



Remarkable research for healthy ageing

THE DUNHILL MEDICAL TRUST

Our strategic framework and priorities for
2020 to 2025

“We fund the remarkable science and the radical social change needed for healthier older age”

We support researchers and communities, systems and services, fundamental science and applied design. We care about inclusion, address inequality and make the interdisciplinary connections that bring your ideas to life.

Introduction from the Chief Executive

We've seen a lot of change here at the Trust over the last three to four years. We have welcomed new faces to the Board, Committees and to the staff team and implemented a quiet, digital revolution in the back office. We have worked equally hard to identify new opportunities, collaborators and initiatives to benefit our award-holders and applicants and to help us shape our future plans.

Many of the things we learned through the fantastic partnerships and collaborations we developed during this time, together with the inspiring response of the research community to the recent pandemic, have re-emphasised to us just how important developing and sustaining capacity in the research base is, if the systemic change needed to improve the health and social care of older people is to be achieved. And the sheer breadth and diversity of the network we have built up has encouraged us to look even harder for ways to help it to add up to more than the sum of its parts. This thinking forms the core of our new strategic framework.

We hope our new approach will see us playing our part at the heart of a network of researchers and passionate and entrepreneurial community leaders who believe that addressing health inequalities is one of the most important challenges we face as a society and underpins the change that needs to be made to secure a healthier later life for us all.

Susan Kay
Chief Executive





The Dunhill Medical Trust has a long history of funding some of the best of the UK's academic and clinical research into understanding the mechanisms of ageing and treating age-related diseases and frailty, as well as supporting community-based organisations which are working to enhance the lives of those who find they need extra support in later life. In working with these two communities, we are uniquely placed to bring them together to inform and influence the collective understanding of “what works”.

Context

In 2015, the Government's “Key Issues for UK Parliament” underlined this need: *“Vastly improved life expectancy, one of the great triumphs of the last century, looks set to be one of great challenges of this one”*. This was further reinforced by the launch of its Grand Challenges mission to ensure that people can enjoy at least 5 extra healthy, independent years of life by 2035, while narrowing the gap between the experience of the richest and poorest. In 2016, the World Health Organisation's strategy on Health and Ageing emphasised the point (quotes below) that many existing systems are better designed to cure single acute conditions and continue to manage health issues in disconnected and fragmented ways, lacking coordination across care providers, settings and time and that certain problems more likely to afflict older people and negatively impact their daily lives (though not life-limiting) are often overlooked.

“Aligning health systems to the needs of older populations: as people age, their health needs tend to become more chronic and complex. Health systems and services that address these multidimensional needs in an integrated way have been shown to be more effective than services that simply react to specific diseases independently. Yet this results in health care and other services that not only fail to adequately meet the needs of older people but also lead to significant and avoidable costs, both for older people and for the health system. Where services do exist, there are frequently barriers that limit older people's access to them, such as lack of transport, unaffordability and ageism in health care delivery”.

“Problems that matter for older people, such as pressure ulcers, chronic pain and difficulties with hearing, seeing, walking or performing daily or social activities, are often overlooked by health professionals. In primary health care, the clinical focus still generally remains on detection and treatment of diseases; because these problems are not framed as diseases, health care providers may not be aware how to deal with them, and frequently lack guidance or training in recognizing and managing impairments and geriatric syndromes”.

And in 2020 the global COVID-19 pandemic brought all of these issues into sharp focus. We plan to play our part in helping our communities and networks to address them.

We invest in those who have great ideas and methods for improving the health and well-being of older people and in making the connections which can help them to flourish.

Our unique role and key aims

We're committed to applying our resources to inspiring and enabling academic researchers (from across the disciplinary range) and health and social care professionals to apply their knowledge and skills to:

- improving the quality of life, functional capacity and well-being for older people now, or
- creating the context for change in the future: preventing, delaying or reducing future health and social care requirements.

We also want to play our part in informing and influencing the collective understanding of “what works” and enabling community organisations to develop innovative, evidence-led and best practice ways of delivering housing, care and support for older people and in driving the systemic change needed to secure a healthier later life for us all.



Key aim #1

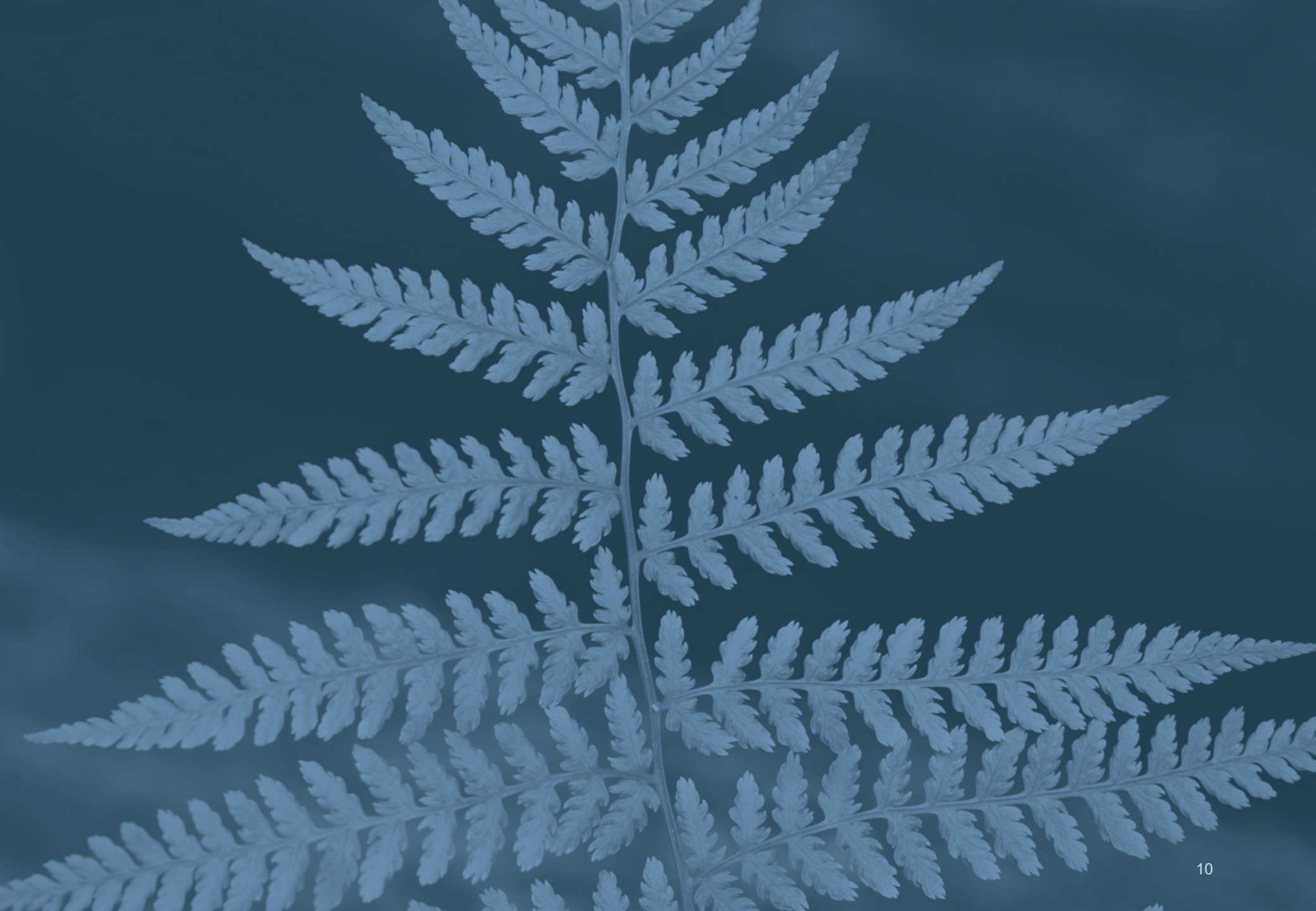
To inspire and enable academic researchers (from across the disciplinary spectrum) and health and social care professionals to apply their knowledge and skills to improving the quality of life, functional capacity and well-being for older people. This could be now, or creation of the context of change for the future.

We'll do this by...

- Identifying the important, but perhaps less well-funded, areas of research and directing our attention and resources to ensuring that they receive the focus and support that they need.
- Backing well-designed research which is imaginative, novel and acknowledges that the complexity of the issues involved often need a multi-disciplinary approach if it is to have real and positive impact on the lives of older people.
- Providing support to encourage leading investigators from all relevant disciplines to undertake work on ageing.
- Providing support to institutions which can demonstrate leadership in and a long-term commitment to ageing-related research.
- Providing support that delivers excellence in doctoral researcher training in ageing-related research.
- Providing support for post-doctoral academics and research-active health and social care professionals so that trained PhD level investigators in ageing are not lost to other disciplines.
- Convening networking events and organising meetings of specialists of varied disciplines and professions to scope the future priorities for ageing-related research and foster the collaborations that will tackle the challenges of delivering our strategic goals to improve health in later life.
- Providing funding to support clear pathways to engagement and impact with community-led organisations.

We know that if the systemic change needed to improve the health and social care of older people is to be achieved in the long term, we need to invest in creating sustained capacity in academic and clinical research. Our support for researchers is organised around five key principles.

- **Involvement and engagement.** We expect older people's views to be considered and, at a minimum, for the researchers we support to be actively involved in public engagement activities. No matter how "cutting edge" or complex the research, the ultimate beneficiary can offer unique and valuable insights in its design, implementation, communication, future prioritisation or evaluation.
- **Making connections; convening networks.** We know we can promote innovation and contribute to making a real difference by connecting researchers from different disciplines with each other and with those working in professional practice and the community.
- **Multi-disciplinarity.** Many of the problems we are trying to understand and address require examination from a variety of perspectives and the input of multiple stakeholders if they are to work and lead to practical benefit. Good and effective collaboration does not come without challenges but is essential if multi-dimensional problems are to be solved.
- **Equality and diversity.** It is important to access and nurture the best talent and equality and diversity are integral to driving innovation and opportunity and to achieving excellence in research. We prefer to work with organisations and teams which are committed to nurturing equal and diverse cultures.
- **Flexibility.** While we have set out our overall strategic framework and will plan the deployment of our resources around our published priorities, from time to time, issues will arise which will require an agile and speedy response.



Key aim #2

To inform and influence the collective understanding of “what works” and to enable community-led organisations to develop innovative, evidence-informed and best practice ways of delivering care and support for older people and drive the systemic change needed to secure a healthier later life for us all.

We'll do this by...

- Developing innovative, cross-sector partnerships – particularly with the research community – which are, or have the potential to be, transformational for the organisation or sector or transformational for the understanding of the issue. This may involve traditional grant funding models but also more innovative forms of finance.
- Supporting evidence-informed, people-centred community programmes which make full use of the range of community assets – in particular, those which create age-friendly environments, connect older people to their wider community and enable them to stay in their own homes for longer.
- Providing targeted funding to community-led organisations to enable them to develop their capabilities in developing financial sustainability, impact evaluation and communication.
- Being proactive in supporting and developing productive networks, in particular aiding the development of relationships between the academic and practitioner communities.
- Joining forces with high profile representative bodies to share the outcomes of our research grants and community-based projects.

Principles

We know that if community organisations are to take their rightful place at the heart of an improved system of health and social care for older people, we need to invest in ensuring that they have the capacity, supportive networks and access to a robust evidence base to do so. Our support for community organisations is organised around five key principles.

- **Involvement and engagement with users.** We expect services and interventions to be demonstrably based on principles of co-production or an existing model where the views of older people are at the heart.
- **Making connections; convening networks.** We know we can help to make a real difference by connecting those working in professional practice and the community with the research base and we will ensure that they are properly recognised, both financially and otherwise, for their participation and contribution.
- **Evidence-gathering and evidence-sharing.** We will ensure that community organisations have the support and resources they need to develop a robust evidence base around the services they develop and provide. We want community teams to be clear on how learning can be shared and demonstrate a willingness to collaborate and share.
- **Equity and diversity.** We prefer to work with organisations and teams which are committed to nurturing equitable and diverse cultures.
- **Flexibility.** While we have set out our overall strategic framework and will plan the deployment of our resources around our published priorities, from time-to-time issues will arise which will require an agile and speedy response.



We strive to be a transparent, learning organisation. We aim to collect and share the outcomes of our grant recipients' work and make them openly available, as well as ensuring that our staff and trustees are well-equipped to support the work of our grant-holders.

Our ways of working

We'll do this by...

- Ensuring that our stakeholders are aware of the support we provide – both financial and non-financial – and providing opportunities to enable them to share their stories, ideas and learning with others.
- Investing in our office systems and developing our staff to achieve a better balance between evaluating applications and providing high quality support, relationship-building and communication of our impact.
- Equipping our staff with the opportunities, tools and resources to enable them to grow their networks, capabilities, knowledge and confidence.
- Investing in practical and helpful use of technology so that our staff and other stakeholders can access what they need from us – anytime and anywhere.
- Respecting our legacy of prudent, yet visionary, stewardship. We will ensure that we continue to develop this legacy, keeping our governance procedures up-to-date and proportionate, our operational procedures effective, efficient, helpful and flexible and making imaginative and appropriate use of our endowment.

We know that there's a big job to do so we need to prioritise. We will be focusing on the following areas for support for this five-year plan period, making periodic detailed calls for proposals around one or more of these topics. We hope that this will provide greater clarity for applicants and improve our ability to apply sufficient resources to make practical impact.

Our priorities for the plan period

We will support high quality academic and clinical research proposals that:

- improve our understanding of the underlying mechanisms of ageing and age-related disease;
- target the social determinants of healthy life expectancy;
- improve the quality of life for older people, in particular:
 - in developing and delivering suitable living environments;
 - addressing issues of age-related vision, hearing and oral health;
- have the potential to prevent, delay or reduce future health and social care requirements, in particular, improve the ability to maintain functional independence for older adults.

We will be supporting a smaller number of larger community programmes, focusing in particular on those which create age-friendly living environments, connect older people to the wider community and enable them to stay in their own homes for longer. In doing so, we will also continue to support targeted initiatives arising from our Older People's Care Improvement Initiative.

We will support those organisations and programmes to engage more closely with the research base by providing co-funding and networking opportunities.



Measuring success

Developing evidence, tracking outcomes, celebrating success and influencing change is important to us but we work in a large and complex system with a diverse range of problems to solve. We want to work alongside you and will flex and adapt our approach as we learn together.

We are sometimes asked how we know we are succeeding. It's quite a challenge for a funder of such a diverse range of activities to have a single set of "performance indicators" to track and measure over time. Rather, our approach is to work with each of our grant-holders to develop a set of objectives and measures of success suitable for their own projects and needs and support them in gathering the evidence that demonstrates their achievements. We will then work with them to celebrate and amplify their success and learning.

We also know, though, that when you are working on issues and problems as complex as those on which we have chosen to focus, things do not always go to plan so we are prepared to flex and adapt along the way .

Above all, we know we need to continue to develop and adapt our own culture and ways of working.

“In the current situation, the themes of our work have gained added importance. Despite the uncertainties we’re all facing at the moment, I’m delighted to say that we have re-affirmed our financial commitment to our plan which amounts to £25M over the five-year period.”

Professor Alison Petch OBE, Chair of the Board of Trustees



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