE KAY: Excellent!
00:15:17:16	SIR DAVID PEARSON: I am with you. Although I am ... On my screen it says Serena Peret, but ...
00:15:22:15	SUE KAY: It does.
00:15:23:15	SIR DAVID PEARSON: ... she has ... she has lent me her computer because I am at the Royal College of Physicians.
00:15:28:14	SUE KAY: Physicians. Yeah, fantastic. I am so pleased. I know ... I am delighted you have been able to join us and thank you so much because I know you have suffered a few vicissitudes of public transport this morning. So thank you. It is great to see you.

00:15:41:18	David is Chair of TEC Quality, the sister organisation to the TSA. He is passionate about choice and control for older people who need to draw on social care and health, and about quality and effectiveness of services. He co-chaired with Paul Burstow and Professor Julienne Meyer our Commission on the Future of Housing with Care and Support. And as I say, that report was published in November, '21. He is a former director of Adult Social Care and Health, and Deputy Chief ... and was Deputy Chief Executive for Nottinghamshire County Council. He took up the role of senior lead on all social care related matters in the NHS for the Covid 19 response at the end of March 2020 and was subsequently asked to lead the Government Taskforce on Covid 19 in the Social Care sector.
00:16:32:22	So without further ado, David, could you now join us to tell us a little more about the Commission. Why you've agreed to chair it. It was after all dealing with some very knotty problems that many have tried to address and not really quite got there. So yeah, over to you to talk a bit more about ...
00:16:51:08	SIR DAVID PEARSON: Thank you very much.
00:16:51:17	SUE KAY: ... about the Commission.
00:16:52:13	SIR DAVID PEARSON: Thank you very much and I'm delighted to be here, and first of all I'd like to thank Dunhill for commissioning this piece of worth through SKIE and what a pleasure it was to Chair it.
00:17:05:25	SIR DAVID PEARSON (Cont): I think at the time that I was asked to Chair it I was in midst of Chairing the Government Taskforce on the pandemic. So I did ... My initial reaction was: I can't do this, I'm too busy. And then after about two and a half minutes careful reflection, thought: I cannot not do this, this is too important.

00:17:22:19	And the reason why I thought it was important is that as a long term Director of Adult Social Care and before that spending you know, many decades in the Health & Social Care sector, I just knew ... I just know how important it is to develop housing solutions and options for people who either by virtue of disability or increasing age need a great deal of flexibility.
00:17:51:23	And in ... in Nottinghamshire I was ... led a number of programs on developing housing options for both older people and younger adults, i.e. under 65, and we had some success, but it was a labyrinthine enormously challenging process. And in Nottinghamshire, as indeed up and down the country, I knew we just haven't made enough progress to meet the burden needs of the people of this country. Anyway, I think that was evidence by the Commission because we did some cross international comparison and found that actually we are fairly below the curve in terms of progress on this compared with other countries in the developed world.
00:18:41:18	So that really was the sort of the precursor to it. And then just my final anecdote is that I became the Chair of the Nottingham and Nottinghamshire Integrated Care System in 2016, something I did for 5 years. And I remember a clinical commission group chief executive saying: "We need to spend more time worrying about the 1.1 million beds that are in Nottingham and Nottinghamshire, rather than 2 ½ thousand beds that are in (acute) sector. Because if we did, people would have better outcomes and the system would be more effective."
00:19:19:19	So I thought that was quite a powerful comment and I thought I'd share it with you. So, if you could go to the next slide please.
00:19:25:18	SLIDE - AIMS

<p>00:19:26:13</p>	<p>SIR DAVID PEARSON:</p> <p>So the 'Aims' worked to co-produce the sector and people with lived experience. And they're co-produced with the people with lived experience is absolutely crucial, and in my view, profoundly changes our perception of things. But we had a wide cabal of people from the sector involved in the Commission group. A huge amount support for people I think which probably recognises or is a result of the things that I talked about, that people could see just how important this is, although not sufficiently addressed in both policy and implementation terms up and down the country, although people, lots of people were applying (BAD SOUND) best endeavours but making not fast enough progress.</p>
<p>00:20:09:08</p>	<p>We wanted to recommend policy changes to inform the government's thinking and a long term plan for social care, and I think partly ... I would like to think because the quality of the work was pretty decent, but also we had good timing, I think a number of our recommendations and approaches found its way into the Social Care white paper.</p>
<p>00:20:28:23</p>	<p>And we wanted to develop not only just have a vision, because I think it is ... visions are important, but we wanted to develop a road map to have some idea about some practical solutions and steps that we should be taking, both for the country and locally in order to make things ... these things happen.</p>
<p>00:20:48:22</p>	<p>And part way along, just on the practical side, part way along in the Commission we actually added a piece of work which Susan kindly championed in terms of funding it, about some of the financial implications about how to make this stack up. So we produced some pretty detailed work, which was in my experience, fairly unique, and around how the funding fits together or might fit together.</p>
<p>00:21:13:07</p>	<p>Next slide, please.</p>
<p>00:21:14:08</p>	<p>NEXT SLIDE</p>

00:21:15:24	<p>SIR DAVID PEARSON:</p> <p>So this is the ... the circle on the left shows that the, if you like, the governors, the Co-production Collective being a key part of this; Stakeholder Reference Group, our co-chairs. So there was myself, Paul Burstow and Julienne Meyer, and it has been so great to work with them, as well as the overall Commission Panel. And then a series of strands of work on the right hand side, which actually were a mixture of specific analytical tools like Population Survey and the Cost Benefit tool, to things that were much more about ... and literature evidence, were much more about tone and style, such as Appreciative Inquiry.</p>
00:22:02:10	Next slide, please.
00:22:04:01	NEXT SLIDE “A PLACE WE CAN CALL HOME”
00:22:06:11	<p>SIR DAVID PEARSON:</p> <p>So we called it “A Place We Can Call Home” and this is based on social care futures view of what Social Care and wider public services should be doing in this space. And that is ... we all want to live in a place we can ... we call home with the people and things we love in communities where we look out for one another, do all the things that matter most.</p>
00:22:30:05	<p>And sometimes we professionalise these things, or we institutionalise them in such a way either ... actually nobody really understand what we are talking about. And this is so wonderfully crisp and simple and evocative about what actually most of us want. It is just that it is not any different, it is not ... it is just that some people need more help to get those things, that is ... that is the point. And that is ... this is what we produced.</p>
00:22:58:13	Next slide, please.
00:22:59:18	NEXT SLIDE “LOW LEVELS OF UNDERSTANDING ABOUT HOUSING OPTIONS (PUBLIC SURVEY)”

00:23:02:01	<p>SIR DAVID PEARSON:</p> <p>So one of the things we discovered was that in terms of the public survey, not surprisingly, although 65 percent of those aged 55 plus have given at least some thought to their own future housing and care needs, and that 20 percent said Covid had changed how they feel about the type of housing they might need, so everybody feeling a bit more thoughtful about the future and so on, I think many people demonstrated also low levels of understanding their housing options.</p>
00:23:38:23	<p>They probably, as I suggested, are insufficient levels of housing options, but even amongst those that there are, people have a low level of understanding of them. Which just demonstrates how important effective communication and discussion about these things is. And so the other thing that this demonstrates is that people want to maintain their own independence, want to live in their own home and if we can compare the stats around Retirement Village, for example, compared with Care Home, 94 percent have heard of it but only 37 percent thought they would consider living in it. But Retirement Village obviously it is closer, it is 82 percent to 69 percent.</p>
00:24:29:23	<p>An Extra Care even more, even more closely. So I think ... I think what that demonstrates is the sort of options that people want to see. And I certainly remember, as a Director of Adults Social Care, being asked by the senior cabinet member at the time, when we were looking at extra care facilities in creating 200, he said: "But how many do we need, David?" And I said: "Probably about 2,000, not 200." Because most of the people who are in residential care would prefer to be in a more independent environment</p>

00:25:03:07	<p>SIR DAVID PEARSON (Cont):</p> <p>And that’s not to say that residential and nursing care do not have their place in the (INAUDIBLE) of provisions, but it, but shows that actually they are failing to meet people aspirations. And indeed, we probably could make their aspirations if we had the facilities. But if you consider that an extra care facility typically in this country takes over 5 years from inception to creation. And that is because we have so many different fundings streams. We have so many different governments, arrangements and organisations, it is a very complex landscape we discovered.</p>
00:25:37:20	Next slide, please.
00:25:39:14	NEXT SLIDE “A 10 YEAR ROADMAP FOR CHANGE”
00:25:42:01	<p>SIR DAVID PEARSON:</p> <p>So what our 10 year roadmap was trying frame some Immediate Priorities, Immediate Term Priorities and Long Term Priorities, recognising that it is important to start momentum and that helps with the longer term vision. If we just have a longer term vision we do not show the intermediate steps, then typically such documents get left on the shelf and do not receive actions. So we have, in the Immediate Priorities, you can see a National Police Framework building momentum for change based around vision, based around investment, rights and workforce strategy. And in terms of local action, place based housing for older people plan.</p>
00:26:29:21	<p>So my own personal view, having been involved in the movement around integrated House and Social Care in this country for a number of years is that the current ... the integrated partnerships which are part of the legislative environment of integrated care systems which are the partnership vehicle, have responsibility to provide health and care strategies. And indeed, I think that they are an opportunity for health and care systems to place housing at the centre of this and develop such approaches nationally, pulling together the various constituent or organisations.</p>

00:27:08:04	<p>SIR DAVID PEARSON (Cont):</p> <p>And then the Medium Term we listed a number of things that we thought needed to happen but were to a degree about structural issues, about changes to national planning arrangements, showcasing, campaigns. That information, advice and guidance which help people to understand their own options, and also bringing together the final point in that national action some of the funding streams by way of expanding use of the individual service funds, bringing together various strands of funding.</p>
00:27:45:08	<p>And then we cited a whole load of local actions that people can undertake. And again, in my role as the Chair of the Integrated Care System in Nottingham and Nottinghamshire, we had some initiatives on housing and care, health and care, and found that actually by investing relatively small amounts of money and developing more housing options that are more suitable for people, the return on investment for the Health Service in particular was quite significant.</p>
00:28:14:07	<p>And then finally on the Longer Term Priorities you can see about having progress reports, scaling innovation and the workforce plans. And on the workforce, I just want to mention that what we discovered was, well thought was, that actually the way in which the workforce are sensitised and understanding of the housing options and also those people helping development them was pretty critical of, we don't skill people up and give them the capacity, and this would not work.</p>
00:28:46:17	<p>Next slide, please.</p>
00:28:48:03	<p>NEXT SLIDE "A PLACE-BASED APPROACH TO HOUSING WITH CARE AND SUPPORT"</p>
00:28:50:12	<p>SIR DAVID PEARSON:</p> <p>So I wanted to emphasise a place-based approach to housing with care and support, which actually fits within the integrated care legislation guidance, because each part of integrated care systems should have place-based partnership which have a slightly smaller level and can be afforded by 42 integrated care systems in England.</p>

00:29:11:16	SIR DAVID PEARSON (Cont): And we thought that there should be some obligation on similar place-based plans, bringing together the various partnerships in a way that I have described.
00:29:23:22	Next slide, please.
00:29:25:09	NEXT SLIDE “ ADULT SOCIAL CARE WHITE PAPER
00:29:28:10	SIR DAVID PEARSON: So we also, as we said, fed into the overall National Planning around the White Paper on People at the Heart of Care, and so Susan mentioned the pending taskforce and I think I am hopeful that, that will hopefully go further by bringing together departments of states, touches the one on (commuters and levelling up) with Social Care to give this further thought.
00:30:02:24	And I think it’s only in about 2015 that first ever housing strategy was developed in terms of White Paper, that mentioned the changing needs of the population around older people and people with disabilities. And previously, White Papers on housing policies has been entirely focused on the important needs of families to create increased provision for families, but obviously what we also have is something that actually is important for the overall housing stock as well as for Health and Social Care. So we are hopeful of that.
00:30:42:01	But there was a commitment in the White Paper to, 250 million pounds worth towards 500 million of investment in this particular sector and they are still to see the fruits of that, but obviously we are hoping that will go further forward as we develop this taskforce, those people participating in it.
00:31:06:01	So, thank you very much for, for that, and I will hand back to Sue for the next ...
00:31:14:13	SUE KAY: Yeah, that’s great. Thanks, thanks so much, David. That gave us a really good sort of ... go through, because it is ... it is quite a little while ago now, but you know, these issues are still very much live and as you say, we are hoping to hear about the announcement of the taskforce.

<p>00:31:30:14</p>	<p>SUE KAY (Cont):</p> <p>So I just want to bring Roy in here so that we can sort of have a similar ... we can get everybody on the same page with regard to what we set out to do with TAPPI. Roy, can you tell us a little more about TAPPI and why you wanted to get involved?</p>
<p>00:31:47:01</p>	<p>PROFESSOR ROY SANDBACH:</p> <p>Sure. Sue. Can you ... I am assuming you can all hear me? Just the ones that are on camera? Yeah. Great. It is ... It is a joy to join you and it is great to hear from David who frankly has taught me a great deal over the past few years with respect to the way in which housing, and in my case, in the case of TAPPI technology, and care, and health, all sit in a space where they overlap a bit, not necessarily strategically and where there is huge opportunity and huge need.</p>
<p>00:32:30:18</p>	<p>So Sue, you asked the question why? Well, you know, in principle I did not really want to go and lie on a beach when I retired, that was the reason why. But more seriously, I believe that civilised society is measured on how it treats its youngest and its oldest. And our ageing population needs our help to live happier, better lives. And I found with Dunhill a sense of common cause, that is I think point number one.</p>
<p>00:33:05:07</p>	<p>And I think also you know, you get nowhere if you just try an idea. In the end you have really got to implement. And I think one of our issues in this space, and I speak by the way as a ... as someone who is arguably on the boundaries of the detail ... I am not in the weeds of working in care. I see lots of wonderfully valiant attempts to get common cause innovation tested, but I see huge gaps that exist in the context of significant step change implementation.</p>
<p>00:33:50:20</p>	<p>So that is my cards on the table. Let me just mention, there are three people that made me really want to lean forward on this, so I will call someone "S". She's 94 and she has lived in her own house for most of her life. She is not there now, but for about three or four years technology helped her to, to live in her own house and for her family to know that she was safe and secure.</p>

<p>00:34:24:21</p>	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>However, I think she was lucky. I think provision of that kind is uncertain, families are unaware and it is patchy. Then there is someone else who I will call “R” who is sort of nearly 70 and lives in the country and his children are worried about his life alone over the next 10 to 15 years. And their awareness of technology in the context of keeping him independent and living independently well is very limited.</p>
<p>00:35:06:05</p>	<p>And then I will just mention briefly someone whose initial is “G” and she lives alone. She is in her 40s and she has no children and when she gets into her 60s she is going to be one of an increasing demographic of women, without children, who will need support as they enter their old age. And it is ... I think, you know, we have got a multiple of issues to address there and I think technology can help.</p>
<p>00:35:42:21</p>	<p>Now, you know, in reality I think there are probably two massive issues. One of them is that technology provision is not a default in the context of people living in their own houses independently, and it could and it possibly should be. But in addition, and I think professional commissioning, and I mean David and other ... I have talked long and hard to many people who -- many wonderful people by the way -- who work in the public sector in this context, but in the end commissioning of technology to support people is not default.</p>
<p>00:36:18:09</p>	<p>But in addition to that there’s another issue which is that there is not a consumer market for technology to help people live happily, longer in their own house. So we have got two issues. One, is the professional commissioning and the other one is the consumer market. And honestly, TAPPI can surely help in that context.</p>
<p>00:36:37:08</p>	<p>So I am going to talk about TAPPI, to bring you up to speed with TAPPI, briefly, and then we can get into discussion. It is a pity, it is such a shame we are not all together. Anyway, so I have shared TAPPI now for a couple of years with wonderful support, huge support, from Sue and her colleagues at Dunhill, from Jeremy and Lois and the Housing LIN and obviously from TSA. And it has been a ... just a fantastic experience for me, I would not have missed it for the world.</p>
<p>00:37:10:00</p>	<p>Next chart, please.</p>

00:37:11:13	NEXT SLIDE “BACKGROUND TO TAPPI”
00:37:12:07	<p>PROFESSOR ROY SANDBACH:</p> <p>It was derived really from HAPPI which was the Housing for our Asian population report, which led to some significant frameworks for engagement in good thinking and good practice for housing. And we thought TAPPI could follow that.</p>
00:37:32:09	Next chart, please.
00:37:33:25	NEXT SLIDE “TAPPI PHASE 1 - THE INQUIRY
00:37:36:07	<p>PROFESSOR ROY SANDBACH:</p> <p>I had a wonderful panel. I cannot describe how expert they were. I will just say one thing, however, that it was brilliant to bring together people from different parts of this multi-agency issue. You know, talking through perspectives from different ... through different lenses is so important. And I should also say that it has been extremely valuable to have some perspectives from best practice across the globe and to have Ikea directly involved in the panel.</p>
00:38:14:02	They bring both corporate multinational and retail view, and design view, frankly, to the panel.
00:38:22:18	We had great expert witnesses who gave us perspectives and insights and the TAPPI report fits ... it is intended to fit and not repeat with the other Commissions which have -- in fact David’s you know, just talked us ... talked to us about the SKIE report -- it fits ... it dovetails.
00:38:48:18	Next chart.
00:38:50:05	NEXT SLIDE “TAPPI PHASE 1 - LESSONS & ACTION

<p>00:38:52:21</p>	<p>PROFESSOR ROY SANDBACH:</p> <p>Look, I've known this for the whole of my career but people are at the heart of the developing things for people. So let us just put that to one side. So in this context co-production is what people talk about now, but frankly, just having a user at the centre of conversations and in the room is so critical.</p>
<p>00:39:14:20</p>	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>We observed what you all know I suspect, that processors and systems to allow technology to be considered, siloed and collaboration it sometimes difficult. People don't have time and they don't have awareness. We also by the way, but really found that knowledge and training in this context is patchy at best, and I should ... I will give you one example. We had a wonderful conversation with occupational therapists who would like to bring technology into their hugely expert area of operation, but that they ... they felt that they did not have the kind of up to date knowledge that would allow them to advocate best practice.</p>
<p>00:40:01:18</p>	<p>We developed 10 TAPPI Principles which I will come to in a minute, which here is my wish, that they are on every desk when housing and technology for older people, and the vulnerable, are considered. Because technology is not that default, so let us get these principles on the desk. And I will say this: If we wait for top down policy to provide for this, we will be waiting a long time. If we can have a bottom of movement to establish how we use some of these principles I will talk about in a minute, for the benefit of people then we get somewhere.</p>
<p>00:40:43:21</p>	<p>We all can do that. In fact I am recruiting you all to do it.</p>
<p>00:40:46:20</p>	<p>Next chart, please.</p>
<p>00:40:48:02</p>	<p>NEXT SLIDE "10 TAPPI PRINCIPLES"</p>
<p>00:40:49:10</p>	<p>PROFESSOR ROY SANDBACH:</p> <p>These are the 10 principles from TAPPI1. I will not go through them now, but they are ... you might think they are obvious, but the fact of the matter is they are not always talked about.</p>

00:40:59:11	Next chart.
00:41:00:17	NEXT SLIDE "TAPPI PHASE 2: FROM PRINCIPLES TO DELIVERY"
00:41:02:23	<p>PROFESSOR ROY SANDBACH:</p> <p>We are moving to delivery by testing these principles in six testbeds areas. I am hugely grateful to the six testbeds for leaning forward and being prepared to have a proper dialogue about whether these things work. Innovations never work the first time and it is the same with the provision of principles.</p>
00:41:26:03	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>And as it says at the bottom, I am starting a movement for delivery of these principles across all of you. You are all on my side.</p>
00:41:33:21	Next chart, please.
00:41:35:09	NEXT SLIDE "TAPPI PHASE 2 : MAKING IT WORK"
00:41:38:09	<p>PROFESSOR ROY SANDBACH:</p> <p>TAPPI 2: Making it work in the six testbeds is funded by Dunhill and it is supported wonderfully by the TSA and Housing LIN. I could not do my job without all of them.</p>
00:41:49:09	Next slide, please.
00:41:50:06	NEXT SLIDE "TAPPI PHASE 2 : MAKING IT WORK"
00:41:51:22	<p>PROFESSOR ROY SANDBACH:</p> <p>However, we are also using a co-production capability, co-production works, to help us to gain perspectives, insights and ideas and really bring into the process end users. And I thank ... I thank them enormously for playing a part in this work. And finally, we have got Gemma Burgess at Cambridge to act as our evaluation partner. Just to sort of walk us through the learnings and make sure, frankly, that we do not just lose it, you know, at the end of a program.</p>
00:42:33:25	Next, please.
00:42:35:13	NEXT SLIDE "TAPPI PHASE 2: COULDN'T HAPPEN WITHOUT THE 6 LOCALITY 'TESTBEDS'"

00:42:37:09	<p>PROFESSOR ROY SANDBACH:</p> <p>And here are the six testbeds. Scotland, Wales and England all doing something somewhat different and I am going to encourage you to read up about that in, if you can. And we are already getting some very interesting learning. I will just, you know, direct you to some of the lessons that have been learnt from Bield in Scotland and Lynne Douglas and her team for being so proactive in working through the TAPPI principles, or some of them, in order to give us great guidance.</p>
00:43:15:03	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>This work will finish towards the end of this year. And obviously we will modify the principles.</p>
00:43:23:19	<p>Next chart, please.</p>
00:43:25:17	<p>NEXT SLIDE “TAPPI STEERING BOARD: A WEALTH OF ADVICE AND DIRECT SUPPORT”</p>
00:43:27:16	<p>PROFESSOR ROY SANDBACH:</p> <p>My big issue is ... Oh yes, I should say: I continue to have a steering board, I am not an expert but this board is hugely expert. They come from academic, they come from business, they come from experience user, they come from design backgrounds, hugely valuable to me and they are practically advising -- and the NHS by the way -- and they are practically advising the six testbeds.</p>
00:44:03:02	<p>Next chart, please.</p>
00:44:04:05	<p>NEXT SLIDE “FIND OUT MORE AT www.housinglin.org.uk/TAPPI”</p>
00:44:05:17	<p>PROFESSOR ROY SANDBACH:</p> <p>Now you know, I think we may ... Sue may want to talk about this in a minute, but we are going to get to the end of TAPPI 2 and we will have got a lot of lessons learnt, but the big ... the big win will be in significant scale application and implementation.</p>

00:44:24:17	Now my observation is that that is an issue for many pilots working in the health and care area and in the housing area and it will be no different for the application of TAPPI at scale, technology at scale for housing, either retrofitting or in the context of new housing.
00:44:46:08	Now, that implementation needs space and I know that Dunhill and myself and others on this core will be talking about how we break through the issue of doing great pilots but not getting big scale application. So more on that as we go.
00:45:07:24	SUE KAY: Absolutely.
00:45:08:10	PROFESSOR ROY SANDBACH: Now I am going to hand back to Sue now and maybe we open a conversation up now, Sue. Thanks.
00:45:13:23	SUE KAY: Absolutely. No, thanks, Roy, that was an absolute perfect point to end on because, your section on. We are going to have about 10/12 minutes now. Please, if anyone has got questions, please put them in the chat box, and while you do that, I just wanted to pick up on that last point of Roy's and put that to David.
00:45:35:12	David, there are lots of examples of some actually great improvements, despite what, you know, the media talk about, you know, everything's going to Helena Hancart. There are actually some great examples of improvements being made, a lot of the time through the new integrated care systems, not least in Wales and Scotland and in small local pockets. What is your perspective? What do you think are the barriers to achieving improvement at scale?

<p>00:46:04:21</p>	<p>SIR DAVID PEARSON:</p> <p>Thank you, Susan. So, um, I think ... I think there are some good examples in Wales and Scotland, I think there are some good examples in England. So I am thinking of North Yorkshire who have been at this for quite some time. Places like central Bedfordshire, Sunderland and some London, London boroughs. In terms of the barriers, there ... there are a lot of people in ... there are lot of organisation in this sector that have to come together to make this work.</p>
<p>00:46:41:23</p>	<p>So we've got housing providers. We've got funders. Sometimes national government, local authorities, housing providers own funding. Then they have that (INAUDIBLE), so there has to be the ability to pay for new provision over a period of time. And then I think the other issue is about having enough people who know about this ... this institute and what it can deliver. So I think we need to continue to make sure that enough people capture the vision, and enough people know.</p>
<p>00:47:20:20</p>	<p>SIR DAVID PEARSON (Cont):</p> <p>We've got to make sure that there's the right training and development for the workforce. We ... In thinking about the point that Roy made about technology and are we, are we actually utilising technology to enable this to work more effectively? Answer: Not enough. There are huge opportunities.</p>
<p>00:47:40:16</p>	<p>And then going back to the money, filthy lucre, and there's something very important about do we have enough evidence that we can display and talk about? Because the issue with the pilots is, we need something more scale in order to do that. We need consortia research around this whole thing that keep it going. I think we've got good ... there is good evidence internationally. I think we are able to get some good evidence from the Commission, but we need to keep talking about it and we need to keep having a thirst and hunger for more knowledge across this whole piece.</p>
<p>00:48:21:05</p>	<p>SUE KAY:</p> <p>Yeah, absolutely. Alison, you've been keeping an eye on the chat box. Do we have questions coming in from ...?</p>

<p>00:48:29:00</p>	<p>PROFESSOR ALISON PETCH:</p> <p>We do indeed. We have one from Ian Cassidy asking for some further elaboration on the key principle of prevention. How do you incentivize prevention, particularly in the housing services world?</p>
<p>00:48:47:08</p>	<p>SUE KAY:</p> <p>Yeah. Roy, do you want to have a go at that?</p>
<p>00:48:51:11</p>	<p>PROFESSOR ROY SANDBACH:</p> <p>Well yeah, I mean honestly, that's a great question from Ian. And I, I would ... I am going to turn it round, okay, and Ian ... Look, I will ... I will ... I am very happy to have a longer conversation on this. But yeah, we surely have to incentivize but one of our ... I am a consumerist, right, and if, if there were a consumer pull, people would include preventative services in their offer, whatever that offer might be.</p>
<p>00:49:27:24</p>	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>And so if it was me, what I would be doing, and I appreciate by the way, prevention is ... if we do not get there, then we are in real trouble ... if it was me, what I would be doing is I would be focusing on the messaging to the population at large that there are opportunities to live better, longer, that are out there, but they do not know about. And that in the end I suspect increased consumer pull will enhance the provision from housing providers. That is one thing.</p>
<p>00:50:10:22</p>	<p>The second thing is, to my mind this is all to do with existing housing, not new housing. Because we all know, don't we, that by 2042, 85 ... well in 2042, 85 percent of the homes that we live in today are already built. So it is not as if we are going to change the world by building new houses or even building new provision, necessarily.</p>
<p>00:50:38:00</p>	<p>So happy to have a conversation on your subject. Thanks.</p>
<p>00:50:45:02</p>	<p>SUE KAY:</p> <p>Alison, looks like we have got more?</p>

00:50:46:18	<p>PROFESSOR ALISON PETCH:</p> <p>Yeah. Perhaps a question for David from Julienne Meyer about no mention so far of dementia. Should that be seen as part of the whole or should there be special consideration in respect of particularly housing issues?</p>
00:51:09:08	<p>SIR DAVID PEARSON:</p> <p>Do you want me to come in on that?</p>
00:51:10:14	<p>SUE KAY:</p> <p>Yes please, David.</p>
00:51:11:03	<p>SIR DAVID PEARSON:</p> <p>Yeah. Excellent. So great question Julienne, thank you. And right to prompt it. So if I ... if I just quickly go back to the previous question, say something, just one quick thing about that. I think ... Health and Care services in this country are under enormous pressure, and there is a real issue about maintaining prevention whilst dealing with today's current exigencies and crises.</p>
00:51:42:13	<p>SIR DAVID PEARSON (Cont):</p> <p>But I think that most leaders in Health and Care are now thinking if we don't look into prevention we will never be able to turn the tide and help people to live better lives, but also to be more sustainable in the future. So I think ... And, and the thing about population health, in Population Health Management, which are the actual requirements of the new integrated care partnerships are critical to this in terms of setting a template for it. And it is one of the things I go up and down the country talking to systems about.</p>
00:52:26:15	<p>Anyway, going back to the dementia question. Absolutely. It is part of it. And indeed, in the early of development and housing solutions when I was a director, I remember people saying: Well actually this does not really apply to people with dementia, does it? And it absolutely does. And there is pretty good research evidence that if you adopt housing solutions at the right point then people can be sustained with better quality of lives in housing with care and support, and indeed NHS treatment for longer, and sometimes for the duration.</p>

<p>00:53:08:10</p>	<p>And so it is absolutely critical ... (CUTS) ... the importance of a good training development of the workforce. It also speaks to, and having the appropriate design of housing facilities that can help and ensure people are safe. It also speaks to good technology and as the (share) TEC quality, there were a couple of certificates I have awarded at this week's conference to services who run the monitoring systems which help to keep people safe and monitor and adjust their needs in a way that can help sustain and support people.</p>
<p>00:53:52:23</p>	<p>So I think ... And it play for the prevention thing actually, because prevention works at different levels. There is primary secondary and tertiary prevention. So what we want to do is to help people to have healthier, happier lives for longer, but we also want to ensure that the people are able to avoid the next adverse event in their lives that will actually diminish their independence and the choice of control. In other words, enhance it. And this is what this is all about in my view.</p>
<p>00:54:28:21</p>	<p>PROFESSOR ALISON PETCH: Some very interesting discussion in the chat, particularly around the whole prevention. And we are obviously not going to have time to cover all the questions, but perhaps we could conclude with one from Joanna Davison, address this to Roy in the first instance. Very important question about equity and differential effectiveness. How do you ensure that innovations do not benefit the better off most, and therefore increase the inequalities that we are trying to battle against?</p>
<p>00:55:02:01</p>	<p>PROFESSOR ROY SANDBACH: Yes.</p>
<p>00:55:02:08</p>	<p>PROFESSOR ALISON PETCH: And do you have to open your pilots to look at this?</p>

00:55:05:02	<p>PROFESSOR ROY SANDBACH:</p> <p>Yes. It is ... First of all, pilots do not look at, to use a term, rich people's ability to engage with technology. And I am just going to suggest that you take a look at the work that the pilots are doing. However, it is a good question. It is a good question particularly in a context of any building of a consumer platform for the use of technology.</p>
00:55:40:04	<p>However, let us just be clear. Let us take a technology that exist today and is in the hands of consumers. Take the iPhone. I do not think anybody would argue that only the rich, only rich people have iPhones. They do not. And I think what is key here is to try to get the value equation that people will see -- I would love to have more conversation on this -- the value equation that people see in the use of technology for their lives at home to be one which, which makes them value those things more than some of the other things that they buy.</p>
00:56:26:00	<p>And if you do that then you reach a broad population, in my opinion. Now, for the very poorest in our population, then clearly we have got to support them directly. But I do not think that is the majority of people. I think we can drive a big effect in a lot of people by just creating that better balance in terms of the value of what great lifestyle support and health and care support technologies can bring.</p>
00:56:57:01	<p>PROFESSOR ROY SANDBACH (Cont):</p> <p>There -- I hope that helps, Alison.</p>
00:57:01:13	<p>PROFESSOR ALISON PETCH:</p> <p>Thanks very much indeed. Should we move on, Sue?</p>
00:57:05:05	<p>SUE KAY:</p> <p>Yeah. Sorry, there are some really interesting ... I am really sorry not to be able to deal with the questions. We know that you did not want to be kept for a long time today but wanted to be able to have the opportunity for at least some questions. We are going to try and capture these, and we will come back to you. And as our fantastic speakers have said, not least Roy, if you do want to have longer debates on this, then they say that they will make themselves available to do that and to have personal conversations with you. So that is great and thank you for that.</p>

00:57:40:22	So I now want to start to draw this to a close by inviting our Chair, Alison, to tell you about some exciting new developments that we have coming. But for now, thank you very much and I am going to hand over to Alison.
00:58:03:03	<p>PROFESSOR ALISON PETCH:</p> <p>Many thanks to David, Roy and everyone who joined us on those commissions and on the TAPPI journeys. And I have been very heartened in my time as Chair, by these developments and obviously we now move into the critical phase of moving from some of the principles into the practice. So do watch this space.</p>
00:58:26:11	Before we let you go, I would like to take this opportunity to tell you about some of our future plans at Dunhill and Sue has already hinted at some of these.
00:58:41:14	Sue said earlier that one of the key principles we set out in that strategic framework was that of making connections and convening networks. And while obviously we are not the largest of organisations, we are perhaps the only funder uniquely focused on ageing and older people, and we are certainly in it for the long haul.
00:59:10:01	<p>PROFESSOR ALISON PETCH (Cont):</p> <p>What hopefully we can do is make sure that we are playing our part at the heart of a network of researchers and passionate community leaders who believe that addressing health inequalities is one of the most important challenges we face as a society, and which underpins the change that needs to be made to secure a healthier later life for us all.</p>
00:59:43:16	So, with that in mind, the experience of the last three years has reinforced all of us the importance of creating and fostering networks of support, celebrating success ... (CUTS) ... to learn and explore solutions to the many challenges that we have already touched upon.

01:00:14:17	Conversations with existing professional membership organisations, such as the British Geriatric Society and the recently formed networks biotechnology and by the medical research councils, have highlighted that there is a real appetite not to duplicate existing networks, not to reinvent wheels, but to provide a forum for connecting people working in a range of professions and disciplines.
01:00:52:18	So the purpose of these would be to celebrate success, achievement and ambition in ageing related research, to create a support of place, to find new collaborators, one outside one's normal sphere, mentors and advisors. To facilitate better understanding and to foster relationships between academic and clinical researchers and community organisations working with older people, something very close to my own heart. And to sustain existing and emerging networks for the longer term to avoid duplication and reinvention.
01:01:42:10	As a funder with a charitable mission, we are keen to provide ways in which we can help researchers to translate research into practice; to make new connections; to showcase and encourage the key principles we want to uphold in this area, both in relation to the research itself and in the delivering of the health and social care services.
01:02:12:03	So in respect of that, we are therefore delighted to announce the launch of the DMT Academy which you see on your screen at the moment.
01:02:24:03	<p>PROFESSOR ALISON PETCH (Cont):</p> <p>What will be the benefits for you? As an Academy member you will have access to an expanding, searchable portal of other researchers and research ready coming to organisations. You will have advance notice of future funding schemes and member only schemes. You will have a platform for advertising job vacancies. You will have professional development opportunities. You will have networking and shared learning events. And you will have opportunities to sit on or to observe grant award panels.</p>
01:03:07:15	So I hope that sounds like an exciting opportunity. And for those who are academic and clinical research members there will also be the opportunity to be nominated for our annual excellence awards.

01:03:23:18	Next slide, please.
01:03:24:22	NEXT SLIDE DMT ACADEMY EXCELLENCE AWARD
01:03:26:20	<p>PROFESSOR ALISON PETCH:</p> <p>So that brings me to the second announcement. Each year we are going to make two three year awards of 40,000 a year, so a total value of 120,000 to two academy researcher members. One of these will go to an early mid-career researcher who has demonstrated leadership potential. And the second one will go to a senior leader in ageing related research who has demonstrated that they uphold the principles that we hold strong.</p>
01:04:10:00	Nominations for these awards will be opened later in 2023 with the first award being made this time next year.
01:04:22:19	And I am delighted to be able to announce that the first round of our rewards will be made in the name of Professor Stuart Parker, one of our Trustees, who sadly died earlier this year and will be greatly missed by the Dunhill community as well as of course the wider world.
01:04:46:06	Next slide, please.
01:04:47:14	NEXT SLIDE DEVELOPMENT PROGRAMME FOR COMMUNITY ORGANISATIONS
01:04:49:15	<p>PROFESSOR ALISON PETCH:</p> <p>Then for community organisation members of the Academy, we will be launching our new Capability Development Program. This will comprise a half million commitment to support three cohorts, each of which will have eight community organisations, and over a period of three years they will once again work with Moore Kingston Smith, our delivery partner, for a similar endeavour in the past, but this time working also for the first time with the University of Birmingham. And the program will be expanded both online, face-to-face, peer support content around the many issues, strategic development, financial sustainability, impact evaluation and how to work across the research community divide.</p>

01:05:57:02	And we are currently working through the final details of this initiative, so do watch out for further announcements.
01:06:06:08	Final slide, please, Ollie.
01:06:07:11	FINAL SLIDE UK AGEING RESEARCH FUNDERS' FORUM
01:06:09:21	PROFESSOR ALISON PETCH: And for the final announcement we are now turning to the Funder community and we are pleased to announce that Dunhill will be convening with UKRI, UK Research and Innovation, a revitalised UK Ageing Research Funders' Forum.
01:06:33:11	The membership of the forum is drawn from funding organisations across UKRI and the third sector, and one of our first priorities will be to work closely with the two new research council funded ageing research networks that I mentioned earlier, in pulling together a gap analysis of which are the key underfunded, under-researched areas to which hopefully both government and funding organisations will be motivated to respond.
01:07:13:01	And the forum should also provide a supportive space for the collaboration needed to address these gaps.
01:07:26:05	PROFESSOR ALISON PETCH (Cont): Now more than ever, not surprisingly, it feels really important that we address the big questions arising from a population that is ageing. And while the issue is increasingly acknowledged by government, with some recent targeted investment in some areas of research, we still have not seen the substantial ring fenced support at the scale that we saw in the early 2000s.
01:07:59:23	It is essential that those of us with funds to invest in this important topic work together to ensure we are funding effectively, avoiding overlap and in complimentary innovative and accessible ways. Again, another of my hobby horses.

01:08:22:02	So I hope that in these new developments there will be something for all of you who joined us today. It only remains for me to commend to you the recorded talks we are going to be releasing next month. We will be circulating the links for those to all of you who registered and it will of course also be on social media.
01:08:48:09	So I really hope that after the false storm this year, this time next year we will be meeting in person and that perhaps also we will be meeting some of you at our early Career Researchers event in the autumn.
01:09:05:21	Our next task at Dunhill, coming up in May, will be to make our rewards from the ageing immune system follow-on call, we continue to support the theme of understanding the mechanisms of ageing and treating age related disease, central parts of the same dilemma, and our next large planned call for proposals will be on the subject of sensory loss. So do watch out for that and start thinking about your winning ideas.
01:09:41:21	So let me close by wishing you all a pleasant afternoon, urging you to look out for the links to the lectures that Sue flagged up at the beginning, and you can of course, the usual advert, follow us on Twitter, LinkedIn or registering for updates on our website. Thank you very much indeed and best wishes to everyone.
01:10:10:12	END OF RECORDING