DEMENTIA UK

England & Wales · Charity number 1039404

Details

Other names	THE DEMENTIA RELIEF TRUST, ADMIRAL NURSES, ADMIRAL NURSING DIRECT, FOR DEMENTIA, FOR DEMENTIA FOR DEMENTIA TRAINING, FOR DEMENTIA PLUS, FOR DEMENTIA TRAINING, UNITING CARERS FOR DEMENTIA
Status	Registered
Legal form	Charitable company
Company number	02944156
Registered	1994-07-12
Register	View on the Charity Commission register

Contact

Address	7th Floor One Aldgate London EC3N 1RE
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Website	www.dementiauk.org

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Activities

Objects: THE OBJECTS FOR WHICH THE CHARITY IS ESTABLISHED ARE: 2.1 THE PROVISION OF PROFESSIONAL NURSES TO SUPPORT, HELP AND CARE FOR THOSE CARING FOR PEOPLE WHO ARE LIVING WITH DEMENTIA (THE SERVICE TO BE KNOWN AS THE ADMIRAL NURSE SERVICE AND THENURSES AS ADMIRAL NURSES).2.2 THE RELIEF AND CARE OF THE FRIENDS, RELATIVES AND CARERS OF THOSE WHO ARE LIVING WITH DEMENTIA.2.3 THE RELIEF, CARE AND TREATMENT OF PEOPLE WHO ARE LIVING WITH DEMENTIA.2.4 THE DEVELOPMENT OF A PROGRAMME OF PRACTICAL RESEARCH AND THE PROMOTION OF STUDY AND RESEARCH INTO:-2.4.1 UNDERSTANDING THE CAUSES NATURE AND EFFECTS OF DEMENTIA AND INTO MANAGING CARE FOR PEOPLE LIVING WITH DEMENTIA,2.4.2 SUPPORTING PEOPLE LIVING WITH DEMENTIA AND THEIR RELATIVES, FRIENDS OR CARERS, AND THE PUBLICATION OF USEFUL RESULTS OF ALL SUCH STUDY AND RESEARCH.2.5 THE EDUCATION OF THE PUBLIC ABOUT DEMENTIA AND THE INDIRECT EFFECTS ON, AND THE NEEDS OF, PEOPLE LIVING WITH DEMENTIA AND THEIR RELATIVES, FRIENDS AND CARERS.2.6 TO ENGAGE IN ANY CHARITABLE ACTIVITIES WHATSOEVER WHICH MAY PROTECT AND PRESERVE THE HEALTH OF THE RELATIVES, FRIENDS AND CARERS OF PEOPLE LIVING WITH DEMENTIA

Activities: Dementia UK provides specialist dementia support for families through our Admiral Nurse service. Admiral Nurses work alongside families, giving them the one-to-one support, expert guidance and practical solutions they need. Dementia UK also runs Admiral Nursing Direct, a free and confidential helpline for anyone with concerns about dementia.

Classification

- **How:** Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research, Acts As An Umbrella Or Resource Body
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives, Disability
- **Who:** Elderly/old People, People With Disabilities

Geography

- Ireland
- Scotland
- Throughout England And Wales

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Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£31,423,775	£24,812,876	£25,308,595	273
2024-03-31	£22,541,874	£18,821,580	£18,674,513	238
2023-03-31	£19,424,426	£17,728,493	£15,064,982	205
2022-03-31	£17,127,108	£15,130,287	£13,354,050	183
2021-03-31	£15,811,655	£9,935,593	£11,357,229	154

Trustees

Name	Role	Appointed
PROFESSOR DAVID CROISDALE-APPLEBY	Chair	2013-07-09
Alistair Burns		2024-03-28
David John Ball		2023-08-17
David Stewart		2023-08-17
Dr Anne Elizabeth Shinkwin		2023-08-17
Gavin Anthony Sanderson		2019-06-01
Jackie Kinsey		2025-08-20
Katherine Jane Keir		2022-03-08
Philippa Blane Armitage		2019-06-01
Theresa Murphy		2024-03-28
WILLIAM JAMES ROE		2020-02-19

Linked charities

- YOUNGDEMENTIA UK (1039404-1)

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DEMENTIA UK

England & Wales - Charity number 1039404

Accounts

Trustees' Annual Report

and consolidated financial statements

DementiaUK
Helping families face dementia

For the financial year 2024-25

Company number: 02944156 Charity number: 1039404 OSCR number: SC 047429

Dementia UK
Dementia UK

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Chair and Chief Admiral Nurse/Chief Executive Officer's report

Dementia is a huge and growing health crisis. It is the leading cause of death in the UK, with nearly one million people living with the condition. It doesn't just affect the person with the diagnosis – everyone around them is impacted in some way.

Too often, we hear from families who are facing the fear and confusion of dementia alone. But with your help, we are taking great strides towards our vision of specialist dementia support for everyone who needs it.

In 2024-25, we supported more families than ever before, with 476 dementia specialist Admiral Nurses in post (July 2025). More than 46,000 people accessed our expert guidance through our Helpline and virtual appointments. We ensured support for families in their local areas by maintaining Admiral Nurse services and creating new ones in the community, hospitals and care homes. We are also working with our partner Nationwide to deliver dementia clinics in 200 of its branches, bringing our support to more parts of the UK.

This has been a year of innovation for Dementia UK. Highlights included the launch of our online sessions, 'Dementia: what next?', to provide families with vital post-diagnostic support; and our first podcast series, 'My life with dementia', sharing the stories of people living with or caring for someone with the condition. These showcase the expertise of Admiral Nurses and reassure families that they are not alone.

The General Election provided an invaluable opportunity to call on the political parties to put dementia firmly on the agenda. We rallied our community of passionate supporters to contact their candidates, and as a result, had many positive conversations with MPs about why they should make dementia a priority. We will build on this to keep pushing for better dementia care and support.

Behind everything we do is our workforce of highly skilled and dedicated staff, who all share our vision and values. We recognise them as our biggest asset and are delighted to have been named as the best large charity to work for in the Sunday Times Best Places to Work Awards 2025. This recognises our commitment to ensuring every employee feels valued and supported and has the best possible experience of working at Dementia UK.

In the pages of this report, you can read more about how together, we have supported families during the past year. We are so proud of these achievements, which simply would not have been possible without our fantastic supporters and partners. Thanks to you, our annual income reached £31.4m, an incredible 39% increase on 2023-24. This will enable us

to develop even more services and support for families affected by dementia.

The next year will see the launch of our strategy for 2025-30, which will underpin our work to offer families a lifeline when they need it most. It is a time of exciting growth and change for Dementia UK, every day bringing us closer to a world where no one faces dementia alone.

With the demand for our services growing by the day, we are indebted to you, the amazing people who donate, fundraise, partner, pledge, campaign and volunteer. Thank you so much for your support, now and in the future – you are the heart of Dementia UK.

Dr Hilda Hayo
Chief Admiral Nurse and Chief Executive Officer

Professor David Croisdale-Appleby OBE
Chair of Trustees

Trustees' Annual Report, including the strategic report

Dementia UK: the specialist dementia nursing charity

Every three minutes, someone develops dementia. Today, nearly one million people in the UK are living with the condition, and it doesn't just impact the person with the diagnosis.

One in two of us will be affected by dementia in our lifetime – whether by caring for someone with the diagnosis, developing it ourselves, or both.

That is why Dementia UK is here. Our specialist nurses, known as Admiral Nurses, provide life-changing advice and support to anyone affected by dementia, whenever it is needed. From sharing practical tips for caring to offering compassionate emotional support and helping families plan for the future, they are there when people need them most.

As the UK's only charity dedicated to specialist dementia nursing, we want every family to know we are there to support them for as long as they need us – whether it's on our Helpline, through our virtual or face-to-face clinic appointments, or in the community.

We are here to make sure no one faces dementia alone.

"I love so many parts about my role as an Admiral Nurse. There is no greater reward than helping to lift the weight off a carer's shoulders."

Hannah, Consultant Admiral Nurse for Children and Young People

"My Admiral Nurse Liz was a beacon of light; she was the first person to actually listen to me and gave me hope when nobody else did."

Peter, who lives with Alzheimer's disease

Our vision, mission and values

Our vision

A world where no one faces dementia alone – where everyone gets the specialist support they need.

Our mission

Our life-changing support is there for everyone affected by dementia.

Our dementia specialist Admiral Nurses give expert and compassionate support and advice: on our Helpline, in clinics, in hospitals, in the community and in other health and care settings, as well as through the information we provide.

We work alongside people affected by dementia to constantly improve the health and care systems they rely on. We use our clinical knowledge to influence public policy and service delivery, carry out vital research into dementia care, promote better awareness and understanding of dementia, and campaign for change across the UK.

Together, we can make sure no one faces dementia alone.

Our values

Collaboration

Working together makes us stronger. We listen to and collaborate with families living with dementia, clinicians, our colleagues, and our supporters and fundraisers. Every day, we learn from one another.

Compassion

We come to work to improve the lives of people affected by dementia. It's why we approach everything we do, and everyone we talk to, with kindness, respect and support.

Ambition

We will do everything we can to help families affected by dementia feel more empowered. We're resourceful and resilient: whatever the obstacles, we'll try to find a way.

Integrity

We always aim to show integrity and accountability in all our work: from how we spend the money raised by our generous supporters to how we behave with colleagues, stakeholders and partners.

About dementia

Nearly **one million** people in the UK are living with dementia.

Over **70,000** people in the UK have young onset dementia – where symptoms develop before the age of 65.

Around **700,000** people in the UK provide unpaid care for someone with dementia.

Only **65%** of people with suspected dementia have a formal diagnosis.

There many different types and causes of dementia. The most common are:

- Alzheimer's disease
- vascular dementia
- frontotemporal dementia
- Lewy body dementia

Common symptoms of dementia include:

- memory problems
- problems with understanding
- confusion
- speech and language difficulties
- changes in behaviour
- difficulties with problem-solving and decision-making

Dementia is the leading cause of death in the UK.

Gail's story

On Valentine's Day in 2019, my world changed forever. At 54 years young, I was diagnosed with Alzheimer's disease.

At first, I was numb. But in the following weeks and months, there were so many emotions – confusion, sadness, anger and a lot of self-pity. I started to withdraw from the world.

The post-diagnosis support was almost non-existent. I was given this life-altering news, handed some leaflets and expected to walk out of the doctor's room as if nothing had happened. Nobody checked in on me in a meaningful way. Nobody even explained what the diagnosis meant. But perhaps worst of all, nobody asked me how I was coping emotionally. Sometimes you don't need solutions; you just need a listening ear.

I started going to an in-person dementia support group. Talking to other people living with the condition was wonderful – I didn't feel so alone.

At one of these sessions, a woman came and introduced herself to me. Her name was Maxine, and she told me she was a dementia specialist Admiral Nurse.

I told her I'd been struggling and she wrote down the phone number for Dementia UK's Helpline and handed it to me. I put it into the back of my diary. But to be honest, I had no real intention of calling it. Asking for help has never come naturally to me.

"Maxine gives me time"

A few months down the line, I'd had a really bad experience with a medical professional. I was at my wits' end. I don't think my husband, John, was coping very well either. I opened up my diary and on the last page, I found Dementia UK's Helpline number – so I rang it. A friendly voice at the other end told me she'd put me in touch with an Admiral Nurse in my area.

Soon after I received a call from a voice I recognised. It was Maxine. Talking with her, I instantly felt at ease. She was the first person throughout my journey to actually listen to what I had to say. She made an appointment to come around – the first of many.

The difference between Maxine and any other health professional I've seen is that she gives me time. I'm not rushed in and out. Her visits give me something to look forward to. I open the door and see a friendly face beaming back at me. She wraps her arms around me. You have no idea how much that hug means.

I wish everybody who had a dementia diagnosis could have access to an Admiral Nurse. It would make a hell of a difference.

"I am not my diagnosis"

My perspective has totally changed from when I was first diagnosed. The overwhelming response to dementia is negativity, but I'm still here and there's so much I can do. I now dedicate so much of my life to things that bring me joy and meaning: creating art, wandering the local nature reserve with my dog Toby, and photographing the local wildlife.

My other outlet is writing. Starting a blog has helped immensely and I hope it helps others too. It's so easy to get lost in a spiral of negativity after you receive a dementia diagnosis.

Yes, dementia sometimes gets the better of me – but it's not the end. Rather, for me, it was the start of a new chapter.

You can read Gail's blog at
dementiaalzheimers.home.blog

Achievements, performance and plans

Here when people need us

Our Dementia UK Admiral Nursing services – including our Helpline, virtual clinic appointments, Consultant Admiral Nurses and Dementia at Work programme – ensure families affected by dementia can access the support they need, when they need it.

Our objectives for 2024-25

- Identify ways to improve staff availability to answer Helpline calls. We aim to consistently answer 60% of live calls first time so callers can access support without delay; we will strive to exceed this target and ensure that where we cannot answer a call immediately, we return all messages as quickly as possible
- Introduce a post-diagnostic support programme. This will offer a series of sessions to people recently diagnosed with dementia and their families, providing vital information and advice
- Increase the availability of virtual clinic appointments. This will include offering appointments during the evenings and at weekends so carers can speak to an Admiral Nurse outside normal working hours
- Grow our Dementia at Work programme to reach more people and organisations, including by developing and publishing two new guides to working with dementia

Our achievements

Over the last year, our Dementia UK Admiral Nurses provided a lifeline to more people than ever before. Our Helpline responded to 41,757 calls and emails, 364 days of the year (closed 25th December), providing specialist, compassionate advice and support to people affected by dementia throughout the UK. We also supported families through 4,689 videos and phone appointments in our virtual clinic.

To meet the increase in both volume and complexity of calls, we increased the number of Admiral Nurses on the Helpline, enabling us to answer the majority of calls immediately. When we cannot answer straight away due to call volume, we call back within 48 hours, ensuring families affected by dementia receive our expert support quickly.

Expanding our team of Admiral Nurses has enabled us to increase the number of virtual clinic appointments, which allow families to access specialist dementia support through prebooked phone or video calls. In addition to weekday daytime appointments, we now offer appointments until 7pm Monday-Wednesday, and on Saturdays from 10am-4pm.

Dementia UK's Admiral Nurses also supported families through specialist services including regional clinics; clinics for the prison service; and services for members of the Professional Footballers' Association and Rugby League Cares.

Our 'Dementia: what next?' online sessions launched in November 2024. The sessions, which are hosted by Admiral Nurses, are aimed at families where there has recently been a diagnosis of dementia. You can read more about how this exciting new innovation is helping people affected by dementia on page 16.

Growing our teams

Our Admiral Nurse teams continue to grow. We are delighted to be increasing our support for families who often experience health inequalities through the recruitment of two new Admiral Nurses for Black, African and Caribbean communities. Admiral Nurse roles for the Chinese community and South Asian communities are currently in development.

This year, we significantly increased our team of Consultant Admiral Nurses: highly skilled nurses who specialise in supporting people experiencing specific, complex needs relating to dementia, many of whom face barriers to care. In the past year, we have created additional roles in frailty and physical health, young onset dementia and Lewy body dementia.

We also grew our Dementia at Work Team, which leads the way in supporting people who are affected by dementia in the workplace. Across the year, we extended our pioneering work with and for employees, employers and customers affected by dementia. Please see page 20 for more information on our Dementia at Work programme.

Safeguarding vulnerable people

Safeguarding is paramount for us as a charity. All employees recognise the need to raise concerns if they suspect someone is vulnerable, and to consult one of our Admiral Nurses if necessary.

During 2024-25 we identified 580 safeguarding disclosures from contacts with our Helpline and virtual clinics: an average of 48 per month. They fall into three broad categories:

- suicidal ideation in the person with dementia or carer
- domestic violence (actual or threatened) towards the person with dementia or carer
- neglect and self-neglect of carers and/or the person living with dementia

We ensure these disclosures are dealt with in a supportive and compassionate manner and channels of escalation are explored as appropriate.

We use the data we capture to improve the support we provide as a charity and to review our internal policies and processes. We continue to share our experiences externally to help raise awareness amongst other professionals and charities of the situations facing families living with dementia.

The safeguarding disclosures raised in 2024-25 do not meet the threshold for reporting to the Charity Commission as we are supporting our beneficiaries who are experiencing safeguarding situations, as opposed to these situations resulting from the actions or omissions of Dementia UK.

Our expertise in supporting people with dementia and their families was recognised in a number of awards categories in 2024-25:

- Consultant Admiral Nurse for Lewy Body Dementia: shortlisted for a 'Nurse Leader' award at the National Dementia Care Awards 2024
- Consultant Admiral Nurse for Frailty and Physical Health: shortlisted for The Nursing Times Awards 2024 in the 'Care of older people' category
- Dementia at Work Team: finalists in the 'Not for profit initiative of the year' category at the British Training Awards and the 'Dementia care team' category at the Dementia Care Awards
- Helpline and virtual clinics: shortlisted in the 'Measuring, reporting and acting – using insight for improvement' category at the Patient Experience Network National Awards

What we'll do next: our priorities for 2025-26

Expand the scope of specialisms within the Consultant Admiral Nurse Team, so that more families experiencing complex challenges can access support tailored to their specific needs.

Develop new pathways to improve access to the Consultant Admiral Nurse Teams for families facing dementia. This will include developing new clinic models within the Frailty and Physical Health Team and Young Onset Dementia Team, with regular reviews to ensure they are having a positive impact on the people we support.

Further develop and embed the LGBTQ+ Consultant Admiral Nurse Service within Dementia UK and ensure the service is known externally to people affected by dementia and stakeholders, including LGBTQ+ organisations, so members of the community know how to access our specialist support.

Improve accessibility to the Helpline and clinics service including through introducing an SMS service and live chat functionality; growing national Admiral Nurse support for Black, African and Caribbean communities and Chinese and South Asian communities; and developing specialist clinics for those with additional support needs, starting with British Sign Language assistance.

Spotlight
‘Dementia: what next?’ – our online sessions

Too often, people are left to cope with a dementia diagnosis alone, with many questions unanswered. Our new online sessions help address their worries and empower them to face the future.

On our Helpline, we hear every day from people who are left unsupported following a diagnosis of dementia. No one tells them what to expect next, or in the future. Often, they are not even told what the diagnosis means. Many carers are falling into crisis because they do not receive the guidance they need.

The concept for our new online sessions came from our recognition that too many families facing dementia are left without support. In response, we developed ‘Dementia: what next?’: a series of three sessions, hosted on Zoom, to address people’s most common questions and concerns following a diagnosis.

‘Dementia: what next?’ is a flagship model of support that no other dementia charity is offering. The sessions are aimed predominantly at families who have recently received a dementia diagnosis, but they are open to all, including professionals.

Our session themes

We identified three core themes for ‘Dementia: what next?’ based on what we hear on the Helpline, and what we think people need to know about living with dementia:

- What is dementia?
- Financial and legal guidance
- Planning for the future

The sessions are hosted by an Admiral Nurse, with a prerecorded presentation followed by a Q&A session. Attendees can ask questions anonymously using the chat function, and following the presentation, the Admiral Nurse answers as many as possible.

We launched the 90-minute sessions in November 2024. They initially took place on the first three Friday mornings of the month, repeated monthly. In response to requests for evening sessions from people who cannot attend during the day, we then added slots on Tuesday evenings. People are welcome to join any or all of the sessions, consecutively or spread over several months.

Attendee feedback

In the first two months of the programme, 419 people attended at least one ‘Dementia: what next?’ session. The busiest session had 114 attendees, with session three – Planning for the future – proving the most popular overall.

We collected participants’ feedback on the sessions through a survey, with an overwhelmingly positive response. All

respondents described the sessions as 'very good' or 'good'. Almost all respondents told us they got all or most of the information they needed, that their understanding of dementia and knowledge of the next steps to take had increased, and that they would recommend the sessions to others.

Next steps

Going forward, we will continue to improve 'Dementia: what next?' based on feedback gathered through the survey. This will include reducing the length of the presentations to avoid information overload, and being clearer about matters relating to the devolved nations of the UK.

'Dementia: what next?' is making a genuine difference to people's understanding of dementia and ability to cope with the many challenges. By continuing to deliver the sessions, more families affected by dementia will face the future with confidence thanks to the specialist support and knowledge of our Admiral Nurses.

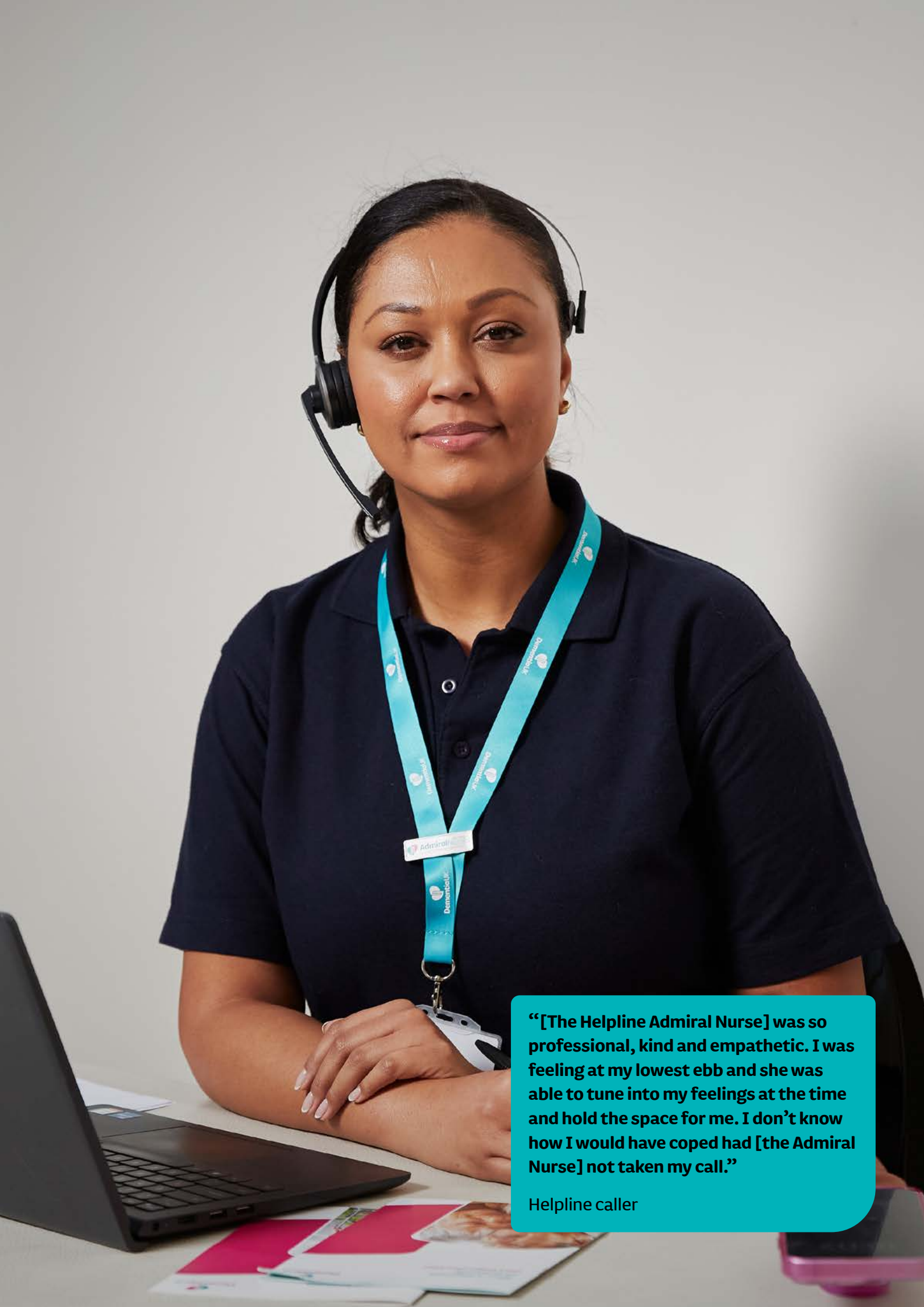
For more information and to register for 'Dementia: what next?' please visit **dementiauk.org/dementia-what-next**

What families told us

"The session was extremely helpful, incredibly well-planned, informative, sensitive. It was brilliant. It would have been so helpful to me when I first began the journey of living alongside someone with dementia."

"How you delivered the [session] was appreciated. It was to the point and allowed question time."

"Thank you… As you know, it's a distressing and worrying time when someone you love is diagnosed with dementia, and it's comforting to know that support is out there via your online information and the Admiral Nurses."



“[The Helpline Admiral Nurse] was so professional, kind and empathetic. I was feeling at my lowest ebb and she was able to tune into my feelings at the time and hold the space for me. I don’t know how I would have coped had [the Admiral Nurse] not taken my call.”

Helpline caller

The impact of our Helpline and virtual clinics

Every year, thousands of people are supported by Admiral Nurses on our Helpline and in video and phone appointments. Our latest evaluation shows the incredible difference these services make for families affected by dementia.

In 2023-24*, 34,790 direct contacts were made to our Helpline.

91% of people contacting the Helpline were caring for a family member.

76% were female.

The most common reasons for contacting the Helpline were:

- accessing support (36%)
- behaviour (17%)
- getting a diagnosis (16%)

21% of Helpline contacts related to Alzheimer's disease.

15% concerned vascular dementia.

1,530 contacts to the Helpline related to young onset dementia.

22% of contacts related to suspected cases of dementia with no formal diagnosis.

Between March 2023 and April 2024, 3,187 virtual clinic appointments were completed.

The most common reasons for attending a virtual appointment were:

- general information about dementia/ symptoms/treatments (30%)
- behaviour (19%)
- care options (16%)

Of the people who responded to our survey about their contact with the Helpline or virtual clinic:

83% said they received all or most of the help they needed.

86% said that this made them feel much more or a little more positive about their current situation.

85% said it improved their ability to take better care of the person with dementia.

* Most recent evaluation report

Spotlight
Dementia at work

Dementia impacts thousands of employees, employers and customers across the UK. Our flagship Dementia at Work programme is at the forefront of supporting people affected by dementia in the workplace.

The programme is led by a team of Dementia UK Admiral Nurses who provide organisations with support and guidance around all aspects of dementia. Their expertise ensures the best possible experience for employers, employees and their carers, and customers affected by the condition.

Our 'Dementia at work' guides

With nearly one million people in the UK living with dementia, including over 70,000 with young onset dementia, it is vital that the thousands of employees who are affected by the condition can access the support they need at work. Employers also need to know their rights and responsibilities around supporting employees and customers.

In 2024-25, we created two guides to supporting people affected by dementia at work – one for employees and their carers, and the other for employers. These provide them with essential knowledge about dementia in the workplace, from understanding rights and responsibilities to managing the impact of symptoms. You can read the guides at **dementiauk.org/dawemployers** and **dementiauk.org/dawemployees**

Alongside the guides, we developed two films sharing the experiences of employees affected by dementia, whether living with the diagnosis themselves or supporting a loved one while working. The films also featured an Admiral Nurse from our Dementia at Work Team talking about the challenges of dementia in the workplace and our support for employees and employers.

You can watch the films at **dementiauk.org/support-employees**

Supporting organisations

A vital part of our Dementia at Work offering is providing organisations with bespoke services such as webinars and interactive masterclasses tailored to their individual business needs; advice on creating dementia-inclusive workplaces; and consultancy around improving the customer experience for people living with dementia.

During 2024-25, as part of Dementia UK's Fairer Futures partnership with Nationwide Building Society, and its Fairer Futures social impact strategy, we embedded two dedicated Dementia at Work Admiral Nurses in Nationwide for the duration of the partnership. The nurses are providing free virtual clinic appointments to staff affected by dementia, and working alongside Nationwide on a range of projects to improve support for employees and customers living with the condition. These include regular webinars, consultancy to teams on supporting vulnerable people, and a review of the dementia-related training available to Nationwide's 18,000 staff. You can read more about Dementia UK's partnership with Nationwide on page 60.

Feedback on our 'Dementia at work' guides and films

"Thank you for sharing the valuable knowledge. It is vital that employers are aware of the signs as it can help create a more supportive environment and ensure people receive the right assistance."

"Such an important topic. Fantastic that you have a team who can offer advice and support."

Feedback on Nationwide Dementia at Work sessions

- **98% of attendees said the session increased their knowledge of dementia**
- **97% said it increased their knowledge of how to support someone with dementia**
- **94% said it would enable them to support their colleagues better**

In addition, the Dementia at Work Team worked with 164 individual organisations throughout 2024-25, reaching an audience of around 2,000 people. This included embedding our Dementia at Work offer into the Charity for Civil Servants, Institute of Civil Engineers and Institute of Mechanical Engineers.

We also worked with our Corporate Partnerships and Regional Fundraising Teams to support other organisations that partner with Dementia UK, improving their support for employers and customers affected by dementia.

What's next?

To continue the growth of our programme, we have extended our team from four Admiral Nurses to six, so we can work with even more organisations. Throughout 2025-26, we will continue raising awareness and providing support to employers and employees. We plan to reach more small and medium enterprises and embed our support offer into more sectors and new corporate partnerships. Through this, we will ensure the best possible experience for everyone affected by dementia in the workplace.

For more information on our Dementia at Work programme and our support for organisations, please visit **dementiauk.org/information-and-support/dementia-at-work**

Admiral Nurses: a lifeline across the UK

We want every family affected by dementia to have the specialist support of an Admiral Nurse in their area. We are working hard with organisations such as NHS Trusts and care home groups to develop new services and support the sustainability of existing services, so no one faces dementia alone.

Our objectives for 2024-25

- Focus on achieving a target of 500 Admiral Nurses by the end of 2025
- Increase the number of services in acute hospital care, including the Transitions of Care model
- Increase Admiral Nursing services across integrated and primary care to enable more people to be supported closer to home
- Strive to develop new services in areas where there is currently no or limited Admiral Nurse presence
- Continue to support the sustainability of existing Admiral Nurse services, working with local decision-makers and commissioners to secure service continuation

Our achievements

The support of a community Admiral Nurse can be life-changing for families affected by dementia. Across the year, we extended our vital services to new communities, supporting the development of four new primary care services with five Admiral Nurse posts.

We also developed our services in areas with limited or restricted access to Admiral Nurses. This included securing Admiral Nurse posts within four additional London Boroughs and in areas of the Scottish Borders; and directly delivering Admiral Nurse clinics in areas without their own services, including parts of of Leicestershire and Sussex.

Overall, we supported the recruitment of 47 hosted Admiral Nurses this year – 10 in new services and 37 within existing services, including 30 replacement posts. This brings the total of Admiral Nurses to 476 (as of 30th July 2025) so we can offer more families a lifeline when they need it most.

Along with developing new services, we have worked hard with local stakeholders to maintain existing services. This year, we secured the continuation of 20 services, encompassing 48 Admiral Nurse posts. These included two service expansions, where we supported the growth of existing services. In a challenging health and social care climate, this ensures that families across the UK can continue to access the life-changing support they desperately need.

The Transitions of Care model

Hospital admissions are common for people with dementia. Too often, these are avoidable or prolonged, with particular difficulties around the discharge process.

The Transitions of Care model of Admiral Nursing was an area of priority in 2024-25. This focuses on case management for people with

dementia and their families during a hospital stay and beyond, with Admiral Nurses working together in the hospital and community to provide continuity of care. It aims to reduce the length of hospital stays for people with dementia, manage an appropriate and timely discharge to the right setting, and prevent hospital readmission.

In collaboration with the local integrated care board (ICB) and Livewell Southwest, we secured the continuation of the award-winning Transitions of Care service in Western Devon. The service has reduced hospital admissions and readmissions, reduced the length of stay and improved outcomes for people living with dementia and their families. It is an example of best practice in integrated dementia care and has received high praise and recognition nationally.

We have supported the appointment of two new Transitions of Care Admiral Nurse posts in Sheffield Teaching Hospitals NHS Foundation Trust and anticipate that they will further demonstrate the impact and evidence base for continued growth.

Alongside the Transitions of Care model, we continue to support the development of the traditional acute Admiral Nurse model, where nurses support families during a hospital admission, with a further two services and two Admiral Nurse posts secured in 2024-25. We have also developed two Admiral Nurse services and three new posts in care home settings.

500 Admiral Nurses by the end of 2025

The number of Admiral Nurses continues to grow year on year, and we are close to our target of 500 Admiral Nurses by the end of 2025. This is despite several issues impacting the growth in Admiral Nurse posts, such as the challenges across the health and social care landscape and a lack of funding for dementia services.

When developing new services, due diligence, sustainability and service quality remain key. We are committed to working with the right organisations to develop Admiral Nurse services, with sustainable and recurrent funding in place to support new services.

What we'll do next: our priorities for 2025-26

Develop new Admiral Nursing models to best support people living with dementia and their families, including introducing the Emergency Department model, embedding Admiral Nurse roles within emergency departments in acute hospitals to help avoid unnecessary hospital admissions for people living with dementia; and continuing to adapt community models of Admiral Nursing.

Showcase successful Admiral Nursing models – including the Transitions of Care model – to key stakeholders and decision-makers within health and social care to raise awareness of Admiral Nursing and build the case for new services.

Support the continuation of Admiral Nurse services by working with host organisations and local commissioners to secure ongoing funding; extend the reach and impact of successful services; and maintain existing services.

Support the development of Admiral Nurse services in areas where there is limited or restricted access, and work with other teams within Dementia UK to identify other opportunities to reach these communities, for example through our Helpline and virtual clinic appointments.

Supporting younger people

Our Young Onset Dementia programme exists to make Dementia UK a centre of expertise for young onset dementia and ensures that the needs and experiences of younger people are represented in everything we do.

Our objectives for 2024-25

- Work with the Young Dementia Network to improve the experience of diagnosis and support for people with young onset dementia and their families
- Increase the understanding and knowledge of health and social care professionals, including Admiral Nurses, who support people with young onset dementia and their families
- Continue to build our support for people affected by young onset dementia, including through the creation of specific age-appropriate advice and guidance and promoting access to the Helpline, virtual clinic appointments and other support groups
- Increase awareness of Dementia UK as a centre of expertise for young onset dementia, ensuring our information is seen by people affected by young onset dementia and professionals; looking at how we can bring younger people to the website; and continuing to send targeted emails to professionals

Our achievements

Throughout the year, we worked hard to raise the profile of young onset dementia and ensure people affected receive the best possible support – from Dementia UK and other health and care services.

The Young Dementia Network, hosted by Dementia UK, is central to our work with and for younger people. This online influencing community grew from 5,190 members to over 6,200 in 2024-25, including people living with young onset dementia, their family and friends, and professionals working in the health and social care and voluntary sector.

Dementia UK and the Young Dementia Network worked collaboratively to influence improvements in diagnosis and support for people with young onset dementia and their families. This included developing a young onset dementia framework for integrated care boards (ICBs), setting out our recommended pathway for the diagnosis and support of younger people with dementia.

The Network contributed a young onset dementia-focused response to the NHS England consultation on its 10-year plan for improving health and social care, and supported Dementia UK's overarching response to the consultation. We also made a submission to the Department for Health and Social Care's Dementia Programme Board, ensuring one consistent message – that younger people with dementia must be represented in health and care systems at every level.

We have begun developing the Young Dementia Network strategy for 2025-28, with the involvement of younger people with dementia, family members, professionals and researchers. This will establish our objectives to ensure we continue our vital influencing role around young onset dementia.

Developing professionals' knowledge

Across the year, we shared our young onset dementia expertise with other health and social care professionals. This included through Young Dementia Network webinars, a webinar at Dementia UK's annual Summer School for people working in the dementia field, and embedding young onset dementia across the Admiral Nurse Academy's learning offer for nurses (see page 30).

We were excited to announce the Erica Weldhen Scholarship, funded by a generous donation from a supporter whose wife lived with young onset dementia. In 2025-26, this will fund at least two Admiral Nurses to work on projects aimed at improving care for families living with young onset dementia.

We also contributed to research projects to develop evidence-based knowledge around young onset dementia. These included DYNAMIC – a project on social care for people affected by young onset dementia – and Working with Dementia Network Plus, which aims to shift the understanding of working while living with dementia.

Our young onset dementia resources

People affected by young onset dementia often struggle to find age-appropriate information and support. During 2024-25, we developed and refreshed our young onset dementia resources and ensured young onset dementia is represented in all of Dementia UK's information leaflets and webpages.

To help people with young onset dementia feel less alone, we shared the experiences of others affected by the condition. These included episodes of our new podcast (see page 46), storyteller films and personal stories on our website. We also harnessed topical moments to raise the profile of our support services, for instance through our media activity around an EastEnders storyline focusing on young onset dementia.

We promoted access to our Helpline and virtual clinic appointments for people with young onset dementia, and expanded our 'Find support' search tool, which now lists over 170 groups and services for younger people across the UK. All of this helps to ensure that younger people with dementia know we are here for them – whenever they need us.

What we'll do next: our priorities for 2025-26

Work collaboratively as Dementia UK and the Young Dementia Network to improve the lives of people with young onset dementia and their families through influencing and profile-raising activities, including our young onset dementia pathway framework for ICBs.

Increase the understanding and knowledge of health and social care professionals, including Admiral Nurses, who support people with young onset dementia and their families.

Support the Young Onset Dementia Consultant Admiral Nurse service as it further develops.

Increase the availability and accessibility of specialist information and support for people with young onset dementia and their families, including using topical opportunities as a hook to share personal stories and promote our information, advice and support services.

Spotlight

The Young Dementia Network's 'Share your experiences' project

Younger people living with dementia face different challenges from older people – challenges that are often poorly understood.

For this reason, the Young Dementia Network launched its 'Share your experiences' campaign in 2024, asking people affected by young onset dementia to share the realities of living with the condition.

The project aimed to highlight the often-devastating impact of dementia in mid-life, including how it affects relationships, work and finances. The intention was to raise awareness of young onset dementia amongst two priority audiences – GPs and the general public – and drive improvements in the diagnosis experience for people under the age of 65.

Via email, social media and the monthly newsletter, the Young Dementia Network invited its members to share their responses to three key questions:

- Has young onset dementia taken anything from your life?
- Has receiving a diagnosis brought any comfort or benefits?
- Which symptoms most significantly affect your daily life?

The campaign received over 200 responses – 32% from people living with dementia, and 68% from family and friends – providing vital insight into the unique challenges of dementia in mid-life.

Question 1: has young onset dementia taken anything from your life?

Many of the responses mentioned the loss of the person with dementia as they once were. People talked about changes to their abilities, occupations, social interaction and relationships, and how these changes altered how they felt about themselves. They explained that their hopes and expectations for the future had changed or been taken away, and that they felt a loss of independence, freedom and stability.

Question 2: has receiving a diagnosis brought any comfort or benefits?

There were mixed responses to this question, which seemed to depend on how much support the person was receiving. Some said the diagnosis had brought them some comfort, that it was a relief to have an explanation for their symptoms, and that it allowed them to access support, move forward and plan ahead. But many people found no comfort in the diagnosis and talked about a lack of support.

Question 3: which symptoms most significantly affect your daily life?

While memory and other cognitive symptoms were mentioned in people's responses, these symptoms are often less pronounced in younger people with dementia than in older people, particularly in the early stages. More frequently, respondents talked about other symptoms that are more common in young onset and rarer forms of dementia – including communication difficulties, changes in mood and behaviour, physical symptoms and difficulty with everyday tasks.

People explained that it was not just the symptoms of dementia that impacted their lives, but the lack of awareness and understanding, particularly because of the invisibility of symptoms and the assumption that dementia occurs only in later life.

Since the campaign ended, the Young Dementia Network has used people's responses to create a summary of the most common themes and topics. A series of quotes – both positive and negative – were shared on social media to raise awareness of the reality of young onset dementia. The Network has also developed three animations based on people's answers to each of the questions. You can watch these and read the summary document at **youngdementianetwork.org/share-your-experiences2024**

The Young Dementia Network is now working on a second phase of the 'Share your experiences' campaign focusing on activism, as a tribute to the late Wendy Mitchell: a passionate dementia advocate and activist, Network member and Dementia UK supporter. This will shine a light on people who, inspired by the dementia activism of others, have done something themselves to make a difference to people affected by young onset dementia.

Responses to the 'Share your experiences' campaign

"I look at things differently now. I found out who my real friends are and have made many more since."

Person living with young onset dementia

"The person I married isn't there anymore, the man I live with now has a different personality. Conversation is gone. Empathy is gone. The sense of humour is gone."

Family member

"[The diagnosis] has left me more isolated. I don't think many people realise or understand that dementia can, and does, affect people in their 50s and sometimes younger. As such, I think society is less tolerant of the struggles we face."

Person living with young onset dementia

Developing our Admiral Nurses

Dementia UK's Admiral Nurse Academy supports every Admiral Nurse to develop and maintain their specialist skills, enabling them to provide people living with dementia and their families with the best possible advice and support.

Our objectives for 2024-25

- Begin the two-year project to enhance our learning management system to provide a more sophisticated offer to Admiral Nurses
- Roll out the Admiral Nurse Academy evaluation plan, using the new Admiral Nurse Development Pathway as a pilot, to allow us to monitor if our methods capture what we want to know
- Provide further learning opportunities externally to health and social care professionals
- Maintain our clinical supervision offer for all Admiral Nurses and develop more Dementia UK clinical staff to become facilitators of supervision

Our achievements

Dementia UK's Admiral Nurse Academy is committed to developing and supporting Admiral Nurses so they can offer families the best possible support.

With over 470 Admiral Nurses across the UK, online learning and development is a key part of our Academy offer. In 2024-25, we focused on enhancing our learning management system to ensure it best meets Admiral Nurses' needs.

We have recruited to a new post of Virtual Learning Environment Officer and invested in new tools for creating online courses. We are streamlining our current content and developing processes to support the platform's maintenance, making it more engaging and accessible.

Evaluating our Academy offer

Evaluation is an important part of our work, ensuring we provide Admiral Nurses with the right level of support. In 2024-25, we piloted our evaluation plan on:

- the Admiral Nurse Development Pathway, which all new Admiral Nurses follow in their first six months
- the Admiral Nurse Forum: our annual online event where nurses come together to share knowledge, learning and experiences
- our annual Summer School for anyone working in the dementia field

Our evaluation pilots have provided the whole team with best practice options for evaluating our ongoing activity and helped us make improvements to our ways of working, ensuring the Admiral Nurse Academy provides nurses and other health and social care professionals with the best possible learning and development support.

Clinical supervision and support

Clinical supervision is a vital part of our Academy offer to ensure Admiral Nurses receive the support they need in their demanding role. Our model of clinical supervision, known as Practice Action Learning Sets (PALS) – where groups of nurses come together virtually to reflect on and share their clinical work – now has 55 groups and 29 facilitators, providing nurses with peer support and supporting best practice.

We have increased our team to enable us to pursue further development opportunities for facilitators and ensure the quality and consistency of our supervision. Our steering group is leading on the ongoing work to develop more senior nurses as facilitators; this includes a new focus on Helpline and clinic services Admiral Nurses, as well as part-time staff.

Developing other professionals

Passing our expertise in dementia care to other professionals working in the field helps ensure that families receive the support they need across health and social care services.

We held another successful online Summer School, which is open to all health and social care professionals working in the dementia field, including students and volunteers. We welcomed 1,607 attendees, with feedback indicating that the topics and information provided were relevant to practice.

In 2024-25, we agreed a plan of action to release free and subscription learning to external health and care professionals, with nurses being our priority audience. Our working group is now developing ways forward, including securing a platform for learning modules and webinars. These learning opportunities will upskill nurses in the fundamentals of dementia care and support their specialist development. The platform will also be a space to grow a community of registered members.

Valuing lived experience

Lived experience is fundamental to ensuring that we deliver the best possible support for families affected by dementia. Our Lived Experience Advisory Panel (LEAP) – a group of people living with dementia, their families and carers – plays a crucial role in supporting, informing and influencing our charity's work.

LEAP's objectives are:

- to involve and draw upon the lived experience of people with dementia and carers, especially those using Dementia UK and Admiral Nurse services, in a meaningful, supportive and inclusive way
- to provide constructive feedback and advice on Dementia UK's work
- to assist with promoting Dementia UK and support its strategic aims and activities
- to be linked with the management and governance structure of Dementia UK
- to call upon the expertise of other people living with dementia and their carers

Throughout the year, LEAP has supported many aspects of our work, including helping us develop our General Election manifesto (see page 42), advising on the development of new resources, and sharing members' lived experience at Summer School.

We also seek the valuable insight of our Lived Experience Advisory Network (LEAN) – a nationwide network of over 200 people living with dementia and carers – to ensure our work is guided by a breadth of experiences.

Dementia UK's Admiral Nurse Academy Team

What we'll do next: our priorities for 2025-26

Pilot and launch our Admiral Nurse Practice Standards which will align with the Nursing and Midwifery Council Specialist and Advanced Nurse Practice Standards. We are aiming for a full launch and accompanying learning offer in April 2026.

Trial a new scholarship opportunity through the Admiral Nurse Academy to enable nurses to deliver a practice development project or initiative specifically focused on young onset dementia, building their knowledge, skills and service.

Provide student nurse placements within the Admiral Nurse Academy, working closely with a university to give nursing students the opportunity to learn more about dementia, our charity and Admiral Nursing. Our first two nurses will join us on placement in September 2025.

Further evaluate and modify the new Admiral Nurse Development Pathway, making adaptations as required to best support new nurses.

Launch a new Leadership Pathway with a foundation course available to all Admiral Nurses in 2025 and an advanced course to follow in 2026.

Evidencing our impact

Our Insights and Evaluation Team provides the data that underpins so much of our work and demonstrates the incredible difference Admiral Nurses make.

Our objectives for 2024-25

- Ensure that our insights and evaluation work effectively supports Dementia UK's strategy and demonstrates the role and impact of Admiral Nurses
- Collect feedback from families and professionals who access or have contact with Dementia UK and hosted Admiral Nurse services; and review our current carer and professional feedback surveys
- Develop new ways to build the evaluation capability of Admiral Nurses, working with the Admiral Nurse Academy to deliver webinars, masterclasses and other learning opportunities
- Continue to develop suitable tools and methods for gathering, storing, analysing and sharing information and evidence, and test new systems to make data more accessible to colleagues across the organisation

Our achievements

Throughout 2024-25, we provided 40 hosted Admiral Nurse services and 15 Dementia UK services with monitoring and evaluation advice, guidance and support. This included annual reports for the Helpline and virtual clinics (2023-24), and for our Consultant Admiral Nurse services for Frailty and Physical Health, Young Onset Dementia, Lewy Body Dementia and Sport and Dementia.

We supported colleagues with devising surveys, including advising on question wording and analysis. We provided data for requests received from across the organisation, including data reports to support our Philanthropy and Partnerships Team with evidencing the impact of projects supported by our corporate partners; and data for stewardship emails for the Individual Giving Team.

We provided colleagues in the Admiral Nurse Academy with evaluation guidance and support on key areas of their work including the annual Summer School and Admiral Nurse Forum. We also supported the 2025-30 Dementia UK strategy consultation with the development of the consultation survey, advice on focus group questions, and analysis and reporting of survey data. This insight has informed the strategy to ensure the best ongoing support for families facing dementia.

The annual Admiral Nurse census is an important opportunity to gather information about the breadth and depth of the Admiral Nurse role. In 2024-25, we shared the results of our 2023 census summary report with Admiral Nurses and hosts to evidence the impact of Admiral Nursing. This included a webinar demonstrating what our workforce looks like and the activities carried out to support families living with dementia and other professionals.

Collecting feedback

Throughout the year, we collected feedback from families accessing our Admiral Nurse services. We received around 1,500 responses to feedback surveys for our Helpline and virtual clinic appointments and developed new surveys to support Nationwide dementia clinics and Dementia at Work clinics.

We are piloting a carer feedback survey for people accessing Admiral Nurse services in acute settings, with five services currently using this survey. We have also reviewed and updated our general carer and professional feedback surveys.

The feedback we receive demonstrates the difference Admiral Nursing makes to families and professionals and builds the case for growing hosted and Dementia UK services so we can support more people when they need it most.

Growing our nurses' skills

To support Admiral Nurses with their own evaluation and monitoring, we developed a 'Case study' session, which we delivered as part of the Admiral Nurse Academy masterclass series. We also developed a 'Collecting demographic information for Admiral Nurses' session, attended by nurses from our Helpline, virtual clinics and Nationwide dementia clinics.

We included a monthly evaluation topic in the Admiral Nurse bulletin on subjects including 'What is monitoring and evaluation?', 'Creating a monitoring and evaluation plan', and 'Collecting carer feedback'. These will help nurses grow their understanding of and confidence in evaluation and monitoring.

Exploring new tools

An important part of our work is developing tools and methods for gathering, storing, analysing and sharing information and evidence. We have reviewed our data collection spreadsheets to make them more accessible for Admiral Nurses. These are currently being used by 25 hosted services to record activity and demographic data that demonstrates their impact on families facing dementia.

Requests to support the Nationwide partnership and Dementia UK's strategy consultation took precedence over fully exploring new tools and methods for managing information and evidence, but we will continue this work in the next year.

What we'll do next: our priorities for 2025-26

Ensure that our insights and evaluation work effectively supports Dementia UK's strategy and demonstrates the role and impact of Admiral Nurses. We will provide monitoring and evaluation advice, guidance and support; analyse and report evidence relating to Admiral Nurse services; and develop ideas and plans to support the charity's strategy for 2025-30.

Continue to support the Nationwide partnership with monitoring and evaluation, including feedback surveys and activity data for branch clinics.

Develop ways to build the evaluation capability of Admiral Nurses, working with the Admiral Nurse Academy to deliver webinars, masterclasses and other learning opportunities. We will also review our monitoring and evaluation handbook and online learning resources.

Continue to develop tools and methods for gathering, storing, analysing and sharing information and evidence, and test new systems to make data more accessible to colleagues across the organisation.

Collect feedback from families and professionals who access or have contact with Dementia UK and hosted Admiral Nurse services, including reviewing our bespoke carer and professional feedback surveys.

The value of research

By building the evidence base for Admiral Nursing and contributing to dementia care research nationally and internationally, our Research and Publications Team plays a vital role in improving support for families facing dementia.

Our objectives for 2024-25

- Continue to support Admiral Nurses to develop their research knowledge and skills through activities such as bespoke modules; support with writing for publication; and translation of research into 'bitesize' reviews so they can read brief summaries of research and its implications for their practice
- Launch a webinar series to give researchers in dementia care a national platform to present their findings and enable Admiral Nurses and Dementia UK to align their own research and innovation results
- Use the webinars to give updates against the outcomes and impact of our three research priorities; and conduct and publish literature reviews for each of the priorities to inform our planning of research around developing Admiral Nurse practice and services

Our achievements

At Dementia UK, our research is focused on building the evidence base for Admiral Nursing in order to grow services throughout the UK and enable us to support more families. Our research strategy sets out three research priorities:

- people with dementia who are living alone and families providing support from a distance
- people with young onset and rare types of dementia
- people living with multiple health conditions alongside dementia

In 2024-25, we completed 11 'bitesize' research reviews on topics including implementing post-diagnostic support and improving end of life care. These are hosted on our online learning platform for Admiral Nurses to inform them about recent research and its implications for their practice.

Developing Admiral Nurses' skills and confidence in research and writing for publication is central to addressing our priorities. This year, we collaborated with Join Dementia Research to create a course on 'Confident conversations about research'. Our pilot showed a statistically significant improvement in nurses' confidence to talk about research and opportunities for people affected by dementia to participate.

Throughout the year, we supported Consultant Admiral Nurses to become involved in research projects relating to their areas of specialty and gain honorary contracts with universities to increase their links with researchers and academia. We also supported the introduction of a 'journal club' to enable them to appraise research literature.

We presented at the Admiral Nurse Forum on 'Transitions in digital technology use for people living with dementia' and worked with the Admiral Nurse Academy to deliver a masterclass on decision-making at the end of life. These activities helped nurses develop new knowledge that they can translate into practice to better support families facing dementia.

We continue to co-facilitate the national Hospice UK/Dementia UK Dementia and Palliative and End of Life Care Community of Practice, now in its 10th year.

Our publications

Throughout the year, our research and articles appeared in 32 publications, with nine more accepted for publication or in press. Fourteen conference posters (visual presentations of our research findings) and oral presentations (formal talks to an audience) were also delivered or accepted.

Our book, 'Living with dementia – what you really want to know', is one of the top 20 books on the Dementia Reading Well list, with copies available in every public library. Due to demand, the book will be translated into Welsh in the coming year.

We helped several Admiral Nurses publish their work in peer-reviewed journals during 2024-25 and supported a nurse to take a lead editorial role on 'Dementia Essentials': a textbook introducing the principles of good dementia care to nursing, health and social care students.

The experiences of people living with dementia and their carers are fundamental to our research. To help people feel confident about participating, we worked with LEAP to develop a guide to research involvement for people affected by dementia: please visit **dementiauk.org/about-our-research**

Our research webinar series

While the anticipated launch of our national research webinar series was delayed, planning is well underway for the programme, with three to four webinars proposed for each calendar year. The webinars will embrace developments, research and projects in Dementia UK to reinforce our position as a dynamic and inquisitive charity.

The webinars will also showcase research projects such as our national mapping work, which is progressing well. The first phase of the mapping project is to analyse national data on factors that may increase a person's risk of additional complex challenges related to dementia, for example health inequalities and poverty. We are using this data to develop 'heat maps' showing areas of greatest need, which will help us identify where to prioritise when developing new Admiral Nursing services.

Members of Dementia UK's Research and Publications Team

What we'll do next: our priorities for 2025-26

Map inequalities in dementia and the availability of Admiral Nursing to focus our efforts on developing new services in the areas of greatest need.

Develop a core outcomes set for Admiral Nurses to measure their impact in all services across the UK and help us demonstrate the value of Admiral Nursing more easily and effectively.

Develop a leaflet on autism and dementia, based on the growing evidence that dementia is more common in autistic people.

Commence work on a health economic analysis of Admiral Nursing, assessing its costs and benefits compared to other health interventions, to encourage potential host organisations to consider the benefits of developing a local service.

Update and add new research-mindedness modules to our online learning platform to encourage more Admiral Nurses to undertake and publish their own research.

Campaigning for change

Our Policy, Campaigns and Public Affairs Team is a positive force for change, calling for local and national improvements in dementia care so no one is left to struggle alone.

Our objectives for 2024-25

- Put dementia care firmly on the agenda of the new Government, working with campaigners and people with lived experience to influence new MPs and calling on the parties directly to transform dementia care
- Campaign for improvements in access to dementia support for diverse communities, including people living with young onset dementia
- Push for changes to the NHS continuing healthcare funding system through our 'Fix the funding' campaign, so that it meets the needs of those living with dementia
- Be an expert voice in policy development at national and local level to ensure that the needs of people living with dementia inform the delivery of the services that they rely on
- Work alongside LEAP and our community of campaigners and supporters to deliver national campaigning actions that put the priorities of people living with dementia at their heart

Dementia UK campaigners taking our message to Parliament

Our achievements

The General Election and engaging with the new Government dominated our campaigning activity in 2024-25. Through our 'Put dementia on the agenda' campaign, we called on party leaders and candidates to transform dementia care if elected. You can read more about this on page 42.

Soon after the General Election, working with thousands of passionate supporters, we reached out to all MPs about why dementia needs to be on the Government's agenda. We also created an information pack to show MPs how Dementia UK can work with them to support people affected by the condition, locally and nationally.

During the first six months of the new Parliament, we met with a quarter of all MPs to speak to them about the need to improve dementia care and the impact of Admiral Nurses. This included attending the main UK political party conferences, where we met over 150 MPs. As a result, over the last year, Dementia UK's policy recommendations have been mentioned in Parliament more than ever before.

All these activities will help drive change to address the many issues in health and social care affecting people with dementia, so they and their families receive the support they need.

Our young onset dementia framework

As part of our commitment to improving dementia care for communities that often struggle to access support, we have collaborated with the Young Dementia Network to develop a comprehensive young onset dementia framework for integrated care boards (ICBs). The framework aims to help ICBs in England address the unique needs of people with young onset dementia, with clear guidance on implementation and best practice.

We also worked with MPs to raise the profile of young onset dementia in Parliament and developed a powerful film featuring Gail – whose story you can read on page 10 – talking about the challenges she has faced trying to access dementia support. You can watch this at **dementiauk.org/gails-story**

'Fix the funding': our NHS continuing healthcare campaign

NHS continuing healthcare funding is a lifeline for many families facing dementia, helping cover the costs of care, but too many people are struggling to access it due to a broken system that fails to recognise their needs.

In 2024-25 we continued our 'Fix the funding' campaign, calling for improvements to the NHS continuing healthcare process for families affected by dementia. This was a key call in our General Election campaign. As part of the campaign, we developed a hard-hitting film with Mahersh talking about the challenges his family faced in accessing continuing healthcare funding for his mother. You can watch this at **dementiauk.org/chc-mahersh**

We also met regularly with civil servants from the Department of Health and Social Care, and collaborated with charities across the sector as part of the NHS Continuing Healthcare Alliance to show how the process must be improved for families affected by dementia.

Over the year, we fed into other national and local policy consultations, highlighting the experiences of people affected by dementia and the Admiral Nurses who support them. These included National Institute for Health and Care Excellence (NICE) appraisals of emerging drug treatments; a submission to the Covid inquiry on social care; and the Scottish Government's Palliative Care Strategy.

Shaping the future of NHS England

In autumn 2024, the Government launched its biggest ever consultation about the NHS in England to help shape a new 10-year plan to improve healthcare. This provided a huge opportunity to ensure that the needs of people affected by dementia were reflected in the plan.

An incredible 4,700 supporters completed a survey about NHS dementia care to inform our response to the Government. Nearly three quarters told us that the NHS is failing to meet the needs of families affected by dementia. Our Chief Admiral Nurse and CEO Dr Hilda Hayo was also involved in the Department of Health and Social Care's vision working groups for the 10-year plan – one of the few charity representatives to be included.

The insight from our supporters, along with research carried out with Admiral Nurses, helped shape Dementia UK's organisational response to the Government – calling for more specialist dementia nursing, improved support for carers, and urgent action to remove barriers to care for communities that find it especially difficult to access support.

Dementia UK supporters Will and Ronnie addressing MPs

The plan was published in July 2025, and we are encouraged that it includes a number of commitments that, if effected, would improve care and support for families affected by dementia. We will continue working alongside decision-makers to shape the delivery of the plan and make sure it addresses the complexities of living with dementia.

Dementia UK is also represented in the Commission on Palliative and End-of-Life Care, giving us a voice at the heart of Government.

Making families' voices heard

All our campaigns are underpinned by the experiences of people affected by dementia. In 2024-25, over 19,000 amazing Dementia UK supporters took campaigning action across the UK. We supported several dedicated campaigners to meet with their MPs in person to discuss the importance of transforming dementia care.

LEAP members took an active role in helping shape our General Election campaign,

Rosie Brooks, Dementia UK supporter who cared for her mum, at our Downing Street event

including providing insight into our manifesto summary and open letter to party leaders.

We also developed a campaigner engagement strategy that seeks to strengthen our campaigner community over the next three years. This will help us in our mission to transform dementia care in the UK so that all families can access specialist support.

What we'll do next: our priorities for 2025-26

Push to ensure that specialist dementia care is at the heart of the changes to the way health and care are delivered in England, including through influencing the NHS 10-year health plan and calling for more Admiral Nursing in acute care settings and neighbourhood health teams.

Widen our influence in the devolved nations by campaigning for improvements in dementia care throughout the UK, expanding our team into Scotland, Wales and Northern Ireland and engaging with the respective parliaments and governments.

Push for changes to NHS continuing healthcare funding through our 'Fix the funding' campaign, working with colleagues across the sector to look at systemic improvements needed to the continuing healthcare process.

Campaign to reduce health inequalities in dementia care, including through improving access for people living with young onset dementia and researching other health inequalities to develop robust policy recommendations for change.

Drive improvements in end of life care for people with dementia, including through representation in the Royal Commission for End of Life Care.

Spotlight

‘Put dementia on the agenda’: our General Election campaign

The General Election gave us the opportunity to highlight the need for urgent improvements in dementia care. Our Policy, Campaigns and Public Affairs Team called on all candidates to make it a priority.

In May 2024, Dementia UK launched ‘Put dementia on the agenda’, our General Election campaign. We wanted candidates and newly elected MPs from all political parties to understand the urgent need to fix dementia care, and to commit to taking bold action for the growing number of families affected by the condition.

When the General Election was called sooner than expected, we sprang into action to launch our campaign. At the heart of this was our manifesto, developed in collaboration with Admiral Nurses and people affected by dementia. It outlined four clear steps that the UK Government must take to lead the way in transforming dementia care:

1. Fix the NHS continuing healthcare funding process to make care funding fairer for people with dementia.
2. Deliver expert and personalised support after a dementia diagnosis so that no one faces dementia alone.
3. Improve diagnosis rates and age-appropriate support for people affected by young onset dementia.
4. Increase access to specialist dementia nursing in hospitals.

We contacted all candidates directly to share our manifesto and asked them to meet with us if elected. We also produced an open letter, in collaboration with LEAP, which called on party leaders to commit to fixing dementia care if elected.

Rallying our supporters

We rallied our passionate supporters to get behind our campaign, sharing updates and ways to get involved. We developed an easy-to-use tool for supporters to email General Election candidates about the importance of taking action on dementia care, and created a window poster which suggested questions to ask local candidates who were canvassing in constituencies.

Many people affected by dementia joined the campaign, and shared powerful stories about the challenges of accessing care and the importance of improving it for other families.

An incredible 13,000 Dementia UK supporters signed our open letter to party leaders, and over 2,000 people contacted their local candidates urging them to transform dementia care. We also secured local and national media coverage about our campaign.

Working together for change

Alongside our 'Put dementia on the agenda' campaign, we proudly partnered with Alzheimer's Research UK, Alzheimer's Society, Alzheimer Scotland and the UK Dementia Research Institute to create a joint manifesto setting out the steps we need the UK Government to take to transform the lives of people affected by dementia. Our recommendations for change focused on prevention, diagnosis, support, care and research.

We shared our joint manifesto with our supporters via email and on social media, where it achieved the highest engagement rates across all our General Election activity, highlighting how much Dementia UK supporters care about us collaborating with other charities. We also shared it directly with General Election candidates.

"Throughout the time I was a carer there were so many barriers to us getting support. It took a huge toll on my mental health. I truly believe that the system has to change for other families so they don't experience what I did with my parents."

Chris, campaign supporter whose parents both lived with dementia

Our work continues

Thanks to the efforts of Dementia UK staff and supporters, 400 General Election candidates agreed to meet with us if elected. Since the election in July 2024, we have met with over 160 MPs and seen an increase in the number of MPs asking the UK Government questions about our recommendations for change.

While we cannot fix dementia care overnight, we are making great progress to push it up the political agenda – and we will continue to press for urgent improvements so people affected by dementia can access the support they desperately need.

Spreading the word

The work of our Marketing and Communications Team raises awareness of Dementia UK and our Admiral Nurse services, ensuring people affected by dementia know we are here when they need us.

Our objectives for 2024-25

- Seek new ways to develop awareness of Dementia UK, including by capitalising on key moments such as International Nurses Day, World Alzheimer's Month and Black History Month
- Deliver impactful content to core audiences and provide expert information for people pre- and post-diagnosis, testing different ways of presenting content including animations and podcasts
- Increase our spokesperson roster to ensure we have media-trained spokespeople capable of addressing different audiences effectively
- Ensure our digital offer is embedded in all our work, for example by continuously improving our website, developing a post-diagnostic online programme and investing in search engine optimisation (SEO)
- Raise awareness of Dementia UK's clinical services with other healthcare professionals
- Increase awareness of Dementia UK as a centre of expertise for young onset dementia

Our achievements

The stories of people affected by dementia are a powerful force for raising awareness of our life-changing work. In 2024-25, we put their voices at the heart of our communications. This included creating videos of storytellers talking openly about their experiences, which we shared for key moments including International Nurses Day, World Alzheimer's Month and Black History Month.

Our storytellers were also central to the fourth phase of our awareness campaign, 'We live with dementia'. This signposted people to our 'Living with dementia' guide, which, for the first time, we also distributed through GP surgeries. The campaign ran across social media, TV, radio and out-of-home advertising; as a result, many more families know about the support we provide.

Reaching people digitally

Throughout the year we sent regular email communications to our supporters, sharing dementia information and advice, raising awareness of our support services, and encouraging them to fundraise, donate and campaign. We also used email to connect with health and social care professionals, encouraging them to direct families towards Dementia UK's support.

Social media is key to raising awareness of our charity. Throughout the year, we shared a huge range of content, including stories, videos, tips, campaigns and Q&As. We also tailored content and ran paid campaigns targeted at younger people on TikTok to reach its younger demographic.

We continued to develop our suite of information resources, publishing new leaflets and webpages and reviewing our existing resources to ensure all our information is

current and reliable. We invested in SEO to help people affected by dementia find our information more easily, resulting in increased in traffic to our website.

We also worked with Admiral Nurses to create a series of online sessions, 'Dementia: what next?', designed to inform people about what to expect after a diagnosis. You can read more about the sessions on page 16.

Sharing news and information

Our PR activity is a crucial part of raising our profile and signposting people to our services. Throughout the year, the Media and PR Team secured significantly more press coverage than in 2023-24. We drove this through corporate partnership announcements, by working closely with the BBC and ITV to support dementia storylines in EastEnders and Coronation Street, and through themed media plans around barriers to dementia care and transitions of care.

The team provided media training for Admiral Nurses to grow our roster of spokespeople, and engaged new Celebrity Ambassadors and social media influencers to support our activity. All of this ensures we are at the front of people's minds when they need information and support around dementia.

Social media in numbers

- TikTok: **up 51.16%**
- LinkedIn: **up 23.45%**
- Instagram: **up 18.05%**
- Facebook: **up 14.71%**
- X: **down 1.89%***

* This is reflective of an overall decline in X use.

What we'll do next: our priorities for 2025-26

Design, deliver and roll out a new brand strategy.

Develop a digital transformation strategy to expand the reach of our Admiral Nurses, ensuring more people can access their expert advice and support.

Enhance the accessibility of our information, advice and support services, including through SEO, to ensure that families affected by dementia and professionals can easily access and benefit from our resources.

Use current affairs, celebrity diagnoses and TV storylines as hooks to build our content and raise awareness of Dementia UK and Admiral Nurses, ensuring we are responsive to these emerging moments across our channels.

Spotlight

‘My life with dementia’: Dementia UK’s podcast

No one better understands the challenges of dementia than the people who are living with it. Our new podcast shines a light on their stories and raises awareness of the life-changing support of our Admiral Nurses.

Podcasts have surged in popularity in recent years, providing a conversational platform for sharing stories, allowing listeners to connect deeply with the experiences of others. The Marketing and Communications Team saw the potential of a Dementia UK podcast to reach a huge audience, many of whom may be unaware of our charity. We also recognised that our listeners would be able to download and listen to the podcasts at any time, providing a flexibility that is essential when caring for someone with dementia, or living with the condition yourself.

Our podcast storytellers

Production of our first podcast series, ‘My life with dementia’, began in April 2024. It takes listeners on a personal journey through the world of dementia, told by people who have experienced it themselves.

We worked in collaboration with a freelance producer to create ‘My life with dementia’. All the storytellers featured in the podcast had been supported by Dementia UK and our Admiral Nurses. They had incredibly compelling stories to tell. It was also important for us to hear from people living with dementia themselves, not just carers, family and friends.

Our storytellers included Andy, who was diagnosed with dementia at 52; Ricky, who shared his heartfelt experiences of grief and guilt while caring for his grandmother; and Aqib and Shahbanu, who stressed the importance of creating moments of connection as carers for their mother. Each episode also included practical tips from two of Dementia UK’s Admiral Nurses.

Actor Jim Broadbent, who is a Celebrity Ambassador for Dementia UK, kindly agreed to present the podcast – introducing our storytellers, providing context on their experiences and signposting our services at the end of each episode. We are very grateful for his support.

Andy, who lives with young onset dementia, featured in our podcast

Aqib and Shahbanu care for their mother and shared their story in our podcast

'My life with dementia' launched in September 2024 to coincide with World Alzheimer's Day, with a series of six episodes. The response was phenomenal, with over 21,000 downloads in just one month; this has since risen to over 41,000. The podcast has featured in prominent publications like Radio Times, The Telegraph, The Times and The Sunday Times. It also reached number 17 in the top health and fitness podcasts on Spotify and was shortlisted for a CharityComms 2024 Inspiring Communicator Award.

What's next?

Following the success of season one, a second series of 'My life with dementia' launched in May 2025, featuring six new storytellers, each with their own unique story, and a new presenter – journalist, podcaster and Dementia UK Celebrity Ambassador Marianne Jones.

The new season builds on the success of series one, reaching new listeners so more people hear about the realities of living with dementia, find comfort in listening to the stories of those in similar situations, and learn how we can support them if they need us.

'My life with dementia' is available to listen to on all podcast platforms and our website: please visit **dementiauk.org/podcast**

Feedback from 'My life with dementia' season one

"Thank you for everything you do with such dignity, understanding and sensitivity. I love the sum-ups your Admiral Nurses do at the end, some of which I'm listening to more than once as they are so useful."

"It's comforting to know all the things I feel are normal."

"Currently bingeing on this fantastic new podcast that sensitively, without sensation, explores the challenges families and people living with dementia face."

"As a military doctor, I've encountered many challenging health conditions, but the stories of individuals living with dementia truly resonate with me. It's inspiring to see how much impact Admiral Nurses and organisations like Dementia UK are making in the lives of those affected."

Elliott's story

I was 12 years old when Dad first showed signs of dementia. There were times when I would be waiting at school because he'd forgotten to pick me up. The front door would be left open when he went out. And packing his bag for work the next day began to take hours, not minutes.

Dad wasn't even 60 when he was diagnosed with Alzheimer's disease – the most common form of dementia. I was trying to navigate the transition between primary and secondary school: a confusing time for anyone, let alone when you throw a parent's dementia into the mix. I wanted to form new friendships and invite people over. But I didn't know if this would confuse Dad or if he would be in a strange mood that day.

I didn't speak to any of my friends about what was going on – partly because I didn't really know how to talk about it, but also because I just wanted to be treated normally. I didn't want sympathy.

Music was Dad's great passion in life. He learnt to sing and play a variety of instruments from a very young age. He travelled around the world conducting choirs – in these moments, he was truly in his element.

Dad also taught private music lessons, but as his dementia got worse, his pupils began to drop off. He couldn't remember what they had done in their previous lessons. Sometimes he'd forget altogether and not turn up.

This added a layer of financial pressure to the situation. At one point, my mum was juggling three jobs while caring for Dad and parenting me and my sister. Despite this load, she never let on that it was something to worry about. She didn't want us to be consumed with the stress of the situation, so she bore the weight of it.

"Our Admiral Nurse changed our lives"

As a family, we didn't know too much about dementia. We didn't really speak about it. But then Jody – our Admiral Nurse – came into our lives and changed all of that.

Jody explained things in plain terms, organised carers, communicated with our school, and helped with financial questions. Just as important was her emotional support. She was a lifesaver for Mum. With Jody's help, we were even able to go on a dementia-friendly holiday with Dad. I'll always cherish those memories of our last family trip together.

Elliott's mum Janet (right) with Admiral Nurse Jody

When Dad went into care it was the hardest time for me. I didn't want him to leave home. But it was apparent that having carers at home wasn't enough. Jody instigated the conversation about moving Dad into full-time care and helped us work through the decision, which was difficult beyond words.

"Jody was there in the darkest moments"

I honestly believe music kept Dad going in the later stages of his dementia. Even when he couldn't speak, he could sometimes sit down at the piano and play an amazing classical piece. When he was in hospital in his final weeks, we brought him an MP3 player so we could play music for him. Even though his eyes were closed and he couldn't communicate, you could see him light up and try to sing.

Dad passed away in spring 2019. The funeral was a difficult day for all of us, but Jody was there, which meant so much. She had been with us through our darkest days, and still keeps in contact with Mum.

We simply couldn't have got through this most difficult of periods without Jody. I honestly can't see how any family would be able to navigate dementia without an Admiral Nurse.

You can watch Elliott's story at
dementiauk.org/elliotts-story

Individual giving: changing lives with every donation

Our work is only possible because of the amazing supporters who make single or regular donations, donate in memory and leave gifts in their Wills. Our Individual Giving, In Memory and Supporter Experience Team inspires current and new supporters to donate to our life-changing work.

Our objectives for 2024-25

- Provide new and existing supporters with opportunities to donate through a variety of fundraising activities, including appeals, single donations, regular gifts, the Weekly Lottery, donations in memory and gifts in Wills
- Build deeper engagement with supporters to make them feel more involved in our work, inspiring their loyalty and long-term relationships
- Raise awareness of the value of gifts in Wills through activities such as supporter events and multichannel marketing, including photography and video

Our achievements

Our life-changing work depends on our generous supporters. We are truly grateful to everyone who donates regularly, ensuring we can maintain and grow our support services for families across the UK. In 2024-25, we increased the number of regular givers by 72%. This included through a new face-to-face fundraising programme (see page 52), two annual appeals, and our Weekly Lottery.

Throughout the year, we ran a campaign on social media, giving new supporters the opportunity to request a free gift and be contacted about setting up a donation. This both generates funds and raises awareness of our invaluable work.

We also worked with the Policy, Campaigns and Public Affairs Team to ask supporters to raise their hand for change and email their MP about the need to improve dementia care, with many going on to support Dementia UK in other ways.

Gifts in Wills

Gifts in Wills ensure we can be there for families far into the future. We are sincerely grateful to everyone who supports us in this generous way. To encourage people to consider making a gift in their Will, we:

- developed a new Will planner to help them prepare for their Will-writing appointment
- created video and photography featuring a supporter who has included a gift in her Will
- held a supporter event at London's Museum of the Home, with a talk from a solicitor on the importance of making a Will

These activities and others led to a 34% increase in people leaving a gift in their Will since last year, helping us support families in generations to come.

Showing our gratitude

To express our gratitude to our supporters, we held our first ThankAthon week, contacting some of our most loyal donors to personally explain the difference they make – read more on page 56.

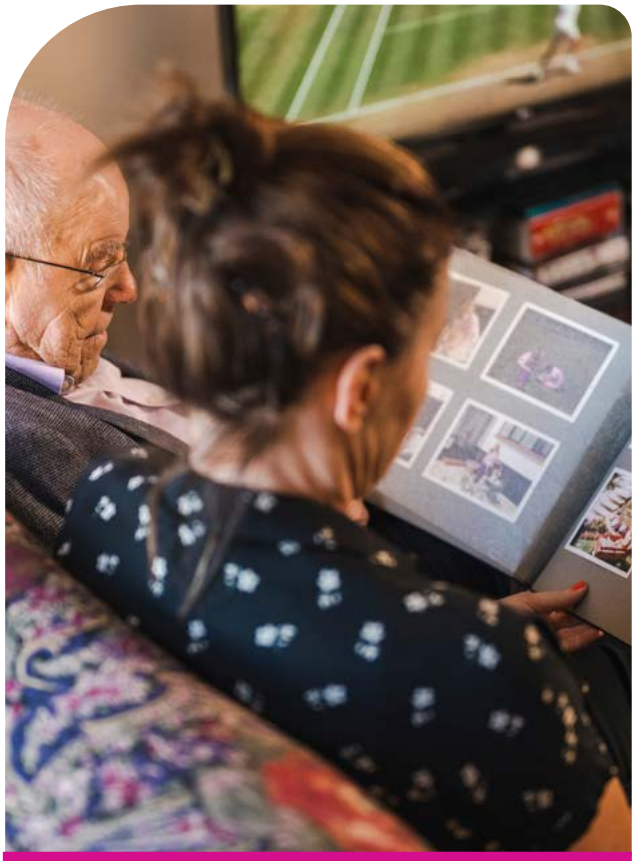
We also sent our magazine, 'Closer to you' to our supporters, featuring stories of the people who benefit from their generosity; and mailings to thank them for their loyalty and show the impact of their donations.

Many of our supporters donate in memory of someone special. We gave them opportunities to remember their loved ones by posting tributes on our virtual Memory Walls. We also held an online remembrance event for supporters to come together to celebrate the life of a loved one. Many attendees told us how much they appreciated this collective act of remembrance.

We continue to collect supporters' feedback through surveys and mystery shopping. The results show that we have maintained their satisfaction and increased their loyalty to Dementia UK. We will use these findings to build an even better experience for our supporters, whose loyalty and generosity mean more families can access our specialist dementia services.

"I wanted to personally thank you for organising the 'Together to remember' event. I really appreciated the opportunity to reflect on my mum's 12-year journey and subsequent death from dementia and share the space with like minded people."

Online remembrance event attendee



What we'll do next: our priorities for 2025-26

Continue to promote gifts in Wills including through advertising our free Wills services and gifts in Wills guide; supporter events; and promoting this form of giving to people who have supported Dementia UK in other ways.

Grow long-term sustainable income through face-to-face fundraising, the Weekly Lottery and other fundraising activities, for example Christmas and spring appeals and promoting the importance of Gift Aid.

Create an excellent supporter experience to make donors feel valued and help them understand the difference they make.

Spotlight

Growing regular giving: our face-to-face fundraising programme

In 2024-25 we embarked on a new fundraising programme, where professional fundraisers meet members of the public in person to tell them about our charity and encourage them to make a regular gift.

Face-to-face fundraising provides the opportunity to diversify and grow long-term, sustainable income that will enable us to develop our support services, now and in the future. It allows us to talk to people about dementia, why our work is so important, and how they can help.

Our initial face-to-face fundraising activity ran from June 2024 to February 2025 at over 500 sites across the Swindon and South London areas, including supermarkets, leisure centres and garden centres.

Raising awareness and funds

Our fundraisers work at a Dementia UK stand with various branded materials such as banners, information leaflets, welcome packs and an electronic tablet which they use to complete Direct Debit sign-ups. They aim to greet every member of the public warmly, often speaking to over 200 people a day. This helps to raise awareness of Dementia UK as well as recruiting new supporters.

Our fundraisers are equipped to have conversations about the urgent need for improved dementia support. They emphasise the impact of long-term giving on growing the number of specialist dementia nurses, and provide examples of what regular donations could achieve.

Our initial face-to-face fundraising activity proved a great success, recruiting more than 4,000 new supporters. In addition, a number of people who were unable to commit to regular giving made single donations in their own time following their conversations.

Just as importantly, we received a wealth of positive feedback about our fundraisers from members of the public, showing the power of this activity to build our reputation and profile.

Following the success of the fundraising campaign, we will continue this method of fundraising in 2025-26 with the aim of signing up more regular supporters, all of whom will help drive our mission of specialist dementia support for every family that needs us.

"I met a very friendly collector in Waitrose today who explained to me what Dementia UK does. He was very thoughtful, especially when I mentioned there is dementia in my family... I'm emailing to advise you of his help and will be signing up for a regular donation."

New Dementia UK supporter

Our amazing fundraisers

Thousands of supporters every year raise vital funds for Dementia UK. Our Community Fundraising, Events and Innovation Team supports them throughout their inspiring fundraising journeys.

Our objectives for 2024-25

- Recruit participants for our challenge events, continuing with our 'fewer, bigger, better' strategy
- Recruit participants for virtual challenges, including through testing new technology and increasing the volume and value of 'do it yourself' (DIY) challenges
- Diversify the virtual events programme to ensure long-term, sustainable income; test new event concepts, audiences and incentives; and use new platforms for acquisition campaigns
- Grow income across community fundraising
- Use our innovation process to create and test new insight-led fundraising products

Our achievements

In 2024-25, our passionate and dedicated challenge events participants came together to raise vital funds for Dementia UK. We focused on our 'fewer, bigger, better' strategy, reducing the number of third-party events but increasing our investment in places. We concentrated on making these events bigger in participant numbers and income; and better, to ensure our committed supporters have the best experience of fundraising for families living with dementia.

Throughout the year, thousands of supporters took on a DIY event – a fundraising challenge of their own choice – or a virtual event for Dementia UK. We ran a number of virtual events throughout the year and tested new fundraising challenges aimed at different audiences.

Historically, we have given branded t-shirts to virtual event participants; however, we branched out this year to include incentives tailored to the challenge, including running buffs, beanies and knitting patterns.

To connect with our supporters, we tested new technology including new sign-up and fundraising platforms. The results were positive, and we are now using these technologies in more upcoming virtual events.

Time for a Cuppa, our flagship annual tea party event, proved a great success. Our committed supporters baked and brewed for Dementia UK, together raising £212,253: an increase of 22% on 2024-25. We secured sponsorship from our partner Nationwide for the 2025 fundraiser, helping us reach more supporters and raise even more for families facing dementia.

Our Regional Fundraising Team continues to work hard to build links with local companies and organisations and encourage them to support us. We are also focused on growing and supporting our community of Volunteer Ambassadors, who generously give their time to raise funds and awareness.

Innovating to succeed

Innovation is crucial to driving our fundraising. Working collaboratively across Dementia UK's Fundraising Teams, we developed three new propositions in 2024-25:

- The 500 Club, inviting high-value supporters to donate a minimum £1,000 per year to grow the number of Admiral Nurses to 500 by the end of 2025
- The Triple Wins Challenge: this invites corporate partners to take on three themed fundraising challenges and will be piloted in 2025-26
- Puzzle Packs: our first subscription product

By developing products like these, we can create new opportunities for new and existing supporters to donate, growing our services so more families can access our life-changing support.

What we'll do next: our priorities for 2025-26

Continue to create new fundraising propositions, using our innovation process to develop and test new insight-led products.

Diversify our marketing channels, including testing different platforms for recruiting supporters for Time for a Cuppa.

Further grow income across community fundraising, focusing on DIY supporters, regional corporates and organisations.

Establish a strong pipeline for new business across regional companies, working closely with the Corporate Partnerships Team.

Focus on growing our DIY events programme through providing an excellent stewardship journey and supplying additional fundraising materials.

Spotlight
Dementia UK's ThankAthon

Without our supporters, we simply couldn't do what we do. They change the lives of families affected by dementia – and showing our immense gratitude is a key part of our supporter experience work.

In February 2025, we piloted a centrally coordinated ThankAthon week to show some our most loyal supporters how grateful we are for their support, rallying staff from across Dementia UK to play their part.

Throughout the week, we personally thanked over 1,000 supporters for their generosity. We sent tailored, handwritten thank you cards, which included a QR code taking supporters to a webpage explaining their incredible impact. A team of staff volunteers, including Admiral Nurses, made phone calls to people who have supported us through events and community fundraising. To extend our gratitude further, staff recorded messages of thanks which we shared on our social media channels.

Building loyalty and trust

Despite not asking for donations, we saw some immediate benefits, including supporters opting into our email communications and updating their Gift Aid status, making their gifts worth 25% more. There was an increase in engagement with our impact webpage during and after the event, and a corresponding increase in volunteer and fundraising rates after visiting the page.

Going forward, we will continue to assess the impact of the ThankAthon on our supporters' loyalty through a survey. Without them, thousands of families would be left to face dementia alone. We could not be more grateful for their kindness.

ThankAthon feedback from supporters and staff

"Everyone I called was so pleased to be getting a call. It was lovely, as an Admiral Nurse, to thank people for supporting us so we can support others."
Staff volunteer

"What I did and raised is nothing compared to the support you have given my family."
Supporter who was contacted by phone

"It made my day!"
Supporter who was contacted by phone

Working in partnership

Our work wouldn't be possible without the corporate partners, trusts and major donors whose generosity ensures we are there when people need us most.

Our objectives for 2024-25

- Continue to deliver successful corporate partnerships, motivating staff to get involved with a programme of events, raising awareness about dementia and supporting colleagues in the workplace
- Create a programme of special events for new and existing supporters to tell them more about the difference they make
- Increase our community of major donors, offering compelling ways to fund our work
- Build our relationships with existing partners, ensuring we provide them with an excellent stewardship experience, and develop powerful new partnerships
- Continue to develop gift opportunities that inspire supporters to transform dementia care

Our achievements

Our corporate partners play a huge part in ensuring families facing dementia can access the expert, tailored support of an Admiral Nurse, and we sincerely thank every new and existing partner who helped us extend our impact throughout the year.

We are delighted to have formed a transformational partnership with Nationwide Building Society as part of its social impact strategy, Fairer Futures. This is funding 30 Admiral Nurses and aims to support 100,000 people impacted by dementia. You can read more about this transformational partnership on page 60.

Our Charity of the Year partnership with Deutsche Bank raised an incredible £1m to fund our life-changing work. A particular highlight was its annual One Day fundraiser, where UK colleagues were encouraged to donate a day's salary to Dementia UK, with all donations matched by the bank. Thanks to their incredible generosity, over £520,000 was raised for families facing dementia.

Our longest-standing partnership with Central Co-op reached its conclusion in December 2024, having raised a fantastic £2.8m since 2017. This will have a lasting impact on families facing dementia, including directly in their local communities and through our Helpline.

We are extremely grateful to our other corporate partners who supported us during 2024-25. These include Assura, Everyone Active, Macfarlanes, Morson Group, The Openwork Foundation, Tokio Marine HCC International, Westerleigh, Wolseley UK and Zurich Community Trust. We have also begun an exciting new three-year partnership with F.Hinds. Because of their support, we can be there for more families who would otherwise have nowhere to turn.

Trusts and major donors

Across 2024-25, we were truly grateful to receive generous donations from many trusts, foundations and individual supporters. These valued donations will help us develop specific services, including clinics for communities that struggle to access dementia support. We provide these

Hilda Hayo, Dementia UK's Chief Admiral Nurse and CEO, joining a Nationwide Fairer Futures panel

supporters with regular stewardship and engagement, ensuring they hear about the incredible impact of their donations.

We also launched our first giving club for major donors who pledge to support us annually – The 500 Club. In recognition of their commitment, we keep supporters up to date with the difference their donations make, along with invitations to special events. We are collaborating with teams across Dementia UK to develop more opportunities like this for our supporters to work with us.

To show our gratitude to our trusts and major donors and encourage others to support us in this way, we have created a programme of events, such as an event at 11 Downing Street where we met and thanked some of our supporters. We will build on this programme to ensure our donors feel valued and inspired to continue their support for people affected by dementia.

What we'll do next: our priorities for 2025-26

Continue to develop major gift opportunities that inspire funders to accelerate and transform dementia support.

Build long-lasting relationships with our partners and supporters through providing excellent stewardship.

Continue to deliver successful, strategic and wide-reaching corporate partnerships, providing a platform to help us reach more families and communities who need our support.

Develop and enhance opportunities to engage colleagues and customers in a meaningful and impactful way, such as further embedding our Dementia at Work programme and exploring how we can harness theirnetworks and knowledge.

Spotlight

Our partnership with Nationwide Building Society

In 2024, we announced a transformational partnership with Nationwide. We are working together as part of its new social impact strategy, Fairer Futures, which is tackling four of the biggest issues affecting society today.

Our partnership aims to support 100,000 people through specialist dementia advice and guidance. This includes funding 30 Admiral Nurses to work on our Helpline and run dementia clinics in 200 Nationwide branches across the UK. The clinics provide free appointments to members of the public, regardless of whether they are a Nationwide customer, enabling anyone to seek expert support from an Admiral Nurse in their community.

We have also embedded two Admiral Nurses in Nationwide for the duration of the partnership. They are supporting colleagues affected by dementia through virtual clinic appointments, and helping the building society improve its support for vulnerable people, including customers impacted by dementia.

You can read more about how our Dementia at Work Team is supporting Nationwide on page 20.

Rebecca O'Neill-Kerr, Admiral Nurse working with Nationwide

Nationwide's incredible impact

In our first year working together, we supported 29,173 people through our partnership activities. This was only possible because of the generosity of Nationwide in donating and fundraising for Dementia UK.

To celebrate the launch of Fairer Futures, Nationwide committed to donating up to £500,000 to its three charity partners, offering members the opportunity to choose a charity to donate to as part of their Annual General Meeting vote. A large number of generous members chose to donate to Dementia UK; these funds will be used to grow our policy and public affairs work with the aim of improving dementia care and support.

Nationwide is supporting Time for a Cuppa – our annual tea party fundraising event. It officially sponsored the campaign in May 2025, providing a platform to engage colleagues, customers and members of the public in the flagship event so that together, we can support more families facing dementia.

Nationwide colleagues have also gone above and beyond to support our partnership, from taking part in dog walking challenges to hosting quiz nights and volunteering to promote our branch clinics.

What's next

After a year in partnership, Nationwide and Dementia UK will now be focusing on:

- increasing the reach and take-up of branch clinics
- training for frontline colleagues who support vulnerable customers, including those with dementia
- Nationwide providing its expertise and experience to support with Dementia UK's digital development
- supporting our policy and public affairs agenda, including a parliamentary Time for a Cuppa drop-in event for MPs

We are truly grateful to Nationwide, its colleagues and members for their support so far.

To find out more about our partnership, please visit **nationwide.co.uk/dementia**

Feedback from Nationwide dementia clinics

"It was absolutely amazing to speak to somebody who understood what I was going through and had the time to listen. We weren't just given a load of leaflets and signposted to someone else. The Nationwide clinic has had a lasting positive impact on me and I'm so grateful to the Admiral Nurses and Nationwide."

Branch clinic attendee

"The nurse was compassionate and patient with me... [She] listened to my worries and fears with empathy and kindness. I've worked for Nationwide for almost 22 years, and meeting the Admiral Nurse is probably the most profoundly impactful conversation I've had at work."

Nationwide staff clinic attendee

Nationwide's Time for a Cuppa event

Shara's story

My mum, Anna, was the strongest person I've ever known. She raised three daughters on her own, teaching us how to be strong, independent and hard-working women.

Throughout our childhood, Mum juggled multiple jobs, often across day and night shifts. She loved cooking and feeding people, and while we didn't have a garden, our balcony was an incredible display of pots and hanging baskets.

When she entered her mid-70s, I started to notice changes in Mum's behaviour. Documents and paperwork were stacking up, with bills left unpaid. She became forgetful, often leaving food burning on the hob. And she began to withdraw socially, which was completely out of character.

I convinced Mum to visit the GP in 2015. A year later, she was diagnosed with vascular dementia, aged 79.

It's heartbreaking when someone you love receives a dementia diagnosis. But what I wasn't expecting was the complete lack of follow-up and support. I lost count of the number of health professionals who nodded their way through appointments, saying how sad it was and that it wasn't going to get better.

When I finally succeeded in proving to Social Services that Mum had no money, was on benefits and was in desperate need of care, they gave us access to a care team. But the turnover in carers was such that Mum often thought there were strangers in her own house and would become agitated. Many of them were overworked, underpaid and not adequately trained in dementia care.

"Admiral Nurse Kerry was a shining light"

I could not have coped through this stressful time without the Dementia UK Helpline and its Admiral Nurses. Initially, I felt a sense of guilt for using a service I wasn't paying for, which put me off calling. Looking back, that was a mistake, as by the time I did call, I was desperate. I wish I hadn't let myself get to that point.

Because of Mum's poor physical health, I was put in touch with Kerry, Dementia UK's Consultant Admiral Nurse for Frailty and Physical Health. We met regularly via virtual appointments after my initial call to the Helpline, and she was a godsend.

In 2023, Mum had a number of falls, and after a traumatic 32-hour wait in A&E, she was admitted to hospital for eight weeks. Kerry was a great support at this upsetting time. She understood the pressures of the hospital setting, and suggested practical tips like making a 'patient passport' to help the staff understand Mum's history, her likes and dislikes and who she was as a person. This helped them care for her better.

Kerry also taught me so much about Mum's advancing frailty and corresponding continence issues, weight loss, pain, poor mobility and risk of falls. When the time came, she guided us through the hospital discharge process and helped us find a suitable care home for Mum's final months.

Alongside all of this, Kerry was there for me. I was so consumed with stress and worry that my own wellbeing had well and truly taken a backseat. She reminded me that in order to be the best carer I could be, I needed to look after myself too.

Mum died in April 2024. I'm still processing her loss, and grief has very much been a journey for me. But Kerry's support meant the world, and I'm so grateful for everything she did for us.

When I remember Mum, I like to think of her laughing. She had the most beautiful laugh and a smile that could light up a room. She never lost either, right up to the end.

Nurturing our supporters

The work of our Supporter Care and Database Services Team and Dynamics 365 Implementation Project Team ensures we provide our valued fundraisers and donors with the best experience of supporting Dementia UK.

Our objectives for 2024-25

- Continue our database migration to Dynamics 365, enabling better reporting and analysis; close to real-time data; more responsive supporter journeys; seamless integration between data sources – and ultimately, a better supporter experience across the board
- Further contribute to the Dementia UK supporter experience project to continually improve our supporters' experience of the charity and our internal teams' ability to make effective, data-driven decisions as the volume and breadth of our fundraising activities grow
- Oversee adherence to data protection and other regulations across the fundraising programme, consulting the Data Protection Officer where appropriate; and create and update fundraising policies to govern our day-to-day work and decision-making

Our achievements

Using our data effectively means we can understand our supporters better and give them complete confidence in supporting Dementia UK. To this end, in 2024-25 we continued our database migration project to Dynamics 365, which will improve how we store, manage and use our supporters' data.

Once fully live, the database will ensure our supporters have the best possible experience of Dementia UK, encouraging them to continue raising funds to support and grow our Admiral Nursing services.

To ensure our supporters' confidence in how we handle their data, we continued to oversee adherence to data protection regulations, updated several fundraising policies, and provided support to fundraising teams to ensure all activities are compliant.

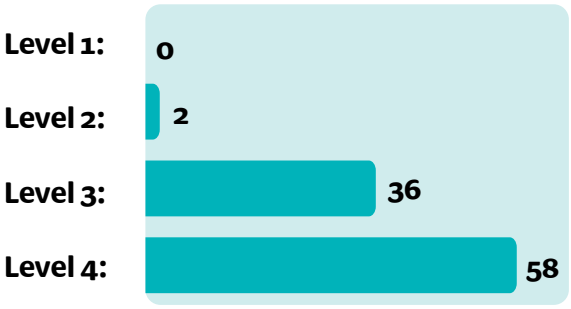
Our team has continued to contribute to the charity's supporter experience project and implemented several process changes in response to mystery shopping feedback. We have significantly improved donation processing and thanking timeframes and centralised our phone lines by taking over the Community Fundraising and Events Team's calls, giving supporters one central number for all fundraising enquiries.

Responding to complaints

As members of the Chartered Institute of Fundraising and the Fundraising Regulator, we adhere to the Code of Fundraising Practice and are committed to the Fundraising Promise. There were no instances of non-compliance with the Code this year.

We make it easy for people to contact us with their complaints, which can be registered by phone, email, post or online form and are forwarded to the Supporter Care Team. Depending on the severity, they may be escalated to more senior members of staff. We work together with each supporter in resolving their complaint and record the process and resolution on our database.

In 2024-25, we received 96 general complaints, a reduction of three from 2023-24 despite an increase in fundraising activity, evidenced by our higher income. Our complaints are classified according to four levels – Level 1 being the most serious, and Level 4 the least.



Our overall volume of complaints is low for a charity of our size. We are pleased that we had no Level 1 complaints, and the number of Level 2 and Level 3 complaints were significantly lower than in 2023-24, showing that the complaints we do receive are less serious.

Supporter Manny Singh Kang, who has raised over £300,000 for Dementia UK, with members of the Fundraising Team

Third-party fundraising

We work with a small number of third parties, including commercial organisations and professional fundraisers, to raise money. We deliver training and support to professional fundraisers, including outlining how to recognise and protect vulnerable people and adhere to our Vulnerable donors policy (see right). We closely monitor all third parties, including compliance reviews of all contracts, regular review meetings and call listening.

In 2024-25 we received eight complaints about contact from third-party fundraisers. These were categorised as either a dislike of the method of fundraising or related to the conduct of a fundraiser.

In the instances of dislike of the method of fundraising, the supporter was given the opportunity to opt out, and this was actioned if they requested a change in their communication preference. Where fundraiser conduct was the nature of the complaint, an apology was sent to the supporter and the details were passed over to the relevant third party for them to undertake additional training with the individual fundraiser. Examples of real complaints are used in our third-party fundraiser training to try to prevent similar complaints from occurring.

All complaints related to third party fundraising were successfully resolved.

Protecting vulnerable donors

At Dementia UK, we are committed to fundraising in an honest and responsible way, so we take care to act appropriately with people who may be in vulnerable circumstances. 'Vulnerable' in this context refers to people who may lack the appropriate decision-making capacity to support Dementia UK financially.

Our Vulnerable donors policy sets out our framework for recognising potential vulnerability during interactions with supporters, and the escalation process for addressing this and making a decision about whether we can accept a donation.

In certain cases, according to the policy we may refuse or refund a donation from an individual if we have sufficient grounds to believe that they lack capacity and that therefore accepting a donation from them would be unethical. This is in line with the Chartered Institute of Fundraising's 'Treating donors fairly' guidance.

The policy also makes it clear that having dementia does not in itself class someone as vulnerable; the assessment should always be based on their behaviours and communications, regardless of any condition they may have. The policy provides guidance for recognising these, again with reference to 'Treating donors fairly'.

What we'll do next: our priorities for 2025-26

Complete the implementation of the new fundraising database and the associated data architecture.

Enter a continuous improvement phase after database go-live, continuing to develop the data architecture to significantly improve the management and use of data and drive our evolving fundraising programme.

Further improve supporter experience by continually reviewing and updating business practices and processes; and effectively leveraging the benefits of new technologies.

Our people and culture

Our People and Organisational Development Team plays a pivotal role in building a supportive, inclusive and high-performing culture at Dementia UK, enabling staff to thrive and deliver real impact for families affected by dementia.

Our objectives for 2024-25

- Develop our 2025-30 strategy, working together with people with lived experience of dementia and staff across the charity to inform our direction for the next five years
- Support the charity's growth by ensuring we attract and recruit exceptional staff to help us deliver our vision and mission, appeal to a diverse range of people and grow our workforce to meet the needs of people affected by dementia
- Enhance staff recognition and retention through a range of new initiatives celebrating those who make an outstanding contribution
- Implement new project management approaches which support cross-charity collaboration and effective delivery of our work
- Be recognised as an employer of choice and strive to feature for the first time in the Sunday Times Best Places to Work

Our achievements

A core focus for our team this year was the development of our 2025-30 strategy, designed to unite the charity around a bold and clear purpose. This began with identifying the barriers we are facing in achieving our vision of a world where no one faces dementia alone – where everyone gets the specialist support they need.

We engaged every member of staff in the development of the strategy and provided the opportunity to contribute through our annual staff conference and virtual workshops. We further sought more in-depth involvement from more than 60 staff representatives through dedicated working groups, fully consulting LEAP throughout the process.

We have used the findings to develop a strategic framework for the next five years, built around three pillars and three enablers:

- **Pillar 1: support** – delivering personalised, specialist support to families
- **Pillar 2: influence** – shaping policy and public understanding
- **Pillar 3: inform** – sharing knowledge and insights to improve care
- **Enabler 1: inspire** – fostering ambition and inspiring millions of others
- **Enabler 2: effectiveness** – driving efficient and impactful ways of working
- **Enabler 3: culture** – embedding our values and thriving as an employer of choice

We developed a theory of change to sit around the strategic framework and conducted a landscape review for each of the pillars and enablers to inform our top objectives in each area.

People affected by dementia, all staff and key external partners were invited to feed back on

the first draft of the strategy through an online consultation exercise or focus groups, with over 250 responses. The process of developing detailed delivery plans with clear priorities is now underway.

Growing our organisation

Recruiting highly skilled and committed people who align with our vision and values is crucial in ensuring we provide families affected by dementia with the best possible support. To raise our profile as an employer of choice, we were featured in articles in several publications, including an interview with our Chief Admiral Nurse and CEO Dr Hilda Hayo in Charity Times. This contributed to the high volume of qualified candidates applying for vacancies.

We introduced our first dedicated online recruitment platform, streamlining the candidate experience and embedding inclusive practices such as anonymous applications and other measures to minimise bias. We gained Inclusive Hirers accreditation, enabling us to further improve the inclusivity of our recruitment process.

Across the year, 112 posts were filled, 71 of which were new roles for the charity. 22% of advertised roles were filled by internal candidates. Our recruitment process has received exceptional reviews on the job search site Glassdoor.

We are committed to being an employer of choice and are delighted to have been named the Sunday Times Best Place to Work – non-profit and charities (big organisation): please see page 72 for more information. We are actioning feedback received as part of the survey process to make continuous improvements for the benefit of our staff.

Valuing our staff

Our staff are our greatest asset, and we regularly celebrate our successes at our monthly all-staff meetings and our annual conference. These provide opportunities to relay information and updates to staff, collect their feedback and enable them to ask any questions that they wish.

This year, we also launched our quarterly staff Recognition Awards, for individuals and teams who embody our values through their work.

As part of our commitment to developing our staff, we extended our Learning Programme

to offer more opportunities for training and development. We developed a bespoke Dementia UK job evaluation framework, supporting transparency around pay and progression within the charity. We also hold regular Lunch and Learn sessions to ensure our teams are connected and up to date.

Colleagues are invited to participate in focus groups and workshops throughout the year, for example in the development of the 2025-30 strategy, detailed on page 68, and in new policy development. Staff have the opportunity to attend Trustee and sub-committee meetings, where they can present to Trustees on their areas of work and what they see as the challenges and opportunities.

We also maintained our focus on providing excellent support to – and a high standard of communication with – our Volunteer Ambassadors, recruiting a new role dedicated to supporting them.

Supporting equality, diversity and inclusion

As a Disability Confident Employer, Dementia UK is committed to supporting job applicants and employees with disabilities. We implement a range of adjustments during the recruitment process and subsequent employment to improve accessibility, enabling disabled people to join and thrive in our team.

Our internal Recruitment Team is trained in inclusive hiring practices, ensuring that our job adverts and recruitment processes are as accessible as possible.

Through our health review process, we take an active approach to supporting employees with health conditions, helping to keep them in work.

We offer a range of diversity and inclusion training and awareness-raising opportunities to all staff, including through our Equality,

Diversity and Inclusion (EDI) Network. We are proud to have achieved Menopause Friendly Accreditation and developed our own Menopause Hub, demonstrating our support for staff at this life stage. We have also signed the Pregnancy Loss Pledge.

Working together as one

To ensure we are collaborating across the charity, we have implemented new project management approaches. This included launching a cross-organisation planning document to provide Dementia UK staff with central visibility of key activity, timelines and resource requirements, helping us to plan more proactively and collaboratively.

One such project is the refurbishment of our Head Office to create a workspace that better meets Dementia UK's needs as a hybrid organisation. We held collaborative discussions with members of staff to create an appropriate office environment for our growing team. This will ensure we can work as effectively as possible.

What we'll do next: our priorities for 2025-26

Begin implementation of our strategy delivery plans.

Standardise and improve our project management ways of working, adopting best practice that is tailored to the needs of Dementia UK.

Spotlight

The Sunday Times Best Places to Work Awards

In 2025, Dementia UK was delighted to be named as the Sunday Times Best Place to Work in the non-profit and charities – big organisation category.

This achievement reflects our commitment to ensuring every member of staff feels valued, receives the support they need to thrive professionally and personally, and recognises the charity as a great place to work. It comes off the back of our 2025 staff survey, which provided a vital opportunity to establish how colleagues feel about working at Dementia UK.

Our staff surveys help us recognise where we are doing well and where improvements could be made. The feedback means we can take action to address these areas of focus, ensuring that we are listening to our staff and continuously improving their experience of working for Dementia UK.

Our previous staff survey in 2023 showed that our staff were proud to work for our charity

Dementia UK staff members with the Sunday Times Best Places to Work Award

and would recommend it to others. As a result, we decided to enter the Sunday Times Best Places to Work Awards in 2025, with the hope of being recognised as an employer of choice in the charity sector. It was an opportunity to celebrate our culture and working environment, raise awareness of Dementia UK as a great place to work and encourage more talented people to join our team.

The Sunday Times Best Places to Work survey was administered by a third-party employee engagement provider and sent to all staff, with an excellent completion rate of 79%.

The results were overwhelmingly positive and gave us cause for celebration, and receiving the Sunday Times Best Places to Work 2025 Award confirms that we are officially the best large charity to work for in the UK.

The award is a recognition of the culture we have built together, around our values of compassion, collaboration, integrity and ambition. It will strengthen our voice and credibility, help us attract and retain talented people, and raise our profile so even more families affected by dementia know they can turn to us for support.

What's next?

We are delighted to have received the Sunday Times Award; however, we will not stop here. Based on the results of the staff survey, we will continuously strive to make Dementia UK an even better place to work by focusing on the areas colleagues have highlighted for improvement.

This will ensure we provide the best possible experience for our staff, so everyone feels proud to work towards our common vision: a world where no one faces dementia alone – where everyone gets the specialist support they need.

THE SUNDAY TIMES
Industry Awards Winner
Best Places to Work 2025
NON-PROFIT AND CHARITIES

IT: keeping our systems running

Our vital work supporting families depends on the technology we use every day. Our IT Team ensures it is secure, efficient and reliable.

Our objectives for 2024-25

- Upgrade and standardise our equipment to ensure all devices are compliant with Cyber Essentials standard and have improved security and software; introduce a specialised approach to oversee the lifecycle of devices; and make improvements to the lifecycle management of our devices
- Support with replacing systems which are coming to the end of their useful life by conducting workshops to assess our requirements; and devise a focused procurement and implementation plan for new systems that will continue to meet the growing needs of our charity
- Test our ability to continue operations in the event of unplanned disruption to ensure we can provide uninterrupted services to our beneficiaries
- Test our cyber resilience by identifying security vulnerabilities and risk
- Educate staff to embed a cyber security culture across the organisation and minimise the risk of malicious email attacks

Our achievements

Our programme to upgrade and standardise our equipment to ensure all devices are compliant with Cyber Essentials standard was completed in 2024-25. We have updated our equipment and improved security. This will ensure our technological capabilities support future growth that enables us to be there for more families facing dementia.

To make sure our services for the people we support are uninterrupted in the event of unplanned disruption, we have undertaken analysis and established that appropriate back-ups are being taken for our critical systems.

Cyber resilience is essential to protect Dementia UK from security vulnerabilities and risk. We have worked to identify the assets that need to be protected, the threats that could pose a risk to those assets, and potential vulnerabilities. We continually educate staff about the importance of cyber security, particularly being aware of malicious email attacks.

This all ensures our services are secure and reliable, so we can work as efficiently and effectively as possible to provide families with the expert, uninterrupted dementia support they need.

What we'll do next: our priorities for 2025-26

Develop and implement a five-year IT strategic roadmap aligned with Dementia UK's 2025-30 strategy, collaborating with key colleagues regarding timing, change management and implementation plans to ensure our systems support the charity's growth.

Establish a disaster recovery testing schedule for business-critical systems. This will ensure that the organisation is well prepared to activate technology service restoration procedures in the event of a technology or system outage.

Governance, compliance and risk

We ensure that Dementia UK complies with the necessary legal and regulatory requirements, mitigates against risk and has appropriate governance systems in place, ensuring the best possible support for families facing dementia.

Our objectives for 2024-25

- Embed a risk management framework, including a Risk Champions Programme to support our approach to risk management across the charity
- Establish a framework for using artificial intelligence (AI) to ensure we benefit from the use of technology with due consideration of risks
- Continue our work on business continuity by undertaking in-depth business impact analysis for our key areas of work and designing and testing our business continuity plan
- Implement the 'Three lines of defence model' in risk management to effectively manage risk by identifying structures and processes that support us to achieve our objectives

Our achievements

Throughout the year, we made significant strides in implementing robust organisational policies and processes encompassing the full spectrum of corporate and information governance. This included developing comprehensive Information security, AI usage and Data protection policies. We also led the refresh of the data retention schedule to bring it in line with the Data retention and disposal policy.

To ensure that our support for families facing dementia does not falter in the event of unexpected adverse circumstances, we partnered with an external organisation to develop a business continuity framework across the charity. As part of this project, we undertook business impact analysis, which highlighted two critical areas:

- delivery of clinical services to beneficiaries
- fundraising: receipt and processing of donations

As a result, we created a set of business continuity response cards, which set out a plan for managing crisis situations across the charity that would directly impact our supporters or beneficiaries. We tested some of these through a crisis simulation exercise to practise how we would use our response cards in such a situation.

In recognition of this work, Dementia UK won the 'Strategy through partnership' award at the 2025 Cyber Incident Response Business Continuity Awards.

Our approach to risk management

To build a risk-aware culture at Dementia UK and identify operational risks, we have recruited Risk Champions across the organisation who are responsible for promoting and supporting risk management practices within their own directorates.

May 2024 saw the charity's first exercise on risk appetite. We worked with the Executive Team and Trustees to assess the degree of risk we consider acceptable in different areas of the organisation, introducing a sliding scale model from 'averse' to 'eager'. This ensures that Dementia UK has a balanced risk appetite that allows us to develop and innovate in how we support families affected by dementia.

We have undertaken risk inductions and training to ensure staff across the organisation are better equipped in their understanding of risk management and identification. These include a bespoke session for Admiral Nurses as part of the Nationwide dementia clinics programme, and risk training for Trustees.

Through our 'Three lines of defence' model of risk management, we provided advice and support on legal matters, data protection and governance. We also conducted two internal audits on cyber security and pensions and ensured that the recommendations were implemented in a timely manner.

In addition, we have helped reduce reputational and financial risk to the charity by strengthening our procurement and contract management capacity, ensuring that our resources are used efficiently and effectively in any commitments the charity makes.

What we'll do next: our priorities for 2025-26

Become more efficient in risk and governance matters, introducing new software for the effective management of policies and contracts with third parties.

Enhance our risk management framework through a rolling programme of internal audits and piloting a new system to further embed timely risk monitoring.

Develop our business continuity and crisis management processes, including more testing of Dementia UK's business continuity response cards to identify areas of improvement.

Undertake compliance audits on policies, providing independent and objective verification of policies.

Improve governance on legal and data protection matters; the introduction of governance, risk and compliance tools will also help with the effective management of relevant data protection logs.

Making the most of our funds

We want every penny we raise to have the maximum impact on the families we support. Our Finance Team enables this, growing Dementia UK sustainably and ensuring our funds are used as effectively as possible.

Our objectives for 2024-25

- Continue our automation journey to allow our finance system and processes to benefit from automation and have robust processes and controls, working towards our ultimate vision of achieving real-time reporting
- Introduce a procurement strategy and policy to ensure a standardised and transparent approach to purchasing and spending practices across the charity
- Build key performance indicators (KPIs) to provide a clear framework for measuring success against predefined objectives
- Develop management reporting to help with making more accurate, data-driven decisions

Our achievements

Following the implementation of our new purchase order and expenses system, we have continued to explore ways to enhance our automation, including in our budgeting, forecasting and reporting processes. We embarked on a finance transformation journey and have started implementing a new, fully integrated financial management, reporting and procurement system.

In the past year, the charity has developed and implemented a comprehensive Procurement policy to ensure consistency and transparency in our procurement activities. We recruited a Procurement Manager who plays a key role in embedding the policy through staff training sessions, central guidance and templates. The Procurement Manager also brings a strategic focus to making value for money central to our purchasing decisions, maximising the impact of the funds we raise for families facing dementia.

We have improved our due diligence processes to better protect our reputation and resources regarding our third-party supplier engagements. We have also started developing internal finance process KPIs, which include liquidity, and our reserves cover.

Throughout the year, we enhanced our support for other departments in the organisation to enable them to make effective, financially informed decisions and assessments.

All these activities ensure that we use our funds for the maximum possible benefit for the families we support.

What we'll do next: our priorities for 2025-26

Continue our financial transformation by launching and establishing a new, fully integrated finance solution that is scalable, futureproof and flexible. The system will provide real-time insights; encourage collaboration and engagement for all users across the charity; and offer development opportunities for the Finance Team.

Continue to explore opportunities for cost savings and efficiency improvements. We will enhance our due diligence procedures for new and existing suppliers to safeguard our reputation and resources. We will also foster strong supplier relationships through better collaboration, improving overall performance.

Develop and implement a five-year financial plan aligned to Dementia UK's strategy for 2025-30, in partnership with the wider organisation. We will test its resilience through scenario planning and risk assessment.

Develop effective business partnering to help make informed decisions, using real-time information flow to allow the organisation to be more effective in managing its resources.

Develop a Treasury management policy to optimise funds management, generate a stronger financial return from our funds held and improve stewardship of monetary assets.

Financial review

The Trustees present their report and audited consolidated financial statements for the year ended 31st March 2025.

All Trustees are also Directors for the purpose of company law, and the Trustees' Report represents the Directors' Report required by section 417 of the Companies Act 2006.

Objectives and activities for public benefit

The Trustees confirm that they have referred to the Charity Commission's guidance on public benefit when reviewing the aims and objectives in planning future activities.

Summary

The financial statements have been prepared in accordance with applicable accounting standards, current statutory requirements, the requirements of the Statement of Recommended Practice (SORP), Accounting and Reporting by Charities (SORP 2015), and the charity's governing document.

Income

- Donations and legacies £29.6m
- Charitable activities £0.7m
- Other £1.1m

Total £31.4m

Income and expenditure

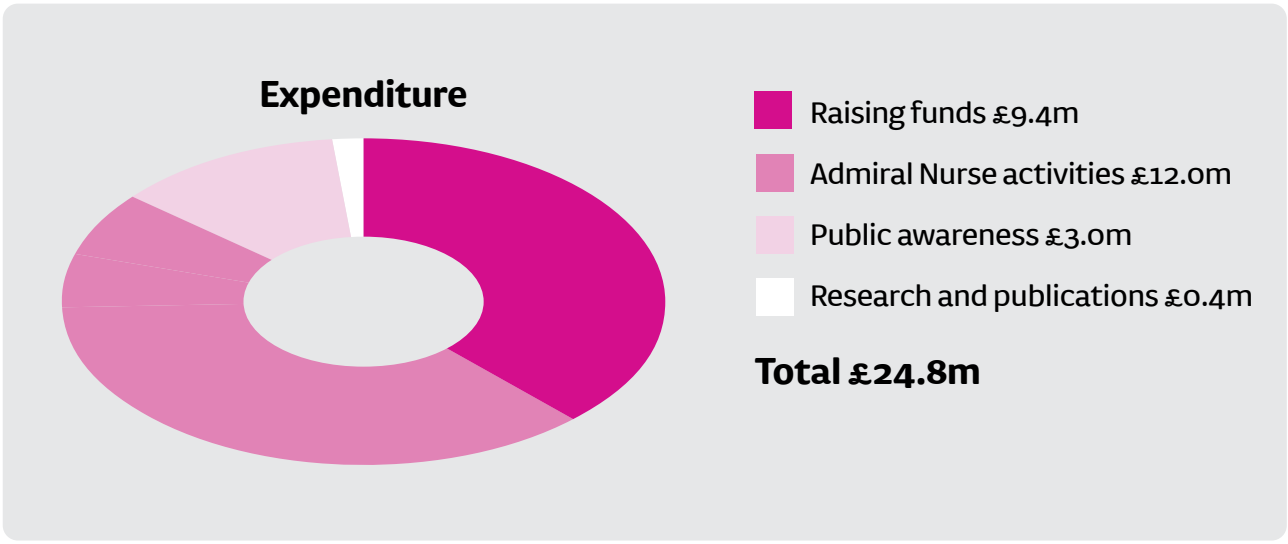
Our income increased by £8.9m to £31.4m in 2025 (2024: £22.5m). This was £2.7m above our forecast expectations set during autumn 2024, largely due to donations, legacies and interest from short-term deposits being higher than projected.

Our total expenditure was £24.8m (2024: £18.8m), which was £2m below forecast expectations of £26.8m. Delays in recruitment and large projects contributed towards cost savings. We achieved a net surplus for reinvestment of £6.6m (2024: £3.7m).

Our net assets totalled £25.3m (2024: £18.7m) with net current assets of £23.1m (2024: £16.6m). The liquid cash balance (accessible within one year) was £23m (2024: £17.6m).

Included within the group income and expenditure above are the results for our trading subsidiary, Dementia UK Trading, which generated profit of £24,135 (2024: £16,995) from a turnover of £181,947 (2024: £46,196). Further detail can be found in note 15 to the accounts.

The Trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. This is based on detailed budget and cash flow projections for 2025-26.



Structure, governance and management

Board of Trustees

The Board of Trustees is the governing body that administers the charity. All major decisions are made by the Board, which meets at least four times a year to discuss and formulate policy, risk and strategic direction. All Trustees give their time voluntarily and receive no benefits from the charity. Any expenses reclaimed from the charity are set out in note 9 to the accounts.

The Trustees of the charity are also the Directors of the company for the purpose of company law, and any reference to Trustees is therefore also to Directors. None of the Trustees has a beneficial interest in the company, and the charitable company held third-party indemnity insurance on behalf of the Trustees during the current and prior year.

Trustees in office since 1st April 2024 are:

- Professor David Croisdale-Appleby OBE (Chair)
- Philippa Armitage
- David John Ball
- Alistair Burns
- Steven Clarke (Honorary Treasurer) (resigned 13th November 2024)
- Emma Crozier (resigned 14th August 2024)
- Jane Keir
- Jackie Kinsey (appointed 20th August 2025)
- Theresa Murphy
- William Roe
- Gavin Sanderson
- Anne Shinkwin
- David Stewart (Honorary Treasurer with effect from 14th November 2024)
- Mark Stroyan

Company Secretary:

- Suruchi Saraf (resigned 20th August 2025)
- Claire Mattinson (appointed 3rd September 2025, to be ratified by the Board of Trustees on 19th November 2025)

Working with our stakeholders

As Directors of the charity, the Trustees have a duty under section 172(1) of the Companies Act 2006 to act in the way that they consider, in good faith, would be most likely to promote the success of the charity in achieving its charitable purposes. The act states that in doing so, the Trustees should have regard, amongst other matters, to:

A. The likely consequence of any decision in the long term.

Dementia UK recognises the importance of having a clear strategy to guide us as we seek to grow our support for people affected by dementia and their families. Dementia UK's strategy for 2025-30 will ensure we continue on our growth trajectory as we address the ever-increasing demand for our services and support.

Performance against the strategy, and any risks to delivery of this, are considered regularly at meetings of the Board and its committees, which have clearly defined terms of reference and delegations to ensure that decisions are made in the best interests of beneficiaries, both now and in the future.

B. The interests of the organisation's employees.

We are proud of our values at Dementia UK and seek to bring these into consideration in everything we do. Our recognition as the Sunday Times Best Place to Work: non-profit and charities (big organisation) in 2025 is a key indicator of the investment we make in our people.

We support the interests of our employees in many ways, including:

- assessing staff performance against our values in annual appraisals and one-to-one meetings
- celebrating people who live out our values through our staff Recognition Awards
- keeping staff engaged and informed via regular all-staff meetings, newsletters and our annual conference
- providing a generous range of benefits
- offering a comprehensive learning and development programme

C. The need to foster the organisation's business relationships with suppliers, customers and others.

We engage regularly with the NHS and were active in campaigning for improvements in dementia care in the recently announced NHS 10-year health plan for England. We believe that the plan now shows the Government is committed to taking significant steps to improve dementia care.

The views of our beneficiaries are essential to our work. We consult our Lived Experience Advisory Panel (LEAP) and Lived Experience Advisory Network (LEAN) to inform our strategy and our work. We also have many volunteers who are instrumental in growing awareness of and support for Dementia UK, helping us generate the income that we need to provide our vital services.

We have a number of active corporate partners, whose support helps us develop our services for families living with dementia. We also work with our partners to embed our specialist knowledge into their organisations, allowing them to better recognise and support the needs of employees and customers affected by dementia.

D. The impact of the organisation's operations on the community and the environment.

We seek to locate services where they are needed, both remotely through our Helpline and virtual clinics and in healthcare and community settings where people can access them most easily. We aim to ensure that access to our services is as easy as possible to minimise travel and disruption for the people who need our support.

We have invested in our leasehold offices in central London, providing an improved space for hybrid working, investing in technology and processes to enable better connectivity, and seeking to minimise our carbon footprint through effective procurement.

We have introduced reporting under the Streamlined Energy and Carbon Reporting (SECR) legislation this year (see pages 87-88) and will be monitoring our performance against it going forward.

E. The desirability of the organisation maintaining a reputation for high standards of business conduct.

Clear and transparent business processes and stakeholder engagement are vital for effective business operations. Dementia UK has strengthened its approach to supply chain management with the establishment of a procurement function and the introduction of new finance and procurement systems. These will enable us to improve the efficiency and effectiveness of our purchases and foster stronger relationships with our business partners.

We also recognise the importance of ensuring that there is a sound governance framework in place within the organisation, particularly in the light of the sometimes complex regulatory framework within which we operate. We have embedded risk management and a robust policy framework within the organisation, supported by an insourced internal audit function, designed to provide an appropriate degree of assurance to key stakeholders.

F. The need to act fairly between members of the organisation.

Dementia UK is a UK charity and a registered company, limited by guarantee. Its purpose is to deliver benefit to its beneficiaries. The membership of the company is limited to the Trustees of the charity and no Trustees, either directly or indirectly, received any benefit from Dementia UK in the financial year.

Trustee recruitment, appointment and induction

The existing Trustees of Dementia UK are empowered under the Articles of Association to elect new Trustees of the charity and to make co-options at any other time.

Dementia UK seeks to include a wide skillset within the Board of Trustees, and as part of our governance process, Trustees identify and remedy any gaps in skills on the Board.

We recruit new Trustees in different ways, including advertising vacancies and reaching out to people who are involved and interested in our work. We invite potential new Trustees to observe at least one Board meeting to guide their decision about whether to agree to nomination as a Trustee.

We have an induction programme for all new Trustees of Dementia UK. This includes meeting the Chief Admiral Nurse/CEO, along with other members of staff across the charity. We also provide them with relevant historical documentation.

Sub-committees of the Board of Trustees

Trustees belong to at least one of three sub-committees that oversee and advise on the charity's work and report to the Board. This contributes to the smooth running of Dementia UK. The three sub-committees are:

- Clinical and Professional Committee
- Finance, Risk and Audit Committee
- Fundraising and Engagement Committee

Each committee meets at least four times a year and includes at least one-third of the number of Trustees in office, with one acting as Chair for these meetings. The Trustees contribute their relevant interests and skills to the work of the committees.

Chief Admiral Nurse/CEO and Executive Team

The Chief Admiral Nurse/CEO and Executive Team are responsible for the day-to-day affairs of Dementia UK, including operational matters,

and a scheme of delegation is in place. The members of Dementia UK's Executive Team are:

- Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive Officer
- Martin Bishop, Director of Fundraising and Engagement
- Mark Blake, Director of Finance (interim) (from 1st September 2025)
- Nando Caicedo, Director of Strategy, Culture and Transformation
- Paul Edwards, Chief Nursing Officer
- Suruchi Saraf, Director of Finance and Corporate Services (until 20th August 2025)
- Caroline Scates, Director of Nursing Services (from 30th June 2025)

Principal risks and uncertainties

As the governing body, the Board of Trustees has overall accountability for risk management at the charity. It ensures that Dementia UK has in place effective internal controls to manage risks, whilst maximising opportunities.

The Strategic Risk Register is updated by the Executive Team and then reviewed by the Trustees at every sub-committee and Board meeting.

We are continuing to develop our Risk appetite policy and plan to have this in place later in 2025.

The main risks identified that the charity faces are:

Risk of not meeting net income targets, mainly as a result of relying heavily on voluntary income and the cost of living remaining high.

This risk is mitigated by our robust fundraising strategy, the creation of a diverse range of income streams (both long- and short-term) and having specific targets and KPIs. We saw an increase in voluntary and legacy income in 2025, although the future income from legacies is difficult to forecast, therefore a level of uncertainty remains.

We also encourage and drive innovation and continually develop ways for existing and new donors to support and strengthen their engagement with, and commitment to, Dementia UK.

Risk that the integrity and reputation of the Admiral Nurse brand may be negatively impacted.

This is mitigated by ensuring all the systems, processes and support are in place to ensure the effective recruitment, maintenance and development of Admiral Nurses and Admiral Nurse services.

Admiral Nurses receive regular clinical supervision and their practice is guided by the Admiral Nurse Competency Framework, which outlines the knowledge, skills and attributes that they are required to demonstrate.

The Admiral Nurse Academy continues to grow and provides opportunities for continued professional development, including webinars, interactive learning, short courses and a leadership programme.

Risk of a cyber-attack on the charity's IT systems, resulting in loss of data, ransom payment and reputational damage.

The charity has strategies in place to limit the impact of a threat, and we have invested in several systems and initiatives this year to protect unauthorised access to the Dementia UK network. We have achieved this by continuously identifying, prioritising and remediating vulnerabilities. We have also introduced robust policies and processes to provide assurance on how our IT infrastructure is managed.

We do, however, recognise that cyber-attacks are becoming more sophisticated by the day and there are many uncertainties associated with this. We are procuring third-party cyber

security services which will be onboarded in the coming year.

Risk of data breaches, privacy incidents or security incidents (including third-party).

This is mitigated by keeping up-to-date documentation in alignment with GDPR legislation, including a Data retention policy and schedule; Data privacy policy; record of processing activities; and information asset register. We are also striving to enhance staff awareness, education and the promotion of a cultural shift to embed the 'privacy by design and default' principle across all organisational activities.

The Governance Team ensures the monitoring of internal compliance on data privacy; informs and advises on data protection obligations; provides advice regarding data protection impact assessments; and acts as a contact point for data subjects and the Information Commissioner.

Risk of financial mismanagement, poor financial planning or cash flow and inadequate reserves.

The risk of financial mismanagement is mitigated by having robust financial policies and procedures in place, supported by clear engagement with budget holders across the organisation. In addition, we report on the organisational financial performance regularly to the Board of Trustees to inform decisions on reserves, budget performance and overall financial health.

The charity has short- and long-term cashflow projections in place to help manage liquidity and optimise returns on unspent funds. We ensure we maintain adequate levels of free reserves to cover us for any unexpected events.

The charity is implementing a new financial system, supported by strengthened policies, which will streamline and automate many processes and allow more efficient reporting (real-time) and better cashflow modelling.

Reserves policy

The charity holds unrestricted reserves to ensure we can continue to operate in the event of any unforeseen and significant decreases in income.

The Board of Trustees' policy with regards to unrestricted reserves has been set at three to six months of projected unrestricted expenditure.

The Trustees aim to achieve this by careful management of the charity's resources and reviewing the Reserves policy at least annually.

As of 31st March 2025, we held £17.3m in general reserves after deducting the Net Book Value of Fixed Assets (2024: £12.4m). This represents six months of total planned future operational costs.

The Trustees are of the opinion that maintaining reserves at this level is prudent given that voluntary donations are the main source of income for Dementia UK and carry high risks of sharp and sudden decline. The external environment presents uncertainties, and the high cost of living remains a significant challenge for the organisation. In addition, economic fluctuations are anticipated due to the US Government's strategy of introducing high tariffs, which may have knock-on effects on UK markets and consumer confidence.

The Trustees consider that the reserves level is in line with best practice within the charity sector and guidance from the Charity Commission; and will give the charity time to continue its vital work supporting people with dementia and their families while finding alternative sources of income should we see a sudden drop in voluntary donations.

As of 31st March 2025, the charity held £4.9m of designated funds (2024: £4.9m), of which £688,582 (2024: £1m) is held for

the New Nurse Fund, expected to be spent by 2027; £2m (2024: £1.3m) is for systems development work to be completed by 2026; £600,000 (2024: £600,000) is set aside for digital transformation of services, expected to be completed in 2028; £850,000 (2024: £850,000) for investment in fundraising to be spent in 2025-26; and £816,781 (2024: £942,000) for clinical activities to be spent by 2027.

The charity held restricted funds totalling £2.1m at 31st March 2025 (2024: £1.2m). All funds are held for specific Admiral Nursing projects that have been funded by donations for the development and support of the services which Admiral Nurses provide.

Investment policy

The Trustees' investment powers are governed by the Memorandum and Articles of Association, which permit the charity's funds to be invested in a wide range of securities and assets.

The charity holds long-term investments with two investment companies, Sarasin and Partners LLP and Ruffer LLP. As of 31st March 2025, the market value of these investments totalled £1.6m; £1.1m in Sarasin and Partners LLP and £480,000 in Ruffer LLP.

The purpose of investments is to preserve and protect the value of donations received from the adverse impacts of inflation until such time as they are allocated towards charitable activities.

The charity aims for a diversified investment portfolio that seeks to produce the best financial return within an acceptable level of risk.

The charity's investment objective is capital growth: to invest long-term reserves with a view to capital preservation, with a focus on protection against inflation. There are no current plans for future spending commitments that the portfolio will fund, other than to protect against inflation.

The funds allocated towards investment are unrestricted and no donor restrictions have been placed on them.

In line with capital preservation, any income earned from the fund is to be accumulated and invested back into the portfolio. The charity does not expect to withdraw any investments in its long-term reserves and aims to invest no more than 25% of unrestricted net assets in long-term investments.

The charity is dedicated to ensuring that funds are invested in a responsible and ethical manner, incorporating environmental, social and governance considerations with particular emphasis on stewardship. The charity restricts investments in alcohol, tobacco, gambling, pornography, armaments, oil sands and thermal coal.

The Trustees have set a performance benchmark of CPI +3% a year in line with the investment strategy. The performance of our portfolio managers is kept under close and regular review and will be measured against inflation and agreed market indices. The level of capital volatility will be monitored to ensure the risk profile remains appropriate for the charity. For the financial year 2024-25, the portfolio performances of Sarasin and Partners LLP and Ruffer LLP were 3.8% and (4)% respectively.

The charity has nominated a list of authorised signatories, two of whom are required to sign instructions to the Investment Manager. The investment firms will provide quarterly reports on the valuation of investments, transactions, cash reconciliation, performance analysis and commentaries.

The Trustees of the charity have delegated the decision-making on investment matters to the Finance, Risk and Audit Committee (FRAC).

FRAC has the responsibility for:

- agreeing the investment strategy
- appointing/reappointing Investment Managers
- monitoring the investment assets

FRAC will review the information provided by the Investment Manager at least annually at the committee meeting to gain insights into investment performance and in-depth analysis to enable informed decision-making.

Remuneration policy for key management personnel

Dementia UK has a Remuneration policy, and pay for the CEO and Senior Management Team is decided by Trustees, who review pay based on market rates and benchmarking against charities of comparable size.

The CEO's remuneration for 2024-25 was a base salary of £130,000. This is five times more than the lowest paid staff member. Our CEO works four days per week and accordingly she was paid £104,000 in 2024-25.

Key relationships

Dementia UK seeks to build strong relationships with a wide variety of stakeholders.

We ensure we have effective and mutually beneficial relationships with our suppliers; we seek to build outstanding relationships with our supporters (see Nurturing our supporters, page 64; Individual giving, page 50; Spotlight on the ThankAthon, page 56; and Working in partnership, page 58, amongst others); with local and national government and the NHS (see Campaigning for change, page 39) and with the media (see Spreading the word, page 44).

We also seek to put experience of dementia at the heart of the charity. We do this through:

- ensuring we implement the clinical expertise of our dementia specialist Admiral Nurses
- wherever possible, ensuring Trustees have personal experience of dementia
- formally listening to the voices of people affected by dementia through our LEAP and LEAN networks (see page 31)

Energy and carbon reporting

In line with the Streamlined Energy and Carbon Reporting (SECR) legislation, we are required to report our energy consumption and greenhouse gas emissions arising in the UK. All Scope 1 and Scope 2 sources of energy and emissions have been disclosed as well as mandatory Scope 3 sources of energy and emissions.

- Scope 1: direct emissions gas
- Scope 2: indirect emissions electricity
- Scope 3: indirect emissions business travel

As this is our first year of reporting, this will be our base year for future comparisons.

We have one Head Office, and utilities are provided via our landlord who has provided us with actual consumption figures for the period. Our reporting is reflective of that.

We are always working to reduce our carbon emissions. Our Travel and expenses policy encourages staff to use public transport wherever possible as an alternative to travelling by car. We restrict travel to that which is only necessary, encouraging green transportation modes and providing remote access to events where possible.

In 2025-26 we will be introducing a cycle to work scheme to further encourage use of green transportation modes.

Methodology

The conversion factors used in this report are from the UK Government Greenhouse Gas (GHG) Reporting (2024) as published by the Department for Energy Security and Net Zero and the Department for Environmental Food and Rural Affairs. Reporting has been compiled in line with the HM Government Environmental Reporting Guidelines (March 2019).

We have used our turnover as a metric of measurement.

	Scope 1 **Direct emissions gas**	**Scope 2** **Indirect emissions electricity**	**Scope 3** **Indirect emissions business travel**
Energy consumed	okWh	19,487kWh	50,608 miles
Conversion factor	kWh (net CV) 0.20399	kg CO2e/ kWh 0.20493	kg CO2e/ mile 0.27064
Emissions (tCO2e)	0	3,993.47	13,696.50
Performance indicator (turnover in millions)	£30m	£30m	£30m
Emissions ratio (tonnes of CO2/ turnover)	0	1,355	2,190

Please note:

Scope 1: there are no Scope 1 emissions. There are no transportation costs to declare under Scope 1 emissions for the period as there were no company-owned cars or business fleet. There is no gas in use in our Head Office.

Scope 3: emissions based on expense data for employee-owned vehicles; as data about the engine size and fuel type of vehicles is not available, CO2 emissions are calculated using 'cars (by size) average car' kg CO2e/mile.

Reference and administrative details

Legal status

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC 047429 (Scotland).

The charity's affairs are governed by its Memorandum and Articles of Association incorporated 30th June 1994, as amended 28th March 2024, which allow for any activities covered by the charity's objectives with no specific restrictions.

The liability of the members in the event of the company being wound up is limited to a sum not exceeding £1.

Registered office and operational address

Dementia UK, 7th Floor, One Aldgate, London EC3N 1RE

Bankers

Lloyds Bank, PO Box 1000, Andover BX1 1LT

National Westminster Bank Plc, 250 Bishopsgate, London EC2M 3UR

Investment Managers

Sarasin and Partners LLP, Juxon House, 100 St Paul's Churchyard, London EC4M 8BU

Ruffer LLP, 80 Victoria Street, London SW1E 5JL

Statutory Auditor

Sayer Vincent LLP, Chartered Accountants and Statutory Auditor, 110 Golden Lane, London EC1Y 0TG

Internal Auditor

Grant Thornton LLP, 8 Finsbury Circus, London EC2M 7EA

Solicitor

Charles Russell Speechlys LLP, 5 Fleet Place, London EC4M 7RD

Trustees' responsibilities in relation to the financial statements

The charity's Trustees (who are also the Directors of Dementia UK for the purposes of company law) are responsible for preparing the Trustees' Annual Report, including the Strategic Report and financial statements, in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity's Trustees to prepare financial statements for each year, which give a true and fair view of the state of affairs of the charitable company and the group; and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue to operate

The Trustees are responsible for keeping adequate accounting records that disclose, with reasonable accuracy at any time, the financial position of the charity; and for ensuring that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and the group and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website.

Legislation in the UK governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as to disclosure to our auditor

Insofar as the Trustees are aware at the time of approving our Trustees' Annual Report:

- There is no relevant audit information of which the charitable company's auditor is unaware
- The Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information

The Trustees' Annual Report, which includes the Strategic Report, has been approved by the Trustees on 20th August 2025 and signed on their behalf by:

Professor David Croisdale-Appleby OBE
Chair of Trustees

Independent Auditor's report

for the year ended 31st March 2025

Opinion

We have audited the financial statements of Dementia UK (the 'parent charitable company') and its subsidiary (the 'group') for the year ended 31st March 2025 which comprise the consolidated statement of financial activities; the group and parent charitable company balance sheets; the consolidated statement of cash flows; and the notes to the financial statements, including significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31st March 2025 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations six and eight of the Charities Accounts (Scotland) Regulation 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report.

We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Dementia UK's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Trustees' Annual Report, including the Strategic Report, other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' Annual Report, including the Strategic Report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The Trustees' Annual Report, including the Strategic Report, has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report, including the Strategic Report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of Trustees

As explained more fully in the statement of Trustees' responsibilities set out in the Trustees' Annual Report, the Trustees (who are also the Directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the group's and the parent charitable company's

ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's Report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations.

We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud, are set out on the right.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and FRAC, which included obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:

  - identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance

  - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud

  - the internal controls established to mitigate risks related to fraud

  - non-compliance with laws and regulations
- We inspected the minutes of meetings of those charged with governance
- We obtained an understanding of the legal and regulatory framework that the group operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the group from our professional and sector experience
- We communicated applicable laws and regulations throughout the Audit Team and remained alert to any indications of non-compliance throughout the audit
- We reviewed any reports made to regulators
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations
- We performed analytical procedures to identify any unusual or unexpected

relationships that may indicate risks of material misstatement due to fraud

- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments; assessed whether the judgements made in making accounting estimates are indicative of a potential bias; and tested significant transactions that are unusual or those outside the normal course of business

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation.

This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at
frc.org.uk/auditorsresponsibilities

This description forms part of our Auditor's Report.

Use of our report

This report is made solely to the charitable company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005.

Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company, and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Noelia Serrano (Senior Statutory Auditor)

16 October 2025

For and on behalf of Sayer Vincent LLP
Statutory Auditor
110 Golden Lane
London
EC1Y 0TG

Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006.

Consolidated statement of financial activities
(incorporating an income and expenditure account)

For the year ended 31st March 2025

	Note	Unrestricted £	Restricted £	2025 Total £	Unrestricted £	Restricted £	2024 Total £
Income from:							
Donations and legacies	2	25,709,177	3,894,259	**29,603,436**	19,991,306	1,675,487	21,666,793
Charitable activities							
Admiral Nursing projects	3	94,780	376,493	**471,273**	68,292	196,780	265,072
Admiral Nurse service development	3	196,125	-	**196,125**	208,249	-	208,249
Research and publications	3	25,738	-	**25,738**	23,105	-	23,105
Other trading activities	4	253,064	-	**253,064**	111,803	-	111,803
Investments	5	874,139	-	**874,139**	266,852	-	266,852
Total income		**27,153,023**	**4,270,752**	**31,423,775**	20,669,607	1,872,267	22,541,874
Expenditure on:							
Raising funds	6a	9,300,080	122,515	**9,422,595**	7,070,107	-	7,070,107
Charitable activities							
Admiral Nursing	6a	6,388,009	2,726,034	**9,114,043**	4,822,675	1,749,829	6,572,504
Admiral Nurse service development	6a	1,306,974	-	**1,306,974**	1,185,642	-	1,185,642
Admiral Nurse Academy	6a	1,259,036	330,284	**1,589,320**	1,132,930	179,518	1,312,448
Total Admiral Nurse activities	6a	8,954,019	3,056,318	**12,010,337**	7,141,247	1,929,347	9,070,594
Public awareness	6a	2,878,916	103,626	**2,982,542**	2,372,797	-	2,372,797
Research and publications	6a	394,711	2,691	**397,402**	305,023	3,059	308,082
Total charitable activities		12,227,646	3,162,635	**15,390,281**	9,819,067	1,932,406	11,751,473
Total expenditure		**21,527,726**	**3,285,150**	**24,812,876**	16,889,174	1,932,406	18,821,580
Net income before net gains/(losses) on investments		**5,625,297**	**985,602**	**6,610,899**	3,780,433	(60,139)	3,720,294
Net gains/(losses) on investments	14	23,183	-	**23,183**	(14,997)	-	(14,997)
Net income for the year	8	**5,648,480**	**985,602**	**6,634,082**	3,765,436	(60,139)	3,705,297
Transfers between funds		1,022	(1,022)	**-**	-	-	-
Funds transferred out to Age UK Oxfordshire	23	-	-	**-**	-	(95,766)	(95,766)
Net movement in funds		**5,649,502**	**984,580**	**6,634,082**	3,765,436	(155,905)	3,609,531
Reconciliation of funds:							
Total funds brought forward		17,516,766	1,157,747	**18,674,513**	13,751,330	1,313,652	15,064,982
Total funds carried forward	22	**23,166,268**	**2,142,327**	**25,308,595**	17,516,766	1,157,747	18,674,513

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in note 22 to the financial statements.

Consolidated balance sheets

As at 31st March 2025

Company no. 02944156

		The group		The charity	
		2025	2024	**2025**	2024
	Note	**£**	£	**£**	£
Fixed assets:					
Tangible assets	13a	**38,796**	34,532	**38,796**	34,532
Intangible assets	13b	**848,001**	190,143	**848,001**	190,143
Investments	14	**1,640,831**	2,064,611	**1,640,832**	2,064,612
		2,527,628	2,289,286	**2,527,629**	2,289,287
Current assets:					
Debtors	17	**2,708,990**	2,033,928	**2,792,833**	2,055,874
Short-term deposits		**20,616,633**	14,000,000	**20,616,633**	14,000,000
Cash at bank and in hand		**2,382,048**	3,620,738	**2,214,162**	3,593,423
		25,707,671	19,654,666	**25,623,628**	19,649,297
Liabilities:					
Creditors: amounts falling due within one year	18	**(2,641,592)**	(3,019,856)	**(2,560,457)**	(3,017,396)
Net current assets		**23,066,079**	16,634,810	**23,063,171**	16,631,901
Total assets less current liabilities		**25,593,707**	18,924,096	**25,590,800**	18,921,188
Creditors: amounts falling due after one year	19	**(285,112)**	(249,583)	**(285,112)**	(249,583)
Total net assets	21	**25,308,595**	18,674,513	**25,305,688**	18,671,605
Funds:	22a				
Restricted income funds		**2,142,327**	1,157,747	**2,142,327**	1,157,747
Unrestricted income funds:					
Designated funds		**4,946,424**	4,867,439	**4,946,424**	4,867,439
General funds		**18,219,844**	12,649,327	**18,216,937**	12,646,419
Total unrestricted funds		**23,166,268**	17,516,766	**23,163,361**	17,513,858
Total funds		**25,308,595**	18,674,513	**25,305,688**	18,671,605

Approved by the Trustees on 20th August 2025 and signed on their behalf by

Professor David Croisdale-Appleby OBE
Chairman

David Stewart
Treasurer

Consolidated statement of cash flows

For the year ended 31st March 2025

	Note	2025	2024
		£	£
Net cash flows from operating activities	24	**4,788,566**	1,565,293
Cash flows from investing activities:			
Interest and dividends receivable		**874,139**	266,852
Purchase of fixed assets		**(731,725)**	(174,904)
Proceeds from sale of investments		**500,000**	-
Purchase of investments		**(53,037)**	(52,838)
Investments in short-term deposits		**(6,616,633)**	(7,410,290)
Net cash used in investing activities		**(6,027,256)**	(7,371,180)
Change in cash and cash equivalents in the year		**(1,238,690)**	(5,805,887)
Cash and cash equivalents at the beginning of the year	25	**3,620,738**	9,426,625
Cash and cash equivalents at the end of the year	25	**2,382,048**	3,620,738

1. Accounting policies

a Statutory information

Dementia UK is a charitable company limited by guarantee and is incorporated in England and Wales. The registered office address and principal place of business is 7th Floor, One Aldgate, London EC3N 1RE.

b Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiary, Dementia UK Trading Limited, on a line-by-line basis. Transactions and balances between the charitable company and its subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

c Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The Trustees are of the view that the immediate future of the charity for the next 12 months is secure on the basis of confirmation of continuing income streams and fundraising activity to generate additional income streams. Accordingly, the financial statements have been prepared on the going concern basis.

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from Government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For pecuniary legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, and the amount receivable can be measured reliably, and the receipt is probable; or a distribution is received from the estate. For residual legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or a distribution is received from the estate. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable, and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

g Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

h Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund. Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

i Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required, and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose

- Expenditure on charitable activities includes the costs of delivering services and other educational activities undertaken to further the purposes of the charity and their associated support costs

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

j Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation that they will receive a grant and that any condition attaching to the grant is outside of the control of the charity.

k Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each.

Support costs are the cost of overall direction and administration, comprising the salary and overhead costs of the central function.

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

- Raising funds 26%
- Admiral Nursing 50%
- Admiral Nurse service development 8%
- Admiral Nurse Academy 8%
- Public awareness 6%
- Research and publications 2%

l Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

m Tangible and intangible fixed assets

Items of equipment, fixtures and fittings, IT hardware and IT software are capitalised where the purchase price exceeds £1,500. Depreciation and amortisation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Where fixed assets have been revalued, any excess between the revalued amount and the historic cost of the asset will be shown as a revaluation reserve in the balance sheet.

Depreciation and amortisation are provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The rates in use are as follows:

Tangible assets

- Equipment 15%-33% per annum, straight line
- Fixtures and fittings 15%-33% per annum, straight line
- IT hardware 15%-33% per annum, straight line

Intangible assets

- IT software 15%-33% per annum, straight line

n Investments

Fixed asset investments

Listed investments are included in the balance sheet initially at cost and revalued at the reporting date to bid price. Unrealised gains and losses on investments at the balance sheet date are included in the Statement of Financial Activities (SOFA) for the relevant underlying funds. The historical cost of investments is shown in note 14 to the financial statements.

Investment in subsidiaries

Investments in subsidiaries are at cost.

o Admiral Nurse services

Funding is made available to employing authorities to meet employment, travelling and training costs incurred by them in the provision of Admiral Nurse services. The funding is accrued and recognised in the accounts in line with the provision of these services.

p Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered.

Any expenditure that exceeds £1,500 and is paid in advance or is related to a future dated event is held as a prepayment on the balance sheet. The prepayment is subsequently released to the SOFA in the month or months that the expenditure is incurred. Prepayments are valued at the amount prepaid net of any trade discounts due.

q Short-term deposits

Short-term deposits include cash balances that are invested in accounts with a maturity date of between three and 12 months.

r Cash at bank and in hand

Cash at bank and cash in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

s Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

t Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

u Pensions

The charity subscribes to a defined contribution scheme for the benefit of its employees. Contributions payable are charged to the SOFA in the year they are payable.

The charity also subscribes to the NHS Pension Scheme, a multi-employer defined benefit pension scheme. It is not possible to identify the assets or liabilities relating to the charity, therefore the charity accounts for contributions to the scheme as if it were a defined contribution scheme. Contributions payable are charged to the SOFA in the year they are payable.

2. Income from donations and legacies

			2025			2024
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Community, events and innovation	11,044,870	116,518	**11,161,388**	9,480,501	116,016	9,596,517
Individual giving and in memory	5,682,432	12,122	**5,694,554**	5,337,856	27,467	5,365,323
Legacies	5,028,034	185,690	**5,213,724**	3,599,071	105,000	3,704,071
Philanthropy and partnerships	3,953,841	3,579,929	**7,533,770**	1,568,901	1,427,004	2,995,905
Other voluntary donations	-	-	**-**	4,977	-	4,977
	25,709,177	3,894,259	**29,603,436**	19,991,306	1,675,487	21,666,793

3. Income from charitable activities

			2025			2024
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Admiral Nursing – fees and contributions from institutions	94,780	376,493	**471,273**	68,292	196,780	265,072
Management and development fees	196,125	-	**196,125**	208,249	-	208,249
Research and publications – contributions from institutions	25,738	-	**25,738**	23,105	-	23,105
Total income from charitable activities	316,643	376,493	**693,136**	299,646	196,780	496,426

4. Income from other fundraising activities

	Unrestricted	Restricted	**2025 Total**	Unrestricted	Restricted	2024 Total
	£	£	**£**	£	£	£
Carol concert, Christmas cards and merchandise	71,117	-	**71,117**	65,607	-	65,607
Income from trading subsidiary	181,947	-	**181,947**	46,196	-	46,196
	253,064	-	**253,064**	111,803	-	111,803

5. Income from investments

	Unrestricted	Restricted	**2025 Total**	Unrestricted	Restricted	2024 Total
	£	£	**£**	£	£	£
Dividends	76,455	-	**76,455**	52,998	-	52,998
Bank interest	797,684	-	**797,684**	213,854	-	213,854
	874,139	-	**874,139**	266,852	-	266,852

6a. Analysis of expenditure (current year)

		Charitable activities								
	Raising funds £	Admiral Nursing £	Admiral Nurse service development £	Admiral Nurse Academy £	Public awareness £	Research and publications £	Governance costs £	Support costs £	**2025 total £**	2024 total £
Staff costs (note 9)	2,993,313	5,287,115	878,817	1,078,349	1,341,125	276,503	370,495	2,847,403	**15,073,120**	12,126,194
Direct activity costs	3,069,358	807,054	-	80,115	1,140,191	2,804	-	-	**5,099,522**	4,046,639
IT and telephone	145,730	226,334	-	-	74	-	-	939,186	**1,311,324**	861,621
Office and administration costs	390,525	26,367	1,803	4,502	100,418	598	4,451	274,633	**803,297**	623,392
Professional fees	1,438,020	102,461	-	-	80,969	10,908	183,992	226,620	**2,042,970**	760,342
Premises	-	-	-	-	-	-	-	482,643	**482,643**	403,392
	8,036,946	6,449,331	880,620	1,162,966	2,662,777	290,813	558,938	4,770,485	**24,812,876**	18,821,580
Support costs	1,240,325	2,385,243	381,639	381,639	286,229	95,410	-	(4,770,485)	**-**	-
Governance costs	145,324	279,469	44,715	44,715	33,536	11,179	(558,938)	-	**-**	-
Total expenditure 2025	**9,422,595**	**9,114,043**	**1,306,974**	**1,589,320**	**2,982,542**	**397,402**	**-**	**-**	**24,812,876**	**18,821,580**

6b. Analysis of expenditure (prior year)

	Charitable activities								
	Raising funds £	Admiral Nursing £	Admiral Nurse service development £	Admiral Nurse Academy £	Public awareness £	Research and publications £	Governance costs £	Support costs £	**2024 total £**
Staff costs (note 9)	2,782,977	3,991,035	876,682	930,782	1,046,367	225,599	345,866	1,926,886	**12,126,194**
Direct activity costs	2,539,342	455,154	-	73,473	975,511	3,159	-	-	**4,046,639**
IT and telephone	102,513	182,311	-	1,152	-	-	-	575,645	**861,621**
Office and administration costs	216,797	25,614	2,307	388	70,770	2,632	12,188	292,696	**623,392**
Professional fees	431,859	1,811	-	-	50,160	29	66,765	209,718	**760,342**
Premises	-	-	-	-	-	-	-	403,392	**403,392**
	6,073,488	4,655,925	878,989	1,005,795	2,142,808	231,419	424,819	3,408,337	**18,821,580**
Support costs	886,167	1,704,169	272,667	272,667	204,500	68,167	-	(3,408,337)	**-**
Governance costs	110,452	212,410	33,986	33,986	25,489	8,496	(424,819)	-	**-**
Total expenditure 2024	**7,070,107**	**6,572,504**	**1,185,642**	**1,312,448**	**2,372,797**	**308,082**	**-**	**-**	**18,821,580**

7. Grant making

	2025	2024
	£	£
Cost		
Admiral Nursing projects	**746,957**	426,886
At the end of the year	**746,957**	**426,886**

During 2025, the charity provided investment for Admiral Nurses in five (2024: five) new services. All grants made in 2025 and 2024 were grants to institutions. These costs are included in note 6a under 'Direct activity costs'. Further details can be found on our website: **dementiauk.org**

8. Net income for the year

Includes the below charges:

	2025	2024
	£	£
Depreciation and amortisation	**69,603**	72,371
Operating lease rentals:		
Property	**425,648**	359,836
Other	**47,405**	78,950
Auditors' remuneration (excluding VAT):		
Audit – current year	**25,950**	24,700
Other services – VAT and Corporation Tax services	**2,920**	7,400

9. Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2025	2024
	£	£
Salaries	**11,613,437**	9,422,877
Termination/redundancy costs	**4,200**	27,779
Employer's National Insurance contributions	**1,260,228**	1,020,695
Employer's contributions to defined contribution pension scheme	**727,549**	621,725
Employer's contributions to defined benefit pension scheme	**354,144**	248,567
Other staff-related costs	**1,113,562**	784,551
	15,073,120	12,126,194

The following number of employees received employee benefits (excluding employer pension costs and employer's National Insurance) during the year between:

	2025	2024
	No.	No.
£60,000-£69,999	**15**	17
£70,000-£79,999	**7**	3
£80,000-£89,999	**2**	2
£90,000-£99,999	**-**	3
£100,000-£109,999	**4**	-
£110,000-£119,99	**1**	-

The total employee benefits (including pension contributions and employer's National Insurance) of the key management personnel were £644,144 (2024: £557,783).

The charity's Trustees were neither paid nor received any other benefits from employment with the charity in the year (2024: £nil). No charity Trustee received payment for professional or other services supplied to the charity (2024: £nil).

Trustees' expenses represent the payment or reimbursement of travel and subsistence costs totalling £3,274 (2024: £3,113) incurred by five (2024: three) members relating to attendance at meetings. The charity also incurred expenditure totalling £701 on Trustees' meetings in the year (2024: £614).

10. Staff numbers

The average number of employees (head count based on number of staff paid per month) during the year was 273 (2024: 238).

This includes sessional employees and other employees who received no pay in certain months (head count based on number per month); the average during the year was 19 (2024: 20).

	2025	2024
	No.	No.
Raising funds	**75**	57
Admiral Nursing projects	**91**	89
Admiral Nurse service development	**16**	16
Admiral Nurse Academy	**18**	17
Public awareness	**25**	21
Research and publications	**6**	4
Support	**42**	33
	273	238

11. Related party transactions

There are no related party transactions to disclose for 2025 (2024: none) other than those already disclosed in note 8.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

The total amount of donations received from related parties, without conditions, was £13,293 (2024: £355).

12. Taxation

The charity is exempt from Corporation Tax as all its income is charitable and is applied for charitable purposes. The charity's trading subsidiary, Dementia UK Trading Limited, Gift Aids available profits to the parent charity depending upon operational requirements. In 2024-25, Dementia UK Trading Limited made a profit before tax of £24,135 (2024: £17,207) and £24,135 profits (2024: £14,000) were Gift Aided to the charity. Therefore, its charge to Corporation Tax in the year was £nil (2024: £609).

The directors of Dementia UK Trading Limited are William Roe, Paul Edwards, Martin Bishop and Suruchi Saraf (until 20th August 2025). William Roe is a Trustee of Dementia UK and all other directors are staff members employed by Dementia UK.

13a. Tangible fixed assets

Group and charity	Equipment	Fixtures and fittings	IT hardware	**Total**
	£	£	£	£
Cost				
At the start of the year	6,646	206,869	44,029	**257,544**
Additions in year	1,529	-	13,326	**14,855**
At the end of the year	8,175	206,869	57,355	**272,399**
Depreciation				
At the start of the year	820	206,869	15,323	**223,012**
Charge for the year	1,662	-	8,929	**10,591**
At the end of the year	2,482	206,869	24,252	**233,603**
Net book value				
At the end of the year	**5,693**	**-**	**33,103**	**38,796**
At the start of the year	5,826	-	28,706	**34,532**

13b. Intangible assets

Group and charity	IT software	**Total**
	£	£
Cost		
At the start of the year	304,315	**304,315**
Additions in year	716,870	**716,870**
At the end of the year	1,021,185	**1,021,185**
Depreciation		
At the start of the year	114,172	**114,172**
Charge for the year	59,012	**59,012**
At the end of the year	173,184	**173,184**
Net book value		
At the end of the year	**848,001**	**848,001**
At the start of the year	190,143	**190,143**

All of the above assets are used for charitable purposes. A presentational adjustment has been made to IT software, which was presented in the prior year under Tangible fixed assets in 2024 (2025: £33,103; 2024: £28,706). It has now been separated into Intangible assets in 2025 (2025: £848,001; 2024: £190,143).

14a. Fixed asset investments

	2025	2024
	£	£
Market value at 1st April	**2,064,611**	2,026,770
Less:		
Disposals at carrying value	**(500,000)**	-
Add:		
Acquisitions at cost	**53,037**	53,425
Net cash reinvested	**-**	(587)
Realised and unrealised gains/(losses)	**23,183**	(14,997)
Market value at 31st March	**1,640,831**	2,064,611
Historical cost at 31st March	**1,583,970**	2,064,609

Asset allocation	**2025**	**2025**	**2024**	**2024**
	£	%	£	%
Alternative investments	**220,325**	13	241,331	12
Equities	**932,640**	57	1,001,169	48
Fixed income	**336,679**	21	723,924	35
Liquid assets	**107,189**	6	58,336	3
Property	**43,999**	3	39,852	2
Total	**1,640,831**	**100**	**2,064,611**	**100**

14b. Investment in subsidiary undertaking

	The group		The charity	
	2025	2024	2025	2024
	£	£	£	£
At the start and the end of the year	-	-	1	1

15. Subsidiary undertaking

The charitable company owns the whole of the issued ordinary share capital of Dementia UK Trading Limited, a company registered in England. All activities have been consolidated on a line-by-line basis in the statement of financial activities. A summary of the results of the subsidiary is shown below:

	2025	2024
	£	£
Turnover	**181,947**	46,196
Cost of sales	**(142,788)**	(23,412)
Gross profit	**39,159**	22,784
Administrative expenses	**(15,024)**	(5,577)
Profit on ordinary activities before taxation	**24,135**	17,207
Taxation on profit on ordinary activities	**-**	(212)
Profit for the financial year	**24,135**	16,995
Total retained earnings brought forward	**2,908**	(87)
Distribution under Gift Aid to parent charity	**(24,135)**	(14,000)
Total retained earnings carried forward	**2,908**	2,908
The aggregate of the assets, liabilities and funds was:		
Assets	**200,933**	28,742
Liabilities	**(198,024)**	(25,833)
Funds	**2,909**	2,909

16. Parent charity

The parent charity's gross income and the results for the year are disclosed as follows:

	2025	2024
	£	£
Gross income	**31,335,463**	22,492,678
Result for the year	**6,609,947**	3,592,536

17. Debtors

	The group		The charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Trade debtors	**97,949**	68,947	**90,449**	68,947
Prepayments	**1,025,419**	920,648	**1,025,420**	920,648
Accrued income	**1,585,622**	1,044,333	**1,585,622**	1,044,333
Amounts due from group undertakings	**-**	-	**91,342**	21,946
	2,708,990	2,033,928	**2,792,833**	2,055,874

The charity received notifications regarding a number of legacies before the year end totalling £3,483,699. However, these legacies did not meet the full income recognition criteria as per the accounting policy as at 31st March 2025, and therefore, have not been accrued in the 2025 financial statements (2024: £2,005,237).

18. Creditors: amounts falling due within one year

	The group		The charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Trade creditors	**667,417**	781,324	**651,795**	780,124
Taxation and social security	**618,614**	436,202	**644,161**	437,417
Other creditors	**13,305**	12,655	**13,305**	12,655
Accruals	**448,874**	436,582	**445,974**	434,107
Deferred income	**181,813**	74,417	**93,653**	74,417
Admiral Nurse projects – grant accruals	**711,569**	1,278,676	**711,569**	1,278,676
	2,641,592	3,019,856	**2,560,457**	3,017,396

19. Creditors: amounts falling due after one year

	The group		The charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Admiral Nurse projects – grant accruals	**285,112**	249,583	**285,112**	249,583
	285,112	249,583	**285,112**	249,583

Total grant commitments outstanding as at 31st March 2025 relating to the recruitment of Admiral Nurses payable to health institutions were £996,681 (2024: £1,528,259), of which payable within one year were £711,569 (2024: £1,278,676) and after one year were £285,112 (2024: £249,583). The amounts due within one year are included within accruals in note 18 above.

20. Pension schemes

The charity operates two pension schemes, a group personal pension scheme, administered by Aviva, and NHS Pensions. As at 31st March 2025, the amounts owed to the scheme were Aviva £101,674 (2024: £82,089) and NHS £nil (2024: £nil). The number of members in Aviva is 241 and NHS 67. The NHS Pension Scheme is an unfunded occupational scheme backed by the Exchequer, which is open to all NHS employees and certain employees of other approved organisations. Dementia UK is an approved organisation. The scheme is a defined benefit scheme. The scheme receives contributions from employees and employers to defray the costs of pensions and other benefits. From 1st April 2006 the NHS Business Services Authority (NHSBSA) has been the body responsible for the administration of the NHS Pension Scheme for England and Wales. In support of NHSBSA, NHS employers are required to explain the scheme to the employees. In addition, they submit pension data to NHSBSA. Every four years the Government Actuary conducts a full actuarial review of contribution rates. In order to defray the costs of benefits, in 2024-25 employers paid contributions of 14.38% of actual pensionable pay. From April 2024, there was a change to member contribution rates from the Department of Health and Social Care. From this date, employees contributed on a tiered scale from 5.2%-12.5% of their actual pensionable pay. Further information on benefits can be obtained from the NHS Pension Scheme website.

21a. Analysis of group net assets between funds (current year)

	General unrestricted	Restricted funds	**Total funds**
	£	£	**£**
Tangible fixed assets	38,796	-	**38,796**
Intangible fixed assets	848,001	-	**848,001**
Fixed asset investments	1,640,831	-	**1,640,831**
Net current assets	20,830,337	2,235,741	**23,066,079**
Long-term liabilities	(191,698)	(93,414)	**(285,112)**
Net assets at 31st March 2025	**23,166,268**	**2,142,327**	**25,308,595**

21b. Analysis of group net assets between funds (prior year)

	General unrestricted	Restricted funds	**Total funds**
	£	£	**£**
Tangible fixed assets	34,532	-	**34,532**
Intangible fixed assets	190,143		**190,143**
Fixed asset investments	2,064,611	-	**2,064,611**
Net current assets	15,381,646	1,253,16	**16,634,810**
Long-term liabilities	(154,167)	(95,417)	**(249,583)**
Net assets at 31st March 2024	**17,516,766**	**1,157,747**	**18,674,513**

22a. Movements in funds (current year)

	At 1st April 2024	Income and gains	Expenditure and losses	Transfers	Gains and losses	**At 31st March 2025**
	£	£	£	£	£	**£**
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	75,394	605,400	(124,695)	-	-	**556,099**
Admiral Nursing learning and disability service and new nurse (national)	165,202	497,056	(196,868)	(1,022)	-	**464,368**
Admiral Nursing projects (geographical funds):						**-**
Buckinghamshire	-	103	23,500	-	-	**23,603**
Cambridgeshire	13,135	15,000	(3,500)	-	-	**24,635**
Devon	34,114	58,395	(68,399)	-	-	**24,110**
Dorset (Purbeck)	39,068	1,895	(3,500)	-	-	**37,463**
Essex	14,318	-	10,548	-	-	**24,866**
Gateshead	20,000	31,640	(34,000)	-	-	**17,640**
Leeds	165,786	14,802	(59,855)	-	-	**120,733**
Leicestershire	50,759	14,876	(3,339)	-	-	**62,296**

Continued

	At 1st April 2024	Income and gains	Expenditure and losses	Transfers	Gains and losses	**At 31st March 2025**
	£	£	£	£	£	**£**
London	188,431	59,541	(184,732)	-	-	**63,240**
Northamptonshire	28,577	300	(14,000)	-	-	**14,877**
Nottinghamshire	15,912	50,165	(5,912)	-	-	**60,165**
Scotland	44,800	1,699	-	-	-	**46,499**
Staffordshire	25,298	-	(7,000)	-	-	**18,298**
Sussex	83,213	13,261	-	-	-	**96,474**
Wales	77,761	500	(19,250)	-	-	**59,011**
Yorkshire	-	137,992	(52,500)	-	-	**85,492**
						-
Other geographical restricted funds (less than £10,000 balances at 31st March 2025)	113,463	424,663	(497,328)	-	-	**40,798**
						-
Nationwide	-	2,316,600	(2,014,940)	-	-	**301,660**
YoungDementia UK projects	2,516	26,864	(29,380)	-	-	**-**
Total restricted funds	1,157,747	4,270,752	(3,285,150)	(1,022)	-	**2,142,327**
Unrestricted funds:						
Designated funds:						
New Nurse Fund	1,000,325	-	(311,743)	-	-	**688,582**
Investment in systems development	1,334,015	-	(32,954)	690,000	-	**1,991,061**
Investment in charitable activities	141,099	-	(141,099)	-	-	**-**
Clinical services digital development	600,000	-	-	-	-	**600,000**
Investment in clinical activities	942,000	-	(125,219)	-	-	**816,781**
Investment in fundraising	850,000	-	(850,000)	850,000	-	**850,000**
Total designated funds	4,867,439	-	(1,461,015)	1,540,000	-	**4,946,424**
General funds	12,649,327	27,153,023	(20,066,711)	(1,538,978)	23,183	**18,219,844**
Total unrestricted and designated funds	17,516,766	27,153,023	(21,527,726)	1,022	23,183	**23,166,268**
Total funds	**18,674,513**	**31,423,775**	**(24,812,876)**	**-**	**23,183**	**25,308,595**

22b. Movements in funds (prior year)

	At 1st April 2023	Income and gains	Expenditure and losses	Transfers	Gains and losses	**At 31st March 2024**
	£	£	£	£	£	**£**
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	60,000	564,742	(549,348)	-	-	**75,394**
Admiral Nursing learning and disability service and new nurse (national)	112,713	206,485	(153,996)	-	-	**165,202**
Admiral Nursing projects (geographical funds):						
Cambridgeshire	48,635	16,000	(51,500)	-	-	**13,135**
Devon	40,745	59,735	(66,366)	-	-	**34,114**
Dorset (Purbeck)	33,209	859	5,000	-	-	**39,068**
Essex	14,318	-	-	-	-	**14,318**
Gateshead	20,000	-	-	-	-	**20,000**
Isle of Wight	16,709	9,500	(14,000)	-	-	**12,209**
Leeds	55,187	328,319	(217,720)	-	-	**165,786**
Leicestershire	46,170	14,389	(9,800)	-	-	**50,759**
London	235,590	189,324	(236,483)	-	-	**188,431**
Northamptonshire	1,777	81,800	(55,000)	-	-	**28,577**
Nottinghamshire	5,912	10,000	-	-	-	**15,912**
Scotland	58,304	3,930	(17,434)	-	-	**44,800**
Staffordshire	25,048	250	-	-	-	**25,298**
Sussex	67,767	15,446	-	-	-	**83,213**
Teesside (Newcastle)	23,564	40,000	(42,486)	-	-	**21,078**
Tyne and Wear	7,770	13,000	-	-	-	**20,770**
Wales	88,653	3,108	(14,000)	-	-	**77,761**
West Midlands	6,125	34,500	(29,000)	-	-	**11,625**
Other geographical restricted funds (less than £10,000 balances at 31st March 2024)	237,642	148,488	(338,349)	-	-	**47,781**
YoungDementia UK projects	107,814	132,392	(141,924)	(95,766)	-	**2,516**
Total restricted funds	1,313,652	1,872,267	(1,932,406)	(95,766)	-	**1,157,747**

Continued

	At 1st April 2023	Income and gains	Expenditure and losses	Transfers	Gains and losses	**At 31st March 2024**
	£	£	£	£	£	£
Unrestricted funds:						
Designated funds:						
Admiral Nursing Development Programme	586,000	-	-	(586,000)	-	**-**
New Nurse Fund	1,508,045	-	(151,720)	(356,000)	-	**1,000,325**
Investment in systems development	1,000,000	-	(65,985)	400,000	-	**1,334,015**
Investment in charitable activities	800,000	-	(658,901)	-	-	**141,099**
Clinical services digital development	1,000,000	-	-	(400,000)	-	**600,000**
Investment in clinical activities	-	-	-	942,000	-	**942,000**
Investment in fundraising	-	-	-	850,000	-	**850,000**
Total designated funds	4,894,045	-	(876,606)	850,000	-	**4,867,439**
General funds	8,857,285	20,669,607	(16,012,568)	(850,000)	(14,997)	**12,649,327**
Total unrestricted and designated funds	13,751,330	20,669,607	(16,889,174)	-	(14,997)	**17,516,766**
Total funds	**15,064,982**	**22,541,874**	**(18,821,580)**	**(95,766)**	**(14,997)**	**18,674,513**

23. Purposes of restricted and designated funds

Restricted funds

Admiral Nursing projects are funded by donations specifically for the development and support of the services which Admiral Nurses provide.

The total restricted funds were raised by individuals, corporates, charitable trusts and fundraisers throughout the UK for the provision of services.

YoungDementia UK projects relate to funds transferred from YoungDementia UK when the charity became part of Dementia UK in November 2020; funding activities in line with YoungDementia UK's charitable objects. In the prior year, at 31st March 2024, the Young Onset Dementia Advisors (YODA) Oxfordshire service and £95,766 of restricted funds relating to the service were transferred to Age UK Oxfordshire. At 31st March 2025 there were no remaining funds.

Designated funds

The charity holds the following designated funds at year end:

New Nurse Fund

The New Nurse Fund is used to fund Admiral Nurse services in host organisations to offer life-changing support to families facing dementia. The balance at 31st March 2025 was £688,582 (2024: £1,000,325).

Systems development work across the charity

Funds totalling £1,000,000 in 2022-23 and an additional £400,000 in 2023-24 were set aside for systems development work across the charity. Work began in 2023-24. An additional £690,000 in 2024-25 has been further designated for additional systems work expected. The balance at 31st March 2025 was £1,991,061 (2024: £1,334,015). The projects are anticipated to be completed by 2026.

Investment in charitable activities

Funds of £800,000 were set aside at 31st March 2023 for the development of policy, campaigns, public affairs and raising awareness of our charitable activities during 2023-24. The balance at 31st March 2024 was £141,099, which was fully spent in 2024-25.

Clinical services digital development

This fund has been set aside for the development of our clinical services offering to include a digital service delivery for our beneficiaries. The balance at 31st March 2025 was £600,000 (2024: £600,000). There was no expenditure in 2024-25 due to other priorities. The expenditure is anticipated to commence in 2025-26 and to be completed towards the end of 2028.

Investment in clinical activities

Investment in clinical activities are funds set aside for investment to help develop and drive expansion of activity within our clinical services teams. The balance at 31st March 2025 was £816,781 (2024: £942,000). It is anticipated that this fund will be spent by 2027.

Investment in fundraising

An additional £850,000 has been designated to help with further diversifying our portfolio of fundraising given the charity is heavily reliant on voluntary donations. The balance at 31st March 2024 of £850,000 was fully utilised in 2024-25.

24. Reconciliation of net income to net cash flow from operating activities

	2025	2024
	£	£
Net income for the reporting period (as per the statement of financial activities)	**6,634,082**	3,705,297
(Gains)/losses on revaluation and sale of investment assets	**(23,183)**	14,997
Depreciation and amortisation charges	**69,603**	72,371
Dividends and interest from investments	**(874,139)**	(266,852)
Increase in debtors	**(675,062)**	(319,855)
Decrease in creditors	**(342,735)**	(1,544,899)
Funds transferred out to Age UK Oxfordshire	**-**	(95,766)
Net cash provided by operating activities	**4,788,566**	1,565,293

25. Analysis of cash and cash equivalents

	2025	2024
	£	£
Cash in hand	**2,382,048**	3,620,738
Total cash and cash equivalents	**2,382,048**	3,620,738

The charity held no notice deposits (less than three months) and did not have an overdraft facility in the year.

26. Operating lease commitments

	Property		Equipment	
	2025	2024	2025	2024
	£	£	£	£
Periods:				
Less than one year	**222,151**	360,528	**16,083**	35,663
One to five years	**1,450,956**	47,730	**-**	16,083
	1,673,107	408,258	**16,083**	51,746

27. Post-balance sheet events

Dementia UK has entered into a new rent lease agreement for its Head Office at One Aldgate, which commenced on 2nd April 2025 until 1st April 2035.

28. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Thank you

We are truly grateful to everyone who supported us in 2024-25, including our Volunteer Ambassadors. Because of you, we can offer more families a lifeline when they need it most. In particular, we would like to thank:

ADI Global Distribution
Alliance Medical
Amber River – East Anglia
Paul and Aaron Anderson
Anokhi Ladies Club
Aon Foundation
Apogee Corp
The Art File
Assura plc
Baird Group
Barbour Foundation
Lord Harry Barnard
Terence Basham
Sarah Bennett
Janette Burt
Butt family through the Calleva Foundation
Central Co-op
Jason Chaffer
David and Elizabeth Challen
David Choules
Maurice Clarke
Sam Coffey
The friends and family of Effy Constantinou
RJ and AH Daniels Charitable Trust
Deutsche Bank
DPD Community Fund
Earlsmead Charitable Trust
East Sussex Fundraising Group
Isabella Ellis
Harry Ellison
emap Croydon Office
Everyone Active
First Milk
Harry Fitzalan Howard
Garfield Weston Foundation
Simon Gibson Charitable Trust
The Grace Trust
Ruth Greene
Haberdashers' Aske's School for Boys
Harj Hayre
Helianthus Charitable Trust
Hodge Foundation
JWS Maintenance Kent Limited
Jane Keir
King's House School
LABC
The Kirby Laing Foundation
Taras Lanchev
Leeds Building Society
Leicestershire Fundraising Group
Alysia Liveras
LOFA
Macfarlanes LLP
Manjinder Kang
Sir James Knott Trust
Judith Mann
Marks & Spencer
Masonic Charitable Foundation
Doreen McCaughey
The family of Ellen McIntyre Short
Mold Golf Club
Moondance Foundation
The George A Moore Foundation
Blake Morgan
Morson Group
Christine J Muskett
Nationwide Building Society
Mildred Naylor
NatWest Group
Next PLC
The Openwork Foundation
Vina Patel
Pegasus Planning Group
The P F Charitable Trust

James Pickering
Platform Housing Group
The Porta Pia 2012 Foundation
The Radfield Trust
The Julia Rausing Trust
Redrow Homes Limited
The Reed Foundation
MK Rose Charitable Trust
Salisbury and South Wiltshire Golf Club
The Basil Samuel Charitable Trust
ShareGift
The Charles Skey Charitable Trust
Poppy Smith
St Anne's Old Links Golf Club
Stewart Steele
The Swire Charitable Trust
Dame Cristina Taylor
Gavin Thomas
Oliver Thomas
Kim Thorne
Thurlow Nunn Group
Tokio Marine HCC International
UHY Hacker Young
Upchurch River Valley Golf Club
Van Elle
Steven Wakeman
Ruth Watson
Grant Weldhen
Westerleigh Group
Zoe Wilson
Wolseley UK
Jean Woodberry
Zurich Community Trust

We also thank all of the kind legators who generously left a gift in their Will, as well as our supporters who wish to remain anonymous.

Dementia UK is the specialist dementia nursing charity that is there for the whole family. Our nurses, known as Admiral Nurses, provide free, expert advice, support and understanding to anyone who needs it.

How we can support you

'Dementia: what next?' online sessions

If you are caring for someone with dementia or living with the condition yourself, you can register for our free online sessions, 'Dementia: what next?', which are hosted by Admiral Nurses.

Sign up at **dementiauk.org/dementia-what-next**

Admiral Nurse Dementia Helpline

To speak to an Admiral Nurse on our free, confidential Helpline, call 0800 888 6678 (Monday-Friday 9am-9pm, Saturday and Sunday 9am-5pm, every day except 25th December) or email **helpline@dementiauk.org**

Virtual clinic appointments

To book a phone or video appointment with an Admiral Nurse at a time to suit you, please visit **dementiauk.org/book**. Appointments are free, confidential and available Monday-Saturday.

dementiauk.org • 020 8036 5400 • info@dementiauk.org

DementiaUK
Helping families face dementia

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC 047429). Company number: 02944156

Registered with FUNDRAISING REGULATOR

DEMENTIA UK

England & Wales - Charity number 1039404

Accounts

Trustees' Annual Report

and consolidated financial statements

DementiaUK
Helping families face dementia

For the financial year 2023-24

Company number: 02944156 Charity number: 1039404 OSCR number: SC 047429

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Chair and Chief Admiral Nurse/Chief Executive Officer's report

At Dementia UK, we hear every day from families who are facing the fear and confusion of dementia. Too many are left to struggle alone, not knowing where to turn for support.

We want to be there for every one of these families – as well as those who will be affected by dementia in the future – and in 2023-24, with the help of our supporters, we took great steps towards achieving our vision.

We are delighted that for the first time, Dementia UK's annual income passed the £20m mark, ending the year on £22.5m – an incredible 16% increase on 2022-23. This has helped us increase the number of dementia specialist Admiral Nurses to 458, allowing us to reach more of the families who need us – on our Helpline, in virtual clinic appointments, and in the community, including GP surgeries, hospitals, care homes and hospices.

We are particularly proud to have extended our services for families who are experiencing specific and complex challenges, with new Consultant Admiral Nurses specialising in frailty, sport and dementia, children and young people, and LGBTQ+ communities. This reflects our commitment to ensuring no one falls between the gaps in dementia care.

We can only do our life-changing work because of our thousands of dedicated supporters, and we are so grateful to everyone whose generosity in fundraising, donating, campaigning and raising awareness ensures we can offer more families a lifeline.

In 2023-24 our virtual and in-person events saw both record numbers of participants and record income. We also extended valued partnerships with corporate supporters and trusts and secured some exciting new ones.

As well as directly supporting people through our Admiral Nurse services, we are committed to raising awareness of dementia and our charity. Our 'We live with dementia' campaign brought the challenges of dementia to life through powerful personal stories which reached people across the UK through nationwide activity, raising the profile of our specialist support services.

We also launched our 'Fix the funding' campaign. Together with our Campaigns Network, we are calling for urgent improvements in the NHS continuing healthcare process – which is currently failing many families affected by dementia, leaving them without the vital care funding they deserve. This formed one of the pillars of our 'Put dementia on the agenda' General Election manifesto.

With nearly one million people in the UK living with dementia, it is vital that our Admiral Nurses receive the highest quality support and development to be able to provide families with the best possible care. We have created

a development pathway for new nurses and continue to support and develop all nurses through our Admiral Nurse Academy.

You can read more about these highlights, and many more, in the pages of this Annual Report.

As we head into the final year of our 2020-25 strategy, we will undoubtedly face growing demand for our services, but as a Dementia UK community, we are determined to rise to every challenge. This will only be possible by working together with you, the amazing people who donate, fundraise, partner, pledge, campaign and volunteer. We are indebted to you all.

Thank you so much for standing with us to ensure no one faces dementia alone.

Dr Hilda Hayo
Chief Admiral Nurse and Chief Executive Officer

Professor David Croisdale-Appleby OBE
Chair of Trustees

We are Dementia UK: the specialist dementia nursing charity that is there for the whole family.

Every three minutes, someone in the UK develops dementia. Today, nearly one million people in the UK are living with the condition.

Dementia doesn't just impact the person with the diagnosis – everyone around them is affected in some way.

Too often, people are left to cope alone with ever-changing and relentless challenges. Families often have to take on caring responsibilities that push them to their physical, emotional and financial limits. Struggling to know where to turn, they are left feeling exhausted, overwhelmed and alone.

That's where Dementia UK comes in.

Our specialist dementia nurses – known as Admiral Nurses – provide life-changing advice and support to anyone affected by dementia, whenever it is needed. From sharing practical tips for caring to offering compassionate emotional support and helping families plan for the future, they are there when people need them most.

As the only UK-wide charity dedicated to specialist dementia nursing, we want every family to know we will be there to support them – for as long as they need us.

"Being an Admiral Nurse is not just about supporting the person living with dementia – it's about supporting the whole family. My hope for the future is that every family that needs one has access to an Admiral Nurse."

Liz Tomlinson, Admiral Nurse

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The Career University

Trustees' Annual Report, including the strategic report

Our vision, mission and values

In 2023-24, we refreshed our vision, mission and values to better represent our commitment to the families we support. You can read more in our Spotlight feature on page 76.

Our vision

A world where no one faces dementia alone – where everyone gets the specialist support they need.

Our mission

Our life-changing support is there for everyone affected by dementia.

Our dementia specialist Admiral Nurses give expert and compassionate support and advice: on our Helpline, in clinics, in hospitals, in the community and in other health and care settings, as well as through the information we provide.

We work alongside people affected by dementia to constantly improve the health and care systems they rely on. We use our clinical knowledge to influence public policy and service delivery, carry out vital research into dementia care, promote better awareness and understanding of dementia, and campaign for change across the UK.

Together, we can make sure no one faces dementia alone.

Our values

Collaboration

Working together makes us stronger. We listen to and collaborate with families living with dementia, clinicians, our colleagues, and our supporters and fundraisers. Every day, we learn from one another.

Compassion

We come to work to improve the lives of people affected by dementia. It's why we approach everything we do, and everyone we talk to, with kindness, respect and support.

Ambition

We will do everything we can to help families affected by dementia feel more empowered. We're resourceful and resilient: whatever the obstacles, we'll try to find a way.

Integrity

We always aim to show integrity and accountability in all our work: from how we spend the money raised by our generous supporters to how we behave with colleagues, stakeholders and partners.

Dementia facts and figures

Dementia is an umbrella term for a range of progressive conditions that affect the brain.

There are around 200 different types of dementia. The most common are:

Alzheimer's disease

vascular dementia

Lewy body dementia

frontotemporal dementia

mixed dementia

Common symptoms of dementia include:

- memory problems
- problems with understanding
- confusion
- speech and language difficulties
- changes in behaviour

difficulties with problem-solving and decision-making

One in two of us will be affected by dementia in our lifetime – whether by caring for someone with the diagnosis, developing it ourselves, or both.

52% of carers say they do not receive sufficient support, and 40% experience depression or anxiety.

Over **70,000** people in the UK have young onset dementia – where symptoms develop before the age of 65.

Only **64.5%** of people with suspected dementia have a formal diagnosis.

Dementia is the leading cause of death in the UK.

“We had very little support; we felt on our own as a family.”

Clare's story

For Clare, caring for her two young children and her mum, who had dementia, was a constant challenge, but calling our Helpline kept her going.

No one understands how traumatic it is to care for someone living with dementia unless you've experienced it. You're losing the person you love along the way. You can't explain it to the outside world. Every day, every hour is different.

Mam was diagnosed with vascular dementia following a cardiac arrest five years ago. My twins were just four weeks old at the time. We'd suspected something wasn't right with her, but never considered that it could be dementia.

We had very little support when the diagnosis came and felt on our own as a family. Filling out forms and chasing healthcare professionals is the last thing you need, but it's the first thing you have to do to get any help. It caused extra stress and worry, especially as there were constant delays.

I tried to do my absolute best for Mam in every circumstance, but it never felt good enough. Just when I felt like I was getting the hang of something, something else would go wrong. It was like having to be a detective.

"No one saw what we were going through."

When your family is living with dementia, your whole world becomes insular. Mam went from going to parties and doing the flowers at church to not leaving the house.

Nobody saw her decline or what we were going through as a family – it was all behind closed doors. Usually when someone is unwell, everyone is there to offer support. But with dementia, everyone disappears.

While Mam was still living at home, Dad cared for her 24/7. His whole life was put on hold. He couldn't even go to the shops. Mam was type 1 diabetic which is incredibly complicated with dementia. She was having hypos (episodes of dangerously low blood sugar) all over the place and Dad had to monitor her throughout the night.

"Speaking to a dementia specialist makes such a difference."

By the time we heard about Dementia UK, Mam was in the later stages of dementia, but I called the dementia specialist Admiral Nurses on the Helpline many times. They helped me to tackle specific issues like putting us in touch with the Admiral Nurse in our local hospital after Mam was admitted, transitioning her into a care home and applying for funding for her care fees.

It makes such a difference to speak to a dementia specialist who really understands. The Admiral Nurses gave me that extra bit of support to keep going during this devastating illness. No family should have to go through dementia alone.

Achievements, performance and plans

The heart of dementia care: our hosted Admiral Nurse services

Whether in GP surgeries, local communities, hospitals, care homes or hospices, our Admiral Nurse services – hosted by organisations like NHS Trusts – offer a lifeline of support across the UK.

Our objectives for 2023-24

- Recruit a total of 33 new Admiral Nurse posts: 10 in acute care; 15 in primary care networks; five in diverse communities; and three specialising in young onset dementia
- Create eight new Admiral Nurse clinics in areas without existing services
- Expand our clinics for members of the Professional Footballers Association (PFA) and their families

What we achieved

Despite a demanding year in which we faced disruption due to restructuring in NHS teams, difficulty identifying match-funding in primary care locations, a challenging health and social care environment, and funding restrictions putting some services at risk of closure, we successfully recruited 24 new Admiral Nurses across the UK in 2023-24.

We appointed 10 new nurses in acute care, five in primary care, six in care homes and domiciliary care, two in hospices, and two specialising in young onset dementia. This included our first Admiral Nurse post in Orkney, Scotland. We also recruited 34 nurses into vacant roles. This means more families can access the support they need in their local area.

While we didn't achieve our goal of 33 new nurses, we have nevertheless made great progress towards our aim of having 500 Admiral Nurses by 2025. As of April 2024, we have 458 in post across all services (including Core Clinical Services – please see page 18) enabling us to support more families than ever before.

To ensure more people can access dementia support in their local community, we have grown our clinics offering in areas that do not currently have an Admiral Nurse service. We launched a new clinic in Market Harborough and are currently establishing clinics in Leicestershire

Through our partnership with Leeds Building Society, we continued to offer our Closer to Home clinics in High Street branches across the UK. These enabled people to book an appointment with an Admiral Nurse in a convenient location. We delivered 610 appointments, with 96% of people responding to the NHS Friends and Family Test rating the service as 'very good' or 'good'.

These achievements mean that more families than ever have been able to access the face-to-face support of a specialist dementia nurse.

Developing our specialist support services

To ensure that we offer specialist, age-appropriate support to the 70,800 people in the UK living with young onset dementia and their families, we have provided all Admiral Nurses with access to education on young onset dementia. This will increase their knowledge and understanding of dementia in midlife, and give them more opportunities to support these families in their day-to-day jobs.

With a growing need for specialist support for current and former sportspeople affected by dementia and their families, we appointed Joe Costello as Consultant Admiral Nurse for Sport and Dementia in May 2023 – please see our Spotlight feature on page 22 for more on his role.

Our awards successes

We were delighted to be recognised in the selection and judging of several prestigious awards in 2023-24.

- Our Transitions of Care model of Admiral Nursing won a Health Services Journal Partnership (HSJ) bronze award – please see our Spotlight feature on page 16
- Our Chinese Welfare Trust Admiral Nurse clinic, which supports families from Chinese and South-East Asian backgrounds, was a finalist in the Nursing Times awards and Royal College of Nursing (RCN) awards
- We were shortlisted for a Nursing Times award for our collaboration with the Professional Footballers Association
- Closer to Home clinics were shortlisted for the Business Charity Awards

These nominations reflect our commitment to offering the highest quality specialist dementia support that meets every family's unique needs.

"I felt like I had been listened to and didn't feel judged or questioned. I also feel like I left with a completely different mindset with my approach to my mam's care."

Family carer

"When my dad was admitted to hospital, communication with the ward staff was very difficult. But the Admiral Nurse was fantastic – she visited my dad and kept me informed about what was happening. I felt I had a point of contact helping me make sure he was okay."

Family carer

What we'll do next: our priorities for 2024-25

Focus on achieving a target of 500 Admiral Nurses by 2025. We will continue to grow the number of services in:

- acute care, introducing the Transitions of Care model (see page 16) to help people be safely discharged from hospital to their preferred place of care, relieving pressure on the NHS
- primary care, working alongside GP practices to ensure families receive the support they need and relieve the pressure on GPs' time

Strive to develop new services in areas where there is currently no or limited Admiral Nurse presence.

Evaluating Admiral Nursing in primary care

Every year, thousands of families affected by dementia are supported by an Admiral Nurse through primary care settings (GP surgeries), hosted by organisations like NHS Trusts. Our latest evaluation demonstrates the huge difference they make.

Outcomes for families

Carers told us how Admiral Nurse services had supported them in their caring role.*

100% said it had made a positive difference to their ability to take better care of the person with dementia

99% said it had made a positive difference to their ability to make decisions about the care of the person with dementia

98% said the service had made a positive difference to their ability to continue caring for the person with dementia

98% said it had made a positive difference to their ability to cope

"[The Admiral Nurse has] reduced hospital admissions and crisis points for several patients by providing advice and support, regular contact [and] referral to appropriate services."

GP

* Information from Primary care survey evidence report, March 2023

Feedback from professionals

All professionals responding to our evaluation questions said the Admiral Nurse had:

- improved quality of life for families
- improved person-centred care for families
- enabled the inclusion of families in decisions about care

Impact on health and social care services

Professionals felt Admiral Nurse services were contributing to improved utilisation of health and social care resource by:

- avoiding crisis points for families affected by dementia
- delaying long-term care home placements
- reducing unplanned hospital admissions
- reducing their contact time with families affected by dementia

"My Admiral Nurse has helped me cope when I felt alone on this journey of care. When I needed someone to give me advice and help about Mum's anger, inadequate personal care, weight loss, mobility, food and meds, the Admiral Nurse was [there]."

Family carer

Spotlight

The Transitions of Care model of Admiral Nursing

Many people affected by dementia who are admitted to hospital face complex challenges around the period of discharge. Rachel Johnstone, Regional Account Manager (South-West), explains how a new model of Admiral Nursing is smoothing the transition for families.

At any time, one in four hospitals beds is occupied by a person living with dementia. Many of them remain in hospital for longer than is necessary because of issues with discharging them home or into a care home.

This can cause distress for both the person with dementia and the carer, a deterioration in the person's condition (for example, they may lose mobility if they are not supported to walk around in hospital), and an increased risk of complications like delirium – as well as increased health and social care costs.

Even when the person with dementia returns home, many families are inadequately supported which can lead to unnecessary readmissions to hospital.

Our Transitions of Care model of Admiral Nursing is addressing some of the most pressing challenges in the period around hospital discharge. Admiral Nurses divide their time equally between the hospital and the community/care home setting, supporting people with complex needs related to dementia to successfully be discharged back home or into an appropriate care home placement.

Our first Transitions of Care service

The first Transitions of Care Admiral Nurse service launched in April 2022 as a collaboration between Dementia UK, Livewell SouthWest and University Hospitals Plymouth NHS Foundation Trust. It aims to reduce the length of hospital stays for people with dementia, manage an appropriate and timely discharge to the right setting, and prevent hospital readmission.

The service's two Admiral Nurses cover a combined area of 820 square miles and 169 care homes, with each nurse holding a caseload of on average 19 families. They support families in hospital in the lead-up to discharge and for six weeks after.

"Our experience has been overwhelmingly positive and I am certain that without the support [of an Admiral Nurse], many of these people would have been readmitted to hospital... I have such confidence in their expertise that we are more likely to move forward with referrals when we know there's Admiral Nurse involvement."

Care home manager

In the service's first 20 months (April 2022 to December 2023):

- there were no avoidable readmissions to hospital among the 320 families supported
- 14 of 43 people with dementia were discharged from hospital within 48 hours when referred to the Admiral Nurse
- just 9% of people with dementia were discharged to a nursing home
- 17 people who were on a pathway to care home admission were able to be discharged to their own homes
- breakdowns in care home placements were prevented in 20 out of 49 cases by supporting the home to continue to manage care, facilitating transition to a different home, or identifying preventable causes of readmission

Leading the way

This model of care is leading the way in supporting families in the period around hospital discharge. In recognition of its impact, the Livewell Admiral Nurse service won a prestigious bronze HSJ Partnership award (2024) in the 'Most effective contribution to integrated health and care' category.

We now have three Transitions of Care services in operation, with another in recruitment and a further one in development. This model is likely to be a key priority in Dementia UK's Corporate Strategy for 2025-30, helping families affected by dementia through a complex, precarious and poorly integrated health and social care system that right now, is failing too many people.

"Ever since we met, you have been with us on this nightmare journey making it that bit easier and enabling us to navigate the different rules and laws from being medically fit, to being discharged and beyond... You were always there, pointing me in the right direction or giving me advice... Without this, I truly believe Mum would have been in hospital for several more weeks than necessary and I think I would have collapsed under the sheer enormity of the tasks."

Family carer

The Livewell SouthWest Transitions of Care Admiral Nurse Team

Here to listen: our Core Clinical Services

Every year, we support thousands of families through our free Helpline, virtual clinic appointments and Consultant Admiral Nurse services, ensuring that everyone affected by dementia – wherever they live – can access the help they need.

Our objectives for 2023-24

- Support at least a combined 36,000 direct contacts on our Helpline and in virtual clinic appointments
- Improve efficiency to ensure that more callers get through to the Helpline on their first attempt, and enable us to meet the ever-growing number and complexity of calls
- Develop our prison clinics model and extend its reach to improve the support offered to prisoners with dementia in the UK

What we achieved

Throughout 2023-24, we received 33,971 calls and emails to our Helpline and completed 3,590 phone and video appointments in our virtual clinic – a total of 37,561 direct contacts. Through these services, more families than ever have benefited from our expert dementia support, 364 days a year.

By implementing a caller queue function and creating a new process to ensure a set number of Admiral Nurses are available to take calls, we are regularly exceeding our target of answering 60% of calls first time, and our live call answer rate is often over 80%. This means more carers receive immediate support the first time they contact us, without them having to wait for a callback.

In cases where we cannot answer a call immediately, we ensure we return the call as soon as possible.

We have recruited new Admiral Nurses to Core Clinical Services to increase the number of nurses answering calls and offering virtual clinic appointments per session (weekday and weekend sessions are eight hours; evening sessions are 3.5 hours). We are also working on strategies to reduce the time spent on clinical administration, leaving more time for nurses to respond to calls.

Expanding our virtual clinic service

To meet the increased demand for our virtual clinic, we have doubled the number of appointments to 24 each day, Monday to Friday. These pre-booked appointments can be carried out by phone or video call and allow the carer to speak to an Admiral Nurse at a time to suit them. It is particularly valuable for families living in different locations, enabling them to join the same video call to discuss their questions and concerns.

There is still often a waiting period for people wishing to book virtual clinic appointments. With the recruitment of new nurses within Core Clinical Services, we hope to address this in the coming year by making more nurses available for each virtual clinic and Helpline

session so carers can access our support at the point where they need it most.

We have continued to build our prison clinics model. Our services in HMPs Haverigg, Hull and Humber are up and running, including monthly staff clinics and training sessions, and we have received expressions of interest from other prisons. As this model grows, it will directly benefit the estimated 12,000 prisoners with dementia in the UK.

Our Consultant Admiral Nurses

Our Consultant Admiral Nurses are experienced nurses who each have a particular expertise. They work directly with families within their specialism, as well as offering support and education to other Admiral Nurses; developing dementia care skills and knowledge in other health and social care professionals; influencing policy; working with dementia care researchers; and creating new resources.

In 2023-24 we appointed four new Consultant Admiral Nurses for:

- Frailty (appointed April 2023)
- Sport and Dementia (appointed May 2023 – please see Spotlight on page 22 for more on his role)
- Children and Young People (appointed March 2024)
- The LGBTQ+ Community (appointed March 2024)

These new roles, alongside our existing Consultant Admiral Nurses for Young Onset Dementia and Lewy Body Dementia, will help us extend our specialist support for people with specific complex needs relating to dementia.

"I really cannot emphasise enough how important it has been to have Kerry [Consultant Admiral Nurse for Frailty] to talk through our situation with my dad. We as a family were at crisis point. Kerry's empathy and knowledge really helped us to cope with Dad's care and recent admission to hospital. Just knowing I could [contact] her really gave me the strength to continue to support my mum with Dad."

Family carer, supported by the Consultant Admiral Nurse for Frailty

Our Dementia at Work programme

The Dementia at Work Team supports employees and customers who are affected by dementia and plays a crucial role in creating an inclusive and understanding environment in the workplace.

In 2023-24 we had contact with 161 organisations, including working with 46 on a longer-term basis. This substantially exceeded our strategy goals of working with three organisations by the end of 2023, and five by the end of 2025.

Our team offers direct support to companies and employees, including through delivering our dementia masterclass, attending and presenting at live events and conferences, and delivering specialist clinics to staff caring for someone with dementia.

We reached 2,913 people through our activities across the year, including delivering 33 face-to-face or virtual workplace clinics to five organisations.

We undertook consultancy work with a number of organisations, influencing company policy and information – for example, by delivering a suite of masterclasses to employees. 99% of participants who responded to our evaluation request said that their knowledge of dementia and how to support someone with the condition had increased.

We have also developed excellent collaborative working relationships with both the Corporate and Regional Fundraising Teams. Together, we are adding value to our charitable partnerships by providing our partners with bespoke clinical support, dementia masterclasses and topic-focused sessions.

Safeguarding vulnerable people

Safeguarding is paramount for us as a charity. All employees recognise the need to raise concerns if they suspect someone is vulnerable, and to consult one of our Admiral Nurses as necessary.

During 2023-24 our directly delivered services recorded 770 safeguarding disclosures, an average of 64 per month. They fall into three broad categories:

- suicidal ideation in the person with dementia or carer
- domestic violence (actual or threatened) towards the person with dementia or carer
- lack of support making caring particularly difficult

We ensure these disclosures are dealt with in a supportive and compassionate manner and channels of escalation are explored as appropriate.

We use the data we capture to improve the support we can provide as a charity and to review our internal policies and processes. We continue to share our experiences externally to help raise awareness amongst other professionals and charities of the situations facing families living with dementia.

The safeguarding disclosures raised in 2023-24 do not meet the threshold for reporting to the Charity Commission as we are supporting our beneficiaries who are experiencing safeguarding situations, as opposed to these situations resulting from the actions or omissions of Dementia UK.

What we'll do next: our priorities for 2024-25

Identify ways to improve staff availability to answer Helpline calls. We will identify inconsistencies that impact our ability to answer calls and set a realistic target to improve consistency and staff availability.

We aim to consistently answer 60% of live calls first time; we will strive to exceed this target and ensure that where we cannot answer a call immediately, we return all messages as quickly as possible.

We will also ensure that 40% of nurses' time is spent on calls, with their remaining time spent on activities such as updating clinical notes, clinical supervision and essential administration – all of this will help us offer the best possible support.

Introduce a post-diagnostic support programme. This will offer a series of sessions to families of people recently diagnosed with dementia.

Increase the availability of virtual clinic appointments. This will include offering appointments during the evenings and at weekends so carers can speak to an Admiral Nurse outside normal working hours.

Grow our Dementia at Work offer to reach more people and organisations by developing and publishing two new guides to working with dementia: one for people living with dementia and carers, and one for employers.

Spotlight
Sport and dementia

An increasing number of current and former sports players are seeking our support with neurodegenerative conditions like dementia. Our Consultant Admiral Nurse for Sport and Dementia, Joe Costello, shares what his service achieved in 2023-24.

I was delighted to be appointed to the new role of Consultant Admiral Nurse for Sport and Dementia in May 2023. This an exciting and innovative senior clinical role that brings together my passion for all types of sport and my specialist dementia skills and experience.

With increasing evidence for the prevalence of neurodegenerative conditions like dementia in sport, I can offer my expert skills and knowledge in helping people with the diagnosis and their families face the challenges more positively.

Specialist support for sporting families

My role comprises many elements. I am working directly with families affected by dementia where there is a relationship with sport, providing specialist online and telephone support. I act as a resource for all Admiral Nurses, offering my expertise to enhance their knowledge and awareness of dementia in players of sport, including delivering training and learning on a range of topics linked to sport and dementia.

I am developing and facilitating links between research and practice and creating new resources on the emerging area of sport and dementia. I also aim to contribute to research, and to support clinical guidance, strategy and policy for families affected by the complexities of neurodegenerative diseases.

Developing new services

Dementia UK's specialist offer to current and former sportspeople affected by dementia began in 2022 with our online and telephone clinics for the Professional Footballers Association (PFA). These clinics run weekly. I have also provided webinars for PFA staff and family members to understand the challenges and complexities of dementia and caring for a former footballer living with the condition.

All carers who attended appointments rated the service as 'very good' or 'good' in the NHS Friends and Family Test, and professionals felt the service had increased their ability to deliver better care to PFA families.

I have also worked with the Advanced Brain Health Clinic London; football clubs and foundations including Premier League clubs; the Professional Cricketers' Association; university research institutions; and charities such as the Jeff Astle Foundation, Head for Change and the Sporting Memories Foundation – among many others. My service was shortlisted for a Nursing Times award.

In 2024-25 I will be launching a clinic offer similar to the PFA for Rugby League Cares. I will also be collaborating and networking across

Joe Costello, Consultant Admiral Nurse for Sport and Dementia

a range of charities and services – building relationships, creating opportunities for partnerships, and offering clinical consultancy to diverse types of sporting organisations.

I am an ambassador for Dementia UK and am working closely with all our services to help ensure no one is left alone in facing the challenges and complexities of dementia.

"I found Joe so very understanding. He immediately grasped the fact I was grieving for a husband who wasn't there anymore. He helped me understand some of the things my husband did, which to me were very hurtful and upsetting. He also made me feel that I counted too – I wasn't 'just a carer', I was a person in my own right."

Wife of PFA member

Evaluating our Helpline

Our Helpline supports people 364 days a year. Our latest evaluation shows the difference it makes to the carers who contact us.

In 2022-23*, 21,447 individuals contacted our Helpline, 91% of whom were carers.

The most common reasons for contacting the Helpline were:

- accessing support (39%)
- dementia understanding and support (19%)
- getting a diagnosis (17%)

24% of contacts were related to people with suspected – but not confirmed – dementia. Of those diagnosed, Alzheimer's disease was the most common form of dementia.

1,575 contacts related specifically to young onset dementia.

Without the Helpline, people said they...

- would have struggled on their own (61%)
- would have seen a GP for the needs of the person they care for (20%)
- would have seen a GP for their own needs (7%)
- would have needed the person they care for to move into a care home or nursing home (4%)

80% of people said that speaking to someone on the Helpline made them feel more positive about their current situation.

73% said it had helped with family relationships/communication.

65% said it had made a difference to their ability to take better care of themselves.

Our awards successes

We are delighted that our Helpline and virtual clinic team won the prestigious Patient Experience National Network Award (PENNA) for Caregivers, Friends and Family 2023; and the Helpline was shortlisted for the National Helpline Awards. Our Dementia at Work programme was shortlisted in the British Training Awards in the 'Not for profit initiative' category, and in the Dementia in Care Awards in the 'Dementia trainer and workforce development' category.

* Admiral Nurse Dementia Helpline evaluation report, April 2022-March 2023 (most recent evaluation)

"An absolute crucial service to give people like me the courage and tools to go on. I never feel judged or silly for asking for advice. [The Admiral Nurses] have such empathy and a willingness to help and bring hope to carers. They are my lifeline."

Helpline caller

Supporting younger people: our Young Onset Dementia Programme

Our Young Onset Dementia Programme ensures that people whose symptoms developed before the age of 65 receive the specialist, age-appropriate support they need.

Our objectives for 2023-24

- Increase access to young onset dementia expertise within existing and new Admiral Nurse services
- Deliver communication and marketing activity to improve understanding of young onset dementia; increase access to high-quality digital information; and strengthen the Young Dementia Network
- Cultivate a national influencing role to raise awareness and understanding of young onset dementia and improve its care and support
- Ensure young onset dementia is integrated in all aspects of Dementia UK's work and reinforce its distinctive characteristics and the unique issues faced by the families it affects

"I'm a bit bad for not looking after myself when caring for my mum. The Consultant Admiral Nurse for Young Onset Dementia taught me to take time out for myself, and that's it's okay to have a day off and not visit my mum all the time."

Young adult carer

What we achieved

The aim of the Young Onset Dementia Programme is to make young onset dementia support a unique selling point for Dementia UK and create a centre of expertise for people living with dementia in midlife, their families and the people supporting them.

As part of this vision, we developed and launched two new Admiral Nurse services in 2023-24, in Greater Manchester and Surrey and Borders Partnership NHS Foundation Trust. We also worked on promoting our virtual clinic appointments to people with young onset dementia, resulting in an increased uptake by families who often struggle to find age-appropriate support.

Throughout the year, we increased our support for people affected by young onset dementia through specific learning opportunities for our Admiral Nurses. These included a workshop at the Admiral Nurse Forum – 'Forgotten children: living with a parent with young onset dementia' – and a Summer School session on peer support groups for younger people. They helped our nurses and other health and care professionals develop their knowledge of young onset dementia so they can better support the families they work with.

Spreading the word

Our marketing activity was an area of focus this year, aimed at supporting people with young onset dementia by raising awareness and ensuring they receive the right information.

For the first time, we sent specific young onset dementia emails to all Dementia UK supporters, focusing on the different symptoms of dementia in younger people, and menopause – which has similar symptoms to dementia, often leading to misdiagnosis.

Our Consultant Admiral Nurse for Young Onset Dementia also sent targeted mailings to clinicians in memory/neurology clinics to raise awareness of our offer.

We continued to develop our young onset dementia resources with three new advice leaflets:

- Choosing a care home for a person with young onset dementia
- Supporting children and adolescents
- Different symptoms of young onset dementia, with an accompanying animation

We also ensured that information relevant to young onset dementia was embedded in all new and updated general dementia leaflets.

Young onset dementia featured strongly in Dementia UK's social media and was woven into the charity's brand awareness campaign in January 2024, including through sharing the story of Andy, who lives with young onset dementia (see page 32).

The Young Dementia Network

The Young Dementia Network is an online community of people living with dementia, families and friends, and professionals in the field. It is hosted by Dementia UK and aims to hold a powerful influencing role, with a current membership of 5,190 people.

This year, the Network sought to improve the experience of diagnosis and support for families affected by young onset dementia through:

- lobbying for every Integrated Care System in England to develop a young onset dementia service or pathway
- raising awareness of the possibility of dementia in people under 65 to clinicians (including GPs)
- establishing the importance of diagnosis for people with young onset dementia and their families

To make sure we include people with young onset dementia in all our activity, we conducted a 'Share your experiences' survey, with over 180 responses from Network members. Their answers provided us with authentic material to support our campaigns.

The Network also hosted webinars for other health and social care professionals – by developing their knowledge, we will ensure more people affected by young onset dementia receive the right information and support at diagnosis and beyond.

What we'll do next: our priorities for 2024-25

Work with the Young Dementia Network to improve the experience of diagnosis and support for people with young onset dementia and their families.

Increase the understanding and knowledge of health and social care professionals, including Admiral Nurses, who support people with young onset dementia and their families.

Continue to build our support and advice for people affected by young onset dementia, including through the creation of specific age-appropriate advice and guidance and promoting access to the Helpline, virtual clinic appointments and other support groups.

Evidencing our impact through insights and evaluation

Monitoring and evaluation help us measure and highlight the difference Admiral Nursing makes, which is crucial to growing and improving our services.

Our objectives for 2023-24

- Ensure that our work continues to effectively support Dementia UK's strategy by supporting Admiral Nurses and other colleagues with monitoring and evaluation advice and guidance
- Develop suitable tools and methods for gathering, storing, analysing and sharing information and evidence
- Analyse and report evidence relating to Dementia UK's Admiral Nurse services (Helpline, virtual clinic appointments, Consultant Admiral Nurse specialisms and hosted services), with feedback from families a key part of our work
- Continue to gather data to help Dementia UK demonstrate the role and impact of Admiral Nursing across various settings, including through our Admiral Nurse Census

What we achieved

During the past year, the team supported 53 Admiral Nurse services with monitoring and evaluation advice, guidance or support. This included reports for a number of Dementia UK services:

- the 2022-23 annual Helpline report (internal version)
- the Chinese Welfare Trust Admiral Nurse clinic (for families from Chinese and South-East Asian communities) annual report
- the Professional Footballers Association annual report
- reports on our Consultant Admiral Nurse services for Young Onset Dementia, Lewy Body Dementia, and Frailty (interim report)

This vital work enables us to improve the charity's support for families affected by dementia by reflecting on the successes and challenges of our services, and areas for development.

We supported colleagues within the organisation – including the Communications Team, Campaigns, Policy and Public Affairs Team and Digital Team – with devising, delivering and analysing surveys to support and inform their work.

We also provided data for the effectiveness of our partnerships with the Openwork Foundation and Zurich Community Trust, which will help our Corporate Partnerships Team demonstrate the benefits of partnering with the charity to prospective corporate supporters.

The importance of feedback

Some of the best evidence for the impact of Admiral Nursing comes from the families we support and the professionals we work with. Over the year, the team collected feedback from families accessing Admiral Nurse services and professionals working with hosted services, including:

- carer feedback on our Helpline and virtual clinic appointments
- carer feedback on hosted services
- professional feedback on hosted services

The Admiral Nurse Census

In March, we conducted our second Admiral Nurse Census to capture a snapshot of their work, helping us demonstrate what they do, what the workforce is like, who they support, and how.

We listened to feedback about the 2022 Admiral Nurse Census and used it to make improvements. In 2022, we specified a single 'Census day' for Admiral Nurses to report on, but only 57% told us that it felt like a typical day for them. In 2023, we specified a Census week and allowed nurses to report on the day that best represented their usual activity; as a result, 72% of Admiral Nurses told us their chosen Census day felt like a typical day.

We also streamlined the Census and incorporated more drop-down menus to reduce the amount of typing required and make it clearer what was being requested, allowing nurses to enter their data more quickly.

The Census was sent to all Admiral Nurses and completed by 257. Initial analysis shows, among other information, that:

- Admiral Nurses come from a wide range of nursing backgrounds: 57% are Mental Health Registered Nurses, 44% are Adult Registered Nurses, and 3% are Learning Disabilities Registered Nurses (6% hold dual registrations)
- Our nurses have a wealth of experience: 48% qualified as a Registered Nurse between 10 and 25 years ago, and 38% qualified over 25 years ago
- On their chosen Census day, 223 nurses carried out an incredible 4,560 interventions during appointments and contacts – for example, advising on how to get a diagnosis, providing emotional support, giving advice on advance care planning, and offering guidance with financial and benefits issues
- 129 Admiral Nurses also delivered activities to support other health and social care staff, reaching up to 773 professionals

The Census results demonstrate the uniqueness and complexity of the Admiral Nursing role across services, with the overall aim of encouraging prospective hosts to commission an Admiral Nurse service and so enabling more families to access expert support in their local area.

The results will also raise awareness of Admiral Nurses amongst the general public so more people understand the support they offer.

What we'll do next: our priorities for 2024-25

Ensure that our insights and evaluation work effectively supports Dementia UK's strategy and demonstrates the role and impact of Admiral Nurses.

Collect feedback from families and professionals who access or have contact with Dementia UK and hosted Admiral Nurse services. We will also review our current carer and professional feedback surveys.

Develop new ways to build the evaluation capability of Admiral Nurses, working with the Admiral Nurse Academy (see page 34) to deliver webinars, masterclasses and other learning opportunities.

Continue to develop suitable tools and methods for gathering, storing, analysing and sharing information and evidence, and test new systems to make data more accessible to colleagues across the organisation.

Andy's story

Andy's world was rocked when he was diagnosed with dementia at the age of 52, but with the support of an Admiral Nurse, he and his wife Christine are facing the future with more confidence.

When I was first diagnosed with dementia, I felt angry. I've always lived a healthy life, cycling and running marathons, and was never expecting to be told I had dementia at the age of 52. It didn't seem fair. I thought having dementia was my fault.

My wife Christine and I didn't receive any support or information at the time of diagnosis. We were left to deal with it on our own, and the future looked hopeless.

But that changed when Christine and I booked an appointment with Admiral Nurse Helen. She explained in simple terms what dementia was and how it was affecting my brain. It felt like she had flicked a switch in my mind; instead of fighting what was happening, I accepted it.

After the appointment, we sat on a bench outside and let out a massive sigh of relief. That afternoon, we went for a swim in our local lake – Helen had given us the confidence to carry on doing things that we enjoy.

"I want to make memories while I can."

Dementia impacts many parts of my everyday life. I'm forgetful and can have the same conversation three or four times. I sometimes say completely random words in the middle of conversations. I have nightmares and wake up every night terrified.

There are also different challenges with being diagnosed with dementia at my age. I have to keep working to pay rent, bills and have money to go on holidays and make memories while I can – but I'd rather spend the time I have left with my family and friends.

I worry about Christine more than I worry about myself. She works in a hospice, so she knows what's coming. I used to find her crying in the bathroom, but now we've made a pact that if we're going to cry, we cry together. We're more in love now than we've ever been.

I find it really hard to accept that Christine wants to care for me. But it isn't about me, it's about her. Christine will still know who I am, and she will still love me the same. Helen also told me that I might forget who Christine is, but I'll never forget how she makes me feel.

Knowing that the Admiral Nurses will be there for Christine as my condition progresses is so reassuring. It's given us both a little bit of security to know that support will be there when we need it on our journey.

"After our appointment with the Admiral Nurse, we let out a massive sigh of relief. She had given us the confidence to carry on doing the things we enjoy."

"I'm still me."

I speak about my dementia diagnosis very openly. I'm not embarrassed by it. I'm still me, I'm still Andy. I'm trying not to let dementia take over my life and be the only thing I am. If you break your leg and you need crutches, you're not ashamed about it. We need to talk about dementia in the same way.

I'd never even heard of Admiral Nurses before my diagnosis. That needs to change. One in three people will get dementia, and every single one of them – and their families – deserves specialist support.

My advice to anyone with a dementia diagnosis is that life doesn't have to stop. Dementia UK is here to support you, and with the help of an Admiral Nurse, you can carry on doing all the things you enjoy.

Learning and growing: our Admiral Nurse Academy

We can only support families facing dementia if we also support our nurses to continually grow and develop their skills. Our Admiral Nurse Academy ensures every nurse can access the education and support they need to excel in their roles.

Our objectives for 2023-24

- Build on our induction offering for new Admiral Nurses by developing a pathway consisting of an introduction to Admiral Nursing and six months' support with developing the service
- Increase Admiral Nurses' use of resources on our online learning platform by evaluating what currently works well and what does not, and exploring opportunities to increase engagement
- Incorporate the lived experience of people with dementia and their families into the Admiral Nurse Academy and other Dementia UK activity

What we achieved

As part of our commitment to supporting families affected by dementia, we devised a new Admiral Nurse development pathway for nurses who are new to their role and launching a service. It is designed for all nurses to undertake within the initial six months of their Admiral Nursing career.

This innovative pathway provides an engaging and comprehensive learning experience, specialising in advanced dementia nursing skills associated with the Admiral Nurse role. The blended learning programme encompasses mandatory and elective learning units, offering a tailored educational experience.

Every new Admiral Nurse will follow a personalised pathway that combines self-directed learning and shared online sessions. Nurses will also take part in two further Practice Action Learning Sets alongside a cohort of their peers – an opportunity to share experiences, reflect, and discuss how their acquired knowledge has positively influenced their practice.

Through the pathway, we are ensuring that more families throughout the UK can access support in a local setting by equipping every new Admiral Nurse with the skills they need to launch their service with confidence.

Engaging our nurses

This year, we have progressed towards our goal of ensuring Admiral Nurses are supported and encouraged to engage in learning and development. Attendance at our monthly webinars has grown across the whole year, with over 40 nurses at our last three sessions. This is partly due to introducing a more sophisticated booking system that enables nurses to easily access the webinar they want to attend.

We have also begun a two-year project to update and redesign our online learning management system for Admiral Nurses. We have formed a plan of the steps required for this to happen, and three members of our team have attended training to help us create a more user-friendly system. This is work in progress and will remain an objective for 2024-25.

Diane Drain, Academy Lead Admiral Nurse

Valuing lived experience

Families affected by dementia are at the heart of what we do, and to ensure their voices are heard and represented in every aspect of our work, we recruited a Lived Experience Coordinator in April 2023. She has taken on the coordination of our Lived Experience Advisory Panel (LEAP), which is made up of people with dementia and carers who collaborate, advise and inform on many aspects of our work.

She has also developed a further Lived Experience Advisory Network (LEAN): a network of over 200 people living with dementia and carers who Dementia UK can approach for input on our work.

For more information on how we use lived experience at Dementia UK, please see our Spotlight feature on page 38.

Sharing our knowledge

In July 2023 we ran our third online Summer School for all health and social care professionals to support their delivery of high-quality dementia care. Seven sessions took place across four days on subjects including frailty, transitions of care, and end of life care, with over 350 attendees in some sessions.

"It's so heartwarming to see how many people have taken part in [Summer School] sessions. It makes me happy to see that dementia is firmly on the radar and that together, we can all make a difference."

Summer School attendee

Through our Summer School, we promote the work of Dementia UK and the role of Admiral Nurses; provide learning opportunities for health and social care professionals and organisations that support people with dementia; and encourage other nurses to consider a future career in Admiral Nursing, ultimately improving lives for families facing dementia.

What we'll do next: our priorities for 2024-25

Begin the two-year project to rebuild our learning management system to provide a more sophisticated offer to Admiral Nurses. We hope to employ further support in the team, specifically to design and build new learning tools to encourage interaction and measure achievement.

Roll out the Admiral Nurse Academy evaluation plan. We will pilot this using the new Admiral Nurse pathway. This will allow us to monitor if our methods capture what we want to know.

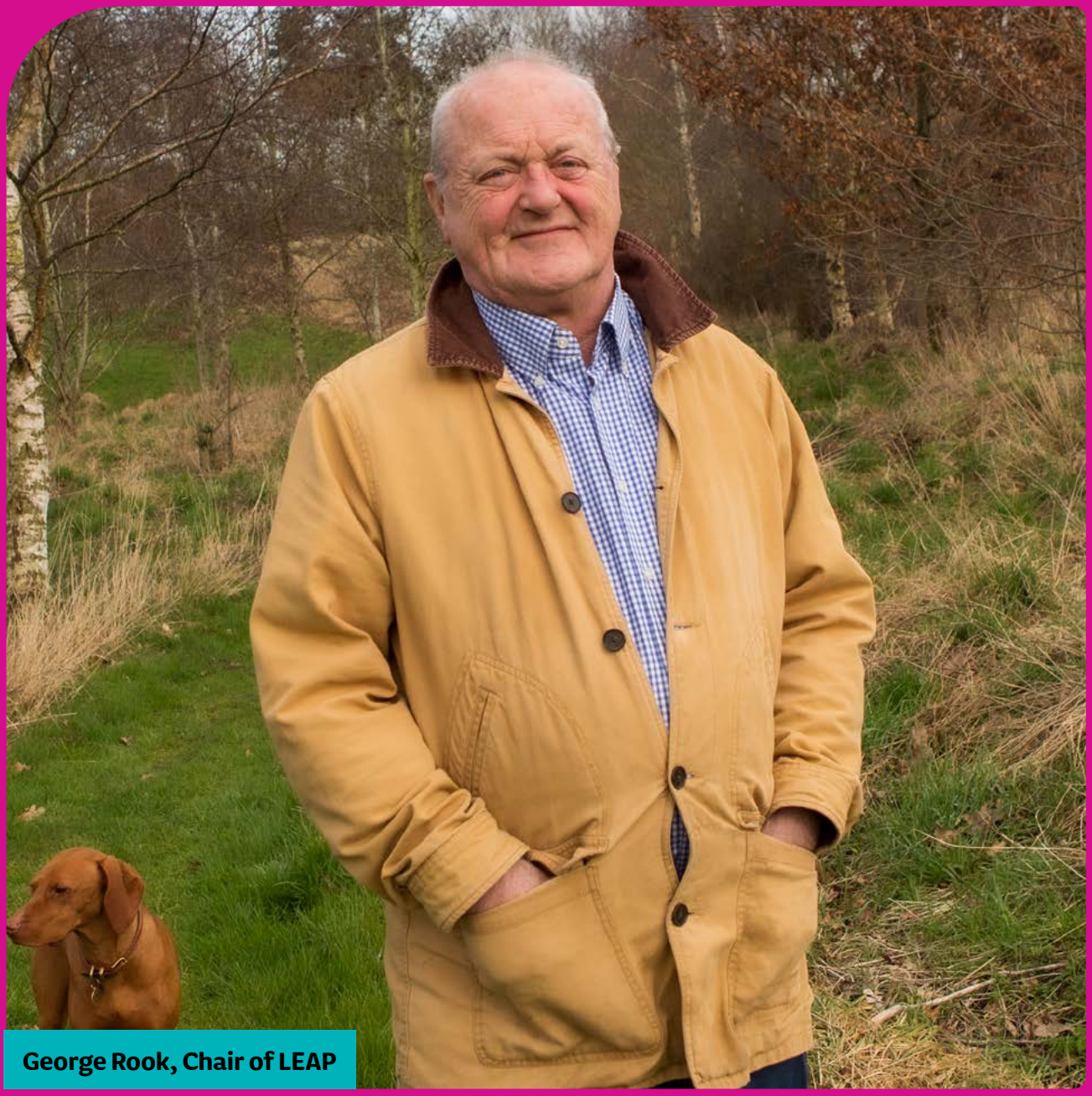
Provide further learning opportunities externally to health and social care professionals. We will agree a plan of action and develop the offer in stages, with the aim of releasing free learning in 2024-25 and subscription learning from 2025 onwards.

Maintain our clinical supervision offer for all Admiral Nurses. We will continue to create groups to run online Practice Action Learning Sets (PALS) – our chosen method of clinical supervision. We will also develop more Dementia UK clinical staff to become facilitators of supervision.

Spotlight

The importance of lived experience

We work hard to provide families with support that meets their needs. Suzy Webster, Lived Experience Coordinator, explains why we can only do this with the lived experience of people affected by the condition.



George Rook, Chair of LEAP

Dementia UK's Lived Experience Advisory Panel (LEAP) is dedicated to making the voices of people living with dementia, their families and carers heard; and using its members' own voices to support, advise and influence our charity's work. Established in 2016, it is a panel of people with dementia and carers that meets five times a year.

Together, our objectives are:

- to involve and draw upon the lived experience of people with dementia and carers, especially those using Dementia UK and Admiral Nurse services, in a meaningful, supportive and inclusive way
- to give Dementia UK constructive feedback and advice on its work. This can include the panel being a 'critical friend' to the charity
- to assist with promoting Dementia UK and support its strategic aims and activities
- to be linked with the management and governance structure of Dementia UK
- to call upon the expertise of other people living with dementia and their carers

In the past 12 months, LEAP members have been closely involved in developing our campaigns, creating learning videos for Admiral Nurses, and supporting the development of our new Research Strategy (see our Spotlight feature on page 42).

They have helped inform our General Election manifesto and are supporting the development of Dementia UK's 2025-30 strategy. This will firmly embed the experiences of families facing dementia in our work going forward.

The Lived Experience Advisory Network

Alongside LEAP, we have created a new Lived Experience Advisory Network (LEAN). This is a network of individuals and groups who have agreed to be contacted with opportunities to contribute to our work.

LEAN ensures we capture a diverse and inclusive voice to inform our work. We reach out to members in the places where they meet and find support. They can be called upon to add their opinions to various projects and departments within Dementia UK, such as focus groups, and to support Admiral Nurses' training. They were also involved in developing our General Election resources and planning for Summer School.

My aim is for Dementia UK to put lived experience on the agenda of everything we do – from discussing a new fundraising idea to designing a project or service. Co-producing our work with our beneficiaries ensures we are getting it right and providing the best possible support for everyone affected by dementia.

In memory of Wendy Mitchell

Everyone at Dementia UK was deeply saddened to hear of the death of dementia advocate and author Wendy Mitchell in February 2024.

Wendy, who lived with young onset dementia, was a member of LEAP and a dedicated Dementia UK fundraiser. Her amazing contributions to our work will be sorely missed.

"Wendy was a powerhouse. She wasn't afraid to challenge people. She always fought for the value of getting a diagnosis, and for accepting how life changes once you get that diagnosis – but doesn't end. I will dearly miss her passion. And I will dearly miss our friendship."

Dr Hilda Hayo, Chief Admiral Nurse and CEO

Changing lives through research

Our Research and Publications Team builds a powerful case for Admiral Nursing through its own research, as well as contributing to new evidence around dementia care in the UK and worldwide.

Our objectives for 2023-24

- Launch Dementia UK's first Research Strategy, identifying and developing our top three research priorities for Admiral Nursing to grow the evidence base for our services
- Extend our reach and influence into dementia care research by growing our team and partnering with researchers in the UK and overseas
- Launch our series of Dementia UK research webinars in autumn 2023, aimed at health and social care professionals and dementia care researchers
- Develop a full range of educational materials to support Admiral Nurses' understanding of research and increase their knowledge and skills to undertake their own research projects
- Create a set of conversation cards to support families affected by dementia in important and sometimes difficult discussions

What we achieved

The Research and Publications Team successfully led the development of Dementia UK's first ever Research Strategy in 2023-24, which will help us focus on improving our support for people with dementia who face specific, complex challenges. It names three key research priorities for Admiral Nursing:

- people with dementia who live alone and families providing support from a distance
- people with young onset dementia and rarer dementias
- people living with multiple health conditions alongside dementia

We have successfully recruited two new Research Fellows to progress the Research Strategy and are now developing a portfolio of evidence to address the questions identified. Please see page 42 for our Spotlight on the Research Strategy.

Building research confidence

In developing the Research Strategy, the Research and Publications Team undertook a survey of Admiral Nurses' research confidence and support needs. The results will allow us to tailor our support for nurses, enabling them to become more research-minded.

We are also collaborating with Join Dementia Research to create a bespoke course for Admiral Nurses, helping them to have confident conversations about research with people living with dementia and their families. To support these conversations, we have produced a leaflet about the benefits of participating in research, which can be read at **dementiauk.org/wp-content/uploads/dementia-uk-about-our-research.pdf**

While the development of our webinar series took longer than anticipated, we are on track

to launch in autumn 2024. We are currently liaising with researchers and academics who will also use our webinars to present their research findings.

Learning through collaborating

In the past year, Research and Publications Team members have contributed extensively to research, highlighting the value of our expertise in shaping dementia research. We have collaborated with many prominent researchers in the UK and further afield on research relating to psychosocial and care issues around dementia, including:

- advance care planning
- case management
- commissioning guidance for services for people with dementia who live alone
- music interventions

In 2023-24 we wrote and published over 45 peer reviewed journal articles and supported many Admiral Nurses in their writing. A further 10 articles have been accepted for publication, with over 25 papers in the peer review process, and a new 'Essential guide to dementia' for nursing students will soon be published. This will benefit families far into the future by enhancing tomorrow's nurses' understanding of dementia.

A second edited book, 'Working with dementia – what you really want to know' was submitted to the publisher and is due in press this year. It follows the very successful format of the first book, 'Living with dementia – what you really want to know', which has been included in the 'Reading Well for Dementia' 2024 booklist – an accolade that recognises its value to families affected by dementia.

What we'll do next: our priorities for 2024-25

Launch the Dementia UK webinar series in the autumn. This will give researchers in dementia care a national platform to present their findings and enable Admiral Nurses and Dementia UK to align their own research and innovation results.

Use the webinars to give updates against the outcomes and impact of each of our three research priorities. We aim to conduct and publish literature reviews for each of the priorities; these will inform our planning of research specific to developing Admiral Nurse practice and services to address these priorities.

Continue to support nurses to develop their research knowledge and skills through activities such as bespoke research-related educational online modules; support with writing for publication; and translation of research into 'bite size' research reviews so nurses can read brief summaries of research and its implications for their practice.

Spotlight
Dementia UK's first Research Strategy

Emma Wolverson, Dementia UK Research Lead, explains why our Research Strategy is needed and how it will inform the direction of our work over the next five years.

Although we have a lot of service evaluation evidence about the impact of Admiral Nursing, to date there has been very little research into its benefits. Our new Research Strategy reflects our desire to build the evidence base for Admiral Nursing and thereby grow the number of Admiral Nurses; and to ensure that current nurses have access to evidence-based interventions.

Through a thorough and systematic process that included consulting people with dementia and their families, Admiral Nurses, staff at Dementia UK, commissioners of Admiral Nurse services and researchers, we devised three priorities for our Research Strategy:

1. People with dementia who live alone and families caring from a distance.

The number of people who live alone with dementia is growing rapidly. Health and social care services can struggle to meet their needs, and as a result, these people often enter residential care earlier than other people with dementia. We want to understand the needs of people who live alone and family members who are caring from a distance, and how Admiral Nurses could support them.

2. People with young onset and rarer forms of dementia and their families.

Dementia UK and Admiral Nurses have expertise in supporting people with young onset and rarer forms of dementia. Our research here will allow us to grow our knowledge, skills and specialism. We are particularly interested in how we support children and families of a person with young onset dementia.

3. People with multiple health conditions alongside dementia, including mental health conditions.

Many Admiral Nurses support people who have complex needs alongside dementia, but research in dementia tends to ignore the fact that people often live with additional health conditions. Carers may also have their own multiple health conditions. Our research here will allow us to evidence the complexities that Admiral Nurses face and demonstrate their specialism.

We have formed advisory groups for each priority, which include people living with dementia, carers, Admiral Nurses, Dementia UK staff and researchers. They will help to shape our research and ensure that it is meaningful and impactful.

Alongside this work, we are looking at how we can measure meaningful outcomes for Admiral Nurses, include demonstrating cost

Dementia UK's Research and Publications Team

savings. We also plan to develop the research confidence and research-mindedness of our nurses, with a range of training and resources to help them feel more confident in talking about research and develop their research skills.

Our aim is that our Research Strategy will build a strong case for the impact of Admiral Nursing, encourage potential host organisations to commission new services, and ultimately improve the lives of people with dementia and their families.

Campaigning for change

We believe that high quality, specialist dementia care for all should be a priority for the Government and policymakers. Together with our supporters, we continually campaign for change locally and nationally.

Our objectives for 2023-24

- Press for improvements in the health and care system for families affected by dementia, including through launching phase two of our 'Guiding the way' campaign, aimed at improving their experience of NHS continuing healthcare funding
- Work with the Department for Health and Social Care to ensure the forthcoming Major Conditions Strategy benefits people living with dementia, their families and carers
- Campaign for improvements in access to dementia support for diverse communities, ensuring that policymakers recognise and understand the unique barriers they face
- Increase Dementia UK's political profile and influence by setting out a manifesto of key recommendations for policy change and improvement before the next UK General Election
- Grow our Campaigns Network to ensure that the voices of people affected by dementia, their families and other supporters are at the heart of all our campaigns

What we achieved

In 2023-24, our campaign to improve the experience of applying for NHS continuing healthcare for families affected by dementia – a vital source of funding that covers care fees – gained pace. We renamed the campaign 'Fix the funding' – which became Dementia UK's first campaign with digital activism tools.

'Fix the funding' formed a key part of our General Election action. Please see Spotlight on page 48 for more information about our achievements so far.

Making dementia a health priority

Expecting that the Government's Major Conditions Strategy would be published in 2023-24, we carried out focus groups and interviews with Admiral Nurses, people living with dementia and their carers to feed into development of the strategy.

The publication of the strategy was delayed due to the General Election being called. However, we submitted comprehensive evidence to the Department of Health and Social Care to demonstrate how a Major Conditions Strategy could meet the needs of people living with dementia, and engaged with the Department's Strategy and Dementia Teams as well as NHS England to share our recommendations.

We were delighted to see the Additional Roles Reimbursement Scheme – which offers Primary Care Networks (PCNs) reimbursement for introducing new roles in their multidisciplinary teams – extended to include enhanced nurses from 2024-25. This allows PCNs to use this reimbursement to create Admiral Nurse roles. It was one of our key asks, and a fantastic success to see the scheme changed.

Chief Admiral Nurse and CEO, Hilda Hayo, addressing attendees at Dementia UK's parliamentary event

Raising our profile

This year, we attended the political party conferences for the first time. This provided us with opportunities to raise the profile of Dementia UK and Admiral Nursing and share our recommendations for change – including the 'Fix the funding' campaign, the need for a framework of support for people with young onset dementia, and the need for Admiral Nursing in acute care.

With the support of Admiral Nurses at the conferences, we engaged with 58 MPs, two peers, 13 prospective parliamentary candidates and hundreds of councillors, party officials and delegates.

Throughout the year, we had more mentions in Parliament than ever before. Nine MPs also supported our dementia awareness campaign (see page 50) by sharing our posts on social media. This shows that politicians are taking our messages seriously, which we hope will prompt them to put dementia firmly on the local and national agenda so that people across the country get the support they need.

Representing the under-represented

Together with our supporters, we continue to campaign for improvements in support for diverse and under-represented communities with the aim of ensuring that people have equitable access to dementia care and support.

Calling for improved support for people living with young onset dementia is a priority for our team. This year we boosted the profile of young onset dementia in Parliament, with questions raised through MPs, including on the need for people under 65 to be included within dementia diagnosis target and recorded rates.

We have convened a panel of cross-sector experts to work with us to deliver a framework of support for people living with young onset dementia, and hope that Integrated Care Systems (local partnerships that

bring health and social care together) will implement this to improve their care offer.

We fed into the Department of Health and Social Care's consultation into mandatory training on learning disability and autism, highlighting the importance of dementia training and awareness within support services for people with learning disabilities.

We have also pushed for rarer dementias to be recorded in NHS statistics, and highlighted the specific barriers faced by people living with dementia in prisons.

Growing our network

We have seen excellent levels of supporter engagement this year, including through the 'Fix the funding' campaign. We have piloted local campaigning resources for supporters who wish to build the case for Admiral Nurses in their area.

We also ensured that Dementia UK's Lived Experience Advisory Panel (LEAP) was involved in reports by National Voices (the leading coalition of health and social care charities in England) into access to primary care and communication needs in primary care for people with dementia.

Former Conservative MP Sir Robert Buckland pledging to transform dementia care

Beth Clayton-Exworth, Campaigns and Engagement Manager, speaking at Dementia UK's Staff Summer Conference

What we'll do next: our priorities for 2024-25

Put dementia care firmly on the agenda of the new Government. This will include working together with campaigners and people affected by dementia to influence new MPs; and calling on the parties directly to transform dementia care.

Campaign for improvements in access to dementia support for diverse communities, including people living with young onset dementia.

Push for changes to the NHS continuing healthcare funding system via our 'Fix the funding' campaign so that it meets the needs of those living with dementia.

Be an expert voice in policy development at national and local level to ensure that the needs of people living with dementia inform the delivery of the services that they rely on.

Grow, develop and work alongside our community of passionate and involved campaigners, supporters and LEAP to deliver national campaigning actions that put the priorities of those living with dementia at their heart.

Spotlight
The ‘Fix the funding’ campaign

Thousands of people affected by dementia are missing out on vital care funding. Beth Clayton-Exworth, Campaigns and Engagement Manager, explains why our ‘Fix the funding’ campaign is calling for urgent change.

NHS continuing healthcare (CHC) funding can be a lifeline for people in England with long-term and complex health needs, many of whom are facing soaring care costs. It covers costs such as home care or care home fees.

But families affected by dementia often face significant obstacles in accessing this vital funding. Many are missing out because the assessment process is flawed and does not recognise their unique and challenging needs.

Families have told us that they feel frustrated and demoralised by a system that appears to work against them. Too many are pushed to their emotional, psychological and financial limits by having to foot the cost of care themselves.

Unless the process is reformed, many more families will miss out on the funding they urgently need.

Growing our community of campaigners

In 2023-24, we relaunched our CHC campaign as ‘Fix the funding’, joining together with our supporters to call on the Government and NHS England to review the CHC process so that it better recognises the health needs of people with dementia – including their cognitive and behavioural needs.

We launched an exciting new digital campaigning tool, which helped harness the collective campaigning efforts of thousands of Dementia UK supporters for the first time. Over 8,000 people pledged their support for the ‘Fix the funding’ campaign and contacted their MPs to call for an urgent review of NHS continuing healthcare.

In total, 96% of MPs in England were contacted by our supporters. This led to dozens of MPs getting involved in the campaign by requesting to meet with the Dementia UK team to find out more; and by submitting written and oral questions to the Government about the CHC process.

In March 2023, we took the campaign to Parliament. We invited MPs to attend an event to hear directly from families living with dementia and Admiral Nurses about how and why the CHC process must be urgently improved. We welcomed 32 MPs and their staff members, including key Ministers and Shadow Ministers.

Putting dementia on the agenda

'Fix the funding' formed a key part of our campaigning for the General Election. We published a Dementia UK manifesto which outlined the commitments we need to see from the new Government so that everyone affected by dementia can get the tailored specialist support they need. With the help of our supporters, we are now calling on the Government to put dementia at the top of the agenda.

"People living with dementia are vulnerable and families are physically and emotionally exhausted and drained due to providing care. We should not have to undergo a continuing healthcare assessment process that is so tortuous and unfair. Dad is no longer here but the process has left a huge scar on me, and I feel incredibly angry about the way he was treated."

Annette, 'Fix the funding' supporter who shared her late father's experiences at our event in Parliament

Spreading the word: marketing and communications

We want everyone to know about the support we offer through our Admiral Nurses – and to have expert dementia information at their fingertips. The Marketing and Communications Team helps raise awareness throughout the UK.

Our objectives for 2023-24

- Develop and oversee phase three of our campaign to increase awareness and knowledge of Dementia UK and Admiral Nurses
- Ensure Dementia UK is visible to those who need our support by creating and harnessing key communication moments across the year such as World Alzheimer's Month
- Deliver innovative, high-standard digital activity and capitalise on new technology and trends – including modernising the look and feel of our website along with improving accessibility
- Review our digital offering to ensure it meets our audiences' needs, for example by delivering our Email and Social Media Strategies to engage our supporters and encourage them to donate or fundraise
- Continue to promote the work of Admiral Nurses to drive recruitment and inspire more organisations to host an Admiral Nurse service
- Develop and deliver our PR, Celebrity and Influencer Strategy, driving our work forward in these important awareness-raising areas

What we achieved

To ensure more families hear about the vital work of Admiral Nurses and understand how they can access our support, we launched the third phase of our awareness campaign. This was seen by hundreds of thousands of people across outdoor advertising (including on Street Hub advertising space generously provided by BT), in the media and on social media. Named 'We live with dementia', it shone a light on how dementia affects not just the person with the diagnosis, but everyone around them.

The campaign included three powerful films sharing families' stories of living with dementia – you can read these families' experiences on pages 10, 32 and 54 – as well as an updated version of our 'Living with dementia' downloadable guide and five new accompanying bite-size guides. 34,778 people signed up to receive information about the campaign and download the guides.

We also hosted an exhibition of children's artwork – innovatively presented on fridges in Dementia UK's brand colours – in London's Paternoster Square, bringing to life the impact that a family member's dementia can have on children and young people.

As a result of the campaign, more families learnt about the support we offer, evidenced through upward trends in our brand tracking and people accessing our Helpline and virtual clinic appointments.

Penny, Shahbanu and Aqib, with Admiral Nurse Sheridan, who featured in our World Alzheimer's Month film

Content that makes a difference

The Marketing and Communications Team is committed to raising awareness of dementia through our digital channels, sharing essential health and care information and highlighting the work of our Admiral Nurses.

To mark World Alzheimer's Month (September 2023), we produced a short film, 'The life-changing impact of an Admiral Nurse'. The film was viewed over 3,400 times on social media and YouTube, and was a finalist in the Smiley Charity Film Awards.

This was part of a multi-channel digital campaign that aimed to increase brand awareness, show supporters why they should continue supporting Dementia UK and create brand loyalty in the lead-up to the 2023 Christmas fundraising appeal.

Throughout the year, we generated content to ensure Dementia UK was visible at key moments such as International Nurses' Day, World Alzheimer's Month, Carers' Week, Mental Health Awareness Day, and Black History Month. We released stories, blogs, videos, cartoons by the late illustrator Tony Husband, and videos showcasing the wide-ranging issues facing people affected by dementia, and the many ways in which our nurses support them.

"I am finding the reality that I may well have vascular dementia very difficult. Through Dementia UK I am able to face and address key concerns and be prepared for the journey ahead. I am very grateful to everyone who has contributed to compile such a creative and insightful collection of vital information."

Social media comment in response to our awareness campaign

Our digital offering

A major focus for our Digital Team was helping families find and engage with the dementia information and advice they need by modernising the look and feel of our website along with improving accessibility. Our website relaunched in September 2023 and we have already seen great results against our original objectives.

Social media also plays an important part in raising awareness of Dementia UK, sharing information and advice, and growing support for the charity. This included developing our presence and influence on TikTok – a platform we began to use in February 2023 – with 109 videos published across the year.

Social media in numbers

- LinkedIn: **48,970 followers (up 25%)**
- Instagram: **50,949 followers (up 21%)**
- Facebook: **130,597 followers (up 18%)**
- Twitter/X: **117,048 followers (up 1%)**
- TikTok: **4,950 followers**

Our new Email Strategy

In 2023 we focused on creating and beginning to implement our latest Email Strategy, with the goals of making our email programme more useful to subscribers, raising awareness of our Admiral Nurse services, and increasing engagement rates when asking supporters to take action for Dementia UK.

We also developed our internal process for sending reactive content to supporters, ensuring we move quickly in response to the latest news. We started this process with an email to supporters in response to TV presenter Fiona Phillips's dementia diagnosis, which received excellent engagement rates.

Dementia UK in the media

We have seen unprecedented, high quality media coverage in the past year, all aimed at raising awareness of dementia, highlighting how families can access our support, and positioning Dementia UK as an authority on dementia care.

Throughout the year we commented on celebrity diagnoses of dementia; targeted regional syndication networks with content focused on our services; and placed powerful storyteller pieces in the media.

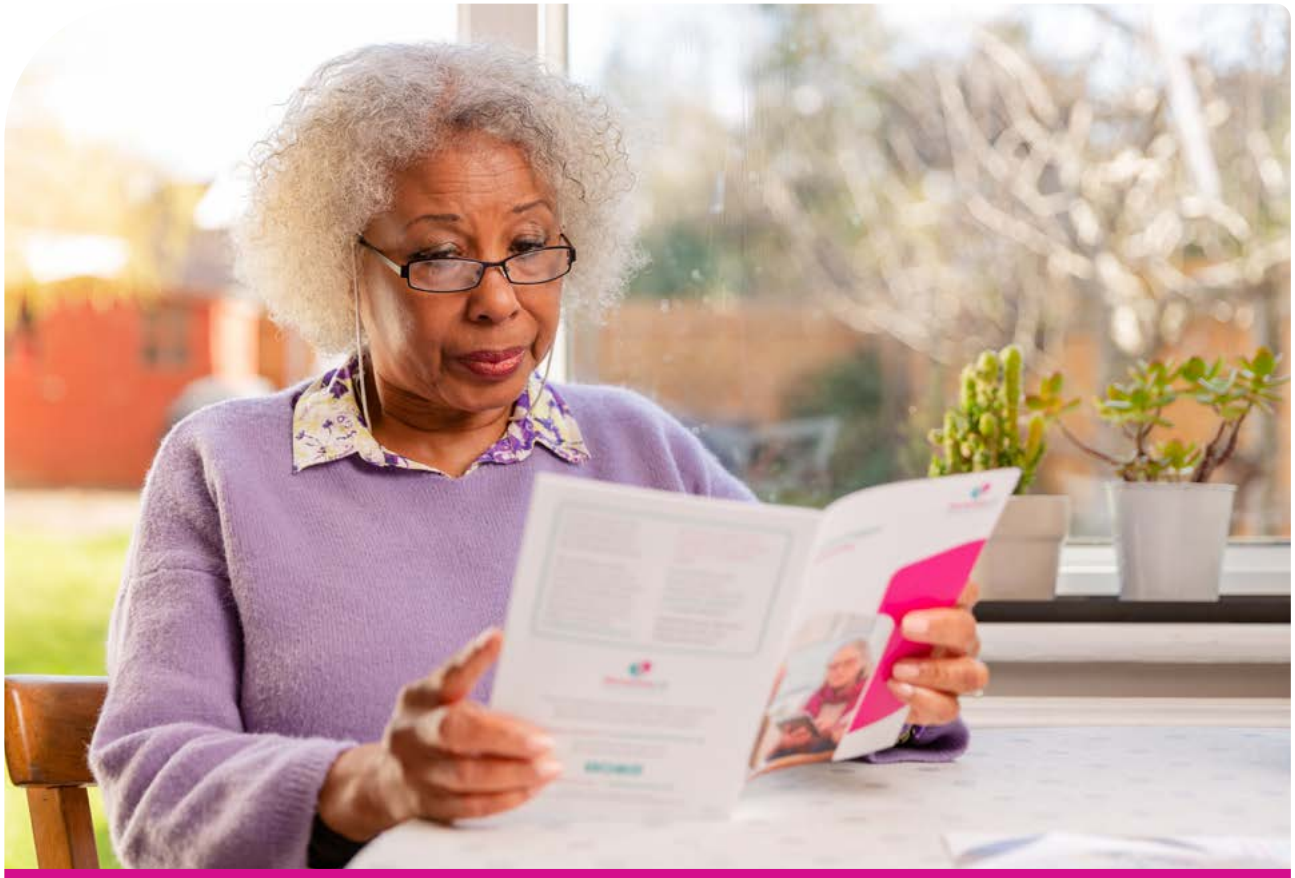
Highlights for the Media Team included a live interview on BBC Breakfast with our new Ambassadors John and Nula Suchet, a 'day in the life' feature with an Admiral Nurse on BBC Morning Live, and an interview with Dr Hilda Hayo in inews calling for more Admiral Nurses on International Nurses Day 2023.

We have increased the number of internal spokespeople to place comment and opinion pieces in trade and national press, and continued to work with influencers to support key campaign and fundraising moments.

Embracing accessibility and diversity

This year, we undertook a project to assess and redesign our resources and templates to meet accessibility standards, which included looking at fonts, sizes and our colour palette. We also reviewed our style and language guide, with a focus on the language we use around ethnicity, gender and sexuality and disability.

We continue to ensure we represent people from diverse backgrounds across all our content, including stories, blogs, photography and information leaflets, so that everyone affected by dementia understands that their voices and needs are important to us.



What we'll do next: our priorities for 2024-25

Seek new and innovative ways to develop awareness and understanding of Dementia UK, including by capitalising on key moments such as International Nurses' Week, World Alzheimer's Month and Black History Month.

Deliver impactful and effective content to core target audiences and provide expert information for people pre- and post-diagnosis. We will experiment with different ways of presenting content including animations and podcasts.

Increase our spokesperson roster to ensure we have media-trained spokespeople capable of addressing different audiences effectively.

Ensure our digital offer is embedded in all our work, for example by continuously improving our website, trialling live web chat, developing a post-diagnostic online programme and investing in search engine optimisation (SEO).

Raise awareness of Dementia UK's clinical services with other healthcare professionals, including working with Consultant Admiral Nurses to promote their specialist services and using our 'Living with dementia' guide to start conversations about Dementia UK services.

Increase awareness of Dementia UK as a centre of expertise for young onset dementia – ensuring our current assets are seen by people affected by young onset dementia and professionals, looking at how we can bring younger people to the website, and continuing to send targeted emails to young onset dementia professionals.

Ricky's story

Ricky's gran's dementia diagnosis left him feeling torn between his caring responsibilities and raising his young son, but advice from our Admiral Nurses has helped them maintain their relationship.

I wish I'd known how suddenly dementia would take hold of Gran. We always think we have plenty of time with our family, but it's like Gran is not really there now. As a family, we do as much as we can for Gran, but we never feel like we're doing enough.

It's the little things that get to me the most. Gran and I used to listen to music together and watch gameshows, but we can't do that anymore. She gets names and faces mixed up and often confuses me for her son. It's heartbreaking knowing that we will never have a normal conversation again.

"We're all living with dementia."

Gran has always been the family matriarch. She was strong-willed and someone I looked up to – the first person I would tell when I had achieved something. But her dementia has slowly impacted every part of our day-to-day lives.

I used to see Gran every day, but now I'm married and have a child of my own, it's hard to balance my responsibilities. I still try to have video calls with her every day, but I feel guilty that I don't see her as much. She looked after me all my life, and now I want to look after her.

My mum struggles too as she has her own health issues. Mum and Gran's roles have reversed, and Mum is her carer now, as well as her daughter. She is also still trying to be a wife, a mum and a gran herself.

We're all living with dementia. We're all living with guilt. It's taken a big toll on us all as a family. Fortunately, we are very close; we all help and support each other.

"When things get too much, I call the Helpline."

Living with dementia is isolating, and you can't think clearly when you're in the thick of it. But I've called Dementia UK's Helpline many times when I've needed support.

The Admiral Nurses have given me practical ideas on how to keep Gran's mind active, like playing games and colouring. They encouraged me to stop correcting Gran when she doesn't understand things. Instead, a tender touch on the shoulder or a hug can make her feel special and loved.

I've also called the Helpline just to talk through how I'm feeling. It's reassuring to hear that what you're going through is normal, and that other people are in similar situations.

I wish I'd asked Gran more about her early years in India – she had a whole life before she became my gran. I would love to have just one more day with her, without dementia.

Dementia impacts so many people and the more we know about the condition, the better we can support our loved ones. It's reassuring to know that when things get too much, I can pick up the phone and speak to a dementia specialist who understands.

“It’s reassuring to hear that what you’re going through is normal, and that other people are in similar situations.”

The power of giving

As a charity that receives no Government funding, we rely on our supporters to continue our vital work. Every gift, donation and pledge changes lives.

Our objectives for 2023-24

- Provide new and existing supporters with opportunities to donate through a variety of fundraising activities, including appeals, single donations, regular gifts, donations in memory and our new Weekly Lottery
- Build deeper engagement with supporters to make them feel more involved in our work, inspiring their loyalty and long-term relationships
- Continue to raise awareness of the value of gifts in Wills through a variety of activities including legacy marketing, events for current and prospective supporters, and ensuring all Dementia UK staff and Admiral Nurses are able to articulate the importance of gifts in Wills

What we achieved

Throughout the year, we targeted existing supporters through a range of communications, including our summer and Christmas appeal direct mailings and regular emails, encouraging them to make regular or single gifts.

We continued to encourage new supporters to make donations via our value exchange campaign (where we give them the opportunity to request a free pin badge and be contacted about setting up a regular gift) and payroll giving so that together, we can support more families.

We also launched two new innovations: online shopping through a bespoke easyfundraising Shop and Raise app, where retailers donate a percentage of every online purchase made by supporters; and our Weekly Lottery, the first prize-led fundraising for Dementia UK.

Our handraiser campaign, where we invited new supporters to stand with us for better dementia care, proved a great success. We encouraged supporters to sign up for updates on our work and consider making a regular gift. This contributed to increasing the number of regular givers by 32% overall – all helping us grow our specialist services for families facing dementia.

Building trust and loyalty

2023-24 saw the development and delivery of the first year of our Supporter Experience Strategy, in collaboration with the entire Fundraising and Engagement Department. We invited existing supporters' feedback on their feeling of connection, support and loyalty to Dementia UK. These findings helped us better understand supporter behaviour and consider how to increase their commitment, satisfaction and trust in us.

We then focused on supporter experience activities to improve retention and deepen their engagement with the charity – including non-financial actions to drive policy change and raise awareness.

We also worked to ensure our supporters have the best experience of Dementia UK by participating in a stewardship tracker, and using mystery shoppers to check the quality and effectiveness of our processes and communications.

To make sure supporters feel directly connected to the people we support, we

featured stories from families and nurses in every fundraising appeal to showcase the difference they make, including two issues of 'Closer to you', our supporter magazine.

We also developed welcome journeys and loyalty communications for supporters, ensuring everyone is thanked for their generosity and sharing how their support improves the lives of families facing dementia.

Changing lives in years to come

Gifts in Wills are crucial in helping us plan how we will support families in the future, and in 2023-24, we increased the number of pledgers by 67% from the previous year. We developed new resources to highlight the importance of this form of giving, including a gifts in Wills guide, promotional mailings and other stewardship materials – all using stories from families receiving our support and people who have chosen to leave a gift.

We delivered a multi-channel marketing plan promoting gifts in Wills and participated in Remember a Charity Week to target new and existing supporters. We encouraged supporters to consider using the free Wills service and/or leave a gift, and created our first Dementia UK free Wills service animation.

We also held a gifts in Wills supporter event at The Foundling Museum, London. Supporters were invited to celebrate what we have achieved together through gifts already received; and consider making this generous choice themselves – all helping us support families affected by dementia far into the future.

What we'll do next: our priorities for 2024-25

Continue to provide new and existing supporters with opportunities to donate through a variety of fundraising activities. These include appeals, single donations, regular gifts, the Weekly Lottery, a new Puzzle Packs subscription product, and donations made in memory.

Build deeper engagement with supporters to make them feel more involved in our work, inspiring their loyalty and long-term relationships. We will gather insights from surveys, mystery shopping and focus groups to ensure we make a powerful case for our supporters to donate.

Continue to raise awareness of the value of gifts in Wills through activities including legacy marketing; supporter events; multichannel marketing including photography and video; and ensuring all Dementia UK staff and Admiral Nurses are able to articulate the importance of gifts in Wills.

Spotlight
Dementia UK's Memory Wall

When a loved one dies, having a space to share memories and photos can bring great solace. Naomi Hall, Legacy and In Memory Manager, explains how our Memory Wall offers comfort at a time of sadness and also brings in vital donations.

Dementia UK's Memory Wall is a place for people to remember loved ones who have died. It was set up in spring 2021 to give people bereaved by dementia the opportunity to celebrate the life of someone special by posting photos and messages, which they can share with family and friends so they can make their own tributes.

We recognise the importance of supporters being able to remember a family member or friend, whether their bereavement was recent or some time ago. The Memory Wall gives them a collective space to do this with other like-minded people who have lost someone to dementia, helping them feel less alone.

Celebrating a loved one's life

All supporters who donate to Dementia UK in memory are invited by email to post a tribute on the Memory Wall.

We also set up special Memory Walls related to key dates such as Mother's Day, Father's Day and Christmas, when people are often prompted to reminisce about a loved one. We promote these via email to existing supporters and also on social media, so that anyone who has lost someone can post and pay tribute, even if they are not a current Dementia UK supporter. This allows them to show that the person is still loved at these important moments.

Posting on the Memory Wall is free, showing the value we give back to supporters by helping them grieve their loved one and celebrate their life. We also use it as an opportunity to signpost people to the bereavement information and support we offer online and through our Helpline, virtual clinic appointments and other Admiral Nurse services.

We do invite people to make a donation if they would like to help us make sure no one faces dementia alone, and despite this being a no-obligation ask, the Memory Wall has raised significant funds for our specialist dementia services.

The Memory Wall is live all the time and features over 1,900 tributes to husbands, wives, partners, mothers, fathers, grandparents, siblings and friends – anyone who is dearly missed. You can read these messages and add your own at **dementiauk.dedicationpage.org/memorywall**

Working in partnership

Our corporate partners, major donors and trusts make a huge contribution to our work supporting families who would otherwise have nowhere else to turn.

Our objectives for 2023-24

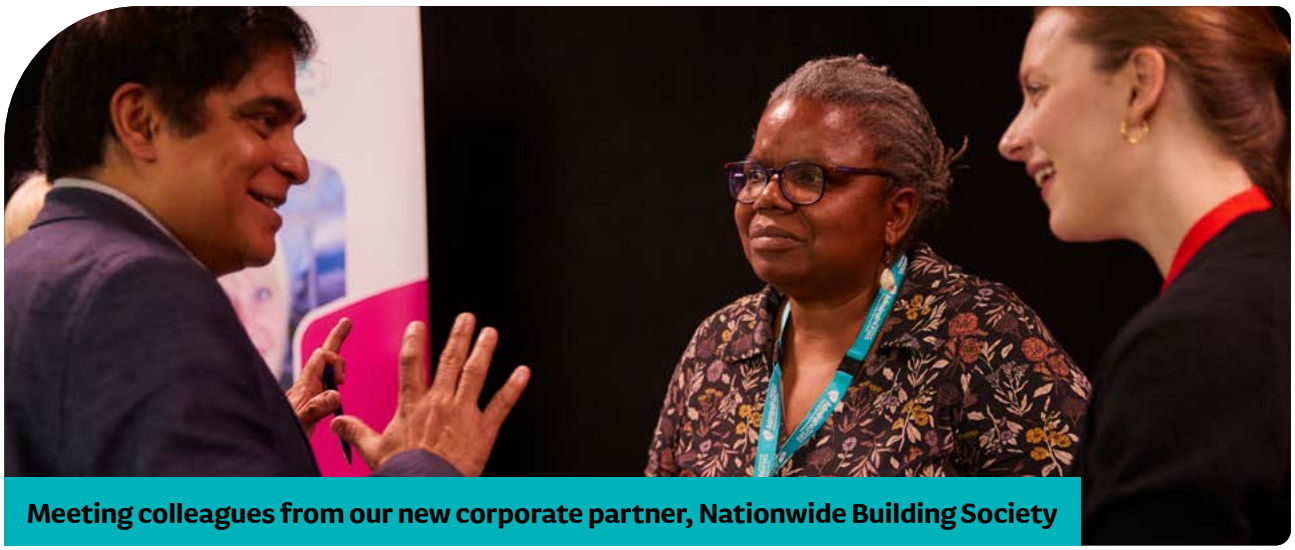
- Increase the number of individuals and organisations making high value gifts, using events as opportunities to introduce new contacts to Dementia UK, and develop innovative and creative ways to connect with supporters and prospects
- Encourage our existing supporters to introduce their like-minded contacts to us, providing them with the tools they need to do so
- Nurture meaningful relationships with our partners, keeping them up to date with our plans, successes, and the amazing things they have made possible
- Work closely with our colleagues to identify where funding from high value supporters could make the most difference to Dementia UK and the families we support, allowing us to demonstrate the impact their generous donations could have

What we achieved

Throughout the year, we have worked closely with our Core Clinical Services colleagues to understand their short- and long-term plans for Admiral Nursing, and how high value funding could accelerate or enable new activity so more families can receive their life-changing support.

Our partnership with Leeds Building Society came to an end in 2023-24, having doubled their income target and raised around £1m over four years. This incredible amount enabled us to hold Closer to Home clinics in Leeds Building Society branches, so families in areas without an Admiral Nurse service could benefit from their specialist support. The programme was shortlisted in the Third Sector Business Charity Awards.

To show our supporters what we can achieve together, we connected them with colleagues across the organisation, including inviting



Meeting colleagues from our new corporate partner, Nationwide Building Society

Dementia UK and Deutsche Bank colleagues at Pride 2024

Admiral Nurses to join us in meetings, at events, and supporting with thank you communications to show the difference our partners are making to families living with dementia.

We created bespoke impact reports and proposals, with case studies and data that evidenced the need for funding and how it would help more families access specialist support.

We recorded digital content of Admiral Nurses directly thanking supporters, and colleagues sharing their personal stories. We shared family stories and our 'Day in the life of an Admiral Nurse' film to thank supporters and sent thank you cards using images created by LEAP member George Rook.

Nurturing new partnerships

We were delighted to secure funding from more than 50 new charitable trusts and foundations in 2023-24. This included a generous £100,000 gift from the Julia and Hans Rausing Charitable Trust to fund the expansion of our Core Clinical Services so more families can access support on our Helpline and in virtual clinic appointments. Another major donor gave a generous second gift to help fund the new Consultant Admiral Nurse for Frailty role.

We formed new corporate partnerships, including with Macfarlanes and Deutsche Bank. The latter is a two-year UK charity of the year partnership with the potential to raise £2m, which could fund 30 new Admiral Nurses, and will help us reach more vulnerable and under-served communities. Driven by staff engagement, the programme of activity will include Deutsche Bank's annual fundraiser, 'One Day' – where colleagues are encouraged to donate one day's salary – and challenge events including international treks and cycle events.

We have so far seen great engagement with our cause, with many employees across the bank sharing their personal stories and getting involved in activities such as The Great Deutsche Bake Off. We will also be raising awareness and supporting employees affected by dementia as part of our Dementia at Work programme (see page 20).

We extended our existing corporate partnerships with Central Co-op, the Openwork Foundation, Zurich Community Trust and Westerleigh Group.

We also secured a partnership with Nationwide Building Society, launching in 2024-25 as part of its Fairer Futures social impact strategy. Dementia UK will be one of three charity partners working with Nationwide over the next three years. The partnership will include funding new Admiral Nurses, and the delivery of a brand-new programme offering free

dementia clinics in over 200 Nationwide branches across all four countries of the UK.

Growing our networks

We have worked together with individual and corporate supporters to encourage them to bring guests to our events, including a new cultivation event at the Garden Museum, London, which brought together new and existing high-value donors to hear about the importance of spending time outdoors for people living with dementia and how their support would make a difference.

We also asked our corporate partners to introduce us to their clients and suppliers, capturing supporter case studies to showcase their experience of working with Dementia UK to encourage others to partner with us.

We increased the visibility of major giving through social media and created a major donor giving page on our website.

Other achievements included working with Next to produce a cushion in support of Dementia UK, with the charity receiving 25.4% of the price of every purchase, and hosting our annual carol concert, attended by over 350 guests.

What we'll do next: our priorities for 2024-25

Increase our community of major supporters, offering compelling ways to fund our work, including by demonstrating impact and keeping them connected to Dementia UK.

Continue to deliver successful corporate partnerships, motivating staff to get involved with a programme of events; raising awareness about dementia; supporting colleagues in the workplace; and delivering flagship events.

Create a programme of special events for new and existing supporters to tell them more about the difference that together we can make for families living with dementia.

Build on our relationships with our existing partners, ensuring we provide them all with an excellent stewardship experience, and develop powerful new partnerships.

Continue to develop gift opportunities that inspire funders to accelerate and transform dementia care.

Rising to the challenge: community fundraising, events and innovation

Without our amazing fundraisers, our life-changing work simply wouldn't be possible. Together, we can give more families the support they need.

Our objectives for 2023-24

- Continue to run our most successful fundraising challenges and events, including Facebook challenges, and increase the number of people who take part in them
- Ensure our fundraisers feel valued and continue to support us
- Increase the number of Volunteer Ambassadors to 150 and make sure we retain them through regular training and opportunities for involvement
- Ensure that the people who support us through challenge events – such as the London Marathon – and DIY challenges feel valued and continue to fundraise for families affected by dementia; and advertise a wider range of challenge events regionally
- Test and develop innovative ways of mobilising supporters including through Stream for Dementia UK, where our supporters raise funds by livestreaming online

What we achieved

Our virtual events programme, which we developed during the Covid pandemic when mass fundraising events were put on hold, has gone from strength to strength this year. We held eight events:

- Walk 1K a Day in February
- March Dog Walking Challenge
- Walk 31 Miles in May
- Summer Steps Challenge
- Walk 30 Miles in September
- October Dog Walking Challenge (run on Facebook)
- October Dog Walking Challenge (run on TikTok)
- November Knitting Challenge

Four of these were brand-new events, including Walk 31 Miles in May, which raised over £1.07m alone – please see our Spotlight feature on page 66 for more information on this challenge.

Across 2023-24, 39,025 people participated in our virtual events – 23% more than last year – raising a fantastic combined £3.6m, which will ensure more families affected by dementia receive the support of an Admiral Nurse.

We also held our annual Time for a Cuppa fundraising week with 3,452 people registering to host an event.

Dementia UK
DementiaUK
KENT
ADAM KENT
8577
WALLY
17164
JULIE
21427
6160

Growing #TeamDementiaUK

We are so grateful to every supporter who joins us as a member of #TeamDementiaUK. This year saw our biggest ever team taking part in our challenge events, with people participating in events like the London Marathon, Great North Run, RideLondon-Essex 100, and Ultra Challenges (walking and running events across the country).

We advertised a wider range of challenges on our website, including more cycles, international treks and swims, and also saw 210% more people take on a DIY fundraiser, devising their own challenge event.

To show our gratitude, we updated our thanking journey to ensure that every challenge event participant feels valued for their efforts. We also developed new stewardship email journeys to support them with their training and fundraising.

As a result of all of this activity, our challenge eventers raised £1.3m more than we had planned, smashing our original target. These vital funds will enable us to increase the number of Admiral Nurses so that more people can access expert, compassionate dementia support.

Staying ahead of the game

In 2023-24 our Innovation Team tested a new fundraising idea for football fans, inspired by Volunteer Ambassador Manny Singh Kang, who walked 125 miles from Wolves FC's Molineux stadium to Chelsea's Stamford Bridge over three days.

We adapted the idea and developed a small pilot – Fans vs Dementia – to test if a football-related walking event would appeal to our audiences. 305 people signed up. We are now developing a second phase of the campaign and hope to scale it up in 2024-25.

We also ran an audience-led product development cycle, and at the end of the financial year launched Puzzle Packs: a new subscription product where we ask supporters to make a gift of at least £10 per month to receive a monthly pack of puzzles to their door.

"My dad always used to take me walking over the Jurassic Coast, so it was fitting to do the Jurassic Coast Ultra Challenge for him. Dementia UK helped so much with supporting me and my family though my father's dementia. I cannot thank them enough for their support and wanted to give something back."

Michael, Ultra Challenge participant

Valuing our volunteers

Our Volunteer Ambassadors are passionate supporters who work together with Dementia UK's Regional Fundraising Team to support people raising money in their local communities, identify new fundraising opportunities and build awareness of Admiral Nurses.

At the close of 2023-24, we had 110 Volunteer Ambassadors in place, and have supported them to develop their skills – including through sessions on managing challenging conversations in the community; and enhanced speaker training, increasing their presentation skills and confidence. We also hosted a national Volunteer Ambassador get-together at the Birmingham Science Museum.

We are so grateful to our Volunteer Ambassadors, whose efforts helped us earn the support of 237 local businesses across the UK, raising 47% more than in the previous year.

What we'll do next: our priorities for 2024-25

Recruit supporters to participate in challenge events for Dementia UK, continuing with our 'fewer, bigger, better' strategy for portfolio events and increasing the volume and value of DIY challenge events.

Recruit virtual event participants for 10 virtual challenges across the year, including through testing new technology such as two-way SMS stewardship.

Diversify the virtual events programme to ensure long-term, sustainable income. We will test new event concepts, audiences and incentives, and use new platforms for acquisition campaigns.

Grow income across community fundraising by at least 10%, focusing on DIY supporters, regional corporates and golf clubs.

Create new fundraising propositions, using our innovation process to work across Fundraising Teams to create and test new insight-led products.

Spotlight
Walk 31 Miles in May

This year we developed a new virtual fundraising event, Walk 31 Miles in May. Lucy Canning, Virtual Events Manager, explains why it became one of our most successful virtual events to date.

Our virtual events programme started in September 2020, in the middle of the pandemic, when mass fundraising events were not possible. Feedback from our first event, Walk 30 Miles in September, showed that supporters loved the challenge – so we decided to test a similar event, Walk 31 Miles in May, in 2023.

We recruited participants primarily through Facebook, with thousands of people showing their interest in walking this distance while supporting families facing dementia. They were invited to join a Walk 31 Miles in May Facebook Group and create a Facebook fundraising page to receive a free Dementia UK t-shirt to wear on their walks.

A supportive community

The Facebook Group played an important part in the success of the event, offering our amazing participants a genuinely supportive community where they could encourage and motivate each other. It also meant we could cheer them on throughout May, answer any queries, and keep them up to date with their fundraising total.

The free Dementia UK t-shirt proved a good incentive for taking part in the event – people enjoyed getting out and about in good weather, wearing their t-shirts to raise awareness of the charity. The Virtual Events Team also kept up the momentum with our dedication to providing the best experience possible.

Smashing our targets

Over 8,900 supporters registered for Walk 31 Miles in May. Our original fundraising target was £357,143, but with people really pushing their fundraising and sharing their pages widely we smashed this, raising £1,077,199 including Gift Aid.

Building on the success of the event, we are running Walk 31 Miles in May again in 2024. We are looking to update the stewardship journey in line with what supporters like hearing about – particularly including more on the work that we can make possible when we join together. We hope that the 2024 challenge will prove equally successful and raise more vital funds for the families we support.

"My lovely mum was diagnosed with vascular dementia and Alzheimer's disease. Doing the Walk 31 Miles in May challenge was a blessing in many ways as it gave me time to breathe. I enjoyed walks alone, walks in silence, walks with music and walks with friends and family. I'm incredibly grateful for all the donations I received and know the money I raised will be put to good use to help families affected by dementia."

Alison, who walked 31 miles in May and raised a fantastic £1,353

Looking after our supporters

We have a duty and a desire to treat all of our supporters with the highest respect. Our Supporter Care Team listens and responds to their concerns.

Our objectives for 2023-24

- Provide an excellent supporter experience and actively improve it on an ongoing basis
- Process Dementia UK's income as quickly and efficiently as possible
- Begin our database migration project
- Provide effective ongoing support to the Fundraising and Engagement Directorate and ensure its compliance with all relevant regulations
- Invest in data analysis and insight to better inform strategic fundraising decisions and marketing success
- Manage and uplift our Gift Aid income
- Ensure an effective working relationship with the Finance Team, and act as its main point of contact with our Fundraising Teams

What we achieved

To ensure our supporters have the best possible experience of Dementia UK, in 2023-24 we improved our ways of working in direct response to mystery shopping feedback. This included refreshing our supporter care phone training, and creating a new complaints reporting dashboard so we can better learn from complaints data.

We extended some of this training, such as our phone refresher training, to other teams within the organisation so that no matter who they speak to, our supporters have a positive experience of Dementia UK.

Admiral Nurses Emily and Sheridan meeting Dementia UK supporters

Processing our income

To ensure that fundraising and donations can be put straight to use supporting families affected by dementia, we aim to process Dementia UK's income as quickly and efficiently as possible. We maintained our service level agreement of four working days from receipt of funds, and we also overhauled our post opening process and rota, which increased efficiency in processing income.

Gift Aid is an important part of our income. In quarters one and two, we received £405,000 in Gift Aid. We also completed a retrospective claim for 2022-23 using a new procedure that allows us to claim Gift Aid from donors who have not provided us with their declaration directly, but have agreed to their inclusion in a central database for this process.

Supporting our colleagues

We play an important role in supporting other teams across the organisation. In the past year we have worked with the Policy, Campaigns and Public Affairs Team to help it run its Campaigns Network and create petitions; the Digital Team to automate supporter email communication; and the Individual Giving Team, supporting it to monitor our supporters' loyalty and satisfaction.

We worked closely with the Finance Team, providing month-end information accurately and on time; and achieved very low discrepancy rates between fundraising and finance income figures. We also overhauled our legacy administration process to more accurately reflect when income should be recognised in our fundraising and finance systems.

We continued to support the Fundraising and Engagement Directorate with activity such as fulfilling fundraising appeal responses; providing accurate and timely data selections for fundraising communications; and regularly importing data from a wide range of sources to our database.

We have also ensured compliance with data protection and other regulations across the Fundraising and Engagement Directorate, including starting a wide-ranging project to ensure full Payment Card Industry (PCI) compliance.

Making the most of data

Using our data effectively means we can understand our supporters better and give them complete confidence in how we look after their data. We have commenced our database migration project, which will provide us with a better platform for managing data, and will start building this in summer 2024.

We have also further developed our suite of reports to inform effective, data-led decisions across the Fundraising and Engagement Directorate.

Responding to complaints

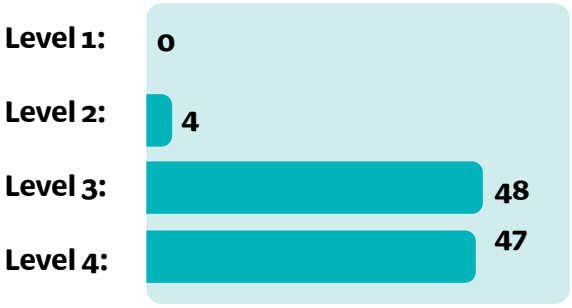
As members of the Chartered Institute of Fundraising and the Fundraising Regulator, we adhere to the Code of Fundraising Practice and are committed to the Fundraising Promise. There were no instances of non-compliance with the Code this year.

We make it easy for people to contact us with their complaints, which can be registered by phone, email, post or online form and are forwarded to the Supporter Care Team.

Depending on the severity, they may be escalated to more senior members of staff. We work together with each supporter in resolving their complaint and record the process and resolution on our database.

In 2023-24, we received 99 general complaints.

Our complaints are classified according to four levels – Level 1 being the most serious, and Level 4 the least.



While the number of complaints increased from 56 complaints in 2022-23, this reflects two main factors: the continued increase in the volume and scope of our fundraising activity; and a review and update of our Complaints handling policy, training and guidance.

Our overall volume of complaints remains low for a charity of our size. It is encouraging that we received no Level 1 complaints (the most serious), and that the number of Level 2 complaints was very similar to 2022-23 (three).

Third-party fundraising

We work with a small number of third parties, including commercial organisations and professional fundraisers, to raise money. We closely monitor all third parties, including compliance reviews of all contracts, regular review meetings, and call listening. We deliver training and support to professional fundraisers, including outlining how to recognise and protect vulnerable people and adhere to our Vulnerable donors policy. In 2023-24 we received six complaints about contact from these third parties, all of which were resolved.

What we'll do next: our priorities for 2024-25

Continue our database migration, enabling better reporting and analysis; close to real-time data; more responsive supporter journeys; seamless integration between data sources – and ultimately, a better supporter experience across the board.

Further contribute to the supporter experience project so we continually improve our supporters' experience of Dementia UK and our internal teams' ability to make effective, data-driven decisions. We will ensure a good supporter experience as the volume and breadth of fundraising activities grow.

Oversee adherence to data protection and other regulations across the fundraising programme, consulting the Data Protection Officer where necessary. We will complete our PCI compliance project; and create and update fundraising policies and ensure staff use these to govern day-to-day work and decision-making.

Support projects across the Fundraising and Engagement Directorate and other teams within the charity where appropriate.

Nurturing our staff

We believe Dementia UK is a great place to work, and we are committed to developing our people and organisation so that every member of the charity feels valued.

Our objectives for 2023-24

- Launch our new online recruitment platform and careers pages on our website to help us to reach a wider audience and communicate why Dementia UK is an employer of choice in the charity sector
- Create and launch our Equity, Diversity and Inclusion (EDI) policies and strategy to give clear direction regarding our commitment to inclusive mindsets, not just internally but across all that we do
- Review our volunteering model and engage people to volunteer their time and become advocates for our much-needed work

What we achieved

At Dementia UK, we are proud of our staff and are committed to their learning and development. This year, we launched our first Learning and Development Programme, including extending our e-learning offer to all staff and introducing line managers' coaching training, to support staff development and retention.

We understand the importance of making our staff feel valued. We have carried out salary benchmarking, achieved Living Wage accreditation, and reviewed our staff members' pension investments to ensure they are supported in retirement.

We have enhanced our flexible working policies and supported numerous staff with flexible working requests; and implemented hybrid working practices to enable staff to divide their time between office and home where appropriate.

We carried out an all-staff survey in 2023 and are acting on the results to make sure everyone has the best experience of working at Dementia UK. We also held a two-day staff summer event: an invaluable chance to connect and learn from each other.

Attracting new talent

We are always looking to attract new colleagues who share our vision and values. In the past year, we have updated our recruitment processes and information packs, including our commitment to our Disability Confident approach, taking action to improve how we recruit, retain and develop disabled people.

By developing a clear recruitment planning tracker, we have improved the time it takes to fill vacancies. We have also developed frameworks for our e-recruit functionality and our e-onboarding approaches – the pace of change has delayed our formal launch, but this is planned for quarter two in 2024-25.

We have reviewed and updated our recruitment media to ensure we are reaching a broad spectrum of potential applicants, and are capitalising on LinkedIn Life pages by actively promoting Dementia UK as an employer of choice.

We now receive on average 50 applications for every role we advertise, and have supported the recruitment of almost 100 positions across the year.

DementiaUK
Helping families face dementia
STAFF

Committed to equality

We want to be an employer that attracts a diverse workforce and have made great progress this year. We launched our new EDI policy and received Board approval to develop our EDI strategy, which will inform all that we do. To support staff in developing their understanding of EDI, we commenced our regular Connect internal learning sessions, building awareness across a range of topics including menopause, neurodiversity and intersectionality.

In the past year we have introduced new measures to support our colleagues at a variety of life stages, including producing our Carers policy and Carers Passport and our Baby loss policy; and signing the Pregnancy Loss Pledge, committing to supporting staff going through the distress of miscarriage.

We have trained new Mental Health First Aiders, giving all staff access to this support when required, committed to being a Menopause Friendly employer, and launched our supportive health review discussions to enable reasonable adjustments as required by staff.

We are also continually building our commitment to gender equality, including delivering our first gender pay gap audit, introducing transitioning at work guidelines, and developing a range of guides for staff, such as a guide to the use of pronouns.

Supporting our volunteers

Our volunteers – whether they are Volunteer Ambassadors (see page 64) or helping at one of our events – play a big role in supporting our work. In the past year we have centralised our volunteer recruitment and retention processes to make them more efficient, completed a review of our volunteer agreements to ensure everyone who represents Dementia UK does so to the best of their ability, and reviewed our volunteer policies and forms.

We have also updated our online support pages for volunteers to encourage more people to get involved and ensure our current volunteers feel valued. This will improve their experiences of supporting us and encourage them to remain in their volunteer roles, helping us bring in the funds we need to ensure no one faces dementia alone.

Dementia UK's Summer Staff Conference

What we'll do next: our priorities for 2024-25

Deliver our 2025-30 Corporate Strategy, working together with people with lived experience of dementia and staff across the charity to inform our direction for the next five years.

Support the charity's growth by ensuring we attract and recruit exceptional staff to help us deliver our vision and mission, appeal to a diverse range of people and grow our workforce to meet the needs of people affected by dementia.

Support the recognition and retention of our valued staff through a range of new initiatives to recognise individuals who do amazing work every day and retain our talented staff.

Implement new project management approaches which support cross-charity collaboration and effective delivery of our work.

Be recognised as an employer of choice and strive to feature for the first time in the Sunday Times Top 100 Companies to Work For.

Spotlight

Our new mission, vision and values

In 2023-24, we undertook a major piece of work to refresh our vision, mission and values. Dr Hilda Hayo, Chief Admiral Nurse and Dementia UK CEO, explains why they are so important in guiding our work.

In 2023, we identified a need to review our vision and mission statements to create one clear, unambiguous articulation of the charity's purpose that communicates our commitment to supporting people affected by dementia through our Admiral Nurses. This was particularly important as we have embarked on developing our 2025-30 Corporate Strategy.

While our 11 previous organisational values still rang true, there was an opportunity to condense them to make them more memorable, allowing us to better embed them in our day-to-day work.

Our vision

Our new vision is, 'A world where no one faces dementia alone – where everyone gets the specialist support they need'. This reflects the change we want to see in the world, our hope for the future and why we exist.

We wanted our vision statement to remain concise and emotive, without losing the core of our purpose – the specialist dementia support that we provide through Admiral Nurses. All of our work is delivered directly or informed by our nurses. We believe our clinical expertise gives us a unique advantage in being able to support everyone living with dementia and the people around them.

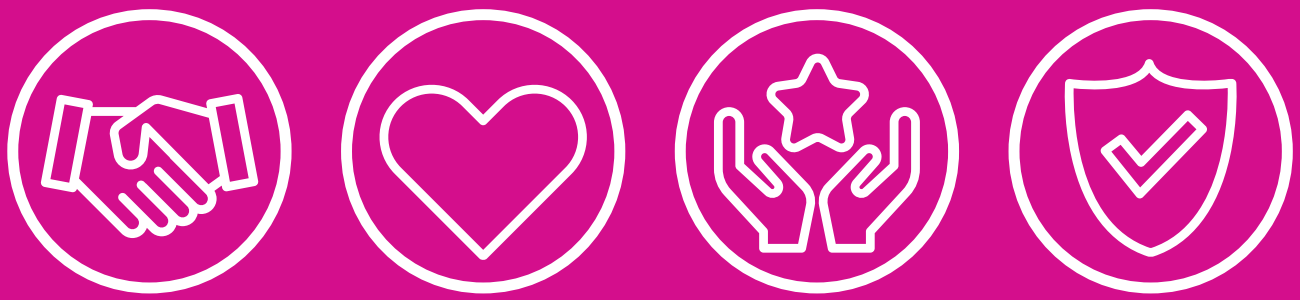
Our mission

Our mission, which you can read in full on page 8, focuses on how we will achieve our vision, strongly communicating the role of Admiral Nursing. It also encompasses the broader work of the charity, highlighting our influence and expertise and the role that everyone plays in helping families affected by dementia get the specialist support they need.

Our updated vision and mission statements were refined through extensive discussion and collaboration with a range of people living with the impact of dementia, staff, senior management, the Executive Team, and Trustees, who are accountable for the overall direction of the charity.

Our values

This year we also took the opportunity to refresh our organisational values, moving from 11 values to four:



Collaboration **Compassion** **Ambition** **Integrity**

Our values inform our approach to how we behave towards one another and how we deliver our work. The four values we chose are not new to Dementia UK; rather they are an amalgamation and simplification of the 11 words we used previously. Our culture and our passion for supporting people affected by dementia remain unchanged, but the new, simpler iteration of our values will help us to better embed them in everything we do, from the way we recruit to the services we deliver.

How our vision, mission and values will guide us

Our vision and mission will guide our strategic direction for the next five years, ensuring everything we set out to do will help us get closer to the world we want to see. As a clear articulation of our offering, they help our teams work together towards one common goal.

We also want the statements to give hope to our beneficiaries, mobilise supporters, partners and donors to help us achieve our mission, and inspire staff with the ultimate reason for doing the work we do.

Our values will be integrated into our day-to-day language, including our staff performance appraisals and our new recognition awards, ensuring we celebrate when they are actively lived out by our staff. We are creating resources for staff to help them remember our values and bring them to life on a daily basis.

The values will ensure that everyone who works for Dementia UK has a shared passion for our purpose, guiding us towards our vision of a world where no one faces dementia alone.

IT: keeping our systems running

A reliable and evolving IT infrastructure that responds to change ensures that all Dementia UK staff can do their work effectively and keeps our systems secure and efficient.

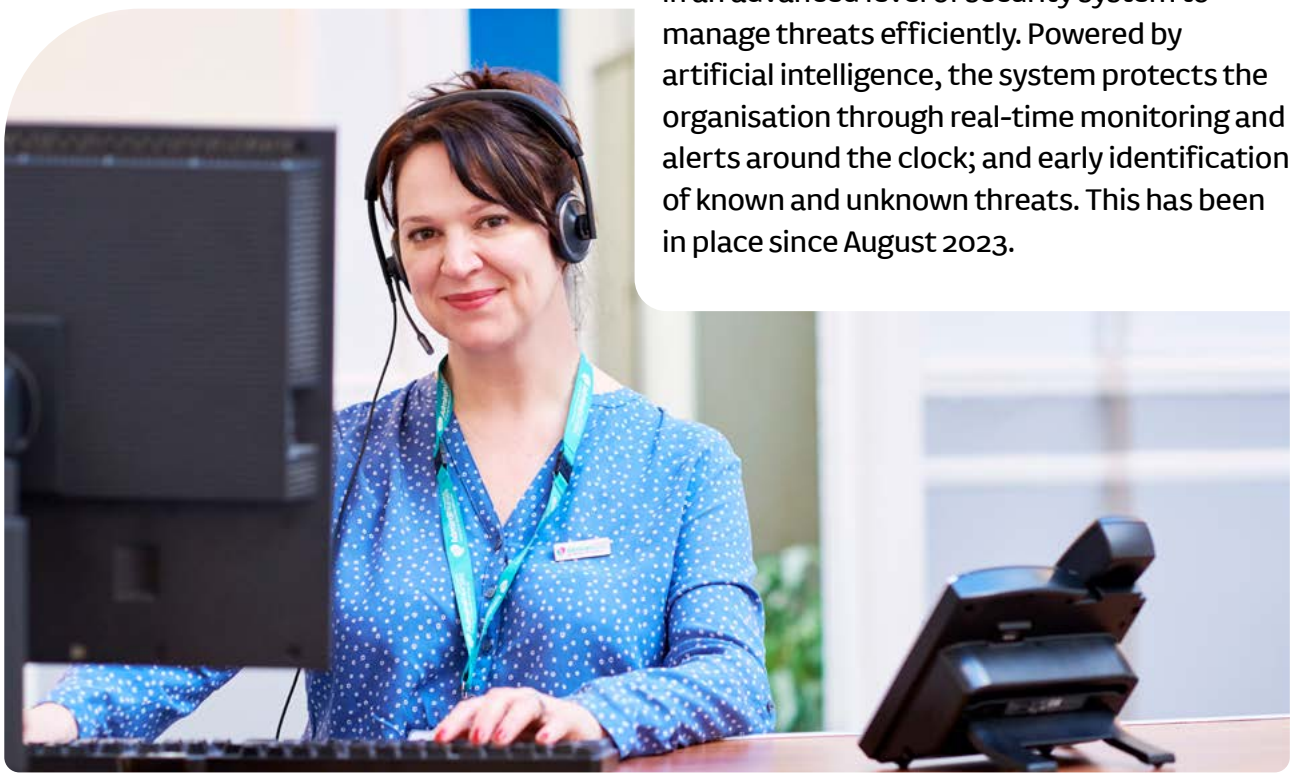
Our objectives for 2023-24

- Introduce contract and service management to optimise our software licences and data storage, reducing support costs and increasing efficiency
- Introduce a security information and event management (SIEM) solution which will enable the charity to detect, analyse and respond to security threats before they can cause harm
- Gain Cyber Essentials Plus accreditation to provide assurance to our beneficiaries, partners and stakeholders that Dementia UK is cyber-secure

What we achieved

To maintain precise records of our contracts with suppliers and service providers, the IT Team systematically reviewed contract details for all IT products and services. We created an updated list of software applications used within the organisation, enhancing the Information Asset Register. We also improved our processes to effectively manage new software and licensing requirements in the charity.

After a review of various solutions available in the marketplace and carefully considering the charity's requirements, we invested in an advanced level of security system to manage threats efficiently. Powered by artificial intelligence, the system protects the organisation through real-time monitoring and alerts around the clock; and early identification of known and unknown threats. This has been in place since August 2023.



Ensuring our IT security

In addition to introducing this security system, we conducted numerous tests to check the resilience of our systems, giving us confidence that the security controls have been configured in accordance with good practice; and to identify any weak spots in a system's defences which could be prone to threats.

We also rolled out several policies in relation to IT security, introduced enhanced security features for management of our equipment, and created a secure environment for accessing our data in the context of continuing to work in an agile way.

We achieved both Cyber Essentials and Cyber Essentials Plus accreditation in 2023-24. This demonstrates that we have robust cyber-security controls, policies and practices, providing a higher level of assurance to our beneficiaries, partners and stakeholders. The reaccreditation work will be repeated annually to provide ongoing assurance that our controls are working effectively.

We initiated mandatory cyber-security awareness training for all staff to embed a culture of security awareness across the organisation. We are also conducting phishing campaigns at regular intervals to test staff knowledge, and support them in developing an understanding of cyber risks.

Alongside the developments and improvements in security, we continued to work for the families we support by ensuring that all existing systems were functioning correctly, particularly our Helpline and virtual clinics. We maintained the existing IT computer systems and networks across the organisation, resolving technical problems and supporting automation of processes whilst managing end-user requests.

What we'll do next: our priorities for 2024-25

Upgrade and standardise our equipment to ensure all devices are compliant with Cyber Essentials standard and have improved security and software through a centralised mobile device management (MDM) solution; and introduce a specialised approach to oversee the entire lifecycle of devices with the aim of achieving efficiencies; and make improvements to the lifecycle management of our devices.

Support with replacing systems which are coming to the end of their useful life by conducting workshops to assess our requirements; and devise a focused procurement and implementation plan for new systems that will continue to meet the growing needs of our charity.

Test our ability to continue operations in the event of unplanned disruption to ensure we can provide uninterrupted service to our beneficiaries.

Test our cyber-resilience by identifying security vulnerabilities and risk. This includes identifying the assets that need to be protected, the threats that could pose a risk to those assets, and the vulnerabilities that could be exploited by attackers.

Educate staff to embed a cyber-security culture across the organisation and minimise the risk of malicious email attacks. We will benchmark this activity against the SANS Institute Cyber Maturity model to measure progress of this programme of work.

Governance, compliance and risk

We ensure that Dementia UK and its workforce comply with the necessary legal and regulatory requirements, mitigate against risk and have appropriate governance systems in place across all areas, so we can best support the families who need us.

Our objectives for 2023-24

- Introduce a rolling programme of internal audits to strengthen internal controls; enhance efficiencies; increase compliance; and manage risks effectively
- Improve Dementia UK's business continuity model to ensure the charity remains operational in the event of disruptions, and outline steps to take during and after unexpected disruptions
- Improve policy management, processes and internal controls including introducing new policies where appropriate
- Introduce Enterprise Risk Management strategies to help mitigate operational, financial, security, compliance, legal, and many other types of risks that can prevent the charity from achieving its objectives
- Strengthen our information governance processes to mitigate any data protection risks
- Review compliance with UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018 to ensure personal data is processed in a safe and secure way

What we achieved

In 2023-24, we partnered with Grant Thornton and introduced an internal audit function at Dementia UK. We conducted two audit engagements: risk management and payroll. We have ensured the recommendations from these are being followed up and implemented effectively, which has helped in strengthening our internal controls.

To ensure our support for people affected by dementia does not falter in the case of unexpected adverse circumstances, we have started to work on business continuity and introduced a high-level policy across the charity to maintain the provision of our services in the event of such situations. We will continue to build on this as we progress into 2024-25.

We have introduced a policy management process which ensures policies are reviewed in a timely way. We have also carried out extensive work to refresh and improve our internal measures for managing and maintaining all contracts that Dementia UK enters with external parties. This will enable greater oversight and control regarding our financial obligations with external organisations.

Introduction of a risk management framework

We have introduced the Enterprise Risk Management (ERM) framework in the organisation to:

- identify and assess a broad array of risks across the organisation that could negatively impact the achievement of our goals and objectives
- ensure appropriate ownership and accountability of risks
- develop and implement appropriate risk mitigation and monitoring plans by risk owners

This will enable us to identify and prioritise risks and provide the Executive Team and Board of Trustees with key information to make risk-informed decisions.

Alongside this, we reviewed the charity's Strategic Risk Register to ensure it accurately reflects our risks, root causes and consequences, linking our strategic risks with the overall objectives.

Strengthening our information governance

We improved our handling of data protection matters by analysing and creating robust data processing and data management processes across the charity.

We strengthened our information governance processes by implementing a culture of privacy by default and design when launching new projects. We continued to provide all staff with data protection training, and introduced an additional advanced data protection training module for members of senior management to create awareness and knowledge about handling sensitive and confidential data.

What we'll do next: our priorities for 2024-25

Establish an Information Governance Group to provide oversight and formal approval processes around the safe management of information assets. We will also establish a framework for use of artificial intelligence to ensure we benefit from the use of technology with due consideration of risks.

Develop a Risk Champions Programme to support our approach to risk management across the charity. The Risk Champions will play a pivotal role in helping ensure risks are identified by different directorates.

Introduce risk management inductions and training which will be tailored in accordance with the needs of staff across the charity.

Continue our work on business continuity by undertaking in-depth business impact analysis for our key areas of work and designing and testing our business continuity plan.

Implement the 'Three Lines of Defence Model' in risk management.

This model provides effective management of risk by identifying structures and processes that support us to achieve our objectives and facilitate strong governance and risk management.

The first line of defence will be managers and staff who are primarily responsible for identifying and managing risk as part of their accountability for achieving objectives.

The Governance Team will be the second line of defence, assisting with managing risk, as well as supporting and monitoring the effectiveness of those primarily responsible for risks.

Our internal and external auditors will be the third line of defence, providing independent assurance that the first two lines are operating effectively and offering advice on how they could be improved.

Looking after our finances

The members of our Finance Team are key enablers for growing Dementia UK sustainably and ensuring the funds we raise are channelled towards creating the maximum impact on families living with dementia.

Our objectives for 2023-24

- Review cash flow forecasting to provide reasonable understanding of short-term and long-term working capital requirements
- Achieve automation of routine finance processes by making process improvements to the current finance system, integrating systems, and streamlining finance processes and controls as the charity continues to grow

What we achieved

2023-24 saw us benefiting from a rolling programme of short-term fixed-interest time deposits, and long-term strategic investments. Our short-term deposits have enabled us to maximise returns by taking advantage of current high interest rates alongside maintenance of our strategic investment funds, which aim for capital growth over the long-term.

We have introduced a personal expenses management system and a purchase order system. These systems have not only enabled automation of finance processes, but also provided a legal and enforceable record of orders; and protected us against unexpected price increases. We also introduced Making Tax Digital (MTD) for filing our VAT returns electronically to streamline our tax administration and filing process.

What we'll do next: our priorities for 2024-25

Continue our automation journey to allow our finance system and processes to benefit from automation and have robust processes and controls. This will help us to work towards our ultimate vision of achieving real-time reporting.

Introduce a procurement strategy and policy to ensure a standardised and transparent approach to purchasing and spending practices across the charity. Once fully embedded, it will benefit the charity by ensuring value for money by identifying savings where possible, promoting best practice with contract management, ensuring a robust due diligence process for new suppliers, and encouraging effective supplier relationships.

Build key performance indicators (KPIs) to provide a clear framework for measuring success against predefined objectives.

Develop management reporting to help with making more accurate, data-driven decisions.

Financial review

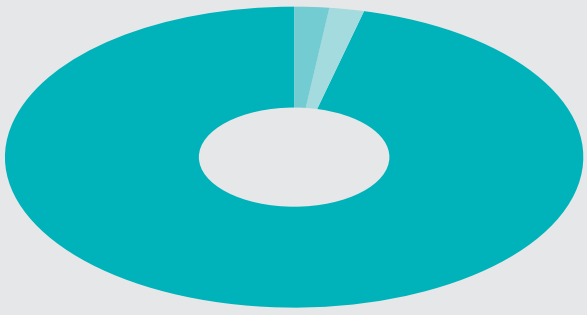
The Trustees present their report and audited consolidated financial statements for the year ended 31st March 2024.

All Trustees are also Directors for the purpose of company law, and the Trustees' Report represents the Directors' Report required by Section 417 of the Companies Act 2006.

Objectives and activities for public benefit

The Trustees confirm that they have referred to the Charity Commission's guidance on public benefit when reviewing the aims and objectives in planning future activities. We have further developed our Admiral Nurse Dementia Helpline and virtual clinic appointments, which can be accessed by beneficiaries throughout the UK. We have also increased the number of Consultant Admiral Nurses, who provide specialist support for families impacted by dementia who are experiencing specific and complex needs.

Income



- Donations and legacies £21.7m
- Charitable activities £0.5m
- Other £0.4m

Total £22.5m

Financial review

The financial statements have been prepared in accordance with applicable Accounting Standards, current statutory requirements, the requirements of the Statement of Recommended Practice (SORP), Accounting and Reporting by Charities (SORP 2015), and the charity's governing document.

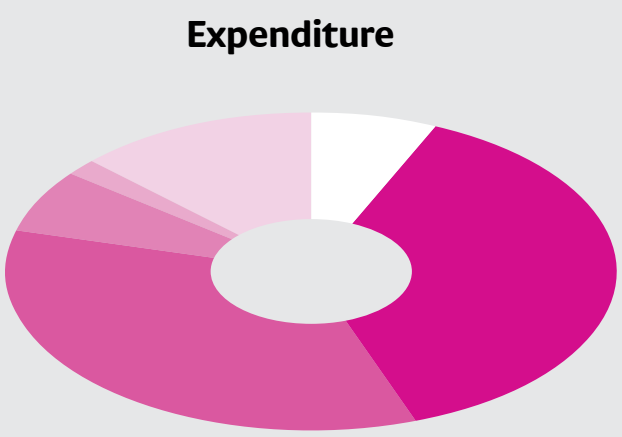
Income and expenditure

Our income this year increased by £3.1m to £22.5m in 2024 (2023: £19.4m). This was £2.3m greater than our forecast expectations set during the autumn period, largely due to donations and legacies being higher than projected.

Our total expenditure was £18.8m (2023: £17.7m), which was £0.9m below forecast expectations of £19.7m. This was primarily due to phasing in recruitment for budgeted posts throughout the year. Certain projects also started later than planned which contributed towards some cost savings in the year.

Overall, we had a net surplus for reinvestment of £3.7m (2023: £1.7m). Our net assets totalled £18.7m (2023: £15.1m) with net current assets of £16.6m (2023: £14.2m). The liquid cash balance (accessible within one year) was £17.6m (2023: £16.0m).

The Trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. This is based on a detailed budget and cash flow projections for 2024-25.



Structure, governance and management

Board of Trustees

The Board of Trustees is the governing body that administers the charity. All major decisions are made by the Board, which meets at least four times a year to discuss and formulate policy, risk and strategic direction.

The Trustees of the charity are also the Directors of the company for the purpose of company law, and any reference to Trustees is therefore also to Directors. None of the Trustees has a beneficial interest in the company, and the charitable company held third-party indemnity insurance on behalf of the Trustees during the current and prior year.

Trustees who have been in office since 1st April 2023 are:

- Professor David Croisdale-Appleby OBE (Chair)
- Philippa Armitage
- David John Ball (appointed 17th August 2023)
- Alistair Burns (appointed 28th March 2024)
- Steven Clarke (Hon Treasurer)
- Emma Crozier (resigned 14th August 2024)
- Steve Jamieson (resigned 19th October 2023)
- Jane Keir
- Theresa Murphy (appointed 28th March 2024)
- William Roe
- Gavin Sanderson
- Anne Shinkwin (appointed 17th August 2023)
- David Stewart (appointed 17th August 2023)
- Mark Stroyan

Company Secretary: Suruchi Saraf, PGDip, FCCA

Trustee recruitment, appointment and induction

The existing Trustees of Dementia UK are empowered under the Articles of Association to elect new Trustees of the charity and to make co-options at any other time.

Dementia UK seeks to include a wide skillset within the Board of Trustees, and as part of our governance process, Trustees identify and remedy any gaps in skills on the Board.

We recruit new Trustees in different ways, including advertising vacancies and reaching out to people who are involved and interested in our work. We invite potential new Trustees to

observe at least one Board meeting to guide their decision about whether to agree to nomination as a Trustee.

We have an induction programme for all new Trustees of Dementia UK. This includes meeting the Chief Admiral Nurse/CEO, along with other members of staff across the charity. We also provide them with relevant historical documentation.

Sub-committees of the Board of Trustees

Trustees belong to one of three sub-committees that oversee and advise on the charity's work and report to the Board. This contributes to the smooth running of Dementia UK. The three sub-committees are:

- Clinical and Professional Committee
- Finance, Risk and Audit Committee
- Fundraising and Engagement Committee

Each committee meets at least four times a year and includes at least two Trustees, with one acting as Chair for these meetings. The Trustees contribute their relevant interests and skills to the work of the committees.

Chief Admiral Nurse/CEO and Executive Team

The Chief Admiral Nurse/CEO and Executive Team are responsible for the day-to-day affairs of Dementia UK, including operational matters, and a scheme of delegation is in place.

The members of Dementia UK's Executive Team are:

- Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive Officer
- Martin Bishop, Director of Fundraising and Engagement
- Nando Caicedo, Director of People and Organisational Development
- Paul Edwards, Director of Clinical Services
- Suruchi Saraf PGDip, FCCA, Director of Finance and Corporate Services

Principal risks and uncertainties

As the governing body, the Board of Trustees has overall accountability for risk management at the charity. It will ensure that Dementia UK has in place effective internal controls to manage risks, whilst maximising opportunities.

The Strategic Risk Register is updated by the Executive Team and then reviewed by the Trustees at every sub-committee and Board meeting.

The main risks identified that the charity faces are:

Risk of not meeting net income targets, mainly as a result of relying heavily on voluntary income and the recent rises in the cost of living.

This risk is mitigated by our robust fundraising strategy, the creation of a diverse range of income streams (both long- and short-term), and having specific targets and KPIs.

We also encourage and drive innovation, and continually develop ways for existing and new donors to support and strengthen their engagement with – and commitment to – Dementia UK.

Risk that the integrity and reputation of the Admiral Nurse brand may be negatively impacted.

This is mitigated by ensuring all the systems, processes and support are in place to ensure the effective recruitment, maintenance and development of Admiral Nurses and Admiral Nurse services.

Admiral Nurses receive regular clinical supervision via Practice Action Learning Sets and their practice is guided by the Admiral Nurse Competency Framework, which outlines the knowledge, skills and attributes that they are required to demonstrate.

The Admiral Nurse Academy continues to grow and provides opportunities for continued professional development, including webinars, interactive learning, short courses and a leadership programme.

Risk of a cyber-attack on the charity's IT systems, resulting in loss of data, ransom payment and reputational damage.

The charity has strategies in place to limit the impact of a threat, and accordingly we have invested in several systems and initiatives this year to protect unauthorised access to the Dementia UK network. We have achieved this by continuously identifying, prioritising and remediating vulnerabilities. We have also introduced robust policies and processes to provide assurance on how our IT infrastructure is managed.

We do, however, recognise that cyber-attacks are getting more sophisticated by the day and there are many uncertainties associated with this. We are therefore trying to create a culture of awareness across the charity by training and educating our staff so that we are able to create a 'human firewall' to protect ourselves from malicious attacks.

Risk of data breaches, privacy incidents or security incidents (including third party).

This is mitigated by keeping up-to-date documentation in alignment with GDPR legislation, including a Data retention policy and schedule; Data privacy policy; record of processing activities; and information asset register. We are also striving to enhance staff awareness, education and the promotion of a cultural shift to embed the 'privacy by design and default' principle across all organisational activities.

The Governance Team ensures the monitoring of internal compliance on data privacy; informs and advises on data protection obligations; provides advice regarding data protection impact assessments; and acts as a contact point for data subjects and the Information Commissioner.

Risk of financial mismanagement, poor financial planning or cash flow and inadequate reserves.

This risk of financial mismanagement is mitigated by having robust financial policies and procedures in place. In addition, we have income and expenditure monitoring, which is reported regularly to the Board of Trustees.

The charity has short-term and long-term cashflow projections in place. We ensure we maintain adequate levels of free reserves to cover us for any unexpected events.

Reserves policy

The charity holds unrestricted reserves to ensure we can continue to operate in the event of any unforeseen and significant decreases in income.

The Board of Trustees' policy with regards to unrestricted reserves has been set at three to six months of projected unrestricted expenditure.

The Trustees aim to achieve this by careful management of the charity's resources and reviewing the Reserves policy at least annually.

As of 31st March 2024, we held £12.4m in unrestricted reserves after deducting the Net Book Value of Fixed Assets (2023: £8.7m). This represents five-and-a-half months of total planned future operational costs.

The Trustees are of the opinion that maintaining reserves at this level is prudent given the economic uncertainty in the UK due to external environmental factors such as the impact of the cost of living crisis, especially as we are heavily reliant on voluntary income in the form of donations from the public.

The Trustees consider that the reserves level is in line with best practice within the

charity sector and guidance from the Charity Commission; and will give the charity time to continue its vital work supporting people with dementia and their families while finding alternative sources of income should we see a sudden drop in voluntary income.

As of 31st March 2024, the charity held £4.9m of designated funds (2023: £4.9m), of which £1m (2023: £1.5m) is held for the New Nurse Fund; £1.3m (2023: £1m) is for systems development work; £0.1m (2023: £0.8m) is for the enhancement of charitable activities including policies, campaigns and public affairs; and £0.6m (2023: £1m) is set aside for digital transformation of services. As of 31st March 2024, the remaining designated fund balance for the Admiral Nurse Development Programme was unassigned, leaving a balance of £nil (2023: £0.6m).

In the financial year 2023-24, the charity set aside a further designated sum of £2.2m for three new designated funds. This consisted of £0.9m for investment in clinical services; £0.4m for further investment in systems development work; and £0.9m for developing a diversified portfolio of fundraising. These projects are expected to commence in 2024-25. More detail on designated funds can be seen in Note 23 of the financial statements.

Investment policy

The Trustees' investment powers are governed by the Memorandum and Articles of Association, which permit the charity's funds to be invested in a wide range of securities and assets.

The charity holds long-term investments with two investment companies, Sarasin & Partners LLP and Ruffer LLP. As of 31st March 2024, the market value of these investments totalled £2.1m; £1.1m in Sarasin & Partners LLP and £1m in Ruffer LLP.

The purpose of investments is to preserve and protect the value of donations received from the adverse impacts of inflation until such time as they are allocated towards charitable activities.

The charity aims for a diversified investment portfolio that seeks to produce the best financial return within an acceptable level of risk.

The charity's investment objective is capital growth: to invest long-term reserves with a view to capital preservation, with a focus on protection against inflation. There are no current plans for future spending commitments that the portfolio will fund, other than to protect against inflation.

The funds allocated towards investment are unrestricted and no donor restrictions have been placed on them.

In line with capital preservation, any income earned from the fund is to be accumulated and invested back into the portfolio. The charity does not expect to withdraw any investments in its long-term reserves and aims to invest no more than 25% of unrestricted net assets in long-term investments.

The charity is dedicated to ensuring that funds are invested in a responsible and ethical manner, incorporating environmental, social and governance considerations with particular emphasis on stewardship. The charity restricts investments in alcohol, tobacco, gambling, pornography, armaments, oil sands and thermal coal.

The Trustees have set a performance benchmark of CPI +3% a year in line with the investment strategy. The performance of our portfolio managers is kept under close and regular review and will be measured against inflation and agreed market indices. The level of capital volatility will be monitored to ensure the risk profile remains appropriate for the charity. For the financial year 2023-24, the portfolio performances of Sarasin and

Partners and Ruffer were 11.2% and (7.3)% respectively.

The charity has nominated a list of authorised signatories, two of whom are required to sign instructions to the Investment Manager. The investment firms will provide quarterly reports on the valuation of investments, transactions, cash reconciliation, performance analysis and commentaries.

The Trustees of the charity have delegated the decision-making on investment matters to the Finance, Risk and Audit Committee (FRAC). FRAC has the responsibility for:

- agreeing the investment strategy
- appointing/reappointing investment managers
- monitoring the investment assets

FRAC will review the information provided by the Investment Manager at least annually at the committee meeting to gain insights into investment performance and in-depth analysis to enable informed decision-making.

Pay for the Senior Management Team

Dementia UK has a Remuneration policy and pay for the CEO and Senior Management Team is decided by Trustees, who review pay based on market rates and benchmarking against charities of comparable size.

The CEO's remuneration for 2023-24 was a base salary of £120,600. This is five times more than the lowest paid staff member. Our CEO works four days per week and accordingly she was paid £96,480 in 2023-24.

Legal status

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC 047429 (Scotland).

The charity's affairs are governed by its Memorandum and Articles of Association dated 28th March 2024, which allow for any activities covered by the charity's objectives with no specific restrictions.

The liability of the members in the event of the company being wound up is limited to a sum not exceeding £1.

Reference and administrative details

Dementia UK, 7th Floor, One Aldgate, London EC3N 1RE

Bankers

Lloyds Bank, PO Box, Andover BX1 1LT

National Westminster Bank Plc, 250 Bishopsgate, London EC2M 3UR

Investment Managers

Sarasin & Partners LLP, Juxon House, 100 St Paul's Churchyard, London EC4M 8BU

Ruffer LLP, 80 Victoria Street, London SW1E 5JL

Statutory Auditor

Sayer Vincent LLP, 110 Golden Lane, London, EC1Y 0TG

Internal Auditor

Grant Thornton UK LLP, 30 Finsbury Square, London EC2A 1AG

Solicitor

Charles Russell Speechlys LLP, 5 Fleet Place, London EC4M 7RD

Trustees' responsibilities in relation to the financial statements

The charity's Trustees (who are also the Directors of Dementia UK for the purposes of company law) are responsible for preparing the Trustees' Annual Report, including the Strategic Report and financial statements, in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity's Trustees to prepare financial statements for each year, which give a true and fair view of the state of affairs of the charitable company and the group; and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue to operate

The Trustees are responsible for keeping adequate accounting records that disclose, with reasonable accuracy at any time, the financial position of the charity; and for ensuring that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and the group, and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as to disclosure to our Auditor

In so far as the Trustees are aware at the time of approving our Trustees' Annual Report:

- There is no relevant audit information of which the charitable company's Auditor is unaware
- The Trustees have taken all appropriate steps to ensure the Auditor is aware of any relevant audit information

The Trustees' Annual Report, which includes the Strategic Report, has been approved by the Trustees on 14th August 2024 and signed on their behalf by:

Professor David Croisdale-Appleby OBE

Chair of Trustees

Independent Auditor's report

for the year ended 31st March 2024

Opinion

We have audited the financial statements of Dementia UK (the 'parent charitable company') and its subsidiary (the 'group') for the year ended 31st March 2024 which comprise the consolidated statement of financial activities; the group and parent charitable company balance sheets; the consolidated statement of cash flows; and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31st March 2024 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations six and eight of the Charities Accounts (Scotland) Regulation 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report.

We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Dementia UK's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Trustees' Annual Report, including the Strategic Report, other than the financial statements and our Auditor's report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' Annual Report, including the Strategic Report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The Trustees' Annual Report, including the Strategic Report, has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report, including the Strategic Report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of Trustees

As explained more fully in the statement of Trustees' responsibilities set out in the Trustees' Annual Report, the Trustees (who are also the Directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as Auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations.

We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out here.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and the Finance, Risk and Audit Committee, which included obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:
  - identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance
  - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud
  - the internal controls established to mitigate risks related to fraud
  - non-compliance with laws and regulations
- We inspected the minutes of meetings of those charged with governance
- We obtained an understanding of the legal and regulatory framework that the group operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the group from our professional and sector experience
- We communicated applicable laws and regulations throughout the Audit Team and remained alert to any indications of non-compliance throughout the audit
- We reviewed any reports made to regulators
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations

- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation.

This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at **frc.org.uk/auditorsresponsibilities**.

This description forms part of our Auditor's report.

Use of our report

This report is made solely to the charitable company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005.

Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

30 October 2024

Noelia Serrano (Senior Statutory Auditor)

For and on behalf of Sayer Vincent LLP
Statutory Auditor
110 Golden Lane
London
EC1Y 0TG

Sayer Vincent LLP is eligible to act as Auditor in terms of section 1212 of the Companies Act 2006.

Consolidated statement of financial activities
(incorporating an income and expenditure account)

For the year ended 31st March 2024

	Note	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
Income from:							
Donations and legacies	2	19,991,306	1,675,487	**21,666,793**	16,903,300	1,884,796	18,788,096
Charitable activities							
Admiral Nursing projects	3	68,292	196,780	**265,072**	91,221	209,083	300,304
Business development	3	208,249	-	**208,249**	151,084	-	151,084
Research and publications	3	23,105	-	**23,105**	400	-	400
Other fundraising activities	4	111,803	-	**111,803**	83,975	-	83,975
Investments	5	266,852	-	**266,852**	100,567	-	100,567
Total income		20,669,607	1,872,267	**22,541,874**	17,330,547	2,093,879	19,424,426
Expenditure on:							
Raising funds	6a	7,070,107	-	**7,070,107**	5,932,694	-	5,932,694
Charitable activities							
Admiral Nursing projects	6a	4,822,675	1,749,829	**6,572,504**	5,176,063	2,246,142	7,422,205
Business development	6a	1,185,642	-	**1,185,642**	950,589	-	950,589
Research and publications	6a	305,023	3,059	**308,082**	323,482	-	323,482
Public awareness	6a	2,372,797	-	**2,372,797**	2,148,919	5,000	2,153,919
Practice development	6a	1,132,930	179,518	**1,312,448**	805,024	140,580	945,604
Total expenditure		16,889,174	1,932,406	**18,821,580**	15,336,771	2,391,722	17,728,493
Net income before net gains/ (losses) on investments		**3,780,433**	(60,139)	**3,720,294**	**1,993,776**	**(297,843)**	**1,695,933**
Net (losses)/gains on investments	14	(14,997)	**-**	**(14,997)**	14,999	**-**	14,999
Net income for the year	8	**3,765,436**	(60,139)	**3,705,297**	**2,008,775**	**(297,843)**	**1,710,932**
Transfers between funds		-	-	**-**	29,196	(29,196)	-
Funds transferred out to Age UK Oxfordshire	23	-	(95,766)	**(95,766)**	-	-	-
Net movement in funds		**3,765,436**	(155,905)	**3,609,531**	2,037,971	(327,039)	1,710,932
Reconciliation of funds:							
Total funds brought forward		13,751,330	1,313,652	**15,064,982**	11,713,359	1,640,691	13,354,050
Total funds carried forward	22	**17,516,766**	**1,157,747**	**18,674,513**	13,751,330	1,313,652	15,064,982

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 22a to the financial statements.

Balance sheets

As at 31st March 2024

Company no. 02944156

		The group		The charity	
		2024	2023	**2024**	2023
	Note	**£**	£	**£**	£
Fixed assets:					
Tangible assets	13	**224,675**	122,143	**224,675**	122,143
Investments	14	**2,064,611**	2,026,770	**2,064,612**	2,026,771
		2,289,286	2,148,913	**2,289,287**	2,148,914
Current assets:					
Debtors	17	**2,033,928**	1,714,073	**2,055,874**	1,715,284
Short-term deposits		**14,000,000**	6,589,709	**14,000,000**	6,589,709
Cash at bank and in hand		**3,620,738**	9,426,625	**3,593,423**	9,423,293
		19,654,666	17,730,407	**19,649,297**	17,728,286
Liabilities:					
Creditors: amounts falling due within one year	18	**(3,019,856)**	(3,551,323)	**(3,017,396)**	(3,549,117)
Net current assets		**16,634,810**	14,179,084	**16,631,901**	14,179,169
Total assets less current liabilities		**18,924,096**	16,327,997	**18,921,188**	16,328,083
Creditors: amounts falling due after one year	19	**(249,583)**	(1,263,015)	**(249,583)**	(1,263,015)
Total net assets	21	**18,674,513**	15,064,982	**18,671,605**	15,065,068
Funds:	22a				
Restricted income funds		**1,157,747**	1,313,652	**1,157,747**	1,313,652
Unrestricted income funds:					
Designated funds		**4,867,439**	4,894,045	**4,867,439**	4,894,045
General funds		**12,649,327**	8,857,285	**12,646,419**	8,857,371
Total unrestricted funds		**17,516,766**	13,751,330	**17,513,858**	13,751,416
Total funds		**18,674,513**	15,064,982	**18,671,605**	15,065,068

Approved by the Trustees on 14th August 2024 and signed on their behalf by:

Professor David Croisdale-Appleby OBE
Chairman

Steve Clarke CPFA
Treasurer

Consolidated statement of cash flows

For the year ended 31st March 2024

	Note	2024		2023	
		£	£	£	£
Net cash flows from operating activities	24		**1,565,293**		2,436,404
Cash flows from investing activities:					
Interest and dividends receivable		**266,852**		100,567	
Purchase of fixed assets		**(174,904)**		(97,158)	
Purchase of investments		**(52,837)**		(2,011,772)	
Investments in short-term deposits		**(7,410,291)**		(48,725)	
Net cash used in investing activities			**(7,371,180)**		(2,057,088)
Change in cash and cash equivalents in the year			**(5,805,887)**		379,316
Cash and cash equivalents at the beginning of the year			**9,426,625**		9,047,309
Cash and cash equivalents at the end of the year			**3,620,738**		9,426,625

Notes to the financial statements

For the year ended 31st March 2024

1. Accounting policies

a Statutory information

Dementia UK is a charitable company limited by guarantee and is incorporated in England and Wales. The registered office address and principal place of business is 7th Floor, One Aldgate, London EC3N 1RE.

b Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiary, Dementia UK Trading Limited, on a line-by-line basis. Transactions and balances between the charitable company and its subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

c Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The Trustees are of the view that the immediate future of the charity for the next 12 months is secure on the basis of confirmation of continuing income streams and fundraising activity to generate additional income streams. Accordingly, the financial statements have been prepared on the going concern basis.

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and the amount can be measured reliably.

Income from Government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For pecuniary legacies, entitlement is taken at the earlier of the date on which either the charity is aware that probate has been granted, and the amount receivable can be measured reliably, and the receipt is probable; or when a distribution is received from the estate. For residual legacies, entitlement is taken at the earlier of the date on which either the charity is aware that probate has been granted; the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made; or when a distribution is received from the estate. Where legacies have been notified to the charity or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service; any conditions associated with the donation have been met; the receipt of economic benefit from the use by the charity of the item is probable; and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

g Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

h Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

i Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party; it is probable that settlement will be required; and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose
- Expenditure on charitable activities includes the costs of delivering services and other educational activities undertaken to further the purposes of the charity and their associated support costs

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

j Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition; or the recipient has a reasonable expectation that they will receive a grant and that any condition attaching to the grant is outside of the control of the charity.

k Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each.

Support costs are the cost of overall direction and administration, comprising the salary and overhead costs of the central function.

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

Admiral Nursing projects	50%
Business development	8%
Research and publications	2%
Public awareness	6%
Practice development	8%
Raising funds	26%

l Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

m Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £1,500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

- Equipment 15%-33% per annum, straight line
- Fixtures and fittings 15%-33% per annum, straight line
- IT hardware and software 15%-33% per annum, straight line

n Investments
Fixed asset investments

Listed investments are included in the balance sheet initially at cost and revalued at the reporting date to bid price. Unrealised gains and losses on investments at the balance sheet date are included in the Statement of Financial Activities (SOFA) for the relevant underlying funds. The historical cost of investments is shown in Note 14 to the financial statements.

Investments in subsidiaries

Investments in subsidiaries are at cost.

o Admiral Nurse services

Funding is made available to employing authorities to meet employment, travelling and training costs incurred by them in the provision of Admiral Nurse services. The funding is accrued and recognised in the accounts in line with the provision of these services.

p Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered.

Any expenditure that exceeds £1,500 and is paid in advance or is related to a future dated event is held as a prepayment on the balance sheet. The prepayment is subsequently released to the SOFA in the month or months that the expenditure is incurred. Prepayments are valued at the amount prepaid net of any trade discounts due.

q Short-term deposits

Short-term deposits include cash balances that are invested in accounts with a maturity date of between three and 12 months.

r Cash at bank and in hand

Cash at bank and cash in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

s Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party, and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

t Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

u Pensions

The charity subscribes to a defined contribution scheme for the benefit of its employees. Contributions payable are charged to the SOFA in the year they are payable.

The charity also subscribes to the NHS Pension Scheme, a multi-employer defined benefit pension scheme. It is not possible to identify the assets or liabilities relating to the charity, therefore the charity accounts for contributions to the scheme as if it were a defined contribution scheme. Contributions payable are charged to the SOFA in the year they are payable.

2. Income from donations and legacies

			2024			2023
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Legacies	3,599,071	105,000	**3,704,071**	2,155,348	658,000	2,813,348
Voluntary donations	16,392,235	1,570,487	**17,962,722**	14,747,952	1,226,796	15,974,748
	19,991,306	1,675,487	**21,666,793**	16,903,300	1,884,796	18,788,096

3. Income from charitable activities

			2024			2023
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Fees and contributions from institutions	68,292	196,780	**265,072**	91,221	209,083	300,304
Sub-total for Admiral Nursing projects	68,292	196,780	**265,072**	91,221	209,083	300,304
Management and development fees	208,249	-	**208,249**	151,084	-	151,084
Sub-total for business development	208,249	-	**208,249**	151,084	-	151,084
Contributions from institutions	23,105	-	**23,105**	400	-	400
Sub-total for research and evaluation	23,105	-	**23,105**	400	-	400
Total income from charitable activities	299,646	196,780	**496,426**	242,705	209,083	451,788

4. Income from other fundraising activities

			2024			2023
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Carol concert, Christmas cards and merchandise	65,607	-	**65,607**	62,194	-	62,194
Income from trading subsidiary	46,196	-	**46,196**	21,781	-	21,781
	111,803	-	**111,803**	83,975	-	83,975

5. Income from investments

			2024			2023
	Unrestricted	Restricted	**Total**	Unrestricted	Restricted	Total
	£	£	**£**	£	£	£
Dividends	52,998	-	**52,998**	11,904	-	11,904
Bank interest	213,854	-	**213,854**	88,663	-	88,663
	266,852	-	**266,852**	100,567	-	100,567

6a. Analysis of expenditure (current year)

	Charitable activities									
	Raising funds	Admiral Nursing projects	Business development	Research and publications	Public awareness	Practice development	Governance costs	Support costs	**2024 total**	2023 total
	£	£	£	£	£	£	£	£	**£**	£
Staff costs (Note 9)	2,782,977	3,991,035	876,682	225,599	1,046,367	930,782	345,866	1,926,886	**12,126,194**	10,541,641
Direct activity costs	2,539,342	455,154	-	3,159	975,511	73,473	-	-	**4,046,639**	5,029,479
IT and telephone	102,513	182,311	-	-	-	1,152	-	575,645	**861,621**	651,684
Office and administration costs	216,797	25,614	2,307	2,632	70,770	388	12,188	292,696	**623,392**	543,440
Professional fees	431,859	1,811	-	29	50,160	-	66,765	209,718	**760,342**	580,709
Premises	-	-	-	-	-	-	-	403,392	**403,392**	381,540
	6,073,488	4,655,925	878,989	231,419	2,142,808	1,005,795	424,819	3,408,337	**18,821,580**	17,728,493
Support costs	886,167	1,704,169	272,667	68,167	204,500	272,667	-	(3,408,337)	**-**	-
Governance costs	110,452	212,410	33,986	8,496	25,489	33,986	(424,819)	-	**-**	-
Total expenditure 2024	**7,070,107**	**6,572,504**	**1,185,642**	**308,082**	**2,372,797**	**1,312,448**	**-**	**-**	**18,821,580**	**17,728,493**

6b. Analysis of expenditure (prior year)

	Charitable activities								
	Raising funds	Admiral Nursing projects	Business development	Research and publications	Public awareness	Practice development	Governance costs	Support costs	**2023 total**
	£	£	£	£	£	£	£	£	**£**
Staff costs (Note 9)	2,475,555	3,993,946	709,958	263,183	832,591	584,742	210,300	1,471,366	**10,541,641**
Direct activity costs	2,101,302	1,780,618	-	-	1,026,302	121,257	-	-	**5,029,479**
IT and telephone	88,910	140,462	92	-	6	-	-	422,214	**651,684**
Office and administration costs	245,158	20,640	3,272	990	39,447	2,373	13,096	218,464	**543,440**
Professional fees	250,765	3,837	35	-	77,648	-	24,530	223,894	**580,709**
Premises	-	-	-	-	-	-	-	381,540	**381,540**
	5,161,690	5,939,503	713,357	264,173	1,975,994	708,372	247,926	2,717,478	**17,728,493**
Support costs	706,544	1,358,739	217,398	54,350	163,049	217,398	-	(2,717,478)	**-**
Governance costs	64,460	123,963	19,834	4,959	14,876	19,834	(247,926)	-	**-**
Total expenditure 2023	**5,932,694**	**7,422,205**	**950,589**	**323,482**	**2,153,919**	**945,604**	**-**	**-**	**17,728,493**

7. Grant making

	Grants to institutions	**2024**	2023
	£	**£**	£
Cost			
Admiral Nursing projects	426,886	**426,886**	1,730,027
At the end of the year	426,886	**426,886**	**1,730,027**

During 2024, the charity provided investment for Admiral Nurses in five (2023: 20) new services. These costs are included in Note 6a under 'Direct activity costs'. Further details can be found on our website at **dementiauk.org**

8. Net income for the year

Includes the below charges:

	2024	2023
	£	£
Depreciation	**72,371**	63,645
Operating lease rentals:		
Property	**359,836**	357,759
Other	**78,950**	53,744
Auditors' remuneration (excluding VAT):		
Audit – current year	**24,700**	22,000
Audit – previous year under accrual	**-**	7,000
Other services – VAT and Corporation Tax services	**7,400**	3,690

9. Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2024	2023
	£	£
Salaries	**9,422,877**	8,109,430
Termination/redundancy costs	**27,779**	74,000
Employer's National Insurance contributions	**1,020,695**	911,620
Employer's contributions to defined contribution pension scheme	**621,725**	617,553
Employer's contributions to defined benefit pension scheme	**248,567**	227,369
Other staff-related costs	**784,551**	601,669
	12,126,194	10,541,641

The following number of employees received employee benefits (excluding employer's pension costs and employer's National Insurance) during the year between:

	2024	2023
	No.	No.
£60,000-£69,999	**17**	14
£70,000-£79,999	**3**	3
£80,000-£89,999	**2**	2
£90,000-£99,999	**3**	2

The total employee benefits (including pension contributions and employer's National Insurance) of the key management personnel were £557,783 (2023: £476,152).

The charity's Trustees were neither paid nor received any other benefits from employment with the charity in the year (2023: £nil). No charity Trustee received payment for professional or other services supplied to the charity (2023: £nil).

Trustees' expenses represent the payment or reimbursement of travel and subsistence costs totalling £3,113 (2023: £2,152) incurred by three (2023: two) members relating to attendance at meetings. The charity also incurred expenditure totalling £614 on Trustees' meetings in the year (2023: £322).

10. Staff numbers

The average number of employees (head count based on number of staff paid per month) during the year was 238 (2023: 205).

This includes sessional employees and other employees who received no pay in certain months (head count based on number per month); the average during the year was 20 (2023: 16).

	2024	2023
	No.	No.
Raising funds	**57**	53
Admiral Nursing projects	**89**	85
Business development	**16**	13
Research and publications	**4**	4
Public awareness	**21**	18
Practice development	**17**	10
Support	**33**	24
	238	205

11. Related party transactions

There are no related party transactions to disclose for 2024 (2023: none) other than those already disclosed in Note 8.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

The total amount of donations received from related parties, without conditions, was £355 (2023: £24,988).

12. Taxation

The charity is exempt from Corporation Tax as all its income is charitable and is applied for charitable purposes. The charity's trading subsidiary Dementia UK Trading Limited Gift Aids available profits to the parent charity depending upon operational requirements. In 2023-24, Dementia UK Trading Limited made a profit before tax of £17,207 (2023: loss £2,087) and £14,000 profits (2023: £nil) were Gift Aided to the charity. Therefore, its charge to Corporation Tax in the year was £609 (2023: £nil). The 2023 loss was carried back to offset part of the tax paid in the previous year, resulting in tax repayable from HMRC of £397.

The directors of Dementia UK Trading Limited are William Roe, Paul Edwards, Martin Bishop and Suruchi Saraf. William Roe is a Trustee of Dementia UK and all other directors are staff members employed by Dementia UK.

13. Tangible fixed assets

Group and charity	Equipment	Fixtures and fittings	IT hardware and software	**Total**
	£	£	£	**£**
Cost				
At the start of the year	2,976	206,869	177,110	**386,955**
Additions in year	3,670	-	171,234	**174,904**
At the end of the year	6,646	206,869	348,344	**561,859**
Depreciation				
At the start of the year	-	182,735	82,078	**264,813**
Charge for the year	820	24,134	47,417	**72,371**
At the end of the year	820	206,869	129,495	**337,184**
Net book value				
At the end of the year	**5,826**	**-**	**218,849**	**224,675**
At the start of the year	2,976	24,135	95,032	**122,143**

All of the above assets are used for charitable purposes.

14a. Fixed asset investments

	2024	2023
	£	£
Market value at 1st April	**2,026,770**	-
Add:		
Acquisitions at cost	**53,425**	2,011,183
Net cash reinvested	**(587)**	588
Gains on revaluation	**(14,997)**	14,999
Market value at 31st March	**2,064,611**	2,026,770
Historical cost at 31st March	**2,064,609**	2,011,772

Asset allocation	**2024**	**2024**	2023	2023
	£	**%**	**£**	%
Alternative investments	**241,331**	**12**	305,105	15
Equities	**1,001,169**	**48**	905,408	45
Fixed income	**723,924**	**35**	676,994	33
Liquid assets	**58,336**	**3**	94,715	5
Property	**39,852**	**2**	44,548	2
Total	**2,064,611**	**100**	2,026,770	100

14b. Investment in subsidiary undertaking

	The group		The charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
At the start and the end of the year	**-**	-	**1**	1

15. Subsidiary undertaking

The charitable company owns the whole of the issued ordinary share capital of Dementia UK Trading Limited, a company registered in England. All activities have been consolidated on a line-by-line basis in the statement of financial activities. A summary of the results of the subsidiary is shown below:

	2024	2023
	£	£
Turnover	**46,196**	21,781
Cost of sales	**(23,412)**	(17,484)
Gross profit	**22,784**	4,297
Administrative expenses	**(5,577)**	(6,384)
Profit/(loss) on ordinary activities before taxation	**17,207**	(2,087)
Taxation on profit on ordinary activities	**(212)**	-
Profit/(loss) for the financial year	**16,995**	(2,087)
Total retained earnings brought forward	**(87)**	2,000
Distribution under Gift Aid to parent charity	**(14,000)**	-
Total retained earnings carried forward	**2,908**	(87)
The aggregate of the assets, liabilities and funds was:		
Assets	**28,742**	3,332
Liabilities	**(25,833)**	(3,418)
Funds	**2,909**	(86)

16. Parent charity

The parent charity's gross income and the results for the year are disclosed as follows:

	2024	2023
	£	£
Gross income	**22,492,678**	19,405,645
Result for the year	**3,592,536**	1,713,022

17. Debtors

	The group		The charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Trade debtors	**68,947**	51,513	**68,947**	51,513
Other debtors	**-**	1,916	**-**	1,916
Prepayments	**920,648**	705,040	**920,648**	705,040
Accrued income	**1,044,333**	955,604	**1,044,333**	955,604
Amounts due from group undertakings	**-**	-	**21,946**	1,211
	2,033,928	1,714,073	**2,055,874**	1,715,284

The charity received notifications regarding a number of legacies before the year-end totalling £2,005,237. However, these legacies did not meet the full income recognition criteria as per the accounting policy as at 31st March 2024, and therefore, have not been accrued in the 2024 financial statements (2023: £1,079,057).

18. Creditors: amounts falling due within one year

	The group		The charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Trade creditors	**781,324**	521,422	**780,124**	521,422
Taxation and social security	**436,202**	533,067	**437,417**	533,061
Other creditors	**12,655**	11,159	**12,655**	11,159
Accruals	**436,582**	453,432	**434,107**	451,232
Deferred income	**74,417**	77,306	**74,417**	77,306
Admiral Nurse projects – grant accruals	**1,278,676**	1,954,937	**1,278,676**	1,954,937
	3,019,856	3,551,323	**3,017,396**	3,549,117

19. Creditors: amounts falling due after one year

	The group		The charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Admiral Nurse projects – grant accruals	**249,583**	1,213,763	**249,583**	1,213,763
Rent-free provision	**-**	49,252	**-**	49,252
	249,583	1,263,015	**249,583**	1,263,015

Total grant commitments outstanding as at 31st March 2024 relating to the recruitment of Admiral Nurses payable to health institutions were £1,528,259 (2023: £3,168,699), of which payable within one year were £1,278,676 (2023: £1,954,537) and after one year were £249,583 (2023: £1,213,763). The amounts due within one year are included within accruals in Note 18 above.

20. Pension schemes

The charity operates two pension schemes, a Group Personal Pension scheme, administered by Aviva, and NHS Pensions. As at 31st March 2024, the amounts owed to the schemes were: Aviva £82,089 (2023: £28,795) and NHS £nil (2023: £nil). The number of members in Aviva is 206 and in NHS 39. The NHS Pension Scheme is an unfunded occupational scheme backed by the Exchequer, which is open to all NHS employees and certain employees of other approved organisations. Dementia UK is an approved organisation. The scheme is a defined benefit scheme. The scheme receives contributions from employees and employers to defray the costs of pensions and other benefits. From 1st April 2006 the NHS Business Services Authority (NHSBSA) has been the body responsible for the administration of the NHS Pension Scheme for England and Wales. In support of NHSBSA, NHS employers are required to explain the scheme to the employees. In addition, they submit pension data to NHSBSA. Every four years the Government Actuary conducts a full actuarial review of contribution rates. In order to defray the costs of benefits, in 2023-24 employers paid contributions of 14.38% of actual pensionable pay. From October 2022, there was a change to member contribution rates from the Department of Health and Social Care. From this date, employees contributed on a tiered scale from 5.1%-13.5% of their actual pensionable pay. Further information on benefits can be obtained from the NHS Pension Scheme website.

21a. Analysis of group net assets between funds (current year)

	General unrestricted	Restricted funds	**Total funds**
	£	£	**£**
Tangible fixed assets	224,675	-	**224,675**
Fixed asset investments	2,064,611	-	**2,064,611**
Net current assets	15,381,647	1,253,164	**16,634,810**
Long-term liabilities	(154,167)	(95,417)	**(249,583)**
Net assets at 31st March 2024	**17,516,766**	**1,157,747**	**18,674,513**

21b. Analysis of group net assets between funds (prior year)

	General unrestricted	Restricted funds	**Total funds**
	£	£	**£**
Tangible fixed assets	122,143	-	**122,143**
Fixed asset investments	2,026,770	-	**2,026,770**
Net current assets	11,651,669	2,527,415	**14,179,084**
Long-term liabilities	(49,252)	(1,213,763)	**(1,263,015)**
Net assets at 31st March 2023	**13,751,330**	**1,313,652**	**15,064,982**

22a. Movements in funds (current year)

	At 1st April 2023	Income	Expenditure	Transfers	Gains and losses	**At 31st March 2024**
	£	£	£	£	£	**£**
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	60,000	564,742	(549,348)	-	-	**75,394**
Admiral Nursing learning disability service and new nurse (national)	112,713	206,485	(153,996)	-	-	**165,202**
Admiral Nursing projects (geographical funds):						
Cambridgeshire	48,635	16,000	(51,500)	-	-	**13,135**
Devon	40,745	59,735	(66,366)	-	-	**34,114**
Dorset (Purbeck)	33,209	859	5,000	-	-	**39,068**
Essex	14,318	-	-	-	-	**14,318**
Gateshead	20,000	-	-	-	-	**20,000**
Isle of Wight	16,709	9,500	(14,000)	-	-	**12,209**
Leeds	55,187	328,319	(217,720)	-	-	**165,786**
Leicestershire	46,170	14,389	(9,800)	-	-	**50,759**

Continued

	At 1st April 2023	Income	Expenditure	Transfers	Gains and losses	**At 31st March 2024**
	£	£	£	£	£	**£**
London	235,590	189,324	(236,483)	-	-	**188,431**
Northamptonshire	1,777	81,800	(55,000)	-	-	**28,577**
Nottinghamshire	5,912	10,000	-	-	-	**15,912**
Scotland	58,304	3,930	(17,434)	-	-	**44,800**
Staffordshire	25,048	250	-	-	-	**25,298**
Sussex	67,767	15,446	-	-	-	**83,213**
Teesside (Newcastle)	23,564	40,000	(42,486)	-	-	**21,078**
Tyne and Wear	7,770	13,000	-	-	-	**20,770**
Wales	88,653	3,108	(14,000)	-	-	**77,761**
West Midlands	6,125	34,500	(29,000)	-	-	**11,625**
Other geographical restricted funds (less than £10,000 balances at 31st March 2024)	237,642	148,488	(338,349)	-	-	**47,781**
YoungDementia UK projects	107,814	132,392	(141,924)	(95,766)	-	**2,516**
Total restricted funds	1,313,652	1,872,267	(1,932,406)	(95,766)	-	**1,157,747**
Unrestricted funds:						
Designated funds:						
Admiral Nursing Development Programme	586,000	-	-	(586,000)	-	**-**
New Nurse Fund	1,508,045	-	(151,720)	(356,000)	-	**1,000,325**
Investment in systems development	1,000,000	-	(65,985)	400,000	-	**1,334,015**
Investment in charitable activities	800,000	-	(658,901)	-	-	**141,099**
Clinical services digital development	1,000,000	-	-	(400,000)	-	**600,000**
Investment in clinical activities	-	-	-	942,000	-	**942,000**
Investment in fundraising	-	-	-	850,000	-	**850,000**
Total designated funds	4,894,045	-	(876,606)	850,000	**-**	**4,867,439**
General funds	8,857,285	20,669,607	(16,012,568)	(850,000)	(14,997)	**12,649,327**
Total unrestricted and designated funds	13,751,330	20,669,607	(16,889,174)	-	(14,997)	**17,516,766**
Total funds	**15,064,982**	**22,541,874**	**(18,821,580)**	**(95,766)**	**(14,997)**	**18,674,513**

22b. Movements in funds (prior year)

	At 1st April 2022	Income	Expenditure	Transfers	Gains and losses	**At 31st March 2023**
	£	£	£	£	£	**£**
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	-	345,600	(285,600)	-	-	**60,000**
Admiral Nursing learning disability service and new nurse (national)	27,272	188,580	(84,571)	(18,568)	-	**112,713**
Admiral Nursing projects (geographical funds):						
Cambridgeshire	47,190	1,445	-	-	-	**48,635**
Cornwall	3,632	17,650	-	-	-	**21,282**
Cumbria	63,625	6,903	-	-	-	**70,528**
Derbyshire	160,258	581	(114,654)	-	-	**46,185**
Devon	156,496	32,474	(148,225)	-	-	**40,745**
Dorset (Purbeck)	14,093	19,116	-	-	-	**33,209**
Essex	9,995	4,323	-	-	-	**14,318**
Gateshead	-	20,000	-	-	-	**20,000**
Isle of Wight	8,209	8,500	-	-	-	**16,709**
Leeds	136,431	200,701	(281,945)	-	-	**55,187**
Leicestershire	30,018	16,152	-	-	-	**46,170**
London	31,960	653,630	(450,000)	-	-	**235,590**
National	10,370	162,516	(142,002)	-	-	**30,884**
Scotland	135,414	50	(77,160)	-	-	**58,304**
Somerset	12,247	-	-	-	-	**12,247**
Staffordshire	94,016	5,211	(74,179)	-	-	**25,048**
Sussex	85,337	12,398	(29,968)	-	-	**67,767**
Teesside (Newcastle)	37,760	40,000	(54,196)	-	-	**23,564**
Wales	68,046	27,107	(6,500)	-	-	**88,653**
Yorkshire	52,910	131,259	(168,572)	-	-	**15,597**
Other geographical restricted funds (less than £10,000 balances at 31st March 2023)	217,426	105,227	(260,150)	-	-	**62,503**
YoungDementia UK projects	237,986	94,456	(214,000)	(10,628)	-	**107,814**
Total restricted funds	1,640,691	2,093,879	(2,391,722)	(29,196)	-	**1,313,652**

Continued

	At 1st April 2022	Income	Expenditure	Transfers	Gains and losses	At 31st March 2023
	£	£	£	£	£	£
Unrestricted funds:						
Designated funds:						
Admiral Nursing Development Programme	760,000	-	(174,000)	-	-	**586,000**
New Nurse Fund	2,084,872	-	(716,827)	140,000	-	**1,508,045**
Investment in systems development	-	-	-	1,000,000	-	**1,000,000**
Investment in charitable activities	-	-	-	800,000	-	**800,000**
Clinical services digital development	-	-	-	1,000,000	-	**1,000,000**
Total designated funds	2,844,872	-	(890,827)	2,940,000	**-**	**4,894,045**
General funds	8,868,487	17,330,547	(14,445,944)	(2,910,804)	14,999	**8,857,285**
Total unrestricted and designated funds	11,713,359	17,330,547	(15,336,771)	29,196	14,999	**13,751,330**
Total funds	**13,354,050**	**19,424,426**	**(17,728,493)**	**-**	**14,999**	**15,064,982**

A presentational adjustment has been made to the the prior year restricted fund for Gateshead (2024: £20,000; 2023: £20,000), which was presented under London (2024: £188,431; 2023: £235,590).

23. Purposes of restricted and designated funds

Restricted funds

Admiral Nursing projects are funded by donations specifically for the development and support of the services which Admiral Nurses provide.

The total restricted funds were raised by individuals, corporates, charitable trusts and fundraisers throughout the UK for the provision of services.

YoungDementia UK projects relate to funds transferred from YoungDementia UK when the charity became part of Dementia UK in November 2020. The funds will continue to be used for activities in line with YoungDementia UK's charitable objects. At 31st March 2024, the Young Onset Dementia Advisors (YODA) Oxfordshire service was transferred to Age UK Oxfordshire, and as such £95,766 of restricted funds relating to the service was transferred to Age UK Oxfordshire.

Designated funds

The charity holds the following designated funds at year-end:

Admiral Nursing Development Programme

The Admiral Nursing Development Programme was set up to enable current Registered Nurses (Adult, Mental Health and Learning Disability) to become Admiral Nurses and establish a new hosted service. There has been no activity in this area during 2023-24 and no activity is expected going forward, therefore, the full balance of the fund £586,000 brought forward at 31st March 2023 has been reassigned.

Continued

New Nurse Fund

The New Nurse Fund is used to fund Admiral Nurse services in host organisations to offer life-changing support to families facing dementia. The balance at 31st March 2024 is £1,000,325 (2023: £1,508,045), of which £356,000 has been reassigned given there are limited opportunities to fund new Admiral Nurse services in this way currently.

Systems development work across the charity

Funds totalling £1,000,000 were set aside in 2022-23 for systems development work across the charity. Work began in 2023-24, and an additional £400,000 has been added to fund a new system. The balance at 31st March 2024 was £1,334,015 (2023: £1,000,000). The projects are anticipated to be completed by 2026.

Investment in charitable activities

Funds of £800,000 were set aside at 31st March 2023 for the development of policy, campaigns, public affairs and raising awareness of our charitable activities during 2023-24. The balance at 31st March 2024 was £141,099, which is expected to be fully spent in 2024-25.

Clinical services digital development

This fund has been set aside for the development of our clinical services offering to include a digital service delivery for our beneficiaries. The balance at 31st March 2024 was £600,000 (2023: £1,000,000), £400,000 of which was reassigned. The expenditure is anticipated to commence in 2024-25 and to be completed towards the end of 2027.

Investment in clinical activities

Funds of £942,000 have been set aside for investment to help develop and drive expansion of activity within our clinical services teams. It is anticipated that this fund will be spent by 2027.

Investment in fundraising

A designated fund of £850,000 has been set up to help with further diversifying our portfolio of fundraising given the charity is heavily reliant on voluntary donations. This is expected to be utilised by 2025.

24. Reconciliation of net income to net cash flow from operating activities

	2024	2023
	£	£
Net income for the reporting period	**3,705,297**	1,710,932
(as per the statement of financial activities)		
Losses/(gains) on revaluation of investment assets	**14,997**	(14,999)
Depreciation charges	**72,371**	63,645
Dividends and interest from investments	**(266,852)**	(100,567)
(Increase)/decrease in debtors	**(319,855)**	369,329
(Decrease)/increase in creditors	**(1,544,899)**	408,063
Funds transferred out to Age UK Oxfordshire	**(95,766)**	-
Net cash provided by operating activities	**1,565,293**	2,436,403

25. Operating lease commitments

	Property		Equipment	
	2024	2023	**2024**	2023
	£	£	£	£
Periods:				
Less than one year	**360,528**	357,759	**35,663**	56,077
One to five years	**47,730**	404,789	**16,083**	51,745
	408,258	762,548	**51,746**	107,822

The 2023 lease commitments disclosure for property has been restated one to five years from £377,428 to £404,789. The 2023 lease commitments disclosure for equipment has been restated less than one year from £37,731 to £56,077 and one to five years from £3,205 to £51,745. This accurately reflects the outstanding position on operating leases.

Contingent liability

Dementia UK has entered into a rent lease agreement that expires in April 2025. The rent agreement includes a probability of 10% rent increase.

26. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Thank you

We are truly grateful for everyone who supported us in 2023-24, including our Volunteer Ambassadors. Because of you, we can offer more families a lifeline when they need it most. In particular, we would like to thank:

29th May 1961 Charitable Trust
Michael Adamson
Alliance Medical
Paul and Aaron Anderson
Aon
Artemis Investment Management
The Art File
Assura plc
James Baker
Simon Baker
Steven Brewster
Briggs Equipment
Jan Burt
Butt family through the Calleva Foundation
Edward Cadbury Charitable Trust
Central Co-op
Gavin Chapman
Nicky Clough
Lydia Colin
The Danesmoor Group
RJ and AH Daniels Charitable Trust
Sam Dawson
Dementia UK Carol Concert Committee
Deutsche Bank
Jill Dinsmore
East Sussex Fundraising Group
Eden Valley Friends of Dementia UK
Equin Ltd
Everyone Active
February Foundation
Gaudet Luce Golf Club
Simon Gibson Charitable Trust
Helena Grant
Simon Harris
Helianthus Trust
Hodge Foundation
Honiton Fundraising Group
The John Horseman Trust
Infrastructure Managers Ltd
Invesco
Isle of Wight Fundraising Group
Jones 1986 Charitable Trust
Emma Keen
Sir James Knott Charitable Trust
Kohler Mira
Leeds Building Society
Leicestershire Fundraising Group
The Frank Litchfield General Charitable Trust
Lloyds Bank Foundation
Macfarlanes LLP
Marks & Spencer
Geraldine McFaul
Edward McGurk
The Mere Golf Club and Resort
Miller Homes
Stuart Mills
Daksha Mistry
Sophie Mitchell
Wendy Mitchell
Mitie
Moondance Foundation
Susan Newman
Next Retail Ltd Head Office
Norwest Foods International Ltd
The Openwork Foundation
P&A Group
Parklane Foundation
PF Charitable Trust
Elise Pilkington Trust
Chris Pople
Premia Solutions Head Office
Purbeck Fundraising Group
Anne Quelch
Julia and Hans Rausing

Rayne Foundation
Basil Samuel Charitable Trust
Sid Valley Memory Cafe
Charles Skey Charitable Trust
Sobell Foundation
Peter Sowerby Foundation
Ali Stearn
Steel Charitable Trust
Stewart Steele
Manjinder Singh Kang
The Swire Charitable Trust
tails.com
ThinCats
Ben and Harriet Thorpe
Tokio Marine HCC
Jill Townsend
Venator
Westerleigh Group
West Leeds Fundraising Group
Wolseley UK
Worshipful Company of Butchers
Zochonis Charitable Trust
Zurich Community Trust

Dementia UK is the specialist dementia nursing charity that is there for the whole family. Our nurses, known as Admiral Nurses, provide free, expert advice, support and understanding to anyone who needs it.

How we can support you

'Dementia: what next?' online sessions

If you are caring for someone with dementia or living with the condition yourself, you can register for our free online sessions, 'Dementia: what next?', which are hosted by Admiral Nurses.

Sign up at **dementiauk.org/dementia-what-next**

Admiral Nurse Dementia Helpline

To speak to an Admiral Nurse on our free, confidential Helpline, call 0800 888 6678 (Monday-Friday 9am-9pm, Saturday and Sunday 9am-5pm, every day except 25th December) or email **helpline@dementiauk.org**

Virtual clinic appointments

To book a phone or video appointment with an Admiral Nurse at a time to suit you, please visit **dementiauk.org/book**. Appointments are free, confidential and available Monday-Friday.

dementiauk.org • 020 8036 5400 • info@dementiauk.org

DementiaUK
Helping families face dementia

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC 047429). Company number: 02944156

Registered with FUNDRAISING REGULATOR

DEMENTIA UK

England & Wales - Charity number 1039404

Accounts

Trustees' Annual Report

and consolidated financial statements

DementiaUK
Helping families face dementia

For the year ended
31st March 2023

Company number: 02944156 Charity number: 1039404 OSCR number: SC 047429

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Chair and Chief Admiral Nurse/Chief Executive Officer's report

With the number of people living with dementia increasing all the time, and families telling us how they struggle to find the support they desperately need, the life-changing work of Dementia UK has never been more important. This year, you have helped us grow our income from £17.1m to £19.4m – an incredible 12% increase – meaning more families have been able to access our services. On behalf of everyone at Dementia UK, thank you so much for your support.

This year, we have made great strides towards meeting the aims of our 2020-25 strategy and our overarching goal of providing expert, compassionate dementia support to every family that needs it through our dementia specialist Admiral Nurses.

During 2022-23, we increased the number of Admiral Nurses by 44, and we are delighted that we now have 420 in post. We are particularly proud to have launched several new specialist services across the UK, including services for families from minority ethnic communities – such as our first ever clinics specifically for people from Chinese and South-East Asian backgrounds, in collaboration with the Chinese Welfare Trust.

Building on the success of our Closer to Home virtual clinics, with the final Covid-19 restrictions on travel and social distancing lifted, we were able to move onto the next phase of the project. Our Admiral Nurses began hosting free dementia clinics in branches of our corporate partner, Leeds Building Society, in January 2023. These clinics have been extremely well-received, and we will be visiting more branches in 2023-24 so more families can access expert dementia support in their own communities.

To strengthen our support for families affected by dementia, we are continuing to offer virtual clinics alongside our Helpline and are growing the number of nurses in these teams. This allows us to offer the best possible advice and support to the increasing number of families facing dementia in the UK – many of whom struggle to know where to turn and are left feeling exhausted, overwhelmed and alone.

As always, we have continued to innovate to raise awareness of our work, drive fundraising and engagement, and be the voice of people affected by dementia and their families.

One highlight was our awareness campaign, 'I live with dementia', with its central message, 'If you love someone living with dementia, you're living with it too'. Through powerful stories and videos, targeted advertising, social media, and press and PR activity, we reached thousands of people who had little or no knowledge of our charity and Admiral Nurses.

To build a clearer picture of the value of Admiral Nursing, we launched our first National

Census, with the results published in 2022-23. This provided further evidence of our nurses' activity, which we will use to highlight their unique role in dementia care and support to potential host organisations and the wider public.

Admiral Nurses are at the heart of everything we do, and we are committed to providing them with the best possible education and support. We developed our Admiral Nurse Academy and saw our first cohort complete the new Accelerator Learning Programme, which allows current Registered Nurses to convert their role to Admiral Nurse and set up a new service through a six-month learning programme.

We also aim to upskill other health and social care professionals and held an extremely successful second online Summer School for those working in the dementia field, including students and volunteers.

We can only do what we do because of the generosity of our supporters. In 2022-23, we built on the success of our virtual events programme with eight fundraising challenges throughout the year, including our popular Dog Walking Challenge and a new Knitting Challenge. We grew our challenge events portfolio and recruited record numbers of participants in events like the London Marathon and Great North Run.

We secured existing – and cultivated new – relationships with our national and regional partners who have not just raised funds for Dementia UK, but also raised awareness of the support our nurses offer. Thank you so much for all you have done. And our regular givers and those pledging gifts in Wills have shown extraordinary generosity that will allow us to support families now and in the future.

These are just a few of our highlights, and you can read about many more in the pages of this report. We are extremely thankful for every single person who has helped make these possible.

We must now press on with our ambitious plan to grow the number of Admiral Nurses to 1,000 by 2030 so they can offer a lifeline to everyone who needs it. This will help ensure that every family affected by dementia has access to our services – whether in person, through our Helpline and virtual clinics, or through the information resources we produce.

By working together, we can make this vision a reality – and we are truly grateful to our supporters, donors, partners, volunteers and, of course, our Admiral Nurses and Dementia UK staff for everything they do to make this happen. Together, we can ensure no one has to face dementia alone.

Dr Hilda Hayo
Chief Admiral Nurse and Chief Executive Officer

Professor David Croisdale-Appleby OBE
Chair of Trustees

We are Dementia UK – the specialist dementia nursing charity

Every three minutes, someone in the UK develops dementia: a progressive and complex condition that can be devastating for the whole family. And too often, people are left to cope alone with ever-changing and relentless challenges.

Families often have to take on caring responsibilities that push them to their physical, emotional and financial limits. Struggling to know where to turn, they are left feeling exhausted, overwhelmed and alone.

That's where our specialist dementia nurses – known as Admiral Nurses – come in. As experts in the condition, their tailored, life-changing support helps families through the fear and confusion of dementia. From sharing practical tips for caring to offering compassionate emotional support and helping families plan for the future, they are there when people need them most.

Every day, Admiral Nurses help families up and down the country to have the best life possible for as long as possible. Whether it's via our Helpline, clinics or in the community, our nurses give people the much-needed space to talk to someone who understands. For many families, they are a lifeline.

> **"Without the Admiral Nurse Helpline, I can't bear to think of what might have happened to me. It was a priceless gift to be able to talk to someone who completely understood when I was feeling utterly desperate."**
>
> Family carer

Trustees' Annual Report, including the strategic report, for 2022-23

Our strategy, purpose and vision

Specialist dementia care – closer to those who need it

More than one million people in the UK will be living with dementia by 2025, and this is set to increase significantly over the coming decades. As this number rises, so too does the number of families impacted by dementia, and the need for specialist advice and support.

We believe that every family affected by dementia should have access to specialist help through our Admiral Nurses. As experienced, compassionate dementia specialists, they offer the practical solutions and emotional support to help families face dementia with more confidence, dealing with the challenges of today and preparing for the future.

We will bring specialist dementia care closer to those who need it.

In the community

We will:

- develop new Admiral Nurse posts each year across the UK, investing in new and existing services to increase our geographical coverage
- provide clinic appointments with Admiral Nurses in areas without full-time nurse services, to reach even more families

In hospitals

We will:

- create new Admiral Nurse posts to support families whose loved one with dementia is in hospital

On our Helpline

We will:

- invest in the Helpline to expand its opening hours and increase the number of nurses on shift, so that the maximum number of calls can be answered in real time
- develop the digital side of the Helpline so carers can access the most relevant information and support resources when they need it, complementing the support that the Admiral Nurses give

In the workplace

We will:

- further develop our Dementia at Work resource, offering guidance to working-age carers, as well as guidance for employers on how best to support their staff and customers
- continue to provide a specialist dementia support programme to corporate partners and other companies for carers while they are at work, including workplace Admiral Nurse clinics

In areas of specialism

We will develop dedicated Admiral Nurse services for:

- people living with learning disabilities and dementia
- diverse communities, including people from Black, Asian and other minority ethnic groups within the UK
- those diagnosed with dementia under the age of 65

Through our digital offer

We will:

- expand our series of Admiral Nurse advice leaflets and videos to cover every symptom and challenge that dementia presents
- constantly update our website to ensure our advice is accurate, contemporary, and supported by clear, intuitive functionality
- develop and test ways to signpost carers to the most relevant information and support services
- promote our digital offering so that everyone who needs it knows there is clear, practical advice available to them at all times
- investigate and implement online access to Admiral Nurses, on our Helpline and in the community – trialling video calling and text message services

Our vision: access to the life-changing support of an Admiral Nurse for every family that needs it.

Our values

We listen, learn and collaborate

We listen to people with dementia and their families; to clinicians and our colleagues; and to our supporters and fundraisers. This underpins all of our work.

We are empowering, supportive and respectful

We empower families to know what they are entitled to and advocate for them so that they receive it.

We act with integrity, transparency and accountability

Every penny we spend comes directly from our supporters – and we are committed to full transparency regarding how we spend this money.

We encourage creativity and innovation

We apply innovation and creativity to everything we do.

About dementia

Dementia is an umbrella term for a range of progressive conditions that affect the brain. Around 944,000 people in the UK are living with dementia.

There are more than 200 types of dementia. The most common are Alzheimer's disease, vascular dementia, Lewy body dementia, frontotemporal dementia and mixed dementia.

Common symptoms of dementia include:

- memory loss
- confusion
- problems with understanding
- speech and language difficulties
- problems with decision-making
- changes in behaviour

Someone in the UK develops dementia every

3 minutes

1 in 2

people in the UK will be affected by dementia in their lifetime

More than half

of UK adults know someone who has been diagnosed with dementia

Around

70,800

people in the UK live with young onset dementia – where symptoms develop before the age of 65

Dementia is the leading cause of death in the UK.

“It’s demanding living with this condition.”

Maq’s story

Maq was diagnosed with dementia at the age of 54. He reflects on how young onset dementia affects his day-to-day life.

I was diagnosed with frontotemporal dementia when I went into hospital for major heart surgery and had a brain scan. I’d had no symptoms, so it was difficult to accept the news.

I was working as an accountant at the time, and I thought, “If I’ve got this condition and there’s no cure, there’s no way I can carry on working” – so I stopped. It was a big adjustment and made me less financially independent. On reflection, I think I could have stayed at work for longer.

I didn’t tell my family about my diagnosis for over a year. My wife had passed away, and my children were still at school. I wanted to protect them. In the end, I asked a professional to explain it to them. I couldn’t bring myself to say it.

Dementia isn’t just about memory loss

As time has passed, my dementia symptoms have become more obvious. It changes my mood and perception and affects me physically and psychologically – it isn’t all about memory loss. Communication can be difficult, so I lip read and rely on body language and gestures a lot.

It’s demanding living with this condition. It changes from day to day, hour to hour, minute to minute. If you spoke to me at 9am, 6pm and 12am you would meet three different people.

My mind wanders and I don’t want to show myself being agitated so I hide that part of me by sitting on my own and reading.

I want to break the stigma around dementia

I get asked to talk at many different events about my experience of dementia. I do on average 18 Zoom sessions a week – it’s like a full-time job, but it keeps me going. Social connection is so important, and whenever somebody asks me for help, I’m there.

In the South Asian community, dementia is a taboo subject. People feel ashamed to seek help and don’t know where to get support. As a member of Dementia UK’s Lived Experience Advisory Panel (LEAP), I act as a liaison between the community and the dementia specialist Admiral Nurses – hopefully, I’m helping to break the stigma.

When someone says they have benefitted from what I have said it gives me a boost. I don’t know how many years I have left, but I want to make a difference while I can.

“Social connection is so important – if somebody asks me for help, I’m there.”

Achievements, performance and plans

Admiral Nurses – a lifeline for families

Our dementia specialist Admiral Nurses are at the heart of everything we do, offering life-changing support to families facing dementia. Admiral Nurse services are hosted by a range of organisations, including many NHS Trusts, in collaboration with Dementia UK.

What we said we would do

Increase the number of new nurses in primary care by 15 and in acute care by 10.

What we did

Appointed 20 new Admiral Nurses in primary care posts and 15 in acute care. This brings our total number of Admiral Nurses to 420 as of 31st March 2023 – compared with 376 in the year ending 2021-22 – and exceeds our target growth for the year.

Appointed new Consultant Admiral Nurses for Frailty and for Young Onset Dementia (see p28 for more information).

What we said we would do

Develop a model to help our nurses better support and engage with families from diverse communities by identifying and supporting the training needed to meet these families' unique needs. This would include creating a further three new Admiral Nurse roles in minority ethnic communities.

What we did

Launched our first service supporting Chinese and South-East Asian families, in partnership with the Chinese Welfare Trust. This is run by an Admiral Nurse who is fluent in both Cantonese and Mandarin. The service aims to address challenges such as myths and taboos around dementia, language barriers, and a lack of culturally appropriate support. Please see p16 for more information.

Identified a Lead Admiral Nurse for Equality, Diversity and Inclusion within the Admiral Nurse Academy who will develop our nurses' knowledge and understanding of supporting families from diverse communities.

Developed three new services to support families from diverse communities in the city of Leicester and in areas covered by the Black Country Healthcare NHS Foundation Trust.

Developed a post in Derbyshire focusing on people with learning disabilities and dementia. People with a learning disability are at greater risk of developing dementia, especially young onset dementia.

What we'll do next – our priorities for 2023-24

Recruit a total of 33 new posts:

- 10 in acute care
- 15 in primary care networks
- five in diverse communities
- three specialising in young onset dementia

We will also create eight new Admiral Nurse clinics in areas without existing services. This will ensure that more areas of the UK have an Admiral Nurse service and therefore support more families in their local communities.

Develop our prison clinics model and extend its reach to improve the support offered to an estimated 12,000 prisoners with dementia throughout the UK. This will build on our current Admiral Nursing activity offering specialist advice to prison staff supporting service users with dementia.

Support the expansion of our clinics for members of the Professional Footballers' Association (PFA) and their families, and similar sports-related clinics. We have appointed a Consultant Admiral Nurse for Sport and Dementia (May 2023) – this will be a key influencing role to ensure the needs of people with sport-associated dementia are represented in national policy, research and guidance. The post will also provide clinical advice and support by telephone, online and in clinics; and offer training and guidance to other Admiral Nurses on best practice in dementia care for people who have played sport and are living with dementia.

Spotlight

The Chinese Welfare Trust Admiral Nurse clinic

In August 2022, Dementia UK and the Chinese Welfare Trust launched a new clinic offering specialist dementia support to families from a Chinese or South-East Asian background across five London boroughs. Clinic Admiral Nurse Emily Ka-Hei Lui shares her experiences of the first eight months of the service.

Families of Chinese and South-East Asian heritage face many challenges in accessing dementia care and support. These include language barriers; the stigma surrounding dementia; conflicts within the family around care expectations; and a lack of dementia-specific, culturally appropriate services.

In recognition of the unique challenges experienced by families living with dementia from these communities, in 2022 Dementia UK launched an Admiral Nurse service specifically for people from Chinese and South-East Asian backgrounds, in association with the Chinese Welfare Trust (CWT).

The service aims to provide health advice and communication tips that are culturally appropriate; help families access local support; offer psychological and emotional support; and raise dementia awareness in the community through talks, awareness sessions, short films, and articles for local newsletters.

Appointments are held in GP surgeries and Chinese community centres, alongside telephone and video calls. Although the service is based in London, we receive appointment requests from all over the country.

> **“Often, people do not want to let their friends and neighbours know about the dementia diagnosis because of the stigma in their community, leaving them with no one to turn to. They also find it helpful to speak to me in their first language.”**

Breaking down stigma

The families I work with say it is helpful to speak to someone who understands their situation. Often, they do not want to let their friends and neighbours know about the dementia diagnosis because of the stigma in their community, leaving them with no one to turn to. They also find it helpful to speak to me in their first language.

Many carers cry in their appointments, stating that they are at a point of breakdown and do not know what to do next. This is rare in Chinese culture as people are in general very reluctant to seek help when they are struggling and do not like to disclose their personal feelings.

Being an Admiral Nurse is really meaningful, especially as I can offer specialist support to carers whose needs are often forgotten, as well as their loved ones. But a lot more could be done to support families affected by dementia within the Chinese and South-East Asian community, from raising awareness to post-diagnostic support.

In the coming year, I hope we can partner with other local community organisations and expand the service across the UK – and also apply the model to other minority ethnic communities.

> **“Being an Admiral Nurse is really meaningful, especially as I can offer specialist support to carers whose needs are often forgotten.”**

Evaluating our hosted Admiral Nurse services

Admiral Nurses work within a range of host organisations, such as NHS Trusts. Our Insights and Evaluation Team collects information from family carers and health and social care professionals about our Admiral Nurse services, demonstrating their impact on people affected by dementia.

Carers told us:

98% The service had improved their ability to take better care of the person with dementia

96% The service had improved their ability to cope

98% Their experience of the service was 'very good' or 'good'

Professionals told us the Admiral Nurse service:

100% Improved person-centred care

100% Improved quality of life for families

100% Enabled families to be involved in decisions about their relative's care

98% Improved case management and coordination

"Due to the help and excellent advice given... I now feel much more positive about my future. I used to get very low and upset after my wife went into a care home... I would have been totally lost without the advice and help from the Admiral Nurse."
Family carer

A listening ear

When families need expert, compassionate dementia advice and support, the Admiral Nurses on our Helpline and in virtual clinics are here to listen.

How to contact an Admiral Nurse

Helpline: call 0800 888 6678 (Monday-Friday 9am-9pm, Saturday, Sunday and bank holidays 9am-5pm, every day except 25th December) or email **helpline@dementiauk.org**

Virtual clinics: book a free, confidential 45-minute phone or video appointment at **dementiauk.org/book**

Closer to Home clinics: book a face-to-face appointment with an Admiral Nurse in selected Leeds Building Society branches at **dementiauk.org/closer-to-home** (until March 2024).

"Since Gran's diagnosis, I've called the Dementia Helpline several times. It's reassuring to have someone listen without judgement."
Family carer

What we said we would do

Increase the number of families we support by adding an extra 17 Helpline shift availabilities per week. Day shifts (weekdays and weekends) are 7½ hours long. Evening shifts are 3½ hours long.

What we did

Merged our Helpline and virtual clinics teams to become a Core Clinical Services Team. Joining up these two key services will improve access to Admiral Nurses to families throughout the UK. This has proven a more successful way of growing our support offer than simply introducing more Helpline shifts. Virtual clinics are now available Monday to Friday, 9am-4pm.

Supported more people than ever before through our Helpline and virtual clinics. Our Helpline recorded 34,273 contacts between April 2022 and March 2023: an increase of 3% on the previous year. In virtual clinics, 2,457 appointments were completed.

What we said we would do

Continue with our Helpline expansion to ensure more families get through on their first attempt. We aimed to have 12 full-time and 16 part-time Helpline nurses in post by April 2023. This would enable us to meet the increasing number and complexity of calls and reduce the need for sessional nurses to staff the Helpline.

What we did

Increased the number of full-time nurses in the service from eight to 10 and the number of part-time nurses from 12 to 17. Due to a recruitment freeze as we merged our Helpline and virtual clinics services under the Core Clinical Services umbrella, we were unable to grow the number as much as we planned, but every one of these nurses has a life-changing impact on the families they support.

What we said we would do

Launch a Closer to Home mobile support centre in January 2023, travelling around the UK and offering families face-to-face appointments with an Admiral Nurse in their local community.

What we did

Revised our plans to introduce a mobile support centre due to Covid-19 supply-chain issues.

Instead, we launched face-to-face Closer to Home dementia clinics visiting branches of Leeds Building Society. These began in mid-January 2023, and by the end of March 2023, we had supported 81 people living with dementia and their families through appointments with Admiral Nurses in branches in their local communities. These clinics are set to continue until March 2024.

What we said we would do

Grow our virtual clinics to offer appointments five days a week so that more families can receive the support of an Admiral Nurse by phone or video call.

What we did

Expanded our virtual clinics offering from four days a week to five, so more families can book an appointment at a time to suit them.

What we'll do next – our priorities for 2023-24

Ensure even more families get through to the Helpline on their first attempt by improving efficiency. This will also enable us to meet the ever-growing number and complexity of calls.

Aim to support at least a combined 36,000 direct contacts on our Helpline and in virtual clinics and increase the number of calls we can answer first time.

Spotlight

Safeguarding our staff and beneficiaries

Safeguarding is a growing concern, and as a charity focused on dementia support, we are acutely aware of our responsibilities to vulnerable people. All employees recognise the need to raise concerns if they suspect someone is vulnerable, and to consult one of our dementia specialist Admiral Nurses as necessary.

Safeguarding disclosures raised via our Helpline and clinics have increased significantly in the past three years. Within our safeguarding policy, disclosures are rated red, amber or green depending on severity. We are seeing a higher number of amber and red disclosures than in previous years. This means that not only are overall disclosures increasing, but their severity is increasing too.

A Safeguarding Team, led by the Director of Clinical Services, meets monthly to review all disclosures, including themes and possible actions to support our beneficiaries and staff members who are engaged in them. The three main themes are:

- **suicidal ideation:** where a carer or person with dementia states they want to end their life
- **domestic violence:** where a carer or person with dementia either threatens or causes actual harm to another person
- **lack of support for carers:** where caring has become extremely difficult due to a lack of formal or informal support

As a result of these issues, we are taking the following actions:

- **suicidal ideation:** we have met with the Marketing and Communications Team to look at ways to provide further information about coping strategies and self-care. We are reviewing our messaging about accessing support so that carers experiencing suicidal ideation can be supported sooner. We continue to provide support information from other charities such as Samaritans, Mind and Cruse
- **domestic violence:** we are reviewing our information on coping with violence, de-escalation techniques and personal safety. We have also produced a new leaflet on personal safety for carers of people with dementia
- **lack of support for carers:** we are continually raising issues nationally about the lack of support for people with dementia and their families to policy-makers and NHS and social care bodies

The safeguarding disclosures raised in 2022-23 do not meet the threshold for reporting to the Charity Commission as we are supporting our beneficiaries who are experiencing safeguarding situations, as opposed to these situations resulting from the actions or omissions of Dementia UK.

In addition to supporting our beneficiaries, we provide regular and enhanced support to our nursing staff and are reducing the administrative burden by automating part of the safeguarding process.

Our Director of Clinical Services has also presented the charity's safeguarding findings to the Chief Social Worker at the Department for Health and Social Care to increase awareness across the Adult Safeguarding Network; and we have been asked to support NHS England's Safeguarding Leads Network to raise the issue of domestic violence in relation to dementia.

Evaluating our Helpline

Our Insights and Evaluation Team's analysis of people's experiences of the Admiral Nurse Dementia Helpline helps ensure the best possible service for the families who contact us.

In 2022, the top reasons for contacts to our Helpline were:

- accessing support
- getting a diagnosis
- dementia understanding and support
- behavioural issues
- information about care options

What carers told us about our Helpline

94% said the nurses explained things clearly, gave them enough time and listened to them

90% said the Helpline made a positive difference to their ability to make decisions about the care of the person with dementia

89% said the Helpline improved their understanding of dementia

88% said the Helpline improved their ability to take better care of the person with dementia

84% said the Helpline made a difference to their ability to communicate with the person they care for

Taking the pressure off other health and social care services

36% of carers told us that without the Helpline, they would have seen a GP for the needs of the person with dementia

15% would have seen a GP for their own needs

6% said the person they care for would have had to go to A&E

"My mental and physical health [were] teetering on the edge for a very long time. The support I received from the Helpline has been immeasurable and the fact I could contact a nurse any time has literally saved me on a few occasions."
Family carer

Spotlight

Closer to Home dementia clinics

In early 2023, we launched our Closer to Home dementia clinics in association with our partner, Leeds Building Society. These clinics are visiting Leeds Building Society branches across the country, offering families free 45-minute appointments with an Admiral Nurse in their local community.

As of March 2023, our clinics had visited 11 branches across Yorkshire and Newcastle, with a team of five Admiral Nurses providing 81 appointments to people living with dementia and their families. We publicised the clinics through awareness days in branches, contacting carers' groups and organisations, advertising, and appearing on local TV and radio.

Admiral Nurse Joe Costello was part of the Closer to Home Team. He says:

"Closer to Home clinics are a fantastic way to deliver dementia support, with up to five appointments available each day. Running the clinics in Leeds Building Society branches means they are easy for people to access in their local communities, and the relaxed setting can remove some of the stress for carers who are anxious in clinical settings like GP practices and hospitals.

"I have spoken to carers about everything from balancing full-time work with their caring responsibilities to supporting their loved one to stay at home for as long as possible. I have advised family members on navigating health and social care services, applying for benefits, and looking into local care options for their relative.

"Families have told us how helpful it is to talk to someone who understands what they are going through, and to have the space and time for a professional to listen to their needs and give them the appropriate advice and support. Many have shared their feelings of love and loss around the progression of the illness in a safe space.

"It has also been a great opportunity to talk to Leeds Building Society staff who are keen to learn more about dementia and how it impacts on people living with the condition or on those close to them."

What's next for Closer to Home?

In the coming months, Closer to Home clinics will be visiting more locations across the UK and offering appointments in branches including Aberdeen, Glasgow, Manchester, Watford, Bristol, Cardiff and Belfast.

As well as face-to-face Closer to Home clinics, we have continued to offer our virtual clinics model, which evolved as a result of the Covid-19 lockdown. These clinics offer appointments by phone and video call and have proven incredibly successful. Virtual clinics are a lasting legacy of our partnership with Leeds Building Society and now form part of our Core Clinical Services alongside our Helpline.

To find out more about Closer to Home dementia clinics, please visit **dementiauk.org/closer-to-home**. For more information on virtual clinics, please see **dementiauk.org/book**

"I have spoken to carers about everything from balancing full-time work with their caring responsibilities to supporting their loved one to stay at home for as long as possible."

Joe Costello, Closer to Home Admiral Nurse

Supporting younger people

Around 70,800 people in the UK live with young onset dementia – where symptoms develop before the age of 65. Our Young Onset Dementia Programme is creating a prominent national centre of expert support, information and collaborative influencing activities for younger people with dementia, their families and professionals in the field.

What we said we would do

Develop new young onset dementia learning materials and support for nurses, including:

- a pre-Admiral Nurse young onset dementia module
- learning opportunities in the Admiral Nurse Forum (our annual online conference) and Summer School (a free virtual learning and development event for health and social care professionals and volunteers with an interest in dementia)
- a special interest group

What we did

Presented an expert session on young onset dementia at Dementia UK's Summer School in July 2022. The session featured our Consultant Admiral Nurse for Young Onset Dementia, a Young Onset Dementia Advisor, and a couple with lived experience of young onset dementia. The session was attended by 255 professionals, with overwhelmingly positive feedback. A further 350 professionals watched a recording of the session.

Hosted an Admiral Nurse Forum session on sexual health conversations with people and families living with young onset dementia. Sixty-four Admiral Nurses attended the session.

Identified the learning needs of our Admiral Nurses on the Helpline and in clinics and produced education and support materials for them, for example on dementia and menopause.

> **"[It was] amazing to hear the insight of someone who is dealing with young onset dementia... It has certainly made me think more about the condition and the strategies that can be used to ensure people can live life as fully as possible for as long as possible."**
> Summer School attendee

Launched a new young onset dementia special interest group – this currently has 43 Admiral Nurse members. The group will increase activity and support for our nurses around young onset dementia in line with Admiral Nurse Academy plans.

What we said we would do

Grow the number of Young Onset Dementia Admiral Nurses – we aim to recruit at least three per year, with 15 in post by 2025.

What we did

Appointed our new Consultant Admiral Nurse for Young Onset Dementia. She will support our Admiral Nurses to build their knowledge and confidence in working with families affected by young onset dementia; and will directly support families with the most complex needs around young onset dementia.

Agreed two new Young Onset Dementia Admiral Nurse posts – one post is being recruited in Manchester, and a second in Northampton will be advertised in 2023. We are also recruiting an Admiral Nurse for the Young Onset Dementia Team in Oxfordshire.

While we may not meet our target of 15 new Young Onset Dementia Admiral Nurses by 2025 due to issues such as difficulties finding match funding for these specialist services, we are identifying opportunities to convert existing Young Onset Dementia Specialist Nurses to Young Onset Dementia Admiral Nurses; and exploring the potential to embed young onset dementia speciality in larger teams, both new and existing.

What we said we would do

Collaborate with the Consultant Admiral Nurse for Young Onset Dementia to raise the national profile of Dementia UK's young onset dementia offer.

What we did

Raised awareness of our support for families affected by young onset dementia. We have presented on Dementia UK's offering for families affected by young onset dementia to professional bodies such as the Royal College of Obstetricians and Gynaecologists; the Alzheimer's Dementia and Care Show; and local and regional groups and services via the national Dementia Clinical Network webinar.

Our work on menopause also attracted media coverage, including on BBC Radio's Woman's Hour.

Developed a range of promotional assets with Dementia UK's Marketing and Communications Team to highlight our services for families affected by young onset dementia. We are particularly proud of our two short films featuring Jude, who was diagnosed with young onset dementia at the age of 57: please see p32 for more information.

What we said we would do

Promote the availability of our Helpline and virtual clinics to people with young onset dementia and collect data and feedback on people's experiences of these services.

What we did

Received 1,531 contacts to the Admiral Nurse Dementia Helpline relating to young onset dementia – an increase of 12% on 2021-22. Sixteen percent of these contacts were from a person living with dementia, showing that our Helpline is an invaluable resource for people with a young onset dementia diagnosis, and not just their carers.

What we said we would do

Develop our suite of young onset dementia resources, including the young onset dementia section of the website.

What we did

Reviewed our existing content and identified gaps that needed to be filled to support families affected by young onset dementia. As a result, we have:

- published new leaflets on:
  - Getting a diagnosis of young onset dementia
  - Next steps after a young onset dementia diagnosis
  - Finance and young onset dementia
  - Perimenopause and menopause
  - Young onset dementia: information for parents
  - Young onset dementia: choosing a care home
  - Young onset dementia: different symptoms
- revised Dementia UK's life story template to include more content relevant to people with young onset dementia
- ensured that all new Dementia UK leaflets published for a generic audience, and those reviewed throughout the year, reference and include information about young onset dementia
- contributed to six Twitter Spaces that either focused on or included panellists with young onset dementia

We also...

Released a new, more accurate estimate of the number of people living with young onset dementia in the UK. We extrapolated from research conducted by a member of the Young Dementia Network and the Dementia Intelligence Network that around 70,800 people in the UK live with young onset dementia, replacing the out-of-date estimate of 42,325 (2014).

We took the opportunity to highlight this discrepancy to the media, raising awareness of the number of people facing young onset dementia and calling for better care and support.

What we'll do next – our priorities for 2023-24

Increase access to young onset dementia expertise within existing and new Admiral Nurse services so that more families can receive support with the unique challenges of the condition.

Deliver communication and marketing activity to improve the understanding of young onset dementia; increase access to high-quality digital information; and strengthen the Young Dementia Network community.

Cultivate a national influencing role to raise awareness and understanding of young onset dementia and improve its care and support. We will use the expertise of the Young Dementia Network to help us do this (see opposite).

Ensure young onset dementia is integrated in all aspects of Dementia UK's work and reinforce its distinctive characteristics and the unique issues faced by the families it affects. This will ensure more people affected by young onset dementia can access specialist information that is applicable to their specific challenges.

The Young Dementia Network

The Young Dementia Network is a dynamic and unique online influencing community of over 4,600 people, hosted by Dementia UK. It was established in 2016 by YoungDementia UK, which merged with Dementia UK in 2020.

Membership of the Young Dementia Network includes people living with young onset dementia; their families and friends; and professionals working in health and social care, dementia research and the voluntary sector. They are all dedicated to improving the lives of people with young onset dementia and their families.

Our highlights in 2022-23 include:

- increasing the Young Dementia Network membership by 1,000
- launching a new and highly successful webinar programme for professionals around diagnosing young onset dementia. This put people with lived experience of young onset dementia at its centre. Over 950 people attended the live webinars, with a further 940 viewing the recording on YouTube. You can watch all our webinars at **youngdementianetwork.org/our-webinars**
- planning our first campaign to improve the diagnosis experience for people with young onset dementia and their families
- contributing a young onset dementia perspective to national policy and strategy planning, including giving written evidence to the All Party Parliamentary Group on dementia and diagnosis

To find out more about the Young Dementia Network and to join us, please visit **youngdementianetwork.org**

Spotlight

Our young onset dementia films

With the number of people with young onset dementia increasing, Kate Fallows, Young Onset Dementia Marketing and Communications Manager, worked on two new films to highlight the issues faced by younger people with the diagnosis.

Young onset dementia is a growing health issue in the UK, but awareness of the condition is poor. Many people consider dementia a condition of old age and do not realise that it can affect younger people – and are unaware of how it impacts the person with the diagnosis and those around them.

To raise awareness of young onset dementia, challenge the stereotype that dementia only affects older people, and show that a fulfilling life can be lived post-diagnosis, we made two films featuring Jude Thorp, who was diagnosed with young onset Alzheimer's disease in 2021 aged 57. Jude, her wife Becky, and their two daughters, aged 17 and 19, are supported by the Young Dementia Oxfordshire service, which is provided by Dementia UK.

In the first film, Jude talks about why getting a dementia diagnosis was important to her, so she knew what she was dealing with – but was nevertheless devastating for her and her family. She shares how, with the help of Becky and best friend Johnty, she came to terms with the news.

In the second film, Jude, Becky and Johnty discuss how she has continued to live a full and active life since her diagnosis. She describes the support she has received from Dementia UK as a godsend.

The impact of the films

We felt it was important to tell Jude's story in her own words, and also include her family's voices, to show the impact her diagnosis has had on her and the people around her. We also wanted to demonstrate that although Jude faces challenges in her daily life, she continues to live actively and positively with support from Becky, her daughters and friends; as well as from Dementia UK.

The films were shared on our social media channels, where they have been viewed over 6,500 times. We have disseminated them on our website, in blog posts and in a young onset dementia-specific email. Jude has also taken part in webinars and been interviewed in the press and on the radio about living with young onset dementia.

You can watch the films at **dementiauk.org/judes-story**

Measuring our impact

Monitoring and evaluating our work helps us develop our services so we can offer the best possible support for families facing dementia. Our Insights and Evaluation Team gathers the information we need to do this.

What we said we would do

Ensure that our insights and evaluation work continues to support Dementia UK's strategy. This includes supporting colleagues across the organisation through the development of tools and methods for gathering, storing and sharing information and evidence. We also said we would support the collection, analysis and reporting of evidence of the impact of Admiral Nurses and wider Dementia UK activities.

What we did

Planned and provided all the elements needed to evaluate the new Admiral Nurse Accelerator Learning Programme – a fast-track programme for current Registered Nurses who wish to convert to an Admiral Nurse role and launch a new service. We aim to report our findings in September 2023.

Advised and guided Dementia UK colleagues and services on the best ways to monitor and evaluate their services. We have supported:

- our Helpline
- virtual clinics
- the Consultant Admiral Nurse for Young Onset Dementia service
- Young Onset Dementia Advisors
- the Consultant Admiral Nurse for Frailty service
- the Chinese Welfare Trust clinic
- the Professional Footballers' Association (PFA) clinics
- prison clinics services
- dementia steering groups

Collected compelling data needed to make an impact in the media and in our campaigns. For example, the Policy, Campaigns and Public Affairs Team included Helpline and clinics data in its response to the Scottish Government's dementia strategy consultation – please see p48.

Produced reports on eight Admiral Nurse services hosted by organisations such as NHS Trusts. These included the West Wales annual report 2021-22; annual reports for two primary care services; and quarterly monitoring reports for five services. We also produced the learning disabilities Admiral Nurse service evaluation report 2020-22. These evaluations will help build the evidence base for Admiral Nursing and enable our nurses to demonstrate the impact of their role.

What we said we would do

Continue to gather data to help Dementia UK demonstrate the role of Admiral Nurses across various settings, including through the first ever National Admiral Nurse Census, carried out in March 2022 (see p38). We also said we would analyse and report evidence relating to Dementia UK's Admiral Nurse services and further develop tools to support with this, eg dashboard reporting.

What we did

Conducted, evaluated and reported on the above census. The results were shared with nurses, host organisations and throughout Dementia UK to highlight the uniqueness and complexity of Admiral Nurse roles across various settings.

Planned the next National Admiral Nurse Census for 2023. Using feedback from 2022, we have improved the survey tool and developed supporting resources to help nurses complete the census. We have also created an individual data summary tool to share with nurses to provide vital information about their service.

Improved the monitoring and evaluation dashboards for our Helpline and clinics. These are now updated monthly and shared with teams across the organisation, enabling them to easily see the data relating to their services such as the number of appointments and contacts.

Monitoring and evaluating Admiral Nurse services highlights their unique role and provides the information we need to best support the families we work with.

Collected feedback from carers accessing our Helpline and Closer to Home service (including virtual clinics) during 2022. We received 828 completed surveys about our Helpline and 379 on Closer to Home. These will be analysed and collated into an annual report for 2022-23 for each service.

What we said we would do

Ensure our nurses are supported with monitoring and evaluation of their services by launching a monitoring and evaluation handbook and an education module on our online learning platform. We also said we would continue to provide monitoring and evaluation advice, guidance and support.

What we did

Launched the evaluation and monitoring toolkit on our online learning platform in September 2022 and trained people in its use via a webinar. The toolkit, which includes our new monitoring and evaluation handbook, helps Admiral Nurses record and evaluate a range of data about the use of their services.

Supported Admiral Nurses with monitoring and evaluation advice, guidance and support throughout the year.

What we'll do next – our priorities for 2023-24

Ensure that our insights and evaluation work continues to effectively support Dementia UK's strategy. We will do this by supporting our Admiral Nurses and other colleagues across the organisation with monitoring and evaluation advice and guidance.

Develop suitable tools and methods for gathering, storing, analysing and sharing information and evidence. We will analyse and report evidence relating to Dementia UK's Admiral Nurse services (Helpline, clinics, Consultant Admiral Nurse specialisms and hosted services). Collecting feedback from families accessing our services and clinics will remain a key part of our work.

Complete our evaluation of our new Admiral Nurse Accelerator Learning Programme (please see p42) to inform and improve it going forward.

Continue to gather data to help Dementia UK demonstrate the role and impact of Admiral Nurses across various settings. This will include analysing and reporting on the 2023 Admiral Nurse Census and further developing the census for future years.

Spotlight

The National Admiral Nurse Census

In March 2022, we launched our first ever National Admiral Nurse Census, which we analysed and reported on in the year 2022-23. The aim was to shine a light on the Admiral Nursing role across our services – to prospective hosts and the general public.

We wanted to capture a snapshot of the work of Admiral Nurses to help us describe what they do, what the workforce is like, who they support, and how. We also wanted to use the census to track changes in and growth of Admiral Nursing over time.

In developing the census, we reviewed censuses used by other nursing workforces globally and data that was already routinely collected during evaluations; and sought the views of senior Admiral Nurses, Dementia UK senior management, and other colleagues across the organisation.

To support nurses in completing the census, we uploaded resources to support the data collection and recording to our online learning platform, which included an overview of and guide to the questions, tally sheets, and an information video.

Admiral Nurses received an email containing a link to the survey. They were asked to record all of their activity on Census Day, and were given two weeks to submit their data. Overall, we had a 77% return rate.

What we learnt

Admiral Nurses come from a variety of backgrounds – each bringing a unique set of skills and experience to their role.

- 65% are Registered Mental Health Nurses
- 38% are Adult Registered Nurses
- 4% are Learning Disabilities Registered Nurses
- Around 12% hold dual registration (eg Adult and Mental Health Registered Nurses)

On Census Day, 165 nurses told us that they collectively carried out an incredible 2,864 interventions during their appointments and contacts. Together, they supported:

- 624 primary carers
- 140 people living with dementia
- 107 other carers

The majority of contacts took place by phone (619), followed by face-to-face appointments (211) and video calls (22).

The most common reasons for contacts were emotional and psychological support; coping strategies; and increasing knowledge of dementia.

Admiral Nurses also play a vital role in providing advice, support, education and training to other health and social care professionals. On Census Day, 99 nurses delivered 244 activities to support other professionals, reaching up to 525 people.

How we will use the census results

We will use the results to share insights about and raise the profile of Admiral Nurses, including with potential host organisations to give them more information about their unique role.

Developing the National Admiral Nurse Census for 2023

Based on our experiences in 2022, we made a number of changes to the census for 2023, including:

- changing from a Census Day to Census Week – Admiral Nurses still recorded their activity for one day, but had the flexibility to choose the day that best represented their work
- streamlining the total number of sections and the flow of questions
- adding a question at the end of each section to record how long the nurse spent on each of the activities listed during their day. This will help us build a picture of how Admiral Nurses spend their time

To read a summary of the results of the National Admiral Nurse Census 2022, please visit **dementiauk.org/census-summary**

Penny's story

Penny's mum, Rosemary, was diagnosed with mixed dementia in 2016. Penny shares how the diagnosis has changed their lives.

My mum was always a happy, chatty and sociable person. She was a talented musician and a big part of the community – she helped organise the local music festival and was the musical director for many local productions.

I first noticed that something wasn't right when Mum started struggling to process information. She repeated things a lot and couldn't manage her diary. This went on for five years before she was diagnosed with mixed dementia in 2016.

> **"Being Mum's carer as well as her daughter was a big adjustment."**

Mum would call me constantly

Becoming Mum's carer as well as her daughter was a big adjustment. As her dementia progressed, she started asking where everyone was, emptying cupboards looking for food, and getting upset and confused. She would call me constantly. It typically happened in the late afternoon or evening, and I was always going back and forth from her house.

I called the Admiral Nurse Dementia Helpline for advice, and the specialist dementia nurse explained that Mum was experiencing 'sundowning' – a state of intense confusion and anxiety that typically happens around dusk. The advice the nurse gave me meant we were able to anticipate Mum's sundowning and try to occupy her with other things before she got caught up in it.

I wanted Mum to live at home for as long as possible, but it was getting more difficult to keep her safe. On one occasion, she was found on the street in her nightie. I knew it was time for Mum to go into a care home, but I really struggled with making that decision. Again, I phoned the Helpline – it was so helpful to speak to an Admiral Nurse who reassured me that it was the right thing to do and helped me to plan.

Our podcast won a gold award

I started the Discovering Dementia podcast with Mum when I realised that people are often isolated after getting a dementia diagnosis. Mum and I hoped the podcast would help other families in a similar situation to feel less alone. She was also very keen to reduce the stigma around dementia.

> **"Life doesn't have to stop after a dementia diagnosis."**

We are now working on our third series, and we even won a British Podcast Award – each time I tell Mum we won, it's like I'm telling her for the first time as she doesn't remember. She is still shocked and so happy every time I tell her, which is lovely to relive.

Life doesn't have to stop after a dementia diagnosis, and I can still spend time with Mum doing things we both enjoy – like going on a Dementia Adventure holiday together. I visit Mum in her care home every week and I do her hair, paint her nails and put her lipstick on. She still loves music and playing the piano; it keeps her mind active.

Living with dementia is a rollercoaster, but the Admiral Nurses have been a great emotional support. I've spent a lot of time crying on calls to the Helpline, and they always take time to understand my circumstances and give solutions, help and advice. I couldn't have coped without them.

You can listen to Rosemary and Penny's podcast at discoveringdementia.co.uk

Developing our Admiral Nurses

Our Admiral Nurse Academy supports our nurses to develop their knowledge, skills and professionalism so they can offer tailored, person-centred support to every family they work with. We also help other health and social care professionals grow their understanding of dementia.

What we said we would do

Build the Admiral Nurse Academy, considering the current education and learning needs of our nurses and the support we can offer to other health and social care professionals working with people affected by dementia.

What we did

Merged two teams – the Service Development Consultant Admiral Nurse Team and the Practice Development Team – to create a more streamlined training and development offer under the Admiral Nurse Academy umbrella. This will ensure that Admiral Nurses are supported to provide high-quality, evidence-based dementia services.

Developed new resources on our online learning platform. These covered topics including grief, loss and bereavement; a leadership course, with eight attendees going on to complete a bespoke course with the Florence Nightingale Foundation; and a course on presentation skills.

We saw increased activity from Admiral Nurses on our online learning platform throughout the year.

Provided regular online clinical supervision for Admiral Nurses, including through monthly Practice Action Learning Sets, where nurses connect with each other to share insights, best practice and support. These sessions are facilitated by Dementia UK clinical staff and support nurses with the practical and emotional challenges of their role, helping to prevent stress and burnout.

What we said we would do

Deliver our new Accelerator Learning Programme to enable current Registered Nurses (Adult, Mental Health and Learning Disability) to become Admiral Nurses and establish a new hosted service.

This is a 'blended learning' programme where nurses will spend 50% of their time studying, and 50% working within their employing organisation (eg NHS Trust) preparing to launch their service. In the first year of the programme, we aimed to recruit at least eight nurses.

What we did

Launched the programme in September 2022, with five monthly modules developed and built on our online learning platform. Throughout the programme, each nurse receives targeted support from an experienced Academy Lead Admiral Nurse to plan and launch their new service.

As of March 2023, five Registered Nurses had completed the course, converted their posts to Admiral Nurse roles, and launched their new services. One nurse is currently undertaking the course, and two more posts are in recruitment.

What we said we would do

Build our external offer of education and learning for health and social care professionals working with people with dementia and their families. We said we would continue to develop our Summer School and consider other ways to engage potential Admiral Nurses.

What we did

Welcomed record numbers of people to our free online Summer School over four days in July 2022 – 1,533 people attended in 2022, compared to 620 in 2021.

Summer School is open to all health and social care staff, including students and volunteers, who have an interest in supporting families living with dementia. Webinars and presentations are offered on a range of contemporary and relevant topics across dementia care and support.

Summer School received excellent feedback, and all presentations are available on the Dementia UK YouTube channel: **youtube.com/@DementiaUK1**

We also...

Held our annual online Admiral Nurse Forum in September 2022, enabling our nurses to meet, learn and share best practice. The keynote speakers were Kathryn Mannix, Consultant in Palliative Medicine at the Newcastle Hospitals NHS Trust and author of 'With the end in mind'; Siobhan O'Dwyer, Associate Professor of Social Care at Birmingham University; and Mark Radford, Deputy Chief Nursing Officer for England.

Summer School feedback

"Empowering, thought-provoking... Made me think about my own practice and approach."

"Excellent speakers, very engaging and inspirational. Lots for me to take back to share with [my] team."

"I have found this week incredibly enlightening and inspiring. I can't wait for next year."

What we'll do next – our priorities for 2023-24

Build on our induction offering for new Admiral Nurses when they start a role and launch a new service. We will develop a pathway consisting of an introduction to Admiral Nursing and six months' support with developing the service.

Increase Admiral Nurses' use of resources on our online learning platform. We will do this by evaluating what currently works well and what does not, and exploring opportunities to increase engagement.

Incorporate the lived experience of people with dementia and their families into the Admiral Nurse Academy and other Dementia UK activity. We will recruit a Lived Experience Coordinator to support our Lived Experience Advisory Panel (LEAP) and embed its work across Dementia UK.

Researching dementia support and care

Our Research and Publications Team is at the forefront of research into dementia care and support. This inspires best practice nationally and helps raise awareness of dementia and our organisation.

What we said we would do

Help Admiral Nurses turn more of their projects and activities into research that results in new evidence of how our services impact on positive outcomes for families.

What we did

Identified the need for a programme of educational materials for our Admiral Nurses to develop their research activity. We have subsequently developed new modules including 'How to undertake a literature review' and 'Understanding methods used in research'.

Conducted a survey to understand Admiral Nurses' specific learning needs around research and publication. We will use the results to develop materials on our online learning platform that will encourage and empower our nurses to become more confident about research, and to eventually conduct and publish their own research.

We are presenting the results of the survey at an upcoming nursing research conference and preparing a journal article for a peer-reviewed publication.

Worked with other teams across Dementia UK to support their various projects and studies, such as a thorough evaluation of the role of Admiral Nurses and their impact on families affected by dementia.

What we said we would do

Produce even more peer-reviewed publications to raise awareness of the activity of Admiral Nurses and evidence of best practice in dementia care and support.

What we did

Continued our important contribution to literature on dementia care and Admiral Nursing, with 48 publications in peer-reviewed journals including Nursing Older People, Nursing Times, and the Journal of Community Nursing.

We have also provided blogs, podcasts, webinars and media interviews for a variety of outlets, including a regular 'day in the life of an Admiral Nurse' feature for Nursing Times.

Worked internationally to research aspects of dementia care, for example by collaborating with the European Association for Palliative Care Taskforce to develop recommendations for advance care planning in dementia (due for publication later in 2023).

What we said we would do

Develop a research and clinical network to consider the needs of children of people diagnosed with young onset dementia, collaborating with other teams in Dementia UK.

What we did

This remains an ambition for Dementia UK. We welcome the appointment of our Consultant Admiral Nurse for Young Onset Dementia and now that she is in post, we hope to collaborate across teams to get this important work underway.

What we said we would do

Produce a second book, 'Working with dementia – what you really want to know', for professionals in the dementia field. This will build on the success of our first book, 'Living with dementia – what you really want to know', which was published in December 2022.

What we did

Commenced work on this book, which is on track to be published in December 2023.

What we said we would do

Develop a research plan for Dementia UK that focuses on commissioning the research needed to support our strategy for 2020-25.

What we did

Gained approval from our Trustees to develop the charity's first research strategy. Part of this development work involved a survey of Admiral Nurses to understand their learning needs and promote research-mindedness and research capacity. We will report on our work in developing the strategy through peer-reviewed journal articles and conference presentations.

We also...

Partnered with the University of Hull and a targeted patient and public involvement group to develop information for families affected by dementia when a mental health hospital admission is required.

We have published two open access peer-reviewed articles that include a content analysis of existing information and guidelines for NHS wards on what to include in their resources for families; and a Dementia UK leaflet for families.

Produced specific Research and Publications webpages to inform researchers and other professionals of our increasing presence in the dementia research world.

What we'll do next – our priorities for 2023-24

Extend our reach and influence into dementia care research by growing our team and partnering with researchers in the UK and overseas.

Launch Dementia UK's first research strategy in autumn 2023. We will identify and develop our top three research priorities for Admiral Nursing to grow the evidence base for our services.

We will also launch our series of Dementia UK research seminars in autumn 2023, aimed at health and social care professionals and dementia care researchers. The first seminar will be an introduction to our research strategy.

Develop a full range of educational materials to support Admiral Nurses' understanding of research and increase their knowledge and skills to undertake their own research projects.

Create a set of conversation cards to support families affected by dementia in important and sometimes difficult discussions. These cards have been commissioned by the publishers of our book, 'Living with dementia – what you really want to know' and will sit alongside it.

Campaigning for change

Our Policy, Campaigns and Public Affairs Team pushes tirelessly for urgent and lasting improvements in dementia care and support. We call on policymakers and politicians to ensure dementia features prominently in the local and national agenda.

What we said we would do

Lay the foundations for the delivery of Dementia UK's ambitious 10-year policy influencing strategy.

What we did

Appointed a new Head of Policy, Campaigns and Public Affairs in October 2022 to lead the delivery of our first ever policy influencing strategy. Since then, the team has set about delivering its plan to transform dementia care in the UK, agreeing our first-year priorities and putting in place the infrastructure to ensure that every family receives the specialist support it needs.

What we said we would do

Influence national and local policy regarding dementia care and support with politicians, officials and decision-makers through raising awareness of the needs of people living with dementia and the experiences of our Admiral Nurses.

What we did

Responded to national and local consultations to help shape policy that affects people living with dementia and their families.

These included:

- the Scottish Government's dementia strategy
- the Department of Health and Social Care's Hewitt Review into the accountability and governance of Integrated Care Systems for families affected by dementia. These are new partnerships between the NHS, local authorities and other partners to deliver joined-up health and social care services in local populations
- the London Borough of Richmond upon Thames Council's dementia strategy

Called on the UK Government to publish its long-awaited 10-year national dementia strategy for England. However, in January 2023 it was replaced by a new major conditions strategy. This includes dementia alongside cancer, cardiovascular conditions, chronic respiratory conditions, mental ill health and musculoskeletal conditions.

We welcome the inclusion of dementia in the strategy but will continue to push for it to be prioritised, with an emphasis on post-diagnostic support for people living with dementia.

Worked closely with the Department for Health and Social Care to provide feedback on its draft guidance to ensure it meets the needs of people with dementia, their families and carers. We also published our position on how the newly established Integrated Care Systems could benefit people affected by dementia by providing more joined-up health and social care; and highlighted the need for dementia care to receive greater focus, locally and nationally.

What we said we would do

Grow our parliamentary engagement and profile as the specialist dementia nursing charity.

What we did

Engaged with MPs on social care and the issues facing people with dementia, including before key debates. We were pleased to see the importance of Admiral Nursing referenced in questions to the Leader of the House, and our campaigning work was mentioned in a debate about guaranteeing care home visiting rights, including in a statement from the shadow Social Care Minister.

We also reached out to parliamentarians during our 'I live with dementia' brand campaign and received social media coverage from MPs during both phases of the campaign.

Secured Baroness Finlay, an expert in palliative medicine and member of the House of Lords, to speak at the Admiral Nurse Forum in September 2022. She shared her professional insights into the importance of understanding fluctuations in mental capacity in people with dementia and having discussions about advance care planning.

Provided evidence on the importance of Admiral Nurse support to the All Party Parliamentary Group's dementia report, 'Workforce matters: putting people affected by dementia at the heart of care'. Our evidence was included in the report and highlighted the impact of Admiral Nurses.

What we said we would do

Continue our 'Guiding the way' campaign for improvements in the application and assessment process for NHS continuing healthcare funding for families affected by dementia.

What we did

Drove our campaign forward, setting out our recommendations for making the continuing healthcare funding process work better for families affected by dementia. Over 10,000 people have viewed our campaign webpage; our information leaflet for families has been downloaded more than 20,000 times; and more than 6,000 people have ordered it in print.

Secured national media coverage in the Daily Mail, the Telegraph and the Independent highlighting some of the barriers to continuing healthcare faced by families affected by dementia. These include assessors ignoring or misunderstanding the variable impact of dementia on individuals and their families; a lack of support within the process; and a confrontational rather than supportive approach to assessment.

Held regular meetings with NHS England to raise issues around continuing healthcare shared by our supporters and themes emerging from our Helpline and clinics.

What we said we would do

Mobilise our Campaigns Network to ensure the voices of families affected by dementia are heard. This is a collaborative network of supporters and campaigners united in the belief that together, we can ensure that every family affected by dementia receives the life-changing support they deserve.

What we did

Focused on inspiring people to join our Campaigns Network. We also launched our first ever survey to understand the issues that matter to our Network members; the results of this will help us shape our future activities.

Asked our campaigners to share their issues surrounding hospital discharge and follow-up social care, which affect many people with dementia. Their responses, which we collected via an email form, have informed our contacts with MPs and helped shape our policy work.

What we'll do next – our priorities for 2023-24

Press for improvements in the health and care system for families affected by dementia. This will involve launching phase two of our 'Guiding the way' campaign, including conducting further research into the impact of current continuing healthcare guidance, and meeting with national statutory bodies about how the process could be improved.

Work with the Department for Health and Social Care to ensure the major conditions strategy benefits people living with dementia, their families and carers.

Campaign for improvements in access to dementia support for diverse communities, ensuring that unique barriers they face are recognised and understood by policymakers.

Increase Dementia UK's political profile and influence by setting out a manifesto of key recommendations for policy change and improvement before the next UK general election.

Grow our Campaigns Network to ensure that the voices of people affected by dementia, their families and other supporters are at the heart of all our campaigns.

Spreading the word

Our Marketing and Communications Team is dedicated to raising awareness of dementia and the role of Admiral Nurses, including through information resources, stories, videos, social media, emails and the press.

What we said we would do

Develop and oversee a campaign to increase awareness and knowledge of Dementia UK. We planned to launch the first phase in 2022; analyse and learn from it; and use our findings to inform the direction of a second phase in early 2023.

What we did

Launched our 'I live with dementia' campaign, which ran from April to June 2022. This hugely successful campaign included powerful stories and videos, bus shelter advertising, social media coverage, and media and PR activity.

We followed up with a second phase, from January to March 2023, based around our free 'Living with dementia' guide, which 39,000 people signed up to receive. For more information on our awareness campaign, please see p56.

What we said we would do

Update our communications – distilling the essence of what we do into a set of powerful messages – to encourage donations from individual supporters, companies and corporate partners. We planned to conduct in-depth interviews with family carers and work with external experts and internal stakeholders to develop these messages.

What we did

Gained tremendous insight into the public's awareness and perception of our work through research and focus groups. The result is a new 'brand book' which sets out how we communicate to ensure people understand the impact of dementia on families, the work of our Admiral Nurses and wider organisation, and the importance of fundraising and donations.

The book is used across the charity to ensure that our messages are always clear and consistent to everyone we are communicating with.

What we said we would do

Develop our website to make it more accessible and user-friendly, including investigating the possibility of having chat functionality.

What we did

Worked with an external agency and held workshops across our organisation to devise a plan for the redevelopment of our website to make it as straightforward, clear and easy to navigate as possible. Chatbot functionality was discussed and may be part of phase two of the project.

What we said we would do

Promote the work of Admiral Nurses to prospective candidates and host organisations by developing a suite of materials highlighting their life-changing work. We planned to do this through 'day in the life' films, articles, emails, blogs, social media, and trade press coverage.

What we did

Worked closely with Admiral Nurses to promote their work with the aim of attracting new host organisations and driving recruitment. We shared powerful stories of their support for families through thought leadership pieces, blogs, social media, 'day in the life' articles, news stories and features. We disseminated these through our own channels, traditional news and social media outlets.

What we said we would do

Develop a PR, celebrity and influencer strategy to drive forward our work in these areas.

What we did

Conducted a thorough review of current and potential Celebrity Ambassadors, identifying opportunities to reach different audiences, and developed a new Ambassador and influencer strategy.

Joined forces with three established Ambassadors – Adelle Tracey, Georgia Kousoulou and Naughty Boy – to promote our awareness campaign. We hosted virtual events and placed interviews with them in the press, including the Daily Mirror, Heat magazine, the Voice and the Sun. Their support helped to raise awareness of our Helpline, clinics and Admiral Nurses.

What we said we would do

Grow our suite of information resources by publishing six new leaflets and associated webpages on various aspects of living with dementia.

What we did

Published leaflets and webpages on:

- Medication management
- Changes in sexual behaviour
- Keeping safe as a carer
- Good hydration for people with dementia
- Frailty and dementia
- Genetic forms of dementia

We also published new leaflets specific to young onset dementia: please see p30 for details.

Created new webpages for each of the above topics, plus others including:

- Vascular dementia
- Blue Badge disabled parking
- Living aids and assistive technology
- Stages of dementia – early, middle, late

We also...

Launched our new TikTok channel in February 2023. We initially posted videos on:

- What is dementia?
- Five things you didn't know about Admiral Nurses
- Alzheimer's disease and dementia: are they the same?

We will continue to experiment with different types of content, including new and existing videos, and capitalise on trends such as graphics, animations, talking heads and employee stories.

As the fastest growing social media platform, we are utilising TikTok to increase brand awareness amongst younger and new

audiences. We are posting videos regularly, experimenting with content to see what works best for our followers.

Used World Alzheimer's Month in September 2022 to raise awareness of young onset dementia. This included releasing two films (please see p56), securing national media coverage and creating our first young onset dementia-specific email.

Our social media growth in 2022-23

Facebook: **112,711: up 22.4%**

Instagram: **42,712: up 23.53%**

Twitter: **115,724: up 2.42%**

LinkedIn: **40,361: up 30.53%**

What we'll do next – our priorities for 2023-24

Develop and oversee phase three of our campaign to increase awareness and knowledge of Dementia UK and Admiral Nurses. We will build on what we have achieved so far to grow our profile so more people are aware of our charity and our work.

Deliver activity that ensures Dementia UK is visible to those who need our support, creating and harnessing key communication moments across the year such as World Alzheimer's Month.

Deliver innovative, high-standard digital activity, and capitalise on new technology and technological trends to reach particular audiences in the way that best suits them. We will continue to develop our website with a focus on modernising the look and feel along with improving accessibility; we expect this to be completed in autumn 2023.

Review our current digital offering to ensure it meets the needs of our audiences. We will make the most of opportunities to collaborate and innovate within the organisation to hit our wider strategic goals, for example by delivering an email strategy that engages our supporters and encourages them to donate to or fundraise for Dementia UK.

Implement our social media strategy. We will continue to develop content and grow our follower numbers on TikTok and the Young Dementia Network's LinkedIn so we can reach professionals, raise awareness of young onset dementia and ensure our messages target the right people.

Continue to promote the work of Admiral Nurses to drive recruitment and inspire more organisations to host our nurses within their services.

Develop and deliver our PR, celebrity and influencer strategy, driving our work forward in these important awareness-raising areas.

Help foster a culture of equity, diversity and inclusion (EDI) within the charity and to our external audiences. We will ensure our team is represented in the EDI working group, and review our information, marketing and media material to ensure they are diverse and inclusive.

Spotlight

‘I live with dementia’ – our awareness campaign

In April 2022, we launched our national awareness campaign, ‘I live with dementia’. Claire Sandham, Dementia UK's Marketing and Brand Lead, explains what we have achieved so far and our plans for the next phase.

‘I live with dementia’ is the charity’s largest awareness campaign to date. It focuses on the message, ‘If you love someone living with dementia, you’re living with it too’. We wanted to show how dementia impacts family and friends – not just the person with the diagnosis.

We identified the need for this campaign because while there is high awareness of Dementia UK amongst the public, there is low understanding of our work as a charity and the specialist support provided by Admiral Nurses.

Phase one

The first phase of our campaign reached millions of people through bus shelter advertising, social media, and media and PR activity that highlighted the challenges faced by family carers. We were also fortunate to be given advertising space on BT's Street Hubs so our message reached high streets across the UK. The creative direction was informed directly by people living with dementia and their families. It included a powerful film featuring three carers talking about their unique experiences, which won silver in the Smiley Charity Film Awards 2023.

During the first phase, 8,855 people signed up to receive further support. We saw:

- an uplift in contacts to our Helpline and virtual clinics
- an overall increase in people searching for ‘Dementia UK’ online
- a 5.9% uplift in one-off donations made via the Dementia UK website compared to the same period the year before

Phase two

The first phase of our awareness campaign showed us that our campaign idea resonated, and that there was demand for information about our specialist dementia nurses. We built on this for phase two, which centred on a new ‘Living with dementia’ guide featuring advice and life hacks from Admiral Nurses, people living with dementia and their families.

We also produced a second series of films, again focusing on the experiences of carers, and made use of a bigger range of channels, such as connected TV and radio advertising to promote the guide, along with further BT Street Hub advertising.

The compelling stories we shared locally and nationally resulted in 39,000 people signing up to receive the guide and associated series of emails – more than double what we expected.

If you love someone living with dementia, you’re living with it too.

Dementia affects everyone in the family.
Our specialist nurses can help all of
you live better with dementia.

Scan me

dementiauk.org/together
#ILiveWithDementia

DementiaUK
Helping families face dementia

Brand campaign feedback

“You’ve hit the nail on the head with this campaign because, yes, I’m living with dementia too. My whole family is as well.”

“A powerful and hugely relatable video… Admiral Nurses have been a great help and lifeline for our family – thank you. This campaign will resonate with many people and help raise awareness of your amazing charity.”

What’s next?

We are now planning phase three of our brand campaign. We will work with more families to generate authentic content that reflects what it means to ‘live with dementia too’ and build on our work to raise further awareness of our life-changing support.

You can watch our films at:

- “I live with dementia” (phase one): **youtube.com/watch?v=OfU6zyDuViE**
- “When’s Nana going to get better?” (phase two): **youtu.be/yXXdNCqGNko**
- “We’ll do it together” (phase two): **youtu.be/ofMBqLHnDbw**
- “I’m glad you called” (phase two): **youtu.be/VKZvaWTj7Uo**

Paul's story

Paul's dad, Mick, lives in Spain, where he was diagnosed with vascular and Lewy body dementia. Paul shares how he is impacted by his dad's dementia, despite not being in the same country.

My dad's dementia has affected me in more ways than I could have imagined. I think about all the things he is going to miss out on in the future. There have been days when I have just cried because I want my dad back. Even though he is still here, he isn't the person he was. I feel like I've forgotten how to laugh.

Mum and Dad moved to Spain three years ago, and that's where he received his dementia diagnosis. He often forgets that I don't live in the same country as him. He sometimes asks me to bring him a bag of chips. I try to joke with him by saying that they will be cold by the time I get there. It's really difficult to know whether to keep reminding him that I'm not in Spain or to just go along with his version of reality.

Some days, it feels easier being far away, but other days are so difficult. Before Dad moved into a care home, my phone lived next to my bed at night just in case he called. But if he's in a bad mood, it's impossible to have a conversation with him on the phone and that's the only opportunity I have to speak to him. I worry about Mum too; I would love to be closer so I could support her more.

"I feel I've forgotten how to laugh."

I felt so overwhelmed and worried

Things got on top of me one day at work. I felt like I was in a fishbowl – I had never known anxiety like it before. I had to tell my manager that it wasn't safe for me to be at work. I got in my car and left, and I honestly don't remember the drive home – I was on autopilot. I realise now that I'd had an anxiety attack because I felt so overwhelmed and worried about Dad.

I don't usually show my emotions, but I knew I needed some support. I researched Dementia UK and came across the Helpline. I plucked up the courage to make the call and spoke to Mark, a dementia specialist Admiral Nurse.

Speaking to Mark, I felt like a weight had been lifted off my shoulders. As much as you can talk to your friends and family, there is a huge benefit to talking to a specialist dementia nurse. Mark truly understood what we were going through and how to help. He reassured me that I was doing a good job.

It takes courage to admit that you are struggling. I find it difficult to open up about my feelings which I think is common amongst men, but it's okay to need help. Making that initial call to the Helpline was scary but I now know I have someone to fall back on and know Dementia UK is there to catch me when I fall. Sometimes you just need someone to listen.

"It takes courage to admit you're struggling."

Celebrating donations, gifts and pledges

We rely entirely on voluntary donations to grow the number of Admiral Nurses. Every penny donated by our generous supporters helps ensure that families do not have to face dementia alone.

What we said we would do

Continue to invest in donor acquisition and retention, securing and delivering one-off donations, regular gifts and donations made in memory.

What we did

Ensured that our existing supporters had as many opportunities as possible to help fund our work. These included our summer and Christmas fundraising appeals via direct mail, email and social media.

Inspired new supporters to join us through payroll giving, birthday donations and our campaigns on Facebook. We also piloted a digital advertising campaign on Facebook, recruiting new supporters who agree with our vision of specialist dementia care for every family that needs it.

Increased our number of regular givers by 30% on the previous year. Regular giving is crucial to the success of our charity, helping us plan for the growth of Admiral Nursing services in the short- and long-term. We are so grateful to every single person who has made a regular gift despite the cost-of-living crisis.

What we said we would do

Develop and deliver timely, relevant and engaging communications to inspire both existing and new supporters to donate to Dementia UK.

What we did

Showcased the difference that our supporters' generosity makes in the two 'Closer to you' magazines we published during the year. We featured stories from families, supporter inspiration and useful dementia information while encouraging readers to make a gift.

Ensured, through our well-planned communications, that everyone who donated to us was thanked for their commitment and generosity. This included clearly showing how supporters' money makes a difference to families affected by dementia.

Based every fundraising appeal on compelling stories from families and Admiral Nurses. These stories are crucial in helping supporters feel directly connected to the people they and we help.

Participated in a mystery shopping activity to check the quality and effectiveness of our processes and communications to ensure we always listen to our supporters and respond to them efficiently and respectfully. Interim results showed that the majority of our contact was rated positively.

What we said we would do

Continue to raise awareness of gifts in Wills as part of the long-term sustainability of our income.

What we did

Promoted how people could leave gifts in Wills to support Dementia UK. We did this via direct mail, email, inserts, digital advertising, Facebook adverts and Remember a Charity Week. This activity contributed to us increasing the number of people pledging a gift in their Will by 56% on the previous year.

Redesigned our Gifts in Wills guide and other supporting materials to powerfully highlight how legacies of all sizes can help people affected by dementia now and in the future. We demonstrated the impact of these gifts through stories from families receiving our support and people who have made a gift in their Will to Dementia UK.

Developed our first Dementia UK gifts in Wills radio advert. It featured the story of a family who made the decision to leave a gift after receiving support from an Admiral Nurse.

Held our first gifts in Wills supporter event at the Garden Museum, London. We invited regular givers and supporters who had expressed an interest in making a Will to celebrate what we have achieved because of gifts already received, and to encourage people to make this generous choice.

We also...

Developed our Memory Wall: an online space where supporters can share memories of loved ones. Over 1,900 people have made dedications, with the no-obligation opportunity to make a donation if they wish.

What we'll do next – our priorities for 2023-24

Continue to provide new and existing supporters with opportunities to donate through a variety of fundraising activities. These include appeals, single donations, regular gifts, donations made in memory and our new Weekly Lottery (launched February 2023).

Build deeper engagement with supporters to make them feel more involved in our work, inspiring their loyalty and long-term relationships. We will gather insights from surveys, mystery shopping and focus groups to ensure we make a powerful case for our supporters to donate.

Continue to raise awareness of the value of gifts in Wills through a variety of activities including legacy marketing, events for current and prospective supporters, and ensuring all Dementia UK staff and Admiral Nurses are able to articulate the importance of gifts in Wills.

Powerful partnerships

We highly value our major supporters and partners, whose generosity plays a vital part in helping us grow our Admiral Nursing services.

What we said we would do

Support our Development Group with its fundraising appeal to fund 30 new Admiral Nurses by 2024. This is a group of seven people who use their contacts and networks to help raise funds to increase the number of Admiral Nurses.

What we did

Raised nearly enough to fund seven new Admiral Nurses by working with and supporting the Development Group throughout the year. The group organised a series of fundraising events including a coast-to-coast walk, private dinners and a horse racing day, and helped us secure new corporate partnerships and personal donations.

What we said we would do

Raise the funds needed to support new Admiral Nurse services across the UK by securing new partnerships and funding from major supporters.

What we did

Submitted applications for funding to trusts and foundations across the UK to support our work. Our successful applications included the Calleva Foundation, which has generously agreed to fund two new Helpline Admiral Nurses per year during our three-year partnership; and the Moondance Foundation, which is contributing to funding our work in Wales.

Launched a new partnership with Everyone Active. The sports and leisure chain is fundraising across its 200 UK centres and has promoted our 'I live with dementia' campaign through screens in gyms. It is also raising awareness of the positive difference exercise can make to people with dementia and making its centres more dementia-inclusive.

Secured new national corporate partnerships with Artemis Investment Management, Briggs Equipment UK, Next, Venator, Westerleigh Group and Wolseley UK Ltd.

What we said we would do

Build strategic and mutually beneficial partnerships with our national corporate supporters.

What we did

Continued our partnerships with some of our highly valued corporate national supporters.

- Leeds Building Society has donated an amazing £635,513 since 2020, raised through colleague fundraising and match-funded by the Society and member donations, such as 'Your Interest in Theirs' (a scheme where members donate the pence interest on their savings accounts) as well as donations linked to savings bonds. As mentioned previously, we have taken our partnership to the next level by offering free dementia clinics in Leeds Building Society branches through our collaborative Closer to Home project (please see p26 for more information)
- Our longest standing and highest value partnership with Central Co-op, which began in 2017, has been extended with the aim of reaching the incredible fundraising milestone of £2m
- Thames Water raised £148,000 during our partnership and we are continuing to work together to raise awareness of its Priority Services Register, which provides extra support to vulnerable customers, including families affected by dementia
- Zurich Community Trust and Tokio Marine HCC have also agreed to continue their partnerships with us in 2023, and we are truly grateful for their ongoing support

Developed our Dementia at Work programme which offers our partners education and access to specialist support from Admiral Nurses for staff and customers who are facing the challenges of dementia – please see p66 for more information.

What we said we would do

Engage our high value supporters more closely.

What we did

Provided opportunities for our high value supporters to meet key Dementia UK staff, including our Chief Admiral Nurse/CEO. These included private dinners, one-to-one meetings with supporters, and celebratory events with our larger partners such as Leeds Building Society. We personally thanked them for their generosity and shared more information about other ways to work with us.

We also...

Welcomed over 400 supporters for our Christmas carol concert at St George's Church, London, organised by a dedicated committee of volunteers. We are so grateful for their support in continuing to create this very special event for Dementia UK.

What we'll do next – our priorities for 2023-24

Present compelling reasons to support us that clearly show the impact of major giving. We will make sure that all our supporters are recognised and thanked for their gifts and feel an important part of the Dementia UK family.

Increase the number of individuals and organisations making high value gifts. We will use events such as a reception at the House of Commons as opportunities to introduce new contacts to Dementia UK and develop innovative and creative ways to connect with supporters and prospects.

We will also encourage our existing supporters to introduce their like-minded contacts to us, providing them with the information they need to do so.

Nurture meaningful relationships with our partners and high value supporters. We will communicate with them in person, by telephone or by email, according to their preference, to keep them up to date with our plans, successes, and the amazing things they have made possible.

Work closely with our colleagues to identify where funding from high value supporters could make the most difference to Dementia UK and the families we support, allowing us to demonstrate to current and potential partners and donors the impact their generous donations could have.

Spotlight

Our Dementia at Work programme

We are committed to providing expert training and advice to businesses so they can better support employees and customers who are affected by dementia. Admiral Nurses Pam Kehoe and Vic Lyons head up our Dementia at Work programme.

Dementia has a significant impact on workplaces throughout the UK. Statistics show that 15% of people who care for a person with dementia are not in work because of their caring responsibilities, and 17% of female carers have felt penalised at work. In addition, many of the 70,800 people in the UK with young onset dementia are still in employment themselves.

At Dementia UK, we recognise the impact that dementia can have in the workplace. Our Dementia at Work programme forms an important part of the charity's strategy.

Through our programme, we provide support and guidance to employers and employees. This aims to help them better understand and manage the challenges of dementia, improving the experiences of work for people living with the condition and their family carers; and to support them in creating dementia-inclusive workplaces.

Dementia UK also offers advice and support to employees with dementia who want to continue working, including by developing new information resources; and to family carers who may need to request reasonable adjustments to balance their work and caring responsibilities.

Through the Dementia at Work programme, we aim to promote understanding in the workplace, reduce stigma, and improve quality of life for people affected by dementia.

In the past year, we have delivered 63 Dementia at Work sessions in workplaces, with 2,404 people attending our talks. This included offering support to 12 of our major partners, with 42 corporate sessions delivered. We have also signposted a number of organisations to other Admiral Nurse teams or wider Dementia UK teams for further information and support.

Our plans for the future

As our Dementia at Work programme grows, we plan to deliver our training in more workplaces, including smaller businesses, and run online masterclasses. We will also create a downloadable Dementia at Work guide for people living with dementia, their carers and employers, and develop other new resources, including leaflets and videos, for our website.

What people have told us

"My mother has vascular dementia. The session helped by giving me the tools to care for her... Many thanks."

"[An] excellent session: the speaker was very knowledgeable and I found the whole thing really useful and informative."

"[A] fantastic presentation, very informative, interactive, and [the Admiral Nurse's] wealth of knowledge was exceptional. The advice and support she offered to the group was hugely appreciated by all."

Our winning team

Our community, virtual and challenge events supporters are enthusiastic, innovative and passionate about helping people affected by dementia. Their fundraising makes an incredible difference to the families we support.

What we said we would do

Invest in and expand our community fundraising over the next three years, focusing on building a number of regional corporate supporters.

What we did

Raised more money than ever before to help people affected by dementia through our community fundraising. We closed the year up 15% on 2021-22.

Worked with regional companies ranging from retail to construction. Our relationships with regional corporates include charity of the year partnerships and one-off events. We welcomed many new partners during the year, including Mira Showers, P&A Group and Parklane Foundation.

What we said we would do

Improve our Volunteer Ambassador programme and grow the number of Volunteer Ambassadors to 25 per region by the end of 2022-23, with an aim of having a total of 150 by the end of 2023.

Volunteer Ambassadors are an important part of our Dementia UK family. They work alongside our Regional Fundraising Team to support people raising money locally. They attend events, hold talks, help identify fundraising opportunities and raise awareness of Admiral Nurses.

What we did

Attracted 34 new Volunteer Ambassadors, bringing the total number to 101.

What we said we would do

Continue to diversify and grow our challenge events portfolio.

What we did

Inspired people to support us across 13 events including sponsored runs, swims, treks and cycle rides. We added two new events to our portfolio in 2022-23, leading to our supporters raising 28% more than in 2021-22.

Filled all our places in the London Marathon, Great North Run and London Landmarks Half Marathon, with many people on the waiting list.

What we said we would do

Grow the volume and value of our 'do it yourself' (DIY) challenge events programme.

What we did

Appointed a new team member to manage DIY fundraising activities and encourage and support the wonderful people who participate in them. Our Skydive Day and Ultra Challenge events (endurance events across a range of distances) were especially popular.

What we said we would do

Deliver a successful Facebook challenge programme to grow supporter numbers and drive fundraising income.

What we did

Organised eight virtual fundraising challenge events through our new Virtual Events Team. These centred around Facebook and included our Walk 30 Miles in September Challenge and March Dog Walking Challenge. We developed a testing process gauging interest in challenges ranging from knitting to badminton, which gave us valuable insights into what galvanises virtual audiences to support us.

What we said we would do

Embed a culture of innovation within the restructured Community, Events and Innovation Team to continually test, develop and learn from new fundraising propositions that engage audiences and deliver income.

What we did

Appointed a Senior Innovation and Products Manager – we now have a small team dedicated to this key area.

Tested our Virtual Lapland Dash on a small scale. This was a ready-made, family-oriented challenge which involved participants covering 10km throughout December, charting their milestones online and retrieving virtual items along the way to meet Santa at his workshop. It generated good interest and we plan to expand it in 2023.

Started research to gain an even better understanding of our existing and potential supporters so that we can develop new ways for them to fundraise for us in the most meaningful ways possible.

What we'll do next – our priorities for 2023-24

Continue to run our most successful fundraising challenges and events, including Facebook challenges, and increase the number of people who take part in them. We will focus on DIY challenges and those involving local organisations and regional corporates. We will also work hard to ensure our fundraisers feel valued and continue to support us.

Increase the number of Volunteer Ambassadors to 150 and make sure we retain them by providing regular training and opportunities for involvement in our speaker network and engagements.

Ensure that the people who support us through challenge events – such as the London Marathon – and DIY challenges feel valued and continue to fundraise for families affected by dementia. We will also advertise a wider range of challenge events regionally.

Test and develop innovative ways of mobilising supporters including through Stream for Dementia UK, where our supporters raise funds by livestreaming online. Streams may include gaming, baking, exercise, music, dance and quizzes, and are a powerful way to engage younger audiences. We hope to recruit 125 content creators to Stream for Dementia UK.

Listening and responding

We are truly grateful for the generosity and commitment of our supporters and aim to cultivate relationships that make them feel valued. Listening to their concerns and addressing them swiftly is vital in ensuring their continued support as well as building our reputation as a charity that appreciates and respects its supporters.

As members of the Chartered Institute of Fundraising and the Fundraising Regulator, we adhere to the Code of Fundraising Practice and are committed to the Fundraising Promise. There were no instances of non-compliance with the Code this year.

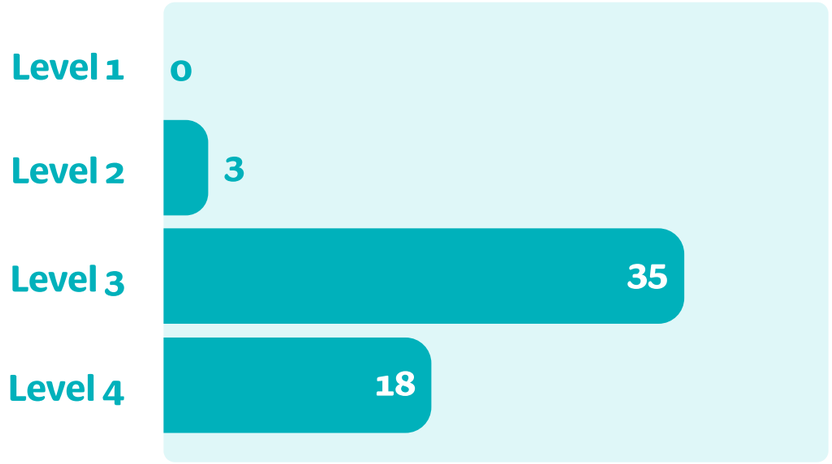
Resolving complaints

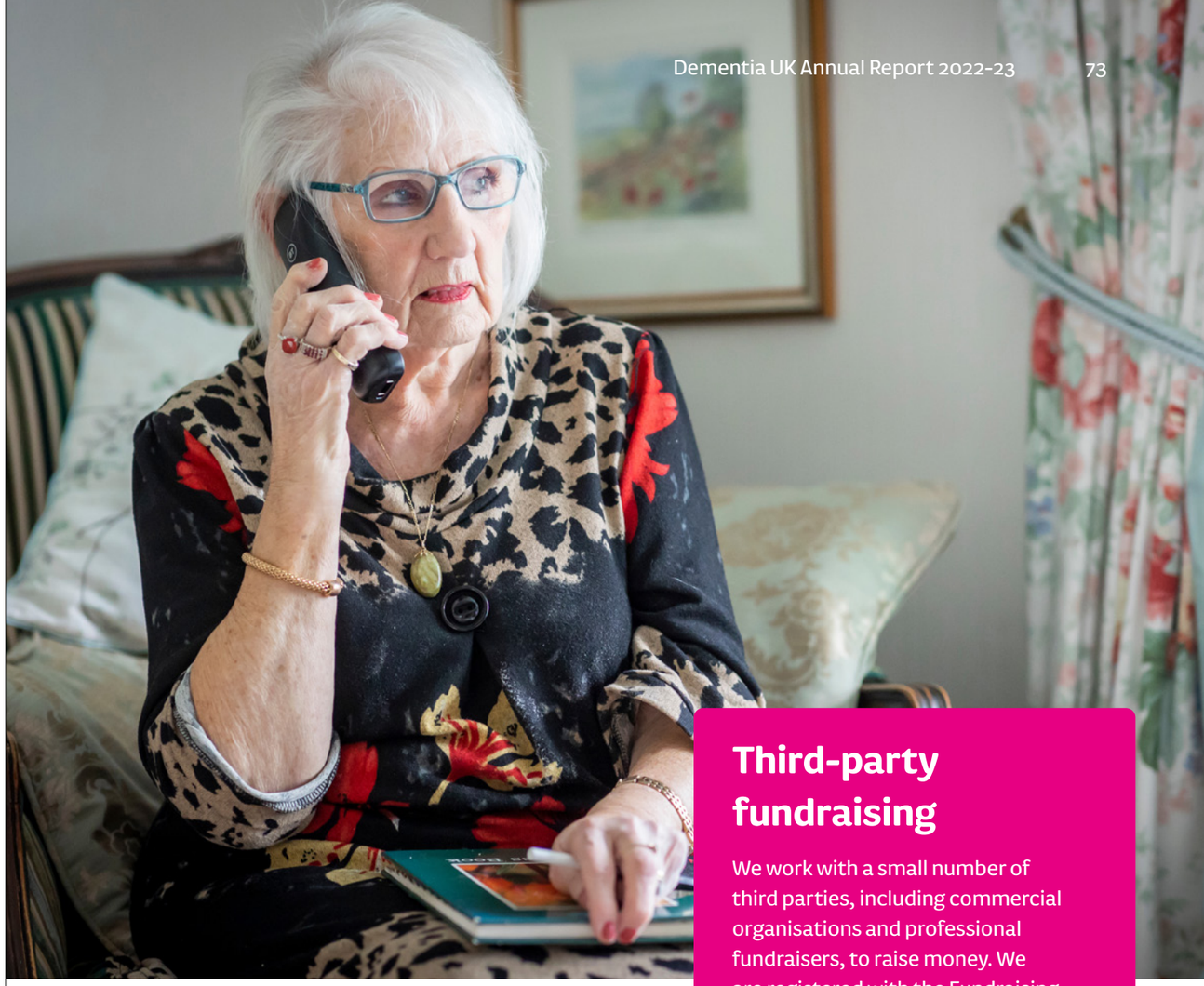
We make it easy for people to contact us with their complaints and are committed to putting each one right. Complaints can be registered by phone, email, post or an online form.

All complaints are forwarded to the Dementia UK Supporter Care Team. Depending on the severity, they may be escalated to more senior members of staff. We involve each supporter in resolving their complaint and record the process and resolution on our database.

In 2022-23, we received 56 general complaints. This was lower than the 286 complaints we recorded in 2021-22, although 242 of those related to a single one-off issue. Taking those out, the number of complaints rose from 44, which is in line with our significantly increased activity during the year. Our overall volume of complaints remains low for a charity of our size.

Our complaints are classified according to four levels – level one being the most serious, and level four the least.





Protecting data

We take data protection seriously and ensure we comply with all regulations in this area. We only process information where we have a legal basis to do so. All staff are required to complete yearly data protection training and this is built into our induction process.

Our internal policies governing data use are reviewed regularly and updated where necessary. New policies are implemented on an ongoing basis to reflect our evolving fundraising programme.

Our up-to-date privacy policy is available on our website, and we ensure that all supporters know how to view this. We also clearly communicate to our supporters that they can change how they hear from us at any time.

Third-party fundraising

We work with a small number of third parties, including commercial organisations and professional fundraisers, to raise money. We are registered with the Fundraising Regulator and there were no compliance issues meeting the Code of Fundraising Practice, Section 8: Professional fundraisers, commercial participators and partners.

We closely monitor all third parties, including compliance reviews of all contracts; regular review meetings; and conducting call listening. We deliver training and support to professional fundraisers, including outlining how to recognise and protect vulnerable people and adhere to our vulnerable people policy. In 2022-23 we received three complaints about contact from these third parties, all of which were resolved.

Looking after our people

Our People Team plays a vital role in supporting Dementia UK staff across the organisation and making our charity a positive place to work.

What we said we would do

Develop our equity, diversity and inclusion (EDI) programme, ensuring we have an inclusive culture focused on equity of opportunity for all our staff, and supporting diverse communities.

What we did

Established an internal EDI working group, made up of staff from across the charity who represent our diverse workforce. This group focuses on activity that supports all our staff to feel that they can be their authentic selves at work, regardless of their personal circumstances.

Reviewed our current practices through a full audit of our EDI work, exploring how we can achieve more impactful outcomes in this area for our staff.

Developed a clear work plan to support our staff. This involves new initiatives supporting carers, women in the workplace, colleagues of different ethnic backgrounds, and transgender colleagues with our new 'Transitioning in the workplace' guidance. We have also signed up to be a 'Menopause Friendly' and 'Disability Confident' employer.

Implemented updated language usage guidance and included this within our new people system to better capture and understand the diverse make-up of our staff.

What we said we would do

Develop the capacity, capability and systems within the People Team to ensure we are equipped to support our growing workforce, now and in the future.

What we did

Created a new position of Director of People and Organisational Development to sit at Executive Director level. The role represents this key component of Dementia UK at Board of Trustees level.

Increased the People Team to better support our managers and staff, particularly regarding supporting fair and equitable recruitment and learning and development activity.

This includes developing our staff members' technical, management and soft skills (such as coaching and negotiating skills) and will lead to a culture shift towards being a learning organisation, which in turn improves innovation and productivity. This will ultimately mean we can better support families affected by dementia.

Implemented a new people system which amongst other things will help us collect more and better data about our staff so we can improve our understanding of their needs.

Supported the implementation of new policies and procedures in relation to our hybrid and remote working practices. This combines the convenience and flexibility of homeworking for our staff while also ensuring vital face-to-face contact between colleagues.

What we said we would do

Develop our employee learning and development opportunities, ensuring equity of access for all and maintaining high standards of knowledge across the organisation in areas that will enable us to meet and exceed our ambitious goals as a charity.

What we did

Introduced a new e-learning platform. This gives staff access to 97 courses, of which five are mandatory:

- Equality, diversity and inclusion
- Safeguarding
- Health and safety
- Whistleblowing
- Bullying and harassment (for managers)

Launched our first full programme of courses designed to meet the learning needs of our staff, based on data from discussions with managers across the charity. This gives all staff access to learning opportunities that support their personal and career development objectives. In turn, it allows Dementia UK to utilise staff with the right skills and knowledge in the right places at all times.

Reviewed our contracts of employment and other contractual arrangements, for example with volunteers, consultants, contractors and honorary researchers, to ensure that we remain compliant with law and best practice principles.

What we'll do next – our priorities for 2023-24

Launch our new online recruitment platform and careers pages on our website to help us to reach a wider audience and communicate why Dementia UK is the employer of choice in the charity sector.

Create and launch our EDI policies and strategy. These will give clear direction regarding our commitment to inclusive mindsets, not just internally but across all that we do.

Review our volunteering model and engage hundreds of people to volunteer their time and become advocates for our much-needed work.

Running our organisation well

The behind-the-scenes efforts of our Finance, Governance and Information Technology (IT) Teams keep Dementia UK running smoothly and responsibly.

What we said we would do

Increase resources in the Governance Team by recruiting new team members and providing tools to ensure that the whole charity can function to its full potential.

What we did

Reorganised and increased the resources in the Governance Team to further the charity's compliance with the law and relevant regulations. This will enable the department to develop high standards of governance with a greater emphasis on reporting and controls; and building a culture of strong risk management throughout Dementia UK. This new structure will be in place in the first half of the 2023-24 financial year.

What we said we would do

Explore more automative recording and reporting functionality across the charity. The reporting would focus initially on progress against our 2020-25 strategy.

What we did

Simplified the recording of risks and safeguarding incidents received through our clinical services. This has significantly reduced the administrative load on our employees.

What we said we would do

Develop the integration of our policy compliance platform across the charity by merging the platform with Microsoft Teams. This would allow staff to benefit fully from the policy, learning and compliance tools and materials available.

What we did

Updated our IT infrastructure and cloud-based functionality to connect our policy compliance platform to our Microsoft Teams platform. The next stage is to work with our policy compliance platform providers to give our staff a single sign-in experience with Teams, allowing easy access to our policies and learning.

What we said we would do

Review and enhance processes across the charity so that risks can be rapidly identified and actions put in place to prevent and manage these appropriately. This makes risk management a live, cyclical process with increased transparency to all levels of employees.

What we did

Implemented an online risk portal to register and record data about events and activities that could have a negative effect on our

organisation's ability to help people and families experiencing dementia. Possible risk areas include issues with clinical service delivery; and corporate and human resource issues affecting our strategic plans.

The board retains overall responsibility for risk management and discusses and decides the level of risk it is prepared to accept for specific and combined risks.

What we said we would do

Introduce multi-factor authentication for all staff to improve digital security and the use of Microsoft 365 resources including Office, Teams, and SharePoint.

What we did

Improved digital security across our whole charity by introducing multi-factor authentication. This means that to log into our IT systems, employees have to verify their identity via an app or text message. This is an additional layer of security on top of password protection, and ensures our data and organisation are protected from potential cyber attacks and misuse by unknown third parties.

Introduced training and guidance to govern the use of Microsoft systems for all employees. The efficient and secure running of Dementia UK depends on our employees' knowledge of Microsoft 365, appropriate access to information, and understanding of when data can be shared externally.

We also...

Registered the charity for VAT, ensuring that we are fully up to date and compliant with charity VAT requirements. This included a comprehensive review of all business and non-business activity in the charity and consideration of VAT recovery available to the charity. Our finance system has been updated for VAT and digital tax processing.

Introduced ethical fixed asset investments in the charity to ensure our income is protected from the long-term adverse effects of inflation.

Improved our internal financial controls and processes by introducing and improving several policies and procedures. This included a new supplier approval process; an improved journal approval process; and regular balance sheet reconciliations. We continuously review our systems and controls to ensure robustness, efficiency and adequate segregation of duties.

Serious incidents

We responded appropriately to one serious incident during the financial year. The incident was met with a joint response from across the charity to ensure a full and transparent investigation was carried out, and the regulatory bodies were made aware as appropriate. We have ensured we have taken lessons from this incident and have strengthened our internal controls and processes accordingly.

What we'll do next – our priorities for 2023-24

Introduce:

- a rolling programme of internal audits to strengthen internal controls; enhance efficiencies; increase compliance; and manage risks effectively
- a security information and event management (SIEM) solution which will enable the charity to detect, analyse and respond to security threats before they can cause harm
- contract and service management to optimise our software licences and data storage, enabling reduced support costs and greater efficiency

Improve:

- Dementia UK's business continuity model to ensure the charity continues to remain operational in the event of disruptions, and outline steps to take during and after unexpected disruptions
- policy management, processes and internal controls including introduction of new policies where appropriate
- risk management processes throughout Dementia UK by strengthening our information governance processes and updating our information asset register

Achieve:

- Cyber Essentials Plus accreditation to provide assurance to our customers and partners that Dementia UK is cyber secure
- automation of routine finance processes by making process improvements to the current finance system; integrating systems; and streamlining finance processes and controls as the charity continues to grow

Review:

- governance procedures to monitor their effectiveness so that improvements or gaps in information handling standards can be recognised and addressed
- cash flow forecasting to provide reasonable understanding of short-term and long-term working capital requirements
- compliance with General Data Protection Regulation (GDPR) and data protection to ensure personal data is processed in a safe and secure way

Financial review

The Trustees present their report and audited consolidated financial statements for the year ended 31st March 2023.

All Trustees are also Directors for the purpose of company law, and the Trustees' Report represents the Directors' Report required by Section 417 of the Companies Act 2006.

Objectives and activities for public benefit

The Trustees confirm that they have referred to the Charity Commission's guidance on public benefit when reviewing the aims and objectives in planning future activities.

Financial review

The financial statements have been prepared in accordance with applicable Accounting Standards, current statutory requirements, the requirements of the Statement of Recommended Practice (SORP), Accounting and Reporting by Charities (SORP 2015), and the charity's governing document.

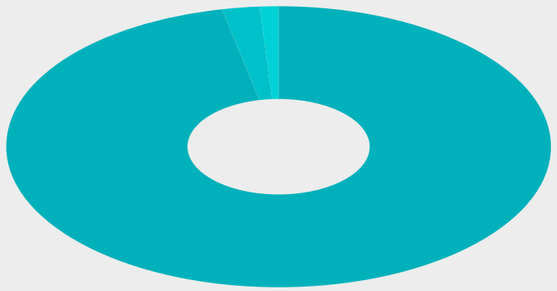
Income and expenditure

Our income this year increased by £2.3m to £19.4m in 2023 (2022: £17.1m). Our total expenditure was £17.7m (2022: £15.1m), giving a net surplus for reinvestment of £1.7m (2021: £2m).

Our net assets totalled £15.1m (2022: £13.4m) with net current assets of £14.2m (2022: £14.6m). The liquid cash balance (accessible within one year) was £16.0m (2022: £15.6m).

Finally, the Trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. This is based on a detailed budget and cash flow projections for 2023-24.

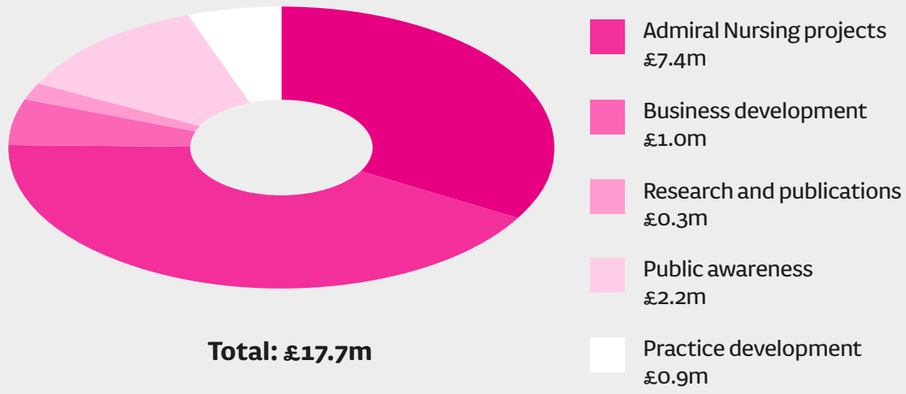
Income



*Numbers rounded

Total: £19.4m

Expenditure



Total: £17.7m

*Numbers rounded

Structure, governance and management

Board of Trustees

The Board of Trustees is the governing body that administers the charity. All major decisions are made by the Board, which meets at least four times a year to discuss and formulate policy and strategic direction.

The Trustees of the charity are also the Directors of the company for the purpose of company law, and any reference to Trustees is therefore also to Directors. None of the Trustees has a beneficial interest in the company, and the charitable company held third-party indemnity insurance on behalf of the Trustees during the current and prior year.

Trustees who have been in office since 1st April 2022 and up to the point of signing of the accounts are:

- Professor David Croisdale-Appleby OBE (Chair)
- Philippa Armitage
- Steven Clarke CPFA (Treasurer)
- Emma Crozier
- Johnnie Ball (appointed 17th August 2023)
- Steve Jamieson
- Jane Keir
- Anna Morgan (resigned 25th June 2022)
- William Roe
- Gavin Sanderson
- Anne Shinkwin (appointed 17th August 2023)
- David Stewart (appointed 17th August 2023)
- Mark Stroyan

Trustee recruitment, appointment and induction

The existing Trustees of Dementia UK are empowered under the Articles of Association to elect new Trustees at the Annual General Meeting of the charity and to make co-options at any other time.

Dementia UK seeks to include a wide skillset within the Board of Trustees, and as part of our governance process, Trustees identify and remedy any gaps in skills on the Board.

We recruit new Trustees in a number of ways, including advertising vacancies and reaching out to people who are involved and interested in our work. We invite potential new Trustees to observe at least one Board meeting to guide their decision about whether to agree to nomination as a Trustee.

We have an induction programme for all new Trustees of Dementia UK. This includes meeting the Chief Admiral Nurse/CEO, along with other members of staff across the charity. We also provide them with relevant historical documentation.

Sub-committees of the Board of Trustees

Trustees belong one of three sub-committees that oversee and advise on the charity's work and report to the Board. This contributes to the smooth running of the charity. The three sub-committees are:

- Clinical and Professional Committee
- Finance, Risk and Audit Committee
- Fundraising and Engagement Committee

Each committee meets at least four times a year and includes at least two Trustees, with one acting as Chair for these meetings. The Trustees contribute their relevant interests and skills to the work of the committees.

Chief Admiral Nurse/CEO and Executive Team

The Chief Admiral Nurse/CEO and Executive Team are responsible for the day-to-day affairs of Dementia UK, including operational matters, and a scheme of delegation is in place.

The members of Dementia UK's Executive Team are:

- Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive Officer
- Martin Bishop, Director of Fundraising and Engagement
- Nando Caicedo, Director of People and Organisational Development (from October 2022)
- Paul Edwards, Director of Clinical Services
- Niall Larkin, Director of Operations (until July 2022)
- Suruchi Saraf FCCA, Director of Finance and Corporate Services (from June 2022)

Dementia UK Trading Limited

Dementia UK Trading Limited develops commercial opportunities and covenants its profits to the charity. Its results are included within the consolidated financial statements.

Principal risks and uncertainties

The Board of Trustees is responsible for managing the risks faced by the charity. A Risk Register identifies:

- the potential and actual risks
- their nature
- the likelihood and possible impact of the risks occurring
- the measures taken to prevent or manage them

The Trustees review this Risk Register at all full Board meetings as well as discussing and updating it at committee meetings.

The main risks identified that the charity faces are:

Risk of shortfall in income to maintain infrastructure and clinical services

This is mitigated by our robust fundraising strategy, diverse range of income streams, specific targets, and key performance indicators (KPIs). There is close monthly monitoring of income and expenditure and consistent reporting to the Board of Trustees.

Income generating activity includes:

- ensuring our fundraising strategy is fit for purpose and adapted where necessary
- investing in a diverse range of income streams, both long- and short-term
- encouraging and facilitating innovation, continually developing ways for existing and new donors to support and strengthen their engagement with – and commitment to – Dementia UK
- ensuring digital fundraising is embedded in our work
- ensuring we have a skilled and high-performing team

Expenditure monitoring includes:

- conducting monthly reporting, regular reforecasts and well-planned annual budgets
- making decisions in a timely manner to ensure activity happens at the optimum time, and does not take place if there are not the funds to support it
- continuing to maximise the benefits of home/agile working
- collaborating with other organisations to avoid duplication of activity

Risk of loss of our reputation and damage to the Admiral Nurse brand

This is mitigated by ensuring all the systems, processes and support are in place to ensure the effective recruitment, maintenance and development of Admiral Nurses and Admiral Nurse services.

Nurses receive regular clinical supervision via Practice Action Learning Sets and their practice is guided by the Admiral Nurse Competency Framework, which outlines the knowledge, skills and attributes that they are required to demonstrate.

The Admiral Nurse Academy continues to grow and provides opportunities for continued professional development, including webinars, interactive learning, short courses and a leadership programme.

Risk of breaches in data protection and governance standards

This is mitigated by maintaining a robust data protection policy and processes, educating staff and volunteers on best practice with regard to data standards. Similarly, our Governance Team ensures that the charity works towards achieving and maintaining best governance practice in fulfilling our strategic aims.

The Governance Team ensures Data Protection Impact Assessments are undertaken so that our systems and processes are safe, secure and appropriate.

Risk of adverse publicity

This is mitigated by ensuring that there are high standards of communication and communication expertise within and outside the charity in dealing with clinical matters, public/supporter queries and complaints. This includes maintaining strong relationships with Admiral Nurse host services, which are monitored and supported through regular steering group meetings.

The Clinical Leadership and Communications Teams are briefed on any issues that arise and address these as required.

Reserves policy

The charity holds unrestricted reserves to ensure we can continue to operate in the event of any unforeseen and significant decreases in income.

The Board of Trustees' policy with regards to unrestricted reserves has been set at three to six months of projected unrestricted expenditure.

The Trustees aim to achieve this by careful management of the charity's resources and reviewing the reserves policy at least annually.

As of 31st March 2023, we held £8.7m in unrestricted reserves after deducting the Net Book Value of Fixed Assets (2022: £8.8m). This represents five and a half months of total planned unrestricted organisational expenditure.

The Trustees are of the opinion that maintaining reserves at this level is prudent given the economic uncertainty in the UK and the cost-of-living crisis, especially as we are reliant on voluntary income for 97% of our income, with over half of this coming from sponsored events and donations from members of the public.

The Trustees have a reserves policy and are of the opinion that the reserves level is in line with best practice within the charity sector and guidance from the Charity Commission; and will give the charity time to continue our vital work supporting people with dementia and their families while finding alternative sources of income should we see a sudden drop in voluntary income.

The charity held £4.9m of designated funds (2022: £2.8m) at 31st March 2023, of which £0.6m (2022: £0.8m) is for the Admiral Nurse Development Programme, and £1.5m (2022: £2.1m) is for the New Nurse Fund. It is planned that these funds will be used by 2025.

In the financial year 2022-23, the charity set aside a further designated sum of £2.8m in total for systems development work across the charity (£1.0m); services development (£1.0m) and enhancement of charitable activities including policy, campaigns and public affairs (£0.8m). These projects are expected to commence in 2023-24 and are likely to be completed towards the latter end of 2025. More detail on designated funds can be seen in Note 23 of the financial statements (p111).

Investment policy

The Trustees' investment powers are governed by the Memorandum and Articles of Association, which permit the charity's funds to be invested in a wide range of securities and assets.

As of August 2022, the Board of Trustees agreed an initial sum of £1.0m each to be held in long-term investments with two investment companies, Sarasin & Partners LLP and Ruffer LLP. This initial investment may be subject to increase in the future.

The purpose of investments is to preserve and protect the value of donations received from the adverse impacts of inflation until such time as they are allocated towards charitable activities.

The charity aims for a diversified investment portfolio that seeks to produce the best financial return within an acceptable level of risk.

The charity's investment objective is capital growth: to invest long-term reserves with a view to capital preservation, with a focus on protection against inflation. There are no current plans for future spending commitments that the portfolio will fund other than to protect against inflation.

The funds allocated towards investment are unrestricted and no donor restrictions have been placed on them.

In line with capital preservation, any income earned from the fund is to be accumulated and invested back into the portfolio. The charity does not expect to withdraw any investments in its long-term reserves and aims to invest no more than 25% of unrestricted net assets in long-term investments.

The charity is dedicated to ensuring that funds are invested in a responsible and ethical manner, incorporating environmental, social and governance considerations with particular emphasis on stewardship. The charity restricts investments in alcohol, tobacco, gambling, pornography, armaments, oil sands and thermal coal.

The Trustees have set a performance benchmark of CPI +3% a year in line with the investment strategy. Performance will be measured against inflation and agreed market indices. The level of capital volatility will be monitored to ensure the risk profile remains appropriate for the charity. The charity has adopted a phased approach to investments and accordingly funds have been transferred to investment companies in equal proportions over the duration of 2022-23. The comparison against benchmark will therefore be conducted in the next financial year.

The charity has nominated a list of authorised signatories, two of whom are required to sign instructions to the Investment Manager. The investment firms will provide quarterly reports on the valuation of investments, transactions, cash reconciliation, performance analysis and commentaries.

The Trustees of the charity have delegated the decision-making on investment matters to the Finance, Risk and Audit Committee (FRAC).

FRAC has the responsibility for:

- agreeing the investment strategy
- appointing/reappointing investment managers
- monitoring the investment assets

FRAC will review the information provided by the Investment Manager at least annually at the committee meeting where there will be presentations by the investment firms to enable decision-making.

Pay for the Senior Management Team

Dementia UK has a remuneration policy and pay for the CEO and Senior Management Team is decided by Trustees, who review pay based on market rates and benchmarking against charities of comparable size.

The CEO's remuneration for 2022-23 was a base salary of £120,600. This is five times more than the lowest paid staff member. Our CEO works four days per week and accordingly she was paid £96,480 in 2022-23.

Legal status

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC 047429 (Scotland).

The charity's affairs are governed by its Memorandum and Articles of Association dated 17th June 1994 (and updated on 4th November 2019), which allow for any activities covered by the charity's objectives with no specific restrictions.

The liability of the members in the event of the company being wound up is limited to a sum not exceeding £1.

Reference and administrative details

Dementia UK, 7th Floor, One Aldgate, London EC3N 1RE

Bankers

Lloyds Bank, PO Box, Andover BX1 1LT

National Westminster Bank Plc, 250 Bishopsgate, London EC2M 3UR

Investment Managers

Sarasin & Partners LLP, Juxon House, 100 St Paul's Churchyard, London EC4M 8BU

Ruffer LLP, 80 Victoria Street, London SW1E 5JL

Statutory Auditor

Sayer Vincent LLP, Invicta House, 108-114 Golden Lane, London EC1Y 0TL

Internal Auditor

Grant Thornton UK LLP, 30 Finsbury Square, London EC2A 1AG

Solicitor

Charles Russell Speechlys LLP, 5 Fleet Place, London EC4M 7RD

Trustees' responsibilities in relation to the financial statements

The charity's Trustees (who are also the Directors of Dementia UK for the purposes of company law) are responsible for preparing the Trustees' annual report, including the strategic report and financial statements, in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity's Trustees to prepare financial statements for each year, which give a true and fair view of the state of affairs of the charitable company and the group, and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue to operate

The Trustees are responsible for keeping adequate accounting records that disclose, with reasonable accuracy at any time, the financial position of the charity, and for ensuring that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and the group, and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as to disclosure to our Auditor

In so far as the Trustees are aware at the time of approving our Trustees' Annual Report:

- There is no relevant audit information of which the charitable company's Auditor is unaware
- The Trustees have taken all appropriate steps to ensure the Auditor is aware of any relevant audit information

The Trustees' Annual Report, which includes the strategic report, has been approved by the Trustees on 17th August 2023 and signed on their behalf by:

Professor David Croisdale-Appleby OBE

Chair of Trustees

Independent Auditor's report

for the year ended 31st March 2023

Opinion

We have audited the financial statements of Dementia UK (the 'parent charitable company') and its subsidiary (the 'group') for the year ended 31st March 2023 which comprise the consolidated statement of financial activities, the group and parent charitable company balance sheets, the consolidated statement of cash flows and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31st March 2023 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations six and eight of the Charities Accounts (Scotland) Regulation 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Dementia UK's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Trustees' Annual Report, including the strategic report, other than the financial statements and our Auditor's report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' Annual Report, including the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The Trustees' Annual Report, including the strategic report, has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report, including the strategic report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of Trustees

As explained more fully in the statement of Trustees' responsibilities set out in the Trustees' Annual Report, the Trustees (who are also the Directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as Auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and the Finance, Risk and Audit Committee, which included obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:
  - identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance
  - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud
  - the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations
- We inspected the minutes of meetings of those charged with governance
- We obtained an understanding of the legal and regulatory framework that the group operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the group from our professional and sector experience
- We communicated applicable laws and regulations throughout the Audit Team and remained alert to any indications of non-compliance throughout the audit
- We reviewed any reports made to regulators
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at **frc.org.uk/auditorsresponsibilities**. This description forms part of our Auditor's report.

Use of our report

This report is made solely to the charitable company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Noelia Serrano (Senior Statutory Auditor)

1st *December* 2023

for and on behalf of Sayer Vincent LLP
Statutory Auditor
Invicta House
108-114 Golden Lane
LONDON
EC1Y 0TL

Sayer Vincent LLP is eligible to act as Auditor in terms of section 1212 of the Companies Act 2006.

Consolidated statement of financial activities
(incorporating an income and expenditure account)

For the year ended 31st March 2023

	Note	Unrestricted £	Restricted £	**2023 Total £**	Unrestricted £	Restricted £	2022 Total £
Income from:							
Donations and legacies	2	16,903,300	1,884,796	**18,788,096**	14,856,771	1,263,455	16,120,226
Charitable activities							-
Admiral Nursing projects	3	91,221	209,083	**300,304**	17,260	743,350	760,610
Business development	3	151,084	-	**151,084**	73,750	-	73,750
Research and publications	3	400	-	**400**	46,381	-	46,381
Other fundraising activities	4	83,975	-	**83,975**	98,680	-	98,680
Investments	5	100,567	-	**100,567**	8,145	-	8,145
Other		-	-	**-**	19,316	-	19,316
Total income		17,330,547	2,093,879	**19,424,426**	15,120,303	2,006,805	17,127,108
Expenditure on:							
Raising funds	6a	5,932,694	-	**5,932,694**	4,622,759	-	4,622,759
Charitable activities							
Admiral Nursing projects	6a	5,176,063	2,246,142	**7,422,205**	5,415,002	1,834,373	7,249,375
Business development	6a	950,589	-	**950,589**	850,160	-	850,160
Research and publications	6a	323,482	-	**323,482**	281,822	-	281,822
Public awareness	6a	2,148,919	5,000	**2,153,919**	1,270,327	8,971	1,279,298
Practice development	6a	805,024	140,580	**945,604**	792,234	54,639	846,873
Total expenditure		15,336,771	2,391,722	**17,728,493**	13,232,304	1,897,983	15,130,287
Net gains on investments	14	14,999	-	**14,999**	-	-	-
Net income for the year	8	**2,008,775**	**(297,843)**	**1,710,932**	1,887,999	108,822	1,996,821
Transfers between funds		29,196	(29,196)	**-**	(11,180)	11,180	-
Net movement in funds		**2,037,971**	**(327,039)**	**1,710,932**	1,876,819	120,002	1,996,821
Reconciliation of funds:							
Total funds brought forward		11,713,359	1,640,691	**13,354,050**	9,836,540	1,520,689	11,357,229
Total funds carried forward	22	**13,751,330**	**1,313,652**	**15,064,982**	11,713,359	1,640,691	13,354,050

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 22a to the financial statements.

Balance sheets
Company no. 02944156

As at 31st March 2023

		The group		The charity	
	Note	**2023 £**	2022 £	**2023 £**	2022 £
Fixed assets:					
Tangible assets	13	**122,143**	88,630	**122,143**	88,630
Investments	14	**2,026,770**	-	**2,026,771**	1
		2,148,913	88,630	**2,148,914**	88,631
Current assets:					
Debtors	17	**1,714,073**	2,083,402	**1,715,284**	2,083,402
Short term deposits		**6,589,709**	6,540,984	**6,589,709**	6,540,984
Cash at bank and in hand		**9,426,625**	9,047,309	**9,423,293**	9,041,037
		17,730,407	17,671,695	**17,728,286**	17,665,423
Liabilities:					
Creditors: amounts falling due within one year	18	**(3,551,323)**	(3,049,984)	**(3,549,117)**	(3,045,716)
Net current assets		**14,179,084**	14,621,711	**14,179,169**	14,619,707
Total assets less current liabilities		**16,327,997**	14,710,341	**16,328,083**	14,708,338
Creditors: amounts falling due after one year	19	**(1,263,015)**	(1,356,291)	**(1,263,015)**	(1,356,291)
Total net assets	21	**15,064,982**	13,354,050	**15,065,068**	13,352,047
Funds:	22				
Restricted income funds		**1,313,652**	1,640,691	**1,313,652**	1,640,691
Unrestricted income funds:					
Designated		**4,894,045**	2,844,872	**4,894,045**	2,844,872
General funds		**8,857,285**	8,868,487	**8,857,371**	8,866,484
Total unrestricted funds		**13,751,330**	11,713,359	**13,751,416**	11,711,356
Total funds		**15,064,982**	13,354,050	**15,065,068**	13,352,047

Approved by the Trustees on 17th August 2023 and signed on their behalf by:

Professor David Croisdale-Appleby OBE
Chair

Steve Clarke CPFA
Treasurer

Consolidated statement of cash flows
For the year ended 31st March 2023

	Note	2023 £	2023 £	2022 £	2022 £
Net cash flows from operating activities	24		**2,436,404**		4,321,319
Cash flows from investing activities:					
Interest and dividends receivable		**100,567**		8,145	
Purchase of fixed assets		**(97,158)**		-	
Purchase of investments		**(2,011,772)**		**-**	
Investments in short-term deposits		**(48,725)**		(7,389)	
Net cash used in investing activities			**(2,057,088)**		756
Change in cash and cash equivalents in the year			**379,316**		4,322,075
Cash and cash equivalents at the beginning of the year			**9,047,309**		4,725,234
Cash and cash equivalents at the end of the year			**9,426,625**		9,047,309

Notes to the financial statements: for the year ended 31st March 2023

1 Accounting policies

a Statutory information

Dementia UK is a charitable company limited by guarantee and is incorporated in England and Wales. The registered office address and principal place of business is 7th Floor, One Aldgate, London EC3N 1RE.

b Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiary Dementia UK Trading Limited on a line-by-line basis. Transactions and balances between the charitable company and its subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

c Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The Trustees are of the view that the immediate future of the charity for the next 12 months is secure on the basis of confirmation of continuing income streams and fundraising activity to generate additional income streams. Accordingly, the financial statements have been prepared on the going concern basis.

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from Government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For pecuniary legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, and the amount receivable can be measured reliably, and the receipt is probable; or when a distribution is received from the estate. For residual legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made; or when a distribution is received from the estate. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

g Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

h Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

i Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose
- Expenditure on charitable activities includes the costs of delivering services and other educational activities undertaken to further the purposes of the charity and their associated support costs

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

j Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation that they will receive a grant and that any condition attached to the grant is outside of the control of the charity.

k Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each.

Support costs are the cost of overall direction and administration, comprising the salary and overhead costs of the central function.

k Allocation of support costs continued

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

Admiral Nursing projects	50%
Business development	8%
Research and publications	2%
Public awareness	6%
Practice development	8%
Raising funds	26%

l Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

m Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £1,500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

• equipment	15%-33% per annum, straight line
• fixtures and fittings	15%-33% per annum, straight line
• IT hardware and software	15%-33% per annum, straight line

n Investments

Fixed asset investments

Listed investments are included in the balance sheet initially at cost and revalued at the reporting date to bid price. Unrealised gains and losses on investments at the balance sheet date are included in the Statement of Financial Activities for the relevant underlying funds. The historical cost of investments is shown in Note 14 to the financial statements.

Investments in subsidiaries

Investments in subsidiaries are at cost.

o Admiral Nurse services

Funding is made available to employing authorities to meet employment, travelling and training costs incurred by them in the provision of Admiral Nurse services. The funding is accrued and recognised in the accounts in line with the provision of these services.

p Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered.

Any expenditure that exceeds £1,500 and is paid in advance or is related to a future dated event, is held as a prepayment on the balance sheet. The prepayment is subsequently released to the Statement of Financial Activities (SOFA) in the month or months that the expenditure is incurred. Prepayments are valued at the amount prepaid net of any trade discounts due.

q Short-term deposits

Short-term deposits include cash balances that are invested in accounts with a maturity date of between three and 12 months.

r Cash at bank and in hand

Cash at bank and cash in hand include cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

s Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

t Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

u Pensions

The charity subscribes to a defined contribution scheme for the benefit of its employees. Contributions payable are charged to the Statement of Financial Activities (SOFA) in the year they are payable.

The charity also subscribes to the NHS Pension Scheme, a multi-employer defined benefit pension scheme. It is not possible to identify the assets or liabilities relating to the charity, therefore the charity accounts for contributions to the scheme as if it were a defined contribution scheme. Contributions payable are charged to the SOFA in the year they are payable.

2. Income from donations and legacies

	Unrestricted £	Restricted £	**2023 Total £**	Unrestricted £	Restricted £	2022 Total £
Legacies	2,155,348	658,000	**2,813,348**	1,867,183	60,079	1,927,262
Voluntary donations	14,747,952	1,226,796	**15,974,748**	12,989,588	1,203,376	14,192,964
	16,903,300	1,884,796	**18,788,096**	14,856,771	1,263,455	16,120,226

3. Income from charitable activities

	Unrestricted £	Restricted £	**2023 Total £**	Unrestricted £	Restricted £	2022 Total £
Fees and contributions from institutions	91,221	209,083	**300,304**	17,260	743,350	760,610
Sub-total for Admiral Nursing projects	91,221	209,083	**300,304**	17,260	743,350	760,610
Management and development fees	151,084	-	**151,084**	73,750	-	73,750
Sub-total for business development	151,084	-	**151,084**	73,750	-	73,750
Contributions from institutions	400	-	**400**	46,381	-	46,381
Sub-total for research and evaluation	400	-	**400**	46,381	-	46,381
Total income from charitable activities	242,705	209,083	**451,788**	137,391	743,350	880,741

4. Income from other fundraising activities

	Unrestricted £	Restricted £	**2023 Total £**	Unrestricted £	Restricted £	2022 Total £
Carol concert, Christmas cards and merchandise	62,194	-	**62,194**	61,271	-	61,271
Income from trading subsidiary	21,781	-	**21,781**	37,409	-	37,409
	83,975	-	**83,975**	98,680	-	98,680

5. Income from investments

	Unrestricted £	Restricted £	**2023 Total £**	Unrestricted £	Restricted £	2022 Total £
Dividends	11,904	-	**11,904**	-	-	-
Bank interest	88,663	-	**88,663**	8,145	-	8,145
	100,567	-	**100,567**	8,145	-	8,145

6a. Analysis of expenditure (current year)

		Charitable activities								
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2023 Total £**	2022 Total £
Staff costs (note 9)	2,475,555	3,993,946	709,958	263,183	832,591	584,742	210,300	1,471,366	**10,541,641**	8,158,494
Direct activity costs	2,101,302	1,780,618	-	-	1,026,302	121,257	-	-	**5,029,479**	4,494,405
IT and telephone	88,910	140,462	92	-	6	-	-	422,214	**651,684**	680,614
Office and administration costs	245,158	20,640	3,272	990	39,447	2,373	13,096	218,464	**543,440**	906,119
Professional fees	250,765	3,837	35	-	77,648	-	24,530	223,894	**580,709**	520,238
Premises	-	-	-	-	-	-	-	381,540	**381,540**	370,417
	5,161,690	5,939,503	713,357	264,173	1,975,994	708,372	247,926	2,717,478	**17,728,493**	15,130,287
Support costs	706,544	1,358,739	217,398	54,350	163,049	217,398	-	(2,717,478)	-	-
Governance costs	64,460	123,963	19,834	4,959	14,876	19,834	(247,926)	-	-	-
Total expenditure 2023	**5,932,694**	**7,422,205**	**950,589**	**323,482**	**2,153,919**	**945,604**	**-**	**-**	**17,728,493**	-

6b. Analysis of expenditure (prior year)

		Charitable activities							
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2022 Total £**
Staff costs (note 9)	1,859,480	3,105,593	610,506	220,390	547,103	504,100	157,711	1,153,612	**8,158,494**
Direct activity costs	1,436,772	2,551,511	-	-	402,926	103,196	-	-	**4,494,405**
IT and telephone	67,151	94,423	85	-	489	-	-	518,466	**680,614**
Office and administration costs	256,727	10,921	1,835	1,999	34,406	1,843	7,431	590,957	**906,119**
Professional fees	229,991	1,088	-	-	116,074	-	11,680	161,405	**520,238**
Premises	-	-	-	-	-	-	-	370,416	**370,417**
	3,850,121	5,763,536	612,426	222,389	1,100,998	609,139	176,822	2,794,856	**15,130,287**
Support costs	726,664	1,397,428	223,588	55,897	167,691	223,588	-	(2,794,856)	-
Governance costs	45,974	88,411	14,146	3,536	10,609	14,146	(176,822)	-	-
Total expenditure 2022	**4,622,759**	**7,249,375**	**850,160**	**281,822**	**1,279,298**	**846,873**	**-**	**-**	**15,130,287**

7. Grant making

Cost	Grants to institutions £	**2023 £**	2022 £
Admiral Nursing projects	1,730,027	**1,730,027**	2,480,430
At the end of the year	1,730,027	**1,730,027**	2,480,430

During 2023, the charity provided investment for Admiral Nurses in 20 (2022: 22) new services. These costs are included in Note 6a under 'Direct activity costs'. Further details can be found on our website: **dementiauk.org**

8. Net income/(expenditure) for the year

Includes the below charges:

	2023 £	2022 £
Depreciation	**63,645**	66,563
Operating lease rentals:		
Property	**357,759**	352,289
Other	**53,744**	71,611
Auditors' remuneration (excluding VAT):		
Audit – current year	**22,000**	18,700
Audit – previous year under/(over) accrual	**7,000**	(1,550)
Other services	**3,690**	2,560

9. Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2023 £	2022 £
Salaries	**8,109,430**	6,481,622
Termination/redundancy costs	**74,000**	36,069
Employer's National Insurance contributions	**911,620**	692,392
Employer's contributions to defined contribution pension scheme	**617,553**	373,852
Employer's contributions to defined benefit pension scheme	**227,369**	187,489
Other staff related costs	**601,669**	387,070
	10,541,641	8,158,494

The following number of employees received employee benefits (excluding employer pension costs and employer's National Insurance) during the year between:

	2023 No.	2022 No.
£60,000-£69,999	**14**	9
£70,000-£79,999	**3**	2
£80,000-£89,999	**2**	4
£90,000-£99,999	**2**	-

The total employee benefits (including pension contributions and employer's National Insurance) of the key management personnel were £476,152 (2022: £401,682).

The charity Trustees were neither paid nor received any other benefits from employment with the charity in the year (2022: £nil). No charity Trustee received payment for professional or other services supplied to the charity (2022: £nil).

Trustees' expenses represent the payment or reimbursement of travel and subsistence costs totalling £2,152 (2022: £2,581) incurred by two (2022: two) members relating to attendance at meetings. The charity also incurred expenditure totalling £322 on Trustees' meetings in the year (2022: £nil).

10. Staff numbers

The average number of employees (head count based on number of staff paid per month) during the year was 205 (2022: 183)..

This includes sessional employees and other employees who received no pay in certain months (head count based on number per month); the average during the year was 16 (2022: 26).

	2023 No.	2022 No.
Raising funds	**53**	43
Admiral Nursing projects	**85**	82
Business development	**13**	11
Research and publications	**4**	4
Public awareness	**18**	13
Practice development	**10**	9
Support	**24**	22
	205	183

11. Related party transactions

There are no related party transactions to disclose for 2023 (2022: none) other than those already disclosed in Note 8.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

The total amount of donations received from related parties, without conditions, was £24,988 (2022: £9,639).

12. Taxation

The charity is exempt from Corporation Tax as all its income is charitable and is applied for charitable purposes. The charity's trading subsidiary Dementia UK Trading Limited Gift Aids available profits to the parent charity depending upon operational requirements. In 2022-23, Dementia UK Trading Limited made a loss of £2,087 and so £nil (2022: £4,164) profits were Gift Aided to the charity. Therefore, its charge to Corporation Tax in the year was also £nil (2022: £1,512).

13. Tangible fixed assets

Group and charity	Equipment £	Fixtures and fittings £	IT hardware and software £	**Total £**
Cost				
At the start of the year	-	206,869	82,928	**289,797**
Additions in year	2,976	-	94,182	**97,158**
At the end of the year	2,976	206,869	177,110	**386,955**
Depreciation				
At the start of the year	-	141,361	59,806	**201,167**
Charge for the year	-	41,373	22,272	**63,645**
At the end of the year	-	182,734	82,078	**264,812**
Net book value				
At the end of the year	**2,976**	**24,135**	**95,032**	**122,143**
At the start of the year	-	65,508	23,122	88,630

All of the above assets are used for charitable purposes.

14a. Fixed asset investments

	2023 £	2022 £
Market value at 1st April	**-**	-
Add:		
Acquisitions at cost	**2,011,183**	-
Net cash reinvested	**588**	-
Gains on revaluation	**14,999**	-
Market value at 31st March	**2,026,770**	-
Historical cost at 31st March	**2,011,772**	-

Asset allocation	**2023 £**	**2023 %**	2022 £	2022 %
Alternative investments	**305,105**	15	-	-
Equities	**905,408**	45	-	-
Fixed income	**676,994**	33	-	-
Liquid assets	**94,715**	5	-	-
Property	**44,548**	2	-	-
Total	**2,026,770**	**100**	-	-

14b. Investment in subsidiary undertaking

	The group		**The charity**	
	2023 £	2022 £	**2023 £**	2022 £
At the start and the end of the year	-	-	**1**	1

15. Subsidiary undertaking

The charitable company owns the whole of the issued ordinary share capital of Dementia UK Trading Limited, a company registered in England. All activities have been consolidated on a line-by-line basis in the statement of financial activities. A summary of the results of the subsidiary is shown below:

	2023 £	2022 £
Turnover	**21,781**	37,409
Cost of sales	**(17,484)**	(23,677)
Gross profit	**4,297**	13,732
Administrative expenses and taxation charge	**(6,384)**	(1,621)
(Loss)/profit on ordinary activities before taxation	**(2,087)**	12,111
Taxation on profit on ordinary activities	**-**	(1,512)
(Loss)/profit for the financial year	**(2,087)**	10,599
Total retained earnings brought forward	**2,000**	(4,435)
Distribution under Gift Aid to parent charity	**-**	(4,164)
Total retained earnings carried forward	**(87)**	2,000
The aggregate of the assets, liabilities and funds was:		
Assets	**3,332**	7,778
Liabilities	**(3,418)**	(5,777)
Funds	**(86)**	2,001

16. Parent charity

The parent charity's gross income and the results for the year are disclosed as follows:

	2023 £	2022 £
Gross income	**19,405,645**	17,093,863
Result for the year	**1,713,022**	1,990,383

17. Debtors

	The group		The charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Trade debtors	**51,513**	354,084	**51,513**	354,084
Other debtors	**1,916**	1,800	**1,916**	1,800
Prepayments	**705,040**	755,865	**705,040**	755,865
Accrued income	**955,604**	971,653	**955,604**	971,653
Amounts due from group undertakings	**-**	-	**1,211**	-
	1,714,073	2,083,402	**1,715,284**	2,083,402

The charity received notifications regarding a number of legacies before the year end totalling £1,079,057. However, these legacies did not meet the full income recognition criteria as per the accounting policy as at 31st March 2023, and therefore have not been accrued in the 2023 financial statements (2022: £1,367,685).

18. Creditors: amounts falling due within one year

	The group		The charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Trade creditors	**521,422**	490,176	**521,422**	490,176
Taxation and social security	**533,067**	296,971	**533,061**	293,014
Other creditors	**11,159**	13,530	**11,159**	13,530
Accruals	**453,432**	484,675	**451,232**	482,855
Deferred income	**77,306**	44,917	**77,306**	44,917
Admiral Nurse projects – grant accruals	**1,954,937**	1,719,715	**1,954,937**	1,719,715
Amounts due to group undertakings	**-**	-	**-**	1,509
	3,551,323	3,049,984	**3,549,117**	3,045,716

19. Creditors: amounts falling due after one year

	The group		The charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Admiral Nurse projects – grant accruals	**1,213,763**	1,257,791	**1,213,763**	1,257,791
Rent-free provision	**49,252**	98,500	**49,252**	98,500
	1,263,015	1,356,291	**1,263,015**	1,356,291

Total grant commitments outstanding as at 31st March 2023 relating to the recruitment of Admiral Nurses payable to health institutions were £3,168,699 (2022: £2,977,506), of which payable within one year were £1,954,537 (2022: £1,719,714) and after one year were £1,213,763 (2022: £1,257,792). The amounts due within one year are included within accruals in Note 18 above.

20. Pension schemes

The charity operates two pension schemes: a stakeholder pension scheme, administered by Aviva, and the NHS Pension Scheme. As at 31st March 2023, the amounts owed to the schemes were Aviva £28,795 (2022: £3,829) and NHS £nil (2022: £nil). The number of members in Aviva are 180 and in the NHS Pension Scheme 35. The NHS Pension Scheme is an unfunded occupational scheme backed by the Exchequer, which is open to all NHS employees and certain employees of other approved organisations. Dementia UK is an approved organisation. The scheme provides pensions, based on final salary, in varying circumstances for employees of participating employers. The scheme receives contributions from employees and employers to defray the costs of pensions and other benefits. From 1st April 2006 the NHS Business Services Authority (NHSBSA: the authority) has been the body responsible for the administration of the NHS Pension Scheme for England and Wales. In support of the authority, NHS employers are required to explain the scheme to the employees. In addition, they submit pension data to the NHSBSA. Every four years the Government Actuary conducts a full actuarial review of contribution rates. In order to defray the costs of benefits, in 2022-23 employers paid contributions of 14.38% of pensionable pay. From April 2022 to September 2022, employees contributed on a tiered scale from 5%-14.5% of their pensionable pay depending on total earnings. From October 2022, there was a change to member contribution rates from the Department of Health and Social Care. From this date, employees contributed on a tiered scale from 5.1%-13.5% of their actual pensionable pay. Further information on benefits can be obtained from the NHS Pension Scheme website **nhsbsa.nhs.uk/nhs-pensions**

21a. Analysis of group net assets between funds (current year)

	General unrestricted £	Restricted funds £	**Total funds £**
Tangible fixed assets	122,143	-	**122,143**
Fixed asset investments	2,026,770	-	**2,026,770**
Net current assets	11,651,669	2,527,415	**14,179,084**
Long-term liabilities	(49,252)	(1,213,763)	**(1,263,015)**
Net assets at 31st March 2023	**13,751,330**	**1,313,652**	**15,064,982**

21b. Analysis of group net assets between funds (prior year)

	General unrestricted £	Restricted funds £	**Total funds £**
Tangible fixed assets	88,630	-	**88,630**
Net current assets	11,723,229	2,898,482	**14,621,711**
Long-term liabilities	(98,500)	(1,257,791)	**(1,356,291)**
Net assets at 31st March 2022	**11,713,359**	**1,640,691**	**13,354,050**

22a. Movements in funds (current year)

	At 1st April 2022 £	Income £	Expenditure £	Transfers £	Gains and losses £	**At 31st March 2023 £**
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	-	345,600	(285,600)	-	-	**60,000**
Admiral Nursing Learning and Disability Service and new nurses (national)	27,272	188,580	(84,571)	(18,568)	-	**112,713**
Admiral Nursing projects (geographical funds):						
Cambridgeshire	47,190	1,445	-	-	-	**48,635**
Cornwall	3,632	17,650	-	-	-	**21,282**
Cumbria	63,625	6,903	-	-	-	**70,528**
Derbyshire	160,258	581	(114,654)	-	-	**46,185**
Devon	156,496	32,474	(148,225)	-	-	**40,745**
Dorset (Purbeck)	14,093	19,116	-	-	-	**33,209**
Essex	9,995	4,323	-	-	-	**14,318**
Isle of Wight	8,209	8,500	-	-	-	**16,709**
Leeds	136,431	200,701	(281,945)	-	-	**55,187**

Continued

	At 1st April 2022 £	Income £	Expenditure £	Transfers £	Gains and losses £	**At 31st March 2023 £**
Leicestershire	30,018	16,152	-	-	-	**46,170**
London	31,960	673,630	(450,000)	-	-	**255,590**
National	10,370	162,516	(142,002)	-	-	**30,884**
Scotland	135,414	50	(77,160)	-	-	**58,304**
Somerset	12,247	-	-	-	-	**12,247**
Staffordshire	94,016	5,211	(74,179)	-	-	**25,048**
Sussex	85,337	12,398	(29,968)	-	-	**67,767**
Teesside (Newcastle)	37,760	40,000	(54,196)	-	-	**23,564**
Wales	68,046	27,107	(6,500)	-	-	**88,653**
Yorkshire	52,910	131,259	(168,572)	-	-	**15,597**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2022)	217,426	105,227	(260,150)	-	-	**62,503**
YDUK projects	237,986	94,456	(214,000)	(10,628)	-	**107,814**
Total restricted funds	1,640,691	2,093,879	(2,391,722)	(29,196)	-	**1,313,652**
Unrestricted funds						
Designated funds						
Admiral Nursing Development Programme	760,000	-	(174,000)	-	-	**586,000**
Designated New Nurse Fund	2,084,872	-	(716,827)	140,000	-	**1,508,045**
Designated systems development work	-	-	-	1,000,000	-	**1,000,000**
Designated charitable activities	-	-	-	800,000	-	**800,000**
Designated services development	-	-	-	1,000,000	-	**1,000,000**
Total designated funds	2,844,872	-	(890,827)	2,940,000	-	**4,894,045**
General funds	8,868,487	17,330,547	(14,445,944)	(2,910,804)	14,999	**8,857,285**
Total unrestricted and designated funds	11,713,359	17,330,547	(15,336,771)	29,196	14,999	**13,751,330**
Total funds	**13,354,050**	**19,424,426**	**(17,728,493)**	-	**14,999**	**15,064,982**

22b. Movements in funds (prior year)

	At 1st April 2021	Income	Expenditure	Transfers	Gains and losses	At 31st March 2022
	£	£	£	£	£	£
Restricted funds:						
Admiral Nursing projects (Helpline and professional and practice development)	-	529,550	(529,550)	-	-	**-**
Admiral Nursing Learning and Disability Service and new nurse (national)	27,272	3,500	(3,500)	-	-	**27,272**
Admiral Nursing projects (geographical funds):						
Buckinghamshire	27,907	-	-	-	-	**27,907**
Cambridgeshire	47,126	64	-	-	-	**47,190**
Cornwall	37,619	300,310	(334,297)	-	-	**3,632**
Cumbria	28,606	35,019	-	-	-	**63,625**
Derbyshire	211,148	3,140	(54,030)	-	-	**160,258**
Devon	13,460	348,099	(205,063)	-	-	**156,496**
Leeds	-	299,206	(162,775)	-	-	**136,431**
Leicestershire	32,050	22,674	(24,706)	-	-	**30,018**
London	21,590	10,370	-	-	-	**31,960**
Manchester	-	22,000	-	-	-	**22,000**
National	-	140,050	(140,860)	11,180	-	**10,370**
Northamptonshire	41,682	95	-	-	-	**41,777**
Nottinghamshire	117,172	-	(53,850)	-	-	**63,323**
Scotland	215,268	3,411	(83,265)	-	-	**135,414**
Staffordshire	123,086	14,963	(44,033)	-	-	**94,016**
Sussex	122,284	16,902	(53,850)	-	-	**85,337**
Teesside (Newcastle)	50,000	-	(12,240)	-	-	**37,760**
Wales	28,801	46,245	(7,000)	-	-	**68,046**
West Midlands	18,187	450	(3,500)	-	-	**15,137**
Yorkshire	39,145	29,043	(15,278)	-	-	**52,910**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2022)	56,815	11,838	23,174	-	-	**91,827**
YDUK projects	261,471	169,876	(193,361)	-	-	**237,986**
Total restricted funds	1,520,689	2,006,805	(1,897,983)	11,180	-	**1,640,691**
Unrestricted funds:						
Designated funds:						
Admiral Nursing Development Programme	-	-	(540,000)	1,300,000	-	**760,000**
Designated New Nurse Fund	2,000,000	-	(1,415,128)	1,500,000	-	**2,084,872**
Total designated funds	2,000,000	-	(1,955,128)	2,800,000	-	**2,844,872**
General funds	7,836,540	15,120,303	(11,277,176)	(2,811,180)	-	**8,868,487**
Total unrestricted funds	9,836,540	15,120,303	(13,232,304)	(11,180)	-	**11,713,359**
Total funds	11,357,229	17,127,108	(15,130,287)	-	-	**13,354,050**

23. Purposes of restricted and designated funds

Restricted funds
Admiral Nursing projects are funded by donations specifically for the development and support of the services which Admiral Nurses provide.

The total restricted funds were raised by individuals, corporates, charitable trusts and fundraisers throughout the UK for the provision of services.

YDUK projects relate to funds transferred from YoungDementia UK when the charity became part of Dementia UK in November 2020. The funds will continue to be used for activities in line with YoungDementia UK's charitable objects.

Designated funds
The charity holds the following designated funds at year end:

Admiral Nurse Development Programme
The Accelerator Learning Programme has been set up to enable current Registered Nurses (Adult, Mental Health and Learning Disability) to become Admiral Nurses and establish a new hosted service. At 31st March 2023 this totalled £586,000 (2022: £760,000).

Designated New Nurse Fund
The New Nurse Fund is used to fund Admiral Nurse services in host organisations to offer life-changing support to families facing dementia. The balance at 31st March 2023 is £1,508,045 (2022: £2,084,872), which includes increasing the designated fund by £200,000 for strategic development of Admiral Nurse services. This has been offset by £60,000, which was originally set aside in 2021-22 for a service that is now no longer required, giving a net movement of £140,000.

Designated systems development work across the charity
Funds totalling £1.0m have been set aside for systems development work across the charity. The project/s will be scheduled to start in 2023-24 and the anticipated duration is likely to be two years from the start date.

Designated charitable activities
Funds of £800,000 have been set aside for the development of policy, campaigns, public affairs and raising awareness of our charitable activities during 2023-24.

Designated services development
Funds totalling £1.0m have been set aside for the development of our clinical services, including digital service delivery for beneficiaries. The expenditure is expected to start in 2023-24 and to be completed towards the end of 2025.

24. Reconciliation of net income to net cash flow from operating activities

	2023	2022
	£	£
Net income for the reporting period (as per the statement of financial activities)	**1,710,932**	1,996,821
Gains on revaluation of investment assets	**(14,999)**	-
Depreciation charges	**63,646**	66,563
Dividends and interest from investments	**(100,567)**	(8,145)
Loss on the sale of fixed assets	**-**	69,441
Decrease in debtors	**369,329**	49,025
Increase in creditors	**408,063**	2,147,614
Net cash provided by operating activities	**2,436,404**	4,321,319

25. Operating lease commitments

	Property		Equipment	
	2023	2022	**2023**	2022
Periods:	**£**	£	**£**	£
Less than one year	**357,759**	357,759	**37,731**	79,188
One to five years	**377,428**	735,187	**3,205**	38,597
	735,187	1,092,946	**40,936**	117,785

The 2022 lease commitments disclosure for property has been restated one to five years from £817,270 to £735,187. This accurately reflects the outstanding position on operating leases.

Contingent liability
Dementia UK has entered into a rent lease agreement that expires in April 2025. The rent agreement includes a probability of 10% rent increase.

26. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Thank you

We are indebted to everyone who has supported us over the past year, including our Volunteer Ambassadors. Because of you, more families can receive the life-changing support of a specialist dementia nurse. In particular, we would like to thank the following supporters:

The 29th May 1961 Charitable Trust
Ali Stearn
Aon UK
The Artemis Charitable Foundation
Assura plc
Johnnie Ball
Mike Balsamo
Barbour Foundation
Barratt London
Briggs Equipment
BT
Janette Burt
Butt family through the Calleva Foundation
James Calvert
Central Co-op
The John Coates Charitable Trust
The Collaboration Choir
Computacenter UK
Cosby Golf Club
Coventry Hearsall Golf Club
The Duchy Health Charity
East Sussex Fundraising Group
Everyone Active
The February Foundation
The Folio Society
Great Days
GRUNDFOS Pumps Ltd
Haywards Heath Golf Club
H&M
Home Instead UK
Industrials REIT
Invesco UK
Isle of Wight Fundraising Group
Manjinder Kang
Jane Keir
The Klondyke Group
Sir James Knott Trust
Kohler Mira
The Kirby Laing Foundation
Nigel and Ian Lane
Leeds Building Society
Leicestershire Fundraising Group
Richard Leitch
Cecil and Hilda Lewis Charitable Trust
Market Harborough and the Bowdens Charity
Marks & Spencer
Frank and Maggie Marshall
The Mere Golf Club and Resort
Moondance Foundation
The George A Moore Foundation
Christine Muskett
Next plc
Norwest Foods International
The Openwork Foundation
The P F Charitable Trust
The Pipeline Industries Guild

Purbeck Fundraising Group (Dorset)
The Rayne Foundation
The Basil Samuel Charitable Trust
Simpson Thacher and Bartlett LLP
The Charles Skey Charitable Trust
The Sobell Foundation
Jon Spurling
Stanmore Golf Club
St Martin's School Northwood
Ian Stone
Nicola Sullivan
Swire Charitable Trust
Team Excalibur
Tina Taylor
Thames Water Utilities Limited
Theydon Bois Golf Club
Tokio Marine HCC
Mr David Tunnicliffe and family
Mr and Mrs Stephen Tunnicliffe and family
Janet Venables
Venator
Rosalind Webber
Westerleigh Group
Wimbledon Park Golf Club
Zenith Vehicles
Zurich Community Trust

We also thank all our kind legators who generously left a gift in their Will, as well as our supporters who wish to remain anonymous.

DementiaUK
Helping families face dementia

The Admiral Nurse Dementia Helpline and virtual clinics provide life-changing support for families affected by all forms of dementia – including Alzheimer's disease.

Call 0800 888 6678 or email helpline@dementiauk.org
Open Monday-Friday, 9am-9pm
Saturday and Sunday, 9am-5pm
Every day except 25th December

Virtual clinics: dementiauk.org/book

dementiauk.org • 020 8036 5400 • info@dementiauk.org

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC 047429). Company number: 02944156

Registered with FUNDRAISING REGULATOR

DEMENTIA UK

England & Wales - Charity number 1039404

Accounts

Trustees' Annual Report

and consolidated financial statements

DementiaUK
Helping families face dementia

For the year ended 31st March 2022

Company number: 02944156 Charity number: 1039404 OSCR number: SC047429

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Chair and Chief Admiral Nurse/Chief Executive Officer's report

It has been another challenging year for families affected by dementia. While the restrictions on daily living have eased, many people continue to feel the effects of Covid-19's 'long tail'.

We hear from families who feel the prolonged periods of isolation led to a deterioration in their loved ones' independence and abilities, and who feel lost and alone in a complex care system. They tell us they are encountering delays in getting a diagnosis in the first place because of a huge backlog of assessments, and that many services that they relied on before have failed to return to pre-Covid levels, or have stopped functioning entirely.

The need for our dementia specialist Admiral Nurses has never been greater, and while we have faced many challenges as we adapt to the 'new normal', I am delighted to say that thanks to our wonderful supporters, our nurses have been able to help more people than ever.

Over the year, we have grown the number of nurses throughout the UK – including appointing our first nurses specialising in young onset dementia, diverse and under-served communities, and learning disabilities.

We also launched our new Closer to Home service – virtual clinics offering appointments by phone and video call, which supported over 1,300 families in its first six months.

None of this would have been possible without our donors, fundraisers, corporate partners, regular givers and legators.

Building on the success of our virtual challenges, which we launched in the midst of the pandemic, we ran four Facebook challenges across the year – Cycle 100 Miles in June, Walk 30 Miles in September, Jog 50 Miles in November, and the hugely popular March Dog Walking Challenge. Over 12,500 supporters took part in these events, raising an incredible £2.1m.

We were also able to reinstate some of our in-person events, including the London Marathon, our annual Time for a Cuppa fundraiser, and our carol concert.

As a charity, we are committed to improving dementia care, and in November, we launched a campaign to highlight the difficulties

many families experience in accessing NHS continuing healthcare (CHC) funding for relatives with dementia.

We engaged with the Department of Health and Social Care and NHS England to call for improvements, and saw an increase in contacts to our Helpline and clinics from families in need of support throughout this complex and often unfair process.

We continue to innovate to improve support for families living with dementia, and in 2021 we were one of the first charities worldwide to start using Twitter Spaces. These are live audio forums where our Admiral Nurses, other professionals and people with lived experience can connect with members of the public to share expert, compassionate advice and support.

We also held our first online Summer School which was open to all health and social care professionals, helping them improve their knowledge and understanding of dementia to better support the families they work with.

These are just a few of our successes this year, and in the pages of this Annual Report, you will find many more highlights – but there is still more to do.

We have ambitious plans for the year ahead, including growing the number of Admiral Nurses, increasing the reach of our Helpline and virtual clinics, and continuing to campaign for much-needed improvements in dementia care.

It is only by working together that we can offer a lifeline to more families facing dementia, and we are truly grateful to our many supporters, donors and, of course, our Admiral Nurses and Dementia UK staff and volunteers who make this happen.

With our sincerest thanks,

Dr Hilda Hayo
Chief Admiral Nurse/CEO

Professor David Croisdale-Appleby OBE
Chair of Trustees

About Admiral Nurses

Dementia UK is the specialist dementia nurse charity. Our nurses, called Admiral Nurses, offer life-changing support for families affected by dementia.

As dementia specialists, they help families manage complex needs, considering the person living with dementia and the people around them. They provide tailored clinical advice and psychological support; advise people about benefits and financial issues; support families in their caring role; and help build links with other health and care professionals.

Admiral Nurses work in the community, in hospitals, on the Dementia Helpline, and in virtual clinics. They are continually supported and developed by Dementia UK.

For families facing dementia, they can be a lifeline.

"Our nurse was amazing. She gave us a 45-minute video appointment and completely understood what we were going through. Her advice was really helpful and relevant – much better than we have had from other services in the last three years."

Family carer

Dementia facts and figures

Dementia is an umbrella term for a range of neurological conditions that affect the brain and get worse over time.

There are over 200 types of dementia – the most common are Alzheimer's disease, vascular dementia, Lewy body dementia, frontotemporal dementia and mixed dementia.

Common symptoms of dementia include:

- **memory loss**
- **confusion**
- **problems with understanding**
- **difficulties with speech**
- **problems with decision-making**
- **changes in behaviour**

Over
940,000
people in the UK are thought to be living with dementia.

1 in 4
hospital beds is occupied by someone with dementia.

65 or under

Around
7.5%
of people with dementia are aged 65 or under – this is called young onset dementia.

700,000
people in the UK are informal carers for a person with dementia.

Dementia is the leading cause of death in the UK.

Joanna's story

Joanna's mum was diagnosed with vascular dementia in 2015. Joanna talks about the impact that her mum's condition has had on the whole family, and how they have been supported by an Admiral Nurse.

My mum worked as a mental health nurse and was always very independent. The first sign that something was wrong was when she broke her leg. She struggled to engage with physiotherapy and couldn't get her head around how to balance on crutches. She started having difficulties at work and there were concerns about her performance.

Mum decided to retire early, aged 55, and from then on, she began to withdraw from life. She found it hard to engage in conversation and would sit staring into space. Her life revolved around watching television – she didn't really do much else.

Mum was referred to a neurologist, who diagnosed disease in the small blood vessels of the brain. But as time passed, I became increasingly worried about her. I found lots of unopened letters in her flat, including unpaid bills. She had been involved in a car accident and because she hadn't responded to the insurance claim, her insurance was void – yet she was still driving. It became clear that there was more to her condition than we knew.

"I couldn't get through a day without crying."

After returning to the neurologist, Mum was eventually diagnosed with vascular dementia in 2015, at the age of 59. We were informed by letter, with no phone call or follow-up. I was devastated.

I knew Mum would need extra support, so she moved to a retirement property with carers on site. I thought she would be safe there, but she ended up having a bad fall and had to have surgery on her face.

After that, I arranged for extra carers to visit Mum in her flat every day, but they only came for 15 minutes at a time. Mum was incontinent and would go unchanged for hours. They would try to put her to bed at 9pm and she would refuse. One night, she fell out of bed and the carers found her on the floor the next morning. I had no idea how long she had been there.

"My Admiral Nurse was a guardian angel."

At the time, I was working as a police officer, and I also had three young children. I was in a constant state of anxiety. I decided to completely change career and become a university lecturer because I needed a job with regular hours. If I was on a late shift and didn't get home until four o'clock in the morning, I'd still have to get up to take Mum to a doctor's appointment at 9am.

I was exhausted and couldn't get through a day without crying. That's when I found the Dementia UK website and called the Helpline. I broke down as I felt so helpless.

The Helpline nurse told me there was a dementia specialist Admiral Nurse, Louise, in my area, and we arranged a meeting. The first time I spoke to Louise it felt like speaking to this amazing, knowledgeable professional who understood what I was going through. It was such a relief.

Louise taught me that I needed to look after myself and gave me lots of practical advice. She supported me with applying for care home funding and came with me to important meetings with Social Care.

Louise also said I could call the Helpline whenever I needed. That felt like a safety blanket, helping me cope with the emotional trauma of seeing the person I love deteriorate.

Mum's dementia has been a very rocky road for our whole family, but at a time when I was at burnout and didn't know where to turn, Louise was there for me. She was my guardian angel.

Achievements, performance and plans

Admiral Nurses – a lifeline for families

Our dementia specialist Admiral Nurses are at the heart of everything we do. Our Admiral Nurse services, which are hosted by organisations such as NHS Trusts, care homes and hospices in collaboration with Dementia UK, offer life-changing support to families facing dementia.

What we said we would do

Increase the number of new Admiral Nurses in primary care by at least 22, and in acute care by at least eight.

What we did

Increased the number of new nurses in primary care by 26, and in acute services by 18.

What we said we would do

Recruit at least four more nurses to support people from under-served communities, such as those with young onset dementia, learning disabilities, and people from ethnic minority communities.

What we did

Expanded our Lewy body dementia service, appointing a new Admiral Nurse specialising in Lewy body dementia. She supports people with Lewy body dementia and their families, as well as other Admiral Nurses across the UK who work with people with the diagnosis.

Appointed a Young Onset Dementia Consultant Admiral Nurse to support people living with young onset dementia (where symptoms develop before the age of 65) and their families. This is a national role, with a focus on raising awareness of young onset dementia and influencing and driving national policy. The nurse will also support other Admiral Nurses and health and social care professionals, encourage links between research and practice, and develop new materials and resources.

Secured an extension of our first Learning Disabilities Admiral Nurse role, continuing and building on our support for people living with learning disabilities. This post is hosted by the charity MacIntyre, which will be fully funding the position going forward.

Appointed our first Consultant Admiral Nurse for Diverse and Under-served Communities. She will play a pivotal role in the development of new and existing services, so people living with dementia from diverse and under-served communities have equal access to specialist dementia care. This includes setting up new services in areas where there is a high number of diverse and under-served communities, and ensuring Admiral Nurses are equipped to provide culturally sensitive care (see p12).

Agreed two new Admiral Nurse posts to focus on diverse communities in Leicester and the Black Country, and a Mandarin and Cantonese-speaking nurse to deliver clinics in London, in collaboration with the Chinese Welfare Trust.

Conducted an Admiral Nurse diversity audit to establish how diverse our workforce is – the better families are understood and represented, the better they can be supported.

What we said we would do

Recruit Admiral Nurses to work in specific areas including care homes and hospitals.

What we did

Recruited 16 new nurses to work in specific settings including the community, care homes, and hospices.

We also...

Created 28 new Admiral Nurse services across the country – a total of 62 nurses. In addition, we now have clinics offering in-person appointments in five regions. We have also secured a contract to develop our first service in Guernsey, which will have two nurses.

Developed a new model within acute care to support people through transitions from hospital to home – this involves Admiral Nurses working with families who care for someone who is about to be discharged from hospital, whether that be to residential care or their family home.

What we'll do next – our priorities for 2022-23

Increase the number of new Admiral Nurses in primary care by 15 and in acute posts by 10.

Increase the number of Young Onset Dementia Admiral Nurses by three to work in Cognitive Disorder Clinics (clinics for the assessment, diagnosis and treatment of people with cognitive deterioration, including dementia) and in community settings.

Develop a model to help our nurses better support and engage with families from diverse and under-served communities. We will identify and support the delivery of training to help nurses meet the unique needs of these families. This will include creating a further three new Admiral Nurse roles in under-served communities.

Spotlight

Supporting diverse and under-served communities

Paulette Winchester-Joseph is Dementia UK's first Admiral Nurse for Diverse and Under-served Communities.

I was appointed Consultant Admiral Nurse for Diverse and Under-served Communities in July 2021, having been an Admiral Nurse for 14 years. The need for this new role arose from a renewed focus on diversity, equity and inclusion in the charity's strategy for 2020-25.

It is recognised that accessing dementia care can sometimes be more challenging for families from Black, Asian and other diverse communities. Some of the challenges that these communities face include lower levels of understanding and knowledge of dementia; higher levels of stigma associated with the condition; lack of knowledge of how to access services; and a reluctance to ask for and accept formal support from professionals, believing that it is the responsibility of family members to care for a person with dementia.

In some minority ethnic communities, there are myths and taboos around dementia that make it difficult to ask for help. For example, dementia can be seen as a punishment for past events or the work of evil spirits. There may also be significant language barriers to accessing support.

At Dementia UK, we understand the needs and challenges of diverse and under-served communities. We support our Admiral Nurses to work alongside these communities to help them overcome the barriers they face and ensure that they have a better experience of dementia support.

A better quality of life with dementia

My priority for the year ahead is to establish a Diversity Champions Network to develop an improved model of nursing. This will enhance the understanding of dementia in people from diverse and under-served backgrounds, and improve their experience of care and support.

We will recruit new Admiral Nurses who are themselves from diverse backgrounds so that families feel better represented and understood, and more able to access life-changing dementia support. We will also upskill our existing nurses through webinars, forums, conferences, special interest groups and communities of practice so they can support families from diverse and under-served backgrounds to have a better quality of life with dementia.

In some minority ethnic communities, there are myths and taboos around dementia that make it difficult to ask for help. For example, dementia can be seen as a punishment for past events or the work of evil spirits. There may also be significant language barriers.

Evaluating our hosted Admiral Nurse services

Our Insights and Evaluation Team collected information from family carers and health and social care professionals about how Admiral Nurse services in communities, primary care and acute care are meeting the needs of families facing dementia.

Carers told us:

86% The service had improved their ability to take better care of the person with dementia.

87% The service had improved their ability to cope.

100% They would recommend the service to family and friends.

Professionals told us the Admiral Nurse service:

99% Improved care for families.

99% Improved quality of life for families.

98% Enabled families to be involved in decisions about care.

94% Improved case management and coordination.

"Before [my Admiral Nurse] came along I was afraid to ask for help from others. Today I can gladly say how much I've grown in confidence and am no longer afraid to ask for help. My anxiety and stress levels have dropped to almost zero and I feel that I can now face whatever difficulties my caring responsibilities throw at me."

Family carer

Here to listen

Our free Admiral Nurse Dementia Helpline provides expert, compassionate advice at the end of the phone.

What we said we would do

Ensure our Helpline reaches and supports even more families living with dementia.

What we did

Supported some of the most vulnerable people across the UK. In 2021-22 there were 33,199 direct contacts to the Helpline – over 600 more than in the previous year.

Due to the 'long tail' of the Covid-19 pandemic, our conversations and emails have become more complex, with many families experiencing difficulties in accessing dementia services and facing pressing or challenging situations at home, in hospital, in care homes and in other settings.

Calls and emails therefore take us more time to ensure that we address the needs of our contacts safely and appropriately.

What we said we would do

Continue the expansion of the Helpline to ensure more callers get through on their first attempt by recruiting more dementia specialist Admiral Nurses.

What we did

Maintained the opening hours of our Helpline, which were extended during the pandemic – we are open seven days a week, every day except 25th December.

Increased the number of nurses on each Helpline shift:

- from 14 to 16 on weekdays
- from five to six on weekday evenings
- from five to six on Saturdays and Sundays

Recruited more Admiral Nurses to work on the Helpline. We now have eight full-time Helpline nurses, and 52 sessional nurses registered to work on the Helpline as required.

What we'll do next – our priorities for 2022-23

Increase the number of families we can support by adding an extra 17 shift availabilities per week. Day shifts (weekdays and weekends) are 7.5 hours long. Evening shifts are 3.5 hours long.

Continue with our Helpline expansion to ensure more families get through on their first attempt. We will do this by recruiting more full-time and part-time Admiral Nurses to the Helpline. We aim to have 12 full-time and 16 part-time nurses in post by April 2023 – this will enable us to meet the increasing number and complexity of calls and reduce the need for sessional nurses to staff the Helpline. Our aim is to support at least 34,000 direct contacts between April 2022 and March 2023.

Evaluating our Helpline

Our Insights and Evaluation Team surveyed 189 carers who contacted our Helpline about their experiences.

In 2021, the top reasons for contacts to our Helpline were:

- accessing support
- getting a diagnosis
- behavioural issues
- dementia understanding and support
- information on care options

Carers say the Helpline made a positive difference to:

99% their ability to take better care of the person they look after.

97% their ability to make important decisions about the care of the person they look after.

97% their knowledge of local services offering support.

97% their ability to cope in their caring role.

93% their ability to communicate with the person they look after.

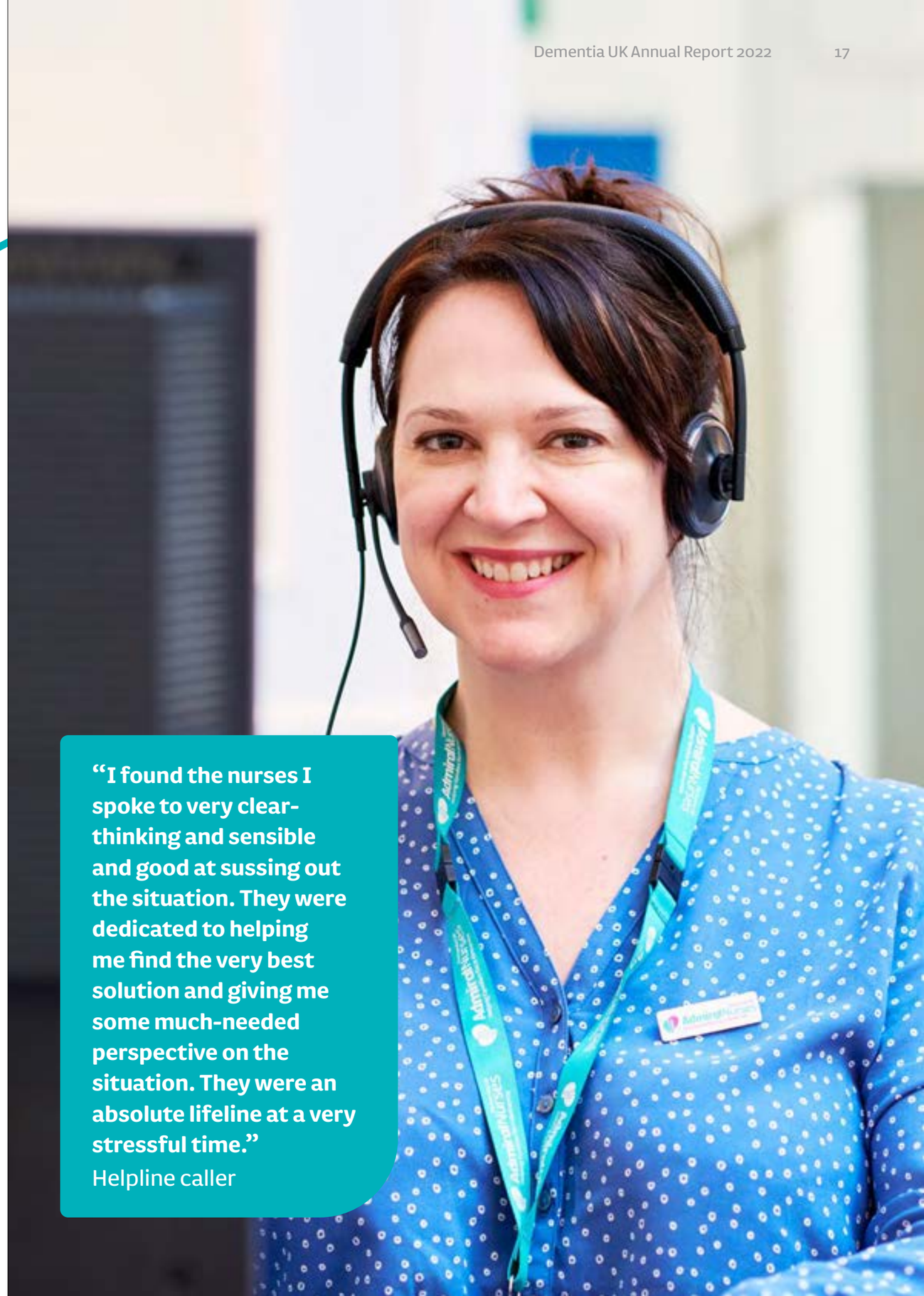
96% of carers said the Helpline Admiral Nurse gave them enough time and listened to them.

95% said that the nurse was good at explaining things clearly.

90% stated that their experience of our Helpline was very good or good.

Our Helpline helps to relieve pressure on other health and social care services.

Without the Helpline, 24% of carers would have seen a GP about the needs of the person with dementia.



"I found the nurses I spoke to very clear-thinking and sensible and good at sussing out the situation. They were dedicated to helping me find the very best solution and giving me some much-needed perspective on the situation. They were an absolute lifeline at a very stressful time."
Helpline caller

Spotlight

Closer to Home virtual clinics

Closer to Home Project Lead Helen Green explains how virtual clinics are reaching more families living with dementia.

Closer to Home is a new initiative that provides families with support from a dementia specialist Admiral Nurse in virtual clinics, by phone or video call. Families can book a free 45-minute appointment at a time to suit them at **dementiauk.org/book-a-clinic-appointment.**

Closer to Home was funded in its first year of service by our corporate partner, Leeds Building Society.

Originally, the intention was to establish the Closer to Home service as a mobile support centre travelling the UK, offering face-to-face appointments. But when lockdown was announced, followed by the ongoing requirement for social distancing, the model evolved into nurse-led virtual clinics offering appointments by phone or video call.

Virtual clinics have the advantage of meeting an increased need for support for families countrywide, reaching people living in under-served areas and those who cannot easily leave their home.

It also allows family members who may live in different areas – both within the UK and sometimes overseas – to participate in the same appointment. We have supported families in countries including Australia, America and Switzerland, all with relatives with dementia in the UK, enabling them to receive the expert advice of an Admiral Nurse at a time when travel was restricted.

Initially, we offered clinics three days a week, but demand for the service led to us expanding to four days a week in February 2022. We have also created four new full- time Admiral Nurse posts to work in the clinics.

Accessing ongoing support

In the first six months after the launch of Closer to Home in June 2021, over 1,300 families had a virtual appointment. Families can access ongoing support through repeat bookings, and health professionals are also using the service to improve their dementia knowledge and awareness.

We are currently working on plans to launch the mobile support centre alongside virtual clinics and hope to commence this in January 2023. We have also developed a new, simpler, bespoke booking system, and are preparing to offer appointments five days a week so we can support more families facing dementia.

Evaluating Closer to Home clinics

Our Insights and Evaluation Team gathered data about our virtual clinics for the six-month period from their launch in June 2021 until the end of November.

During this period, our Closer to Home clinics completed 632 appointments.

The majority of appointments were conducted by phone (63%).

The most common reasons for requesting an appointment were:

- accessing support
- dementia understanding and support
- care options
- psychological/emotional support
- understanding behaviour

Our clinics nurses have the time to listen.

97% of survey respondents said the Admiral Nurse was 'very good' or 'good' at listening to them, making them feel at ease and showing care and understanding.

96% of respondents said the nurse was 'very good' or 'good' at giving them enough time to discuss their situation, and explained things clearly.

90% of respondents said they received all or most of the information, advice or support that they needed.

91% of respondents said their appointment improved their ability to take better care of the person with dementia.

91% said it improved their ability to make decisions about the person's care.

Our clinics signpost contacts to services that can offer additional support.

These include GPs, Social Services, voluntary organisations and organisations that offer advice around benefits and services.

"I felt I must contact you to say how useful my appointment was. Admiral Nurse Helen was so kind and caring but also knowledgeable and helpful. We are not fortunate enough to have an Admiral Nurse service here in Calderdale but having access to the virtual clinics is really beneficial, especially when you have wonderful nurses like Helen."
Family carer

Supporting younger people

Our Young Onset Dementia Programme offers specialist support to people whose dementia symptoms developed before the age of 65 and their families.

What we said we would do

Increase access to Admiral Nurse services with a young onset dementia specialism or expertise.

We also have a searchable database listing young onset dementia groups and services – something that is unique to Dementia UK.

What we did

Appointed a new Consultant Admiral Nurse for Young Onset Dementia, and increased the number of nurses with a young onset dementia specialism.

Launched a young onset dementia module on Blackboard (our virtual learning space for Admiral Nurses). We also developed two young onset dementia-focused webinars: Young onset dementia and families, and Sexual health, perimenopause and menopause in women with young onset dementia.

What we said we would do

Develop and implement an effective and sustainable young onset dementia digital support programme including online information, webinars, short films and blogs.

What we did

Created a specific young onset dementia section of the Dementia UK website with resources including information pages, blogs, family stories, and films to educate and inform people about young onset dementia.

Developed a range of leaflets specific to young onset dementia, addressing the different impact on and needs of younger people with dementia. We have published three new leaflets and webpages: About young onset dementia; Employment and young onset dementia; and Frontotemporal dementia.

What we said we would do

Increase the number of people affected by young onset dementia who connect and engage with Dementia UK.

What we did

Grew the membership of the Young Dementia Network from 3,454 to 4,484.

Carried out a survey of people affected by young onset dementia to guide the development of a portfolio of resources. The survey had 250 responses and identified what information people would find helpful – 150 respondents also volunteered to help develop resources.

Increased the involvement of people affected by young onset dementia through personal stories, photos and films shared in the media and on social media.

"[People with young onset dementia] need acknowledgement that it is not just older people who have dementia. It is life-changing and younger people have jobs, need an income. I feel as though I lost my independence and part of my identity."
Person with young onset dementia

What we'll do next – our priorities for 2022-2023

Develop further learning materials and support for nurses, including a pre-Admiral Nurse young onset dementia module, learning opportunities in the Admiral Nurse Forum and Summer School, and a special interest group.

Grow the number of Young Onset Dementia Admiral Nurses – we aim to recruit at least three per year with 15 in post across the UK by 2025.

Work with the Consultant Admiral Nurse for Young Onset Dementia to raise the national profile of Dementia UK's young onset dementia offer.

Promote the availability of Closer to Home virtual clinics and the Helpline to people affected by young onset dementia, and collect data and feedback on people's experiences of the service.

Develop the young onset dementia section of the Dementia UK website by reviewing and enhancing existing content and identifying and filling gaps.

Produce at least six new young onset dementia leaflets, including Getting a diagnosis of young onset dementia and next steps; Support for children and teenagers with a parent with young onset dementia; and Choosing a care home for and with a person with young onset dementia.

Spotlight

The Young Dementia Network

Tessa Gutteridge, Programme Director for Young Onset Dementia, explains how the Young Dementia Network is working to improve the lives of people with the diagnosis and their families.

The Young Dementia Network was established in 2016 by YoungDementia UK. Following the merger of our charities in 2020, it is now hosted by Dementia UK. It is a unique influencing community made up of people living with young onset dementia, their families and friends, and people working in health and social care, dementia research and the voluntary sector.

Nearly 1,000 people joined the Young Dementia Network this year, taking our membership to over 4,400.

Network members are united in their purpose to improve the lives of people with young onset dementia and their families, and create positive change for a better future. This means embedding young onset dementia firmly within health and social care systems, policies, practice, and research nationally.

This year, the Network has involved people affected by young onset dementia in contributing to England's new dementia strategy, to the All-Party Parliamentary Group on dementia, and to the Memory Services National Accreditation Standards consultation.

Raising the profile of young onset dementia

As well as building a community to create change, the Network has enabled members to participate in research studies, exchange good practice and information, and share stories of activism, including through regular webinars.

Dementia UK has also raised the profile of the Young Dementia Network and young onset dementia by launching our Network website, growing our social media activity and publishing an engaging e-newsletter, all with fresh branding.

There is still much to do to improve the lives of people affected by young onset dementia, but with the reputation and reach of Dementia UK behind us, we have made an excellent start.

"As a clinician and researcher, it is highly motivating and inspiring to be part of a network committed to the common purpose of raising awareness of young onset dementia and promoting change."

Dr Janet Carter, Consultant in Old Age Psychiatry and Senior Clinical Lecturer in Old Age Psychiatry at University College London

Recording our impact

Our Insights and Evaluation Team plays a vital role in helping us develop and improve our services by listening to Admiral Nurses and families affected by dementia.

What we said we would do

Ensure that our insights and evaluation work effectively supports Dementia UK's strategy by collecting, analysing and reporting evidence of the impact of Admiral Nurses and wider Dementia UK activities.

What we did

Monitored and evaluated Dementia UK's clinics services through:

- developing dashboards for activity reporting with 2,021 appointments completed – 1,217 in Closer to Home clinics and 804 in primary care clinics
- developing surveys to collect feedback from people accessing services, with 365 surveys completed to date
- providing reports for steering groups throughout the year for primary care clinics services

Supported Dementia UK's 'Guiding the way: NHS continuing healthcare (CHC) campaign' (see p28) with a rapid appraisal of experiences of CHC from Admiral Nurses and family carers. We completed three focus groups and in-depth interviews and shared the results with the Policy, Campaigns and Public Affairs Team.

Supported our strategic objectives by working on evaluations with Admiral Nurses across a range of services throughout the UK. We also provided 16 monitoring reports for hosted Admiral Nurse services.

What we said we would do

Publish external reports and resources including Dementia UK surveys of carers and professionals to show the impact that our nurses are having and help us to build the evidence base for Admiral Nursing.

What we did

Published summary reports for:

- the Dementia Helpline – see p16 for results
- the Admiral Nurse Lewy body dementia service
- Closer to Home virtual clinics (interim six-month report for partner Leeds Building Society) – see p20

We also...

Developed and launched our first National Admiral Nurse Census in March 2022. The census records our nurses' activity on one selected day and is a great opportunity to gather high quality data to demonstrate the uniqueness and complexity of their roles across various settings.

Supported the Young Onset Dementia Working Group to develop and implement an online survey on what young onset dementia information people want; what has been helpful; what is missing; and how they like to access information.

Developed and implemented a Dementia UK staff audit and survey on equality, diversity and inclusion. The team also supported the Consultant Admiral Nurse for Diverse and Under-served Communities with an Admiral Nurse diversity audit.

What we'll do next – our priorities for 2022-2023

Ensure that our insights and evaluation work continues to effectively support Dementia UK's strategy. We will support colleagues across the organisation through the development of suitable tools/methods for gathering, storing and sharing information and evidence. We will also support the collection, analysis and reporting of evidence on the impact of Admiral Nurses and wider Dementia UK activities.

Continue to gather data to help Dementia UK demonstrate the role of Admiral Nurse across various settings. We will analyse, report on and further develop the National Census. We will also analyse and report evidence relating to Dementia UK's Admiral Nurse services and further develop tools to support with this (eg dashboard reporting).

Ensure our nurses are supported with monitoring and evaluation of their services. We will launch a monitoring and evaluation handbook and an education module on Blackboard, with supporting resources. We will continue to provide monitoring and evaluation advice, guidance and support.

Spotlight

Our ‘Guiding the way’ campaign

Our Policy, Campaigns and Public Affairs Team raises awareness of the issues facing families living with dementia and pushes for change, including through influencing national policy.

In November 2021, we launched our ‘Guiding the way’ campaign, looking at the challenges many families face when applying for NHS continuing healthcare (CHC) funding for a person with dementia, and calling for improvements to the process. CHC funding is a package of care fully funded by the NHS for adults with long-term, complex health needs.

We interviewed family carers and Admiral Nurses to better understand the challenges families face trying to access CHC funding. We uncovered three main issues:

- assessors ignoring or misunderstanding the variable impact dementia may have on individuals and their families
- a lack of support within the process
- a confrontational, rather than supportive, process

Our campaign focused on shining a light on the difficulties that many families affected by dementia face when applying for CHC, and sharing our recommendations for improving the CHC application and assessment process across England.

We launched ‘Guiding the way’ by sharing family stories about applying for CHC on our website and on social media – two of these were picked up by local and national media. We also featured a video of Maureen – a Dementia UK Volunteer Ambassador – talking about her experiences of applying for CHC for her husband.

As part of the campaign, we developed a guide to CHC for families living with dementia, and a separate guide for CHC assessors, which aims to support them in completing robust assessments of people with dementia. We have also developed e- learning resources for Admiral Nurses to continually develop their knowledge and understanding of CHC.

Since launching the campaign, we have seen an increase in contacts to our Helpline and clinics about CHC, and over 4,000 views of our information resources page. As members of the CHC Alliance, we have collaborated on an amendment to the Health and Care Bill to improve accountability and quality of services, and are working with the Department for Health and Social Care (DHSC) on updates to the CHC National Framework.

We are committed to improving the CHC experience for families affected by dementia by working with our supporters, Admiral Nurses, local CHC leads, NHS England, NHS Improvement, and the DHSC to make our recommendations a reality.

“It is so important for families going through the CHC process to have someone like an Admiral Nurse to help them navigate the system. I don’t know how families cope on their own.”

Mary, who was supported by an Admiral Nurse when applying for CHC for her mum

Fred's story

The Admiral Nurse Dementia Helpline was a lifeline to Fred when his wife Lynne was diagnosed with vascular dementia. Fred is now one of our Volunteer Ambassadors, helping to raise awareness of the challenges facing families living with dementia.

Lynne was a primary school music teacher for 35 years and a university lecturer for eight years. During the early part of her teaching career, she was also a semi- professional opera singer. She had a real vocation – she loved music and was very well respected in the amateur theatre world.

Lynne was lecturing at Plymouth University when she suffered her first stroke, in 2010. It left her with some paralysis on her left side, which meant she had to stop work, but she managed to rebuild, working on shows for the local operatic society.

"I fought for two years for a diagnosis."

Then, in 2017, Lynne had a blackout while driving and crashed into a parked car. She got all the admin sorted out, but that evening, she went to a rehearsal, and some of the cast members noticed changes to her facial features. She was taken to A&E, where it was confirmed that she had had a second, more serious, stroke.

From that point, I knew Lynne was deteriorating. But it didn't just go from good to bad overnight – it was a long and difficult process. I fought for two years to get a diagnosis, and finally, in 2020, she was diagnosed with vascular dementia at the age of 65.

Lynne's dementia meant I had to give up my job in the Ambulance Service. I was getting her up in the morning, dressing her, taking her to the toilet, lifting her. She could no longer remember our conversations; her cognition, sight and hearing were rapidly declining, and she was incontinent.

Lynne's psychiatric doctor noticed that I was at risk of a breakdown and gave me the details of the local Admiral Nurse service. I didn't think I needed it at that stage, but I wrote the number down in case I needed it in the future.

Eventually, after a difficult morning with Lynne, I reached crisis point. I went into my office, saw the number for the Admiral Nurse service, and picked up the phone. An amazing nurse, Trace, listened as I cried for an hour and a half. It was like everything came to the surface.

"My Admiral Nurse opened the door to getting help."

Trace arranged to visit us at home, and when I told her everything I was doing for Lynne, she made me see that I couldn't do it alone anymore. She encouraged me to see the doctor about my depression, and supported me with moving Lynne into a care home. It was the most difficult decision I've ever made, especially as it happened during Covid-19 which meant I was unable to visit Lynne, but Trace reassured me that it was the right time.

When someone you love has dementia, it's so hard to get help. Whenever I had asked, the door had always been closed on me. Trace opened that door when no one else would.

Dementia takes over someone's life. Lynne was such a vivacious person, but that has all been lost. Her friends, family, fellow musicians and I are missing out by no longer having the old Lynne in our lives.

I am now a Volunteer Ambassador for Dementia UK and am passionate about spreading awareness of dementia and the role of Admiral Nurses – we urgently need more so that every family that needs their support is able to get it.

Developing our Admiral Nurses

Dementia UK offers ongoing support and continuing professional development to all Admiral Nurses, allowing them to build their knowledge, skills and experience, as well as supporting other health and social care professionals to grow their understanding of dementia.

What we said we would do

Deliver our first ever virtual Summer School for health and social care professionals who work with people living with dementia and their families, involving a series of webinars looking at topics including telephone skills, assessment and diagnosis, distressed behaviour, and planning.

What we did

Hosted a four-day online Summer School on the theme of 'The NHS Well Pathway for dementia'. Summer School was facilitated by the Professional and Practice Development Team, with Admiral Nurses and Dementia UK clinicians presenting sessions on 'Preventing well', 'Supporting well', 'Living well' and 'Dying well'.

Summer School was attended by a total of 621 health and social care professionals. Feedback said that the event increased awareness, understanding and interest in the work of Dementia UK, its Admiral Nurses and Helpline; ignited a passion to improve dementia care; instilled the importance of listening to service users' and carers' experience; and increased interest in a career in Admiral Nursing.

What we said we would do

Plan and develop our Admiral Nurse Academy to ensure it supports our nurses and the increasing number of other nurses who would like to become Admiral Nurses.

What we did

Continued to build the Academy to provide a space for Admiral Nurses that is dedicated to continuing professional development; innovation; career development; knowledge exchange; developing and showcasing evidence; and connecting people and practice across the UK Admiral Nurse community, amongst other things.

We hosted development opportunities for our nurses on our Blackboard learning platform, which allows us to showcase best evidence, innovation and research. We have a regular webinar programme, offer flexible courses and learning units and focus on the individual development needs of our nurses. In addition, we offer a pre-Admiral Nurse module for nurses who are interested in becoming an Admiral Nurse – this highlights the role of the nurse in working with families.

We also...

Developed an online clinical supervision model for Admiral Nurses – we now have around 40 groups which meet monthly and are facilitated by senior nurses at Dementia UK.

Developed a leadership pathway for Admiral Nurses. Our Admiral Nurse Leadership Course offers an opportunity for nurses to consider their leadership styles more closely, and how they can influence change with a wider impact for families living with dementia. The pathway then offers nurses the opportunity to continue to develop their leadership skills by studying with the Florence Nightingale Foundation.

Hosted a successful online Admiral Nurse Forum: an opportunity for all of our nurses to come together to learn and share best practice. Speakers included Ruth May, Chief Nursing Officer for England, and Andrea Sutcliffe, Chief Executive of the Nursing and Midwifery Council, among others.

What we'll do next – our priorities for 2022-2023

Build the Admiral Nurse Academy, considering the current education and learning needs of our nurses and the support we can offer to other health and social care professionals working with people affected by dementia.

Deliver our new Accelerator Learning Programme to enable current Registered Nurses (Adult, Mental Health and Learning Disability) to become Admiral Nurses and establish a new hosted service. This is a 'blended learning' programme where nurses will spend 50% of their time studying, and 50% working within their employing organisation (eg NHS Trust) preparing to launch their service. In the first year of the programme, we aim to recruit at least eight nurses.

Build our external offer of education and learning for health and social care professionals working with people with dementia and their families. We will continue to develop our Summer School and consider other ways to engage potential Admiral Nurses of the future.

Researching dementia support and care

Through our Research and Publications Team, we inspire best practice nationally to help people with dementia and their families get the support they need.

We contribute our expertise to the wider field of research into dementia care and are partners and collaborators on a range of research studies.

We also offer expert advice, assist with participant recruitment, and support dissemination of research across a wide range of stakeholders.

What we said we would do

Publish 'What you really want to know about life with dementia' – a book giving families affected by dementia the chance to voice their questions and concerns. We wanted to provide a resource that gave a rationale or an explanation for the issues families were facing, followed by the advice that they would receive from an Admiral Nurse.

What we did

Completed the 17-chapter book, with the content directed by families affected by dementia. It focuses on what people with dementia and their family carers feel are the most important questions for them, and not what professionals feel they should know. It is expected to be published by December 2022

What we said we would do

Help Admiral Nurses turn their projects and activities into compelling research. We said we would support and guide them to produce projects that resulted in new evidence, extending the organisation's research capability beyond the Research and Publications Team.

What we did

Supported several nurses to develop and complete projects and research. This involved working across teams within Dementia UK and in Admiral Nurse practice.

Two examples of projects are 'Understanding the experiences of Admiral Nurses during Covid-19' and 'Understanding the experiences of carers of people with Lewy body dementia receiving a specialist Admiral Nursing intervention'. They will be presented at the British Society of Gerontology Conference and the International Lewy Body Conference, respectively.

What we said we would do

Produce even more peer-reviewed publications to disseminate the activity of Admiral Nurses and evidence of how best to help people with dementia.

What we did

Produced a high number of publications of varying kinds. In addition to the book described above, we have supported and/or written over 40 journal articles and other publications throughout the year.

What we said we would do

Develop a research plan for Dementia UK that focuses on commissioning the research needed to support the direction of our strategy.

What we did

Due to confounding factors such as stretched resources in the Research and Publications Team and the impact of Covid-19, we were unable to achieve this objective. It will remain an objective for 2022-23.

We also...

Accepted commissions from several journal editors to write about various aspects of dementia care to support generalist practitioners. This includes one of a series of 10 articles for The Journal of Older People Nursing.

Joined a subgroup to support the development of a research plan to support the next National Dementia Strategy.

Contributed a paper to the annual Alzheimer's Disease International Report 2022 focusing on supporting family carers in decision-making.

Provided a 10-venue tour discussing continence care in dementia. We have also been involved in a large National Institute for Health Research (NIHR) study exploring continence care in the acute hospital setting – the report is in final edits, and we have partnered in the development of an NIHR podcast to accompany its launch.

Became collaborators and/or co-applicants on several new successful research bids with university partners across the UK.

Secured a part-time secondment for our Head of Research and Publications, Karen Harrison Dening, to a Chair (Professor) in Dementia Nursing at De Montfort University.

What we'll do next – our priorities for 2022-2023

Help Admiral Nurses turn more projects and activities into compelling research that result in new evidence of how Admiral Nurse services impact on positive outcomes for families.

Produce even more peer-reviewed publications to raise awareness of the activity of our nurses and evidence of best practice in dementia care and support.

Develop a research and clinical network to consider the needs of children of people diagnosed with young onset dementia, collaborating with other teams in Dementia UK.

Complete a recently commissioned second book: 'Working with dementia – what you want to know', for professionals working in the dementia field.

Spreading the word

Our Marketing and Communications Team is central in raising awareness of dementia and the life-changing support of our Admiral Nurses. We also produce expert resources for families affected by dementia.

What we said we would do

Strengthen our social media presence through Facebook, Twitter, Instagram and LinkedIn to ensure that every post reaches the people who need to see it, and that our key messages are always clear.

What we did

Worked with a new social media monitoring platform to streamline our social media scheduling and monitoring. We have used their 'listening tool' to find news articles and other content that is relevant and of interest to our social media followers and encourage them to engage with our posts.

Hosted our first Volunteer Ambassador takeover for Volunteers' Week on Twitter.

Hosted monthly Twitter Spaces with our Admiral Nurses, talking about different topics and giving a platform to supporters and social media users to talk about their concerns and challenges. We are the first UK charity to use Twitter Spaces in this way – see Spotlight on p40.

Increased engagement and reach on Instagram by posting quizzes and polls on Instagram Stories; asking our supporters for ideas on topics to cover; and creating videos for Instagram Reels – we have posted 19 videos, which have been played 60,880 times.

Trialled a new style of content with our 'Home' and 'Loss of recognition' animations. These give tips for carers in a new, more visual, digital format. They proved to be some of our most engaging pieces of content this year – the 'Home' animation had the highest reach of any video we have ever posted on Instagram and received nearly 200 positive comments.

Experimented with different types of content on LinkedIn, including PDFs, articles and polls. This resulted in an increase in click-through and engagement rates and gave LinkedIn our biggest channel growth this year.

Our social media growth in 2021-22

Facebook: **up 24%**

Twitter: **up 3%**

Instagram: **up 24%**

LinkedIn: **up 56%**

What we said we would do

Provide excellent, supportive information for people before and after a diagnosis of dementia by enshrining the expertise of Admiral Nurses through information on our website and in leaflets.

What we did

Published nine new leaflets, with an associated webpage for each:

- A stay in hospital
- End of life care
- Sources of support – practicalities
- Sources of support – financial and legal affairs
- Understanding frontotemporal dementia
- What is young onset dementia?
- Guide to NHS continuing healthcare – for carers
- Guide to NHS continuing healthcare – for assessors
- Employment and young onset dementia

What we said we would do

Deliver excellent digital activity and capitalise on new technology and technological trends in order to reach particular audiences in the way that best suits them.

What we did

Worked with a digital agency to build bespoke events forms that allow our supporters to register and pay for a place in our challenge events seamlessly, sign up to do their own fundraising event, and apply for a place in the London Marathon. Since the launch, our event registration conversion rate has doubled.

Updated the 'Get support' section of our website so the content is written for those reading on their mobile or desktop. We have also reorganised the sub-sections to make it easier for users to find the content they're looking for.

What we said we would do

Raise awareness of Dementia UK's clinical services, influencing work and fundraising by incorporating our new key messaging into all our communications and delivering a series of proactive integrated awareness campaigns.

What we did

Developed our first ever national brand campaign, 'I live with dementia', including capturing family stories and producing a video, advertisements to be displayed on social media and in five major cities, and a series of emails. The campaign launched in April 2022.

Worked with clinical teams on documents, webpages, social media and advertising to promote our Admiral Nurse Accelerator Learning Programme and drive recruitment.

What we said we would do

Ensure we are delivering our messages effectively to under-served communities, for example people from ethnic minority and LGBT+ communities, by working with people with lived experience.

What we did

Published blog posts from Admiral Nurse Asma Pandor on cultural awareness in dementia care, and steps that professionals can take to improve cultural and religious awareness in their work.

Captured Chris and Heather's story – our first family story featuring a lesbian couple – which we have used widely, including on our website, in our supporters' magazine, and in a variety of fundraising appeals. We also highlighted support services for the LGBT+ community on social media.

Developed a small awareness campaign around Black History Month. We put out content including a supporter story, videos with our Consultant Admiral Nurse for Diverse and Under-served Communities, a blog about stigma in black communities, and a Twitter Space.

What we said we would do

Research and further develop ways in which we can support people through digital services.

What we did

Launched an online booking system for Closer to Home virtual clinics appointments with an Admiral Nurse.

Worked with an external expert to develop our first ever email strategy – we changed the format of our email communications to focus on one issue, rather than newsletter and ad hoc campaigns. We have also chosen a new email provider.

We also...

Implemented the necessary processes to ensure the Marketing, Communications and Digital Teams are working across projects in a co-ordinated way to produce even more high-quality content.

Some PR highlights of 2021-22

In 2021-22, we built stronger relationships with journalists and editors and worked more closely with our Ambassadors and Celebrity Supporters – all of which led to some great PR successes.

Director of Clinical Services, Paul Edwards, secured coverage in The Independent with an 'op-ed' feature discussing Ed Balls' BBC documentary on the social care crisis. This was featured as a leading story on its homepage and was also picked up by MSN and Yahoo.

Reality TV personality Georgia Kousoulou was interviewed in Closer magazine, announcing her new role as a Celebrity Supporter of Dementia UK. She was also interviewed by OK! magazine for our Remember a Star Christmas appeal, discussing her grandmother's experience of dementia.

Dementia UK Ambassador Naughty Boy was interviewed in Metro, speaking about his mother's dementia and his role as a carer. He talked about being an Ambassador and his experiences of calling the Admiral Nurse Dementia Helpline.

Head of Research and Publications, Karen Harrison Dening, was the key spokesperson on the representation of dementia in film, including commenting in Metro on the Anthony Hopkins film 'The Father'.

Metro featured a first-person piece from Georgie Rees, whose father lives with dementia, raising awareness of the challenges facing families affected by young onset dementia. She spoke about the support she received from Admiral Nurse Fiona Chaâbane, saying: "She offered ongoing emotional support to us and provided valuable advice and guidance as Dad's health deteriorated."

We also secured widespread national, regional and trade media coverage on key issues in dementia care, including missed dementia diagnoses during lockdown and day centre provision being slashed.

What we'll do next – our priorities for 2022-2023

Develop and oversee two campaigns to increase awareness and knowledge of Dementia UK. Our first campaign, 'I live with dementia', is built around the statement: 'If you love someone living with dementia, you're living with it too'. We will analyse and learn from this campaign and then work on a second campaign in early 2023.

Update our key messaging and develop a fundraising case for support. We will conduct in-depth interviews with family carers and work with external experts and internal stakeholders.

Develop our website to make it more accessible and user-friendly, including investigating the possibility of having chat functionality.

Promote the work of Admiral Nurses to prospective candidates and hosts by developing a suite of materials highlighting the work they do. We will do this through 'day in the life' films, articles, emails, blogs, social media posts, and trade press coverage.

Develop a PR, celebrity and influencer strategy that will drive forward our work in these areas.

Publish six new leaflets and associated webpages including Dementia and menopause; Finance, benefits and debt; Familial Alzheimer's disease; Vascular dementia; and Good hydration for people with dementia.

Spotlight

Twitter Spaces

In May 2021, Twitter made its live audio rooms, called Twitter Spaces, available to all users. These Spaces allow real-time conversations with Twitter audiences about subjects that are important and relevant to them.

Senior Consultant Admiral Nurse Vic Lyons and Digital Marketing Executive Laura Mason were quick to identify the potential of this new digital communication platform.

We held our first Twitter Space in July 2021 and were proud to be one of the first charities in the world – if not the first – to start hosting monthly Twitter Spaces.

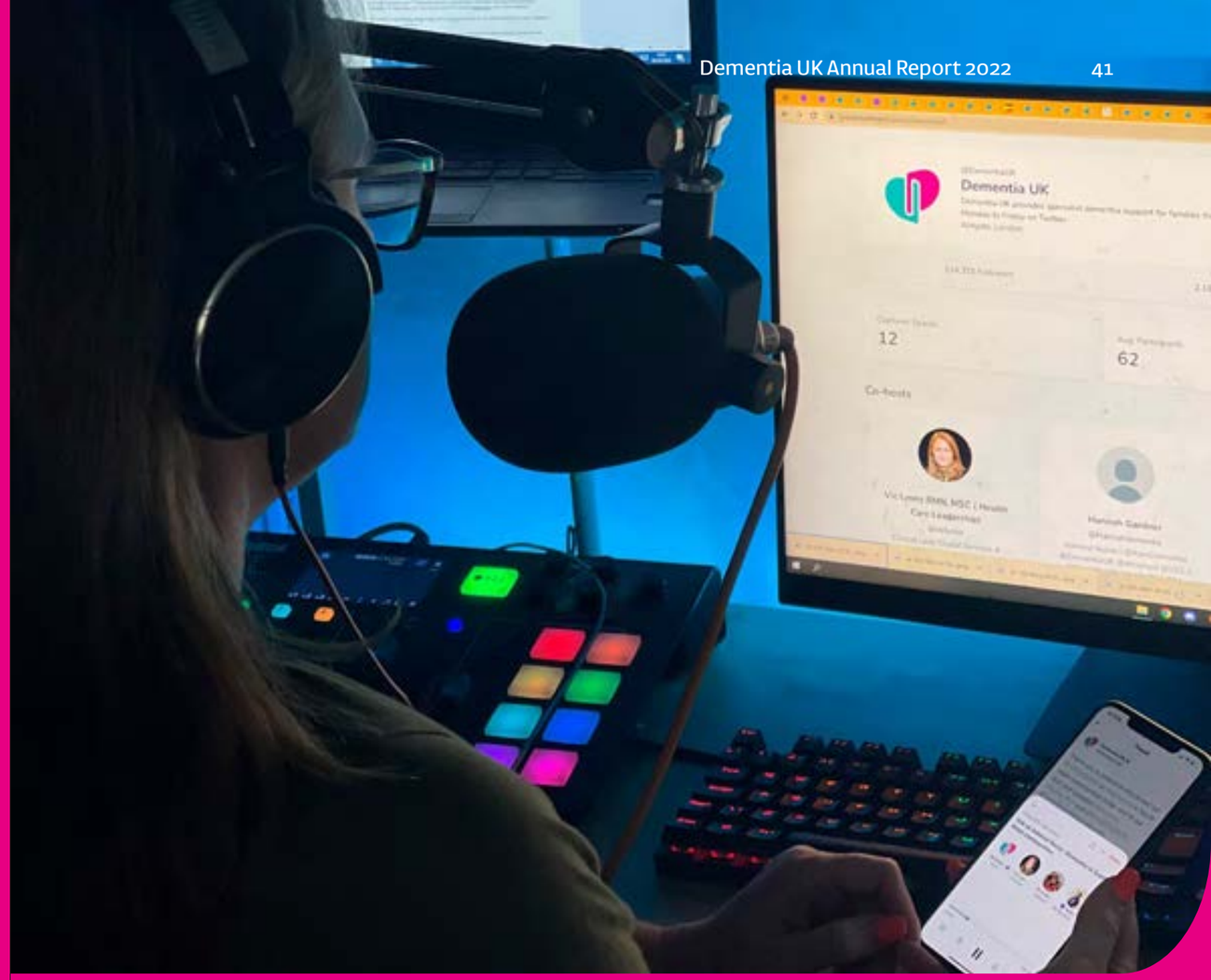
Our Twitter Spaces, called 'Ask an Admiral Nurse', are hosted by Vic Lyons, with our nurses, people living with dementia, family carers and other experts joining us as speakers.

Topics have included getting a dementia diagnosis; challenging stigma; cultural barriers to dementia diagnosis and care; young onset dementia; becoming an Admiral Nurse; understanding behavioural changes; and a stay in hospital.

Twitter Spaces provide an opportunity to have a two-way conversation with our audience – they can hear from the experts, but also share their own thoughts and experiences. We ensure the Space is inclusive, non-judgmental and inviting, and many members of the public have joined in, talking about their experiences and asking questions.

Approximately 100 people have joined each Twitter Space, with many staying to listen to the whole hour. We are also able to record the Space and make it available for 30 days after the event – roughly 200-300 people have listened to each recording.

"It was a great experience and I was very glad I did it. Just talking about things actually felt therapeutic in a weird sort of way. Big thanks to everyone involved. Doing it via audio and not video really helped with the nerves and made it much easier to just talk from the heart. I really enjoyed the relaxed feel and thought it was a great platform for people to speak and share experiences."
Guest speaker



Feedback from our Twitter Spaces

"It is great how much more connected you feel to a person's voice versus copy or even video, knowing it is live and interactive."

"I can't thank @DementiaUK enough for the support they give through their Admiral Nurses. Please give their Twitter spaces a listen if you are a carer/relative of someone with dementia."

"Absolutely fascinating listening to @DementiaUK @JulesKnightDUK [Admiral Nurse Jules Knight] and others talking openly and honestly about young onset dementia."

"A really powerful discussion about people with dementia in hospital and how we can best support them. Highly recommend a listen."

Denise’s story

The practical and emotional support of an Admiral Nurse helped Denise and her family cope when her mum was diagnosed with Alzheimer’s disease.

My mum, Bertha, spent her whole life looking after other people. She cared for her siblings from the age of 11 due to her mother’s ill health. Later in life, she cared for my dad, who had dementia, and helped look after my children while I was working as a nurse. She was my go-to person whenever I needed help.

I first noticed changes in Mum’s behaviour in 2014 when she started to make accusations that someone had broken into her home. She then started to have episodes of delirium and was taken to hospital. No reason was found, but she was admitted to a care home until she was stable.

“I didn’t feel I could talk to anybody.”

After three years trying to get a diagnosis, Mum was finally diagnosed with Alzheimer’s disease in August 2017, at the age of 97. She was prescribed medication to slow the progression of the disease, but it had the opposite effect and her condition deteriorated rapidly.

The few months after Mum’s diagnosis were awful. I didn’t know what to do or where to turn. My health started to deteriorate. I couldn’t sleep, I was always tearful, and I didn’t feel I could talk to anybody.

When I called the Admiral Nurse Dementia Helpline, I broke down. I shared all my worries and for the first time, I felt listened to and understood.

Following the call, I was put in touch with Deborah, an Admiral Nurse in my area. She visited me at home, and we just sat and talked. She took time to understand our background and family history – she was a support for the whole family.

When you care for someone with dementia, it’s so easy to doubt yourself and whether you are doing the right thing. Deborah reassured me that I was doing a good job and that what I was going through was normal. She reminded me that dementia is so much more than just memory loss, and it was dementia that was causing the changes in Mum’s personality.

Deborah helped me practically and emotionally – she had so much specialist knowledge about dementia. Mum would sometimes leave the house on her own and get lost, so Deborah suggested that she wear a scannable badge so that the emergency services could return her home safely. I wouldn’t have known about any of this without her.

When Mum had a nasty fall and ended up in hospital, the doctor suggested that we move her to a care home. I knew it was the right decision to keep her safe, and Deborah supported me throughout the process.

“My Admiral Nurse was at the end of the phone.”

Mum celebrated her 100th birthday with a tea party in the care home, but soon after, her health started to deteriorate further, so I got back in touch with Deborah. Knowing that she was there at the end of the phone was invaluable.

Mum passed away in January 2021 during the Covid-19 pandemic. We could only have a small number of people at the funeral so we live-streamed the service. I laid Mum to rest in the family grave, with her own mum and dad. Deborah supported me in coming to terms with my bereavement.

Caring for my Mum was the hardest thing I’ve ever had to do, but Deborah made that journey easier. Without her, I wouldn’t have been able to cope.

Celebrating donations, gifts and pledges

Dementia UK relies entirely on voluntary donations to grow the number of Admiral Nurses. Every penny donated by supporters helps us reach more families facing dementia.

What we said we would do

Maintain a diverse range of supporters and increase the number of supporters we can reach.

What we did

Delivered our summer appeal in July and our Remember a Star Christmas appeal, combining direct mail, email and social media marketing. These both attracted a large number of new donors.

Rolled out a campaign offering a free pin badge to prospective supporters who registered their details via social media.

Continued to promote Facebook birthday fundraising.

Increased our number of regular givers by 57% from the previous year.

Secured additional awareness through advertorials and with tailored editorial content in multiple publications, including the Jewish Chronicle and British Muslim magazine.

What we said we would do

Deliver powerful and effective content to supporters, ensuring a supporter-centric approach to our activities by using insight, refining our supporter journeys and collaborating with other Dementia UK teams.

What we did

Delivered a loyalty mailing to regular givers, legacy pledgers and Christmas appeal donors to show them our appreciation and tell them about the impact of their support.

Produced two issues of our supporter magazine, Closer to you, in autumn and spring. The magazine is an internal collaboration with the Editorial Manager to source and develop content that places the stories of those affected by dementia at the centre.

Worked collaboratively to source stories of Admiral Nurses and families living with dementia to feature across acquisition appeals, social media marketing and print advertising.

Delivered sensitive and personalised communication to all In Memory supporters including a thank you postcard, the opportunity to add a loved one's photo to our online Memory Wall, and an invitation to complete an In Memory survey.

What we said we would do

Invest in legacy marketing for the long-term benefit of Dementia UK.

What we did

Delivered a multi-channel marketing plan promoting gifts in Wills via print advertising, email and paid Facebook campaigns, including a legacy prospecting mailing to warm supporters.

Increased the number of pledgers by 82% from the previous year.

Participated in Remember a Charity Week in 2021, reaching over 113,000 people with gifts in Wills messaging. Amongst other activities, we emailed supporters promoting gifts in Wills and our free Wills services, ran Facebook ads, and placed features in The Scotsman and Choice magazine (amongst others) encouraging readers to leave a gift in their Will.

Introduced two additional free Wills services – online via Farewill and by phone via the Co-op – ensuring that supporters have multiple options for completing their Will. We also continued to promote gifts in Wills internally so colleagues feel comfortable speaking to those they meet about the importance of gifts in Wills.

What we said we would do

Expand and develop our team to deliver an efficient and effective fundraising operation in an ever-changing and sometimes uncertain fundraising environment that is still feeling the effects of Covid-19.

What we did

Introduced two new roles to the team to increase our capacity to provide effective, timely and high-quality marketing, stewardship and reporting.

What we'll do next – our priorities for 2022-2023

Continue to invest in donor acquisition and retention, securing and delivering one-off donations, regular gifts and donations made in memory through a variety of existing and new channels and products.

Develop and deliver timely, relevant and engaging supporter communications to inspire both existing and new supporters to donate to Dementia UK.

Continue to raise awareness of gifts in Wills as part of the long-term sustainability of our income.

Spotlight

Corporate partnerships

Our partnerships with businesses large and small are vital in helping us grow the number of Admiral Nurses.

In 2021-22, Leeds Building Society reached an incredible milestone, raising £400,000 for Dementia UK after just two years in partnership together. Colleagues have taken on a wide range of challenges for us, from virtual global walking events and marathons to a Christmas raffle and our own March Dog Walking Challenge. This support enabled us to launch our new Closer to Home virtual clinics, offering appointments with an Admiral Nurse by phone or video call to families across the UK.

Colleagues at Central England Co-operative have raised an incredible £1.7m for Dementia UK since the start of our partnership in 2017, through events like car washes, skydives and ziplining. This year, we established new clinic posts in Nottingham, Derbyshire and Staffordshire thanks to their support. They also continued to raise vital funds for our Helpline and Admiral Nurse services.

In May 2021, we began our partnership with Thames Water. So far, colleagues have taken part in our Time for a Cuppa event, a clay shoot, quizzes and a Christmas jumper day, with the aim of raising £150,000 by April 2023.

Since 2018, our corporate partner Zurich Community Trust has donated over £470,000 towards our Helpline. We are delighted that the Trust has partnered with us for another two years with the aim of supporting our virtual clinics service by raising £300,000.

We are pleased to be working once again with Invesco, who initially supported us in 2015, funding a specialist dementia nurse in the Thames Valley area and supporting our Helpline. Invesco colleagues voted for us to resume our partnership for 2022 and 2023, with the funds raised to be split between a Consultant Admiral Nurse for Young Onset Dementia post and a new nurse post in London.

We continue to support our corporate partners with our Dementia at Work programme, which aims to provide employers with access to specialist support for staff and customers who are facing the everyday challenges of dementia.

Post-lockdown, we were also able to reinstate our popular Christmas carol concert at St George's Church, London.

"I found [the Dementia at Work session] very useful indeed. It was powerful to listen to someone who works with people with dementia daily – that part of it, I imagine, brought it home to people who haven't had close contact with a family member or friend who has been affected."

Rob Hanks, Customer Representative, Thames Water

A winning team

The incredible efforts of our community, virtual and challenge events supporters helped us exceed our targets despite the ongoing challenges of the Covid-19 pandemic and its effects on our fundraising activity.

What we said we would do

Run a successful Facebook challenge programme to grow supporter numbers and income.

What we did

Ran four virtual events via Facebook: Cycle 100 Miles in June, Walk 30 Miles in September, Jog 50 Miles in November, and the March Dog Walking Challenge 2022. More than 12,500 fundraisers participated in these challenges.

What we said we would do

Recruit our largest ever team for the London Marathon.

What we did

Recruited 171 runners for the London Marathon 2021 – up from 122 in 2019, when the Marathon last took place in person. We also had 232 Virtual London Marathon 2021 runners.

What we said we would do

Diversify our third-party challenge events portfolio.

What we did

Invested in two new third-party events: the London Landmarks Half Marathon and the British Heart Foundation London to Brighton Cycle Ride.

Partnered with Ultra Challenges on three trekking challenges for 2022 – the Lake District Challenge, the South Coast Challenge and the Thames Bridges Challenge – with a successful start to our recruitment campaign.

What we said we would do

Deliver Time for a Cuppa – our annual tea party fundraising event.

What we did

Held a successful Time for a Cuppa event in May 2021. More than 4,500 people participated, raising a total of £165,000. While we didn't hit our fundraising target – likely due to ongoing social distancing and competition from other charities – we are testing targeted techniques for 2022 to improve our fundraising from this event.

What we said we would do

Run an innovation programme to develop an In Memory fundraising proposition.

What we did

Collaborated with other teams on an In Memory innovation project, exploring options for developing products that invite warm and cold supporters with In Memory motivations to donate or fundraise. The idea that tested best was an in-person walking event, which is in development during 2022.

What we'll do next – our priorities for 2022-2023

Embed a culture of innovation within the restructured Community, Events and Innovation Team so that we continually test, develop and learn from new fundraising propositions that engage audiences and deliver income.

Invest in and expand our community fundraising over the next three years. We will focus on building a pipeline of regional corporate supporters.

Improve our Volunteer Ambassador programme and grow the number of Volunteer Ambassadors to 25 per region by the end of 2022-23, with an aim of having a total of 150 by the end of 2023.

Continue to diversify and grow our third-party events portfolio.

Spotlight

Virtual challenges

We initially launched our virtual challenges – which enabled supporters to take on a challenge in a socially distanced way and raise funds via Facebook – in 2020 during the pandemic. Following on from the success of these challenges, we continued to build on this model in 2021-2022.

The Walk 30 Miles Challenge was particularly popular due to its accessibility for our supporters. With an end to lockdowns and life returning to relative normality, it was difficult to predict how successful the challenge would be, but it attracted over 17,000 Facebook Group members and raised an incredible £922,300. This showed that there is still an appetite for virtual challenges alongside in-person events.

The Facebook fundraising model has proven an excellent fit for Dementia UK, reaching people who have a connection to dementia but may never have fundraised for the charity had they not seen the advert in their feed.

The Facebook Groups for each virtual challenge are not only a place for supporters to share fundraising tips and spur each other on, but also a space where they can share their experiences of dementia, knowing they are not alone.

Due to the success of these challenges, we have decided to invest in the virtual events sector and double the number of challenges we hold each year. This will allow us to test different asks, reach more potential supporters, and ensure that virtual events are a reliable source of vital funds for Dementia UK.

"I wanted to help to raise awareness of dementia and raise as much money as I could so people out there caring for family and friends with dementia can continue to receive much-needed support. I really enjoyed doing the challenge – I walk with [my dog] Poppy a lot anyway but it was good to have a purpose to my walks."

Elaine, March Dog Walking Challenge participant

Taking concerns seriously

Listening to concerns and addressing them swiftly is a vital part of looking after our supporters.

As members of the Chartered Institute of Fundraising and the Fundraising Regulator, we adhere to the Code of Fundraising Practice and are committed to the Fundraising Promise. There were no instances of non-compliance with the Code this year.

We received a total of 286 complaints in the year. The majority of these related to a single incident, where a large number of event participants were wrongly sent an email that was intended for a smaller, more specific segment of the event participant list. No data protection regulations were broken and no data was compromised, however the email generated a large number of responses, of which 242 were classified as complaints.

A follow-up email was sent immediately, apologising to those who had received the email in error. We managed the complaints and responses to the email, and responded to each one to resolve them.

We classify all our complaints on four levels, level one being the most serious and level four the least serious. The majority of these complaints were classified as level three – standard complaint (129) and level four – negative feedback (95). Eighteen complaints were classified as level two – escalated complaints. None were level one.

We received 82 positive responses expressing thanks and understanding after we had apologised for the error, as well as 28 positive responses to the initial email (from those it was intended for) and 255 other neutral responses. Again, we responded to these emails as appropriate.

We have since reviewed our email processes and made changes to ensure we do not make this error again.

Outside of this incident, we received only 44 complaints this year – a very low number for a charity of our size, and significantly fewer than in the previous year. Of these, two complaints were classified as level two, while the others were all levels three and four.

The level two complaints were resolved appropriately; in both cases, there was no evidence of wrongdoing by the charity, but due to the sensitive nature of the cases and the level of dissatisfaction of the complainants, they were classified as level two.

We make it easy for people to contact us with their complaint, and are committed to putting each one right. Supporters can register their complaint using an online form, or by phone, email or post.

All complaints are forwarded to the Supporter Care Team, and depending on the severity, may be escalated to more senior members of staff. We involve the supporter in resolving their complaint and record the process and resolution on our database.

We are acutely aware of our responsibilities to vulnerable people as a charity focused on dementia support.

Data protection

We continue to take data protection seriously and ensure we comply with all regulations in this area. We only process information where we have a legal basis for doing so.

All staff are required to complete data protection training, and this is built into the induction process for new starters. Internal policies governing data use are reviewed regularly and updated where necessary, and new policies are implemented on an ongoing basis to reflect our evolving fundraising programme.

Our up-to-date Privacy Policy is available on our website, and we ensure that all supporters know how to view this. We also clearly communicate to our supporters that they can change how they hear from us at any time.

Safeguarding

We are acutely aware of our responsibilities to vulnerable people as a charity focused on dementia support. All staff are conscious of the need to raise concerns if they suspect someone is vulnerable, in consultation with one of our dementia specialist Admiral Nurses if need be.

Looking after our people

Our Human Resources (HR) Team plays a vital role in supporting Dementia UK staff across the organisation and making our charity a positive place to work.

What we said we would do

Develop a rewards scheme to support development and succession planning and recognise the loyalty of employees who remain in post for an extended period.

What we did

Established enhanced Maternity, Paternity, and Shared parental pay and leave Policies.

Expanded our Employee Assistance Programme (EAP) to include wider coverage for employees and, for the first time, their families too.

Strengthened the Occupational Health referral process and appointed a new provider to better support our employees.

Started an organisation-wide salary benchmarking process, linked to market rate data. The initial stages were completed in November 2021 and will be added to each year.

What we said we would do

Develop our Employee Learning and Development Strategy to improve opportunities for all employees, including carrying out a skills audit to establish the expertise we have and address any skills gaps.

What we did

Launched 'Lunch and learn' sessions across the organisation to offer informal and skills-based learning on a variety of subjects, from social media training to dementia-specific topics.

What we said we would do

Continue our work to ensure that our employees feel respected and valued.

What we did

Rolled out mental health training for line managers from summer 2021.

Engaged with an external Diversity and Inclusiveness Consultant to review our practices and create a road map for improving diversity and inclusiveness.

We also...

Began a hybrid working trial with a view to enhancing work-life balance and productivity, to enable the charity to make the most of new ways of working.

Started to roll out new HR policies across the board, with a new staff handbook.

Completed our largest ever consultation exercise, leading to restructuring within the charity. The proposals were guided by staff feedback, strengthening employee engagement.

Running our organisation well

The behind-the-scenes work of our Information Services and Governance Teams keeps Dementia UK running smoothly.

What we said we would do

Collaborate to implement a common reporting framework allowing real-time oversight and reporting across all departments of the charity. This would increase transparency and reduce repetitive reporting and recording of key performance indicators.

What we did

Migrated our environment to Microsoft Azure, which readies Dementia UK for the next stage of its digital journey and presents many scalable and secure opportunities using a common technology platform.

This paves the way for integrating more easily with other systems as well as developing and managing our own bespoke applications – for example, a new online booking system for Closer to Home virtual clinics.

Took initial steps to introduce standardised reporting across the charity, including monthly reports. This demonstrates performance against the charity's strategic aims for clinical governance, Senior Management Team, and the Board of Trustees.

What we said we would do

Work with Dementia UK's Senior Management Team and Trustees to demonstrate the principles outlined in the Charity Governance Code.

What we did

Started the audit and planning process into how the charity meets the principles of the Charity Governance Code. For example, we focused on the principle of 'openness and accountability' by updating our conflicts of interest process and register; and the principle of 'board effectiveness' by updating our reporting process from directorates through to the Board of Trustees, avoiding duplication of information in multiple formats for the same purpose.

What we said we would do

Increase resource in the Governance Team by recruiting new team members and providing tools to ensure that the whole charity can function to its full potential.

What we did

Recruited a Legal and Governance Advisor and a Business Analyst to support the Head of Governance.

We also...

Continued to develop our Policy Working Group to improve the governance processes involved in developing, reviewing and implementing policy across the charity. The Policy Working Group is now supported by a Trustee, who aids communication directly with the Board of Trustees and helps support the vital role the group undertakes in managing the risk of out-of-date policies.

What we'll do next – our priorities for 2022-2023

Introduce multi-factor authentication for all staff to improve digital security.

Further expand the Governance Team, including the introduction of a new project management function. Recruiting new team members will also accelerate our work to achieve full use of the Charity Governance Code.

Explore more automative recording and reporting functionality across the charity. The reporting will focus initially on progress against our 2020-25 strategy.

Develop the integration of our policy compliance platform across the charity by synchronising it with our active directory and information storage database and improving accessibility by merging the platform with Microsoft Teams. This will allow staff to benefit fully from the policy, learning and compliance tools and materials available.

Continually review and enhance risk management processes across the charity so that risks can be rapidly identified and actions put in place to prevent and manage these appropriately. This makes risk management a live, cyclical process with increased transparency to all levels of employees.

Financial review

The Trustees present their report and audited consolidated financial statements for the year ended 31st March 2022.

All Trustees are also Directors for the purpose of company law, and the Trustees' Report represents the Directors' Report required by Section 417 of the Companies Act 2006.

Objectives and activities for public benefit

The Trustees confirm that they have referred to the Charity Commission's guidance on public benefit when reviewing the aims and objectives in planning future activities.

Financial review

The financial statements have been prepared in accordance with applicable accounting standards, current statutory requirements, the requirements of the Statement of Recommended Practice (SORP), Accounting and Reporting by Charities (SORP 2015), and the charity's governing document.

Total incoming resources for the year were £17.1m (2021: £15.8m) and total expenditure was £15.1m (2021: £9.9m) giving a net surplus for reinvestment of £2m (2021: £5.9m).

Net assets totalled £13.4m (2021: £11.4m) with net current assets of £14.6m (2021: £11.5m).

The liquid cash balance (accessible within one year) was £15.6m (2021: £11.3m).

Finally, the Trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. This is based on a detailed budget, cash-flow and reserves forecast exercise for 2022-23.

Structure, governance and management

Board of Trustees

The Board of Trustees is the governing body that administers the charity. All major decisions are made by the Board, which meets at least four times a year to discuss and formulate policy and strategic direction.

The Trustees of the charity are also the Directors of the company for the purpose of company law, and any reference to Trustees is therefore also to Directors. None of the Trustees has a beneficial interest in the company, and the charitable company held third-party indemnity insurance on behalf of the Trustees during the current and prior year.

Trustees who have been in office since 1st April 2021 are:

- Professor David Croisdale-Appleby OBE (Chair)
- Philippa Armitage
- Steve Clarke CPFA (Treasurer)
- Emma Crozier
- Steve Jamieson
- Jane Keir (appointed 8th March 2022)
- Anna Morgan (resigned 25th June 2022)
- William Roe
- Gavin Sanderson
- Mark Stroyan

Trustee recruitment, appointment and induction

The existing Trustees of Dementia UK are empowered under the Articles of Association to elect new Trustees at the Annual General Meeting of the charity and to make co-options at any other time.

Dementia UK seeks to include a wide skillset within the Board of Trustees, and as part of our governance process, Trustees identify and remedy any gaps in skills on the Board.

We recruit new Trustees in a number of ways, including advertising vacancies and reaching out to people who are involved and interested in our work. We invite potential new Trustees to observe at least one Board meeting to guide their decision about whether to agree to nomination as a Trustee.

We have an induction programme for all new Trustees of Dementia UK. This includes meeting the Chief Admiral Nurse/CEO, along with other members of staff across the charity. We also provide them with relevant historical documentation.

Sub-committees of the Board of Trustees

Trustees belong to one of three sub-committees that oversee and advise on the charity's work and report to the Board. This contributes to the smooth running of the charity. The three sub-committees are:

- Clinical and Professional Committee
- Finance, Risk and Audit Committee
- Fundraising and Engagement Committee (from May 2022)

Each committee meets at least four times a year and includes at least two Trustees, with one acting as Chair for these meetings. The Trustees contribute their relevant interests and skills to the work of the committees.

The Chief Admiral Nurse/CEO and Executive Team are responsible for the day-to-day affairs of Dementia UK, including operational matters, and a scheme of delegation is in place.

The members of Dementia UK's Executive Team are:

- Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive Officer
- Martin Bishop, Director of Fundraising and Engagement
- Paul Edwards, Director of Clinical Services
- Niall Larkin, Director of Operations (until July 2022)
- Suruchi Saraf FCCA, Director of Finance and Corporate Services (from June 2022)

Dementia UK Trading Limited

Dementia UK Trading Limited develops commercial opportunities and covenants its profits to the charity. Its results are included with the consolidated financial statements.

Principal risks and uncertainties

The Board of Trustees is responsible for managing the risks faced by the charity. A Risk Register identifies the potential and actual risks, their nature, the likelihood and possible impact of the risks happening, and the measures taken to prevent or manage them. The Trustees review this Risk Register at all full Board meetings as well as discussing and updating it at committee meetings.

The main risks identified that the charity faces are:

Insufficient funds to maintain infrastructure and clinical services

This is mitigated by our robust fundraising strategy, diverse range of income streams, specific targets and key performance indicators (KPIs). There is close monthly monitoring of income and expenditure and consistent reporting to the Board of Trustees.

Income monitoring includes:

- ensuring our fundraising strategy is fit for purpose and adapted where necessary
- investing in a diverse range of income streams, both long- and short-term
- encouraging and facilitating innovation; continually developing ways for existing and new donors to support and strengthen their engagement with – and commitment to – Dementia UK
- ensuring digital fundraising is embedded in our work
- ensuring we have a skilled and high-performing team

Expenditure monitoring includes:

- conducting monthly reporting, regular reforecasts and well-planned annual budgets
- making decisions in a timely manner to ensure activity happens at the optimum time, and does not take place if there are not the funds to support it
- continuing to maximise the benefits of home/agile working
- collaborating with other organisations to avoid duplication of activity

Loss of our reputation and damage to the Admiral Nurse brand

This is mitigated by ensuring all the systems, processes and support are in place to ensure the effective recruitment, maintenance and development of Admiral Nurses and Admiral Nurse services.

Nurses receive regular clinical supervision via Practice Action Learning Sets and their practice is guided by the Admiral Nurse Competency Framework, which outlines the knowledge, skills and attributes that they are required to demonstrate.

The Admiral Nurse Academy continues to grow and provides opportunities for continued professional development, including webinars, interactive learning, short courses and a leadership programme.

We also offer our annual Summer School to all health and social care professionals within and outside of Admiral Nursing to promote high-quality, person-centred care for all families living with dementia.

Insufficient internal infrastructure

This is mitigated by continually assessing and evolving the infrastructure as the charity grows, while also taking into account what is needed to achieve our strategic aims. We continue to provide an effective office space in One Aldgate utilising a hybrid working model.

Breaches in data protection and governance standards

This is mitigated by maintaining a robust Data Protection Policy and processes, educating staff and volunteers on best practice with regard to data standards.

Similarly, our Governance Team ensures that the charity works towards achieving and maintaining best governance practice in fulfilling our strategic aims.

The Governance Team ensures Data Protection Impact Assessments are undertaken so that our systems and processes are safe, secure and appropriate.

Adverse publicity

This is mitigated by ensuring that there are high standards of communication and communication expertise within and outside the charity in dealing with clinical matters, public/supporter queries and complaints. This includes maintaining strong relationships with Admiral Nurse host services, which are monitored and supported through regular steering group meetings.

The Clinical Leadership and Communications Teams are briefed on any issues that arise and address these as required.

Reserves Policy

The charity holds unrestricted reserves to ensure we can continue to operate in the event of any unforeseen and significant decreases in income.

The Board of Trustees' policy with regards to unrestricted reserves has been set at three to six months of projected unrestricted expenditure.

The Trustees aim to achieve this by careful management of the charity's resources and review the Reserves Policy at least annually.

As of 31st March 2022, we held £8.8m in unrestricted reserves after deducting the Net Book Value of Fixed Assets (2021: £7.6m). This represents around six months of total planned unrestricted organisational expenditure.

In light of current financial pressures created by rising inflation, the war in Ukraine and economic uncertainties, the Trustees are of the opinion that maintaining reserves at this level is prudent and is in line with the best practice on Reserves Policies within the charity sector.

Investment Policy

The Trustees' investment powers are governed by the Memorandum and Articles of Association, which permit the charity's funds to be invested in a wide range of securities and assets. Funds are currently held on bank deposit and plans are underway to consider long-term investments further down the line to protect the charity's funds from the adverse effects of inflation.

Pay for the Senior Management Team

Dementia UK has a remuneration policy and Senior Leadership pay is decided by Trustees, who review pay based on market rates and benchmarking against charities of comparable size.

Trustees' responsibilities in relation to the financial statements

The charity's Trustees (who are also the Directors of Dementia UK for the purposes of company law) are responsible for preparing a Trustees' Annual Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity's Trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charitable company and the group, and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period.

In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue to operate

The Trustees are responsible for keeping adequate accounting records that disclose, with reasonable accuracy at any time, the financial position of the charity, and for ensuring that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and the group, and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as to disclosure to our Auditor

In so far as the Trustees are aware at the time of approving our Trustees' Annual Report:

- There is no relevant audit information of which the charitable company's Auditor is unaware
- The Trustees have taken all appropriate steps to ensure the Auditor is aware of any relevant audit information

Approved by the Trustees on 10th August 2022 and signed on their behalf by:

Professor David Croisdale-Appleby OBE, Chair of Trustees

References and administrative details

Legal status

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC047429 (Scotland).

The charity's affairs are governed by its Memorandum and Articles of Association dated 17th June 1994 (and updated on 4th November 2019), which allow for any activities covered by the charity's objectives with no specific restrictions.

The liability of the members in the event of the company being wound up is limited to a sum not exceeding £1.

Registered office and operational address

7th Floor, One Aldgate, London EC3N 1RE

Bankers

Lloyds Bank, PO Box 1000, Andover BX1 1LT

Auditor

Sayer Vincent LLP, Chartered Accountants and Statutory Auditor, Invicta House, 108-114 Golden Lane, London, EC1Y 0TL

Solicitors

Charles Russell Speechlys LLP, 5 Fleet Place, London, EC4M 7RD

Independent Auditor's report

Opinion

We have audited the financial statements of Dementia UK (the 'parent charitable company') and its subsidiary (the 'group') for the year ended 31st March 2022 which comprise the consolidated statement of financial activities, the group and parent charitable company balance sheets, the consolidated statement of cash flows and the notes to the financial statements, including significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31st March 2022 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulation 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the

UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Dementia UK's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Trustees' Annual Report, including the strategic report, other than the financial statements and our auditor's report thereon.

The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' Annual Report, including the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The Trustees' Annual Report, including the strategic report, has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report, including the strategic report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of Trustees

As explained more fully in the statement of Trustees' responsibilities set out in the Trustees' Annual Report, the Trustees (who are also the Directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as Auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and the Finance, Risk and Audit Committee, which included obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:
  - identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance
  - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud
  - the internal controls established

to mitigate risks related to fraud or noncompliance with laws and regulations

- We inspected the minutes of meetings of those charged with governance
- We obtained an understanding of the legal and regulatory framework that the group operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the group from our professional and sector experience
- We communicated applicable laws and regulations throughout the Audit Team and remained alert to any indications of non-compliance throughout the audit
- We reviewed any reports made to regulators
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at: **frc.org.uk/auditorsresponsibilities**. This description forms part of our Auditor's Report.

Use of our report

This report is made solely to the charitable company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Noelia Serrano
(Senior Statutory Auditor)

Date: 20th September 2022

for and on behalf of Sayer Vincent LLP, Statutory Auditor

Invicta House, 108-114 Golden Lane, London, EC1Y 0TL

Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006.

Consolidated statement of financial activities
(incorporating an income and expenditure account)

For the year ended 31st March 2022

	Note	Unrestricted £	Restricted £	**2022 Total £**	Unrestricted £	Restricted £	2021 Total £
Income from:							
Donations and legacies	2	14,856,771	1,263,455	**16,120,226**	13,462,413	1,463,591	14,926,004
YDUK transfer of net assets	2	-	-	**-**	-	313,513	313,513
Charitable activities							-
Admiral Nursing projects	3	17,260	743,350	**760,610**	88,252	129,806	218,058
Business development	3	73,750	-	**73,750**	100,720	-	100,720
Research and publications	3	46,381	-	**46,381**	6,920	-	6,920
Other fundraising activities	4	98,680	-	**98,680**	95,209	-	95,209
Investments		8,145	-	**8,145**	23,697	-	23,697
Other		19,316	-	**19,316**	127,534	-	127,534
Total income		15,120,303	2,006,805	**17,127,108**	13,904,745	1,906,910	15,811,655
Expenditure on:							
Raising funds	5	4,622,759	-	**4,622,759**	3,138,091	7,917	3,146,008
Charitable activities							
Admiral Nursing projects	5	5,415,002	1,834,373	**7,249,375**	2,375,079	1,934,564	4,309,643
Business development	5	850,160	-	**850,160**	621,980	-	621,980
Research and publications	5	281,822	-	**281,822**	167,499	-	167,499
Public awareness	5	1,270,327	8,971	**1,279,298**	975,651	-	975,651
Practice development	5	792,234	54,639	**846,873**	626,880	87,932	714,812
Total expenditure		13,232,304	1,897,983	**15,130,287**	7,905,180	2,030,413	9,935,593
Net income/(expenditure) for the year	7	1,887,999	108,822	**1,996,821**	5,999,565	(123,503)	5,876,062
Transfers between funds		(11,180)	11,180	**-**	(237,966)	237,966	-
Net movement in funds		**1,876,819**	**120,002**	**1,996,821**	5,761,599	114,463	5,876,062
Reconciliation of funds:							
Total funds brought forward		9,836,540	1,520,689	**11,357,229**	4,074,941	1,406,226	5,481,167
Total funds carried forward	21	**11,713,359**	**1,640,691**	**13,354,050**	9,836,540	1,520,689	11,357,229

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 21a to the financial statements.

Balance sheets
Company no. 02944156

As at 31st March 2022

	Note	The group **2022** £	The group 2021 £	The charity **2022** £	The charity 2021 £
Fixed assets:					
Tangible assets	12	**88,630**	224,633	**88,630**	224,633
Investments	13	**-**	-	**1**	1
		88,630	224,633	**88,631**	224,634
Current assets:					
Debtors	16	**2,083,402**	2,132,427	**2,083,402**	2,154,741
Short term deposits		**6,540,984**	6,533,596	**6,540,984**	6,533,596
Cash at bank and in hand		**9,047,309**	4,725,234	**9,041,037**	4,700,705
		17,671,695	13,391,257	**17,665,423**	13,389,042
Liabilities:					
Creditors: amounts falling due within one year	17	**(3,049,984)**	(1,886,386)	**(3,045,716)**	(1,879,737)
Net current assets		**14,621,711**	11,504,871	**14,619,707**	11,509,305
Total assets less current liabilities		**14,710,341**	11,729,504	**14,708,338**	11,733,939
Creditors: amounts falling due after one year	18	**(1,356,291)**	(372,275)	**(1,356,291)**	(372,275)
Total net assets	20	**13,354,050**	11,357,229	**13,352,047**	11,361,664
Funds:	21				
Restricted income funds		**1,640,691**	1,520,689	**1,640,691**	1,520,689
Unrestricted income funds:					
Designated new nurse funds		**2,844,872**	2,000,000	**2,844,872**	2,000,000
General funds – balance c/fwd		**8,868,487**	7,836,540	**8,866,484**	7,840,975
Total unrestricted funds		**11,713,359**	9,836,540	**11,711,356**	9,840,975
Total funds		**13,354,050**	11,357,229	**13,352,047**	11,361,664

Approved by the Trustees on 10th August 2022 and signed on their behalf by:

Professor David Croisdale-Appleby OBE, Chair

Steve Clarke CPFA Treasurer

Consolidated statement of cash flows
For the year ended 31st March 2022

	Note	2022 £	2022 £	2021 £	2021 £
Cash flows from operating activities	23		**4,321,319**		4,824,163
Net cash provided by operating activities			**4,321,319**		4,824,163
Cash flows from investing activities:					
Interest and dividends receivable		**8,145**		23,697	
Purchase of fixed assets		**-**		(98,492)	
Investments in short term deposits		**(7,389)**		(1,268,175)	
Net cash used in investing activities			**756**		(1,342,970)
Change in cash and cash equivalents in the year			**4,322,075**		3,481,193
Cash and cash equivalents at the beginning of the year			**4,725,234**		1,244,041
Cash and cash equivalents at the end of the year			**9,047,309**		4,725,234

Notes to the financial statements: for the year ended 31st March 2022

1 Accounting policies

a Statutory information

Dementia UK is a charitable company limited by guarantee and is incorporated in England and Wales. The registered office address and principal place of business is 7th Floor, One Aldgate, London EC3N 1RE.

b Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiary Dementia UK Trading Limited on a line by line basis. Transactions and balances between the charitable company and its subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

c Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The Trustees are of the view that the immediate future of the charity for the next 12 months is secure on the basis of confirmation of continuing income streams and fundraising activity to generate additional income streams. Accordingly, the financial statements have been prepared on the going concern basis.

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For pecuniary legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, and the amount receivable can be measured reliably, and the receipt is probable; or when a distribution is received from the estate. For residual legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

g Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

h Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

i Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose.
- Expenditure on charitable activities includes the costs of delivering services and other educational activities undertaken to further the purposes of the charity and their associated support costs.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

j Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation that they will receive a grant and that any condition attaching to the grant is outside of the control of the charity.

k Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each.

Support costs are the cost of overall direction and administration, comprising the salary and overhead costs of the central function.

k Allocation of support costs continued

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

Admiral Nursing projects	50%
Business development	8%
Research and publications	2%
Public awareness	6%
Practice development	8%
Raising funds	26%

l Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

m Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £1,500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

Fixtures and fittings	15%-33% per annum, straight line
IT hardware and software	15%-33% per annum, straight line

n Investments in subsidiaries

Investments in subsidiaries are at cost.

o Admiral Nurse services

Funding is made available to employing authorities to meet employment, travelling and training costs incurred by them in the provision of Admiral Nurse services. The funding is accrued and recognised in the accounts in line with the provision of these services.

p Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered.

Any expenditure that exceeds £1,500 and is paid in advance or is related to a future dated event, is held as a prepayment on the balance sheet. The prepayment is subsequently released to the Statement of Financial Activities (SOFA) in the month or months that the expenditure is incurred. Prepayments are valued at the amount prepaid net of any trade discounts due.

q Short term deposits

Short term deposits includes cash balances that are invested in accounts with a maturity date of between three and 12 months.

r Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

s Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

t Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

u Pensions

The charity subscribes to a defined contribution scheme for the benefit of its employees. Contributions payable are charged to the Statement of Financial Activities (SOFA) in the year they are payable.

The charity also subscribes to the NHS Pension Scheme, a multi-employer defined benefit pension scheme. It is not possible to identify the assets or liabilities relating to the charity, therefore the charity accounts for contributions to the scheme as if it were a defined contribution scheme. Contributions payable are charged to the SOFA in the year they are payable.

2. Income from donations and legacies

	Unrestricted £	Restricted £	**2022 Total £**	Unrestricted £	Restricted £	2021 Total £
Legacies	1,867,183	60,079	**1,927,262**	2,359,992	-	2,359,992
Voluntary donations	12,989,588	1,203,376	**14,192,964**	11,102,421	1,463,591	12,566,012
	14,856,771	1,263,455	**16,120,226**	13,462,413	1,463,591	14,926,004
YDUK transfer of net assets	-	-	**-**	-	313,513	313,513

On 1 November 2020, YoungDementia UK became part of Dementia UK by transferring all its activities and net assets to Dementia UK at nil consideration. The net assets transferred are continued to be expended towards the charitable objects of YoungDementia UK.

3. Income from charitable activities

	Unrestricted £	Restricted £	**2022 Total £**	Unrestricted £	Restricted £	2021 Total £
Fees and contributions from institutions	17,260	743,350	**760,610**	88,252	129,806	218,058
Sub-total for Admiral Nursing projects	17,260	743,350	**760,610**	88,252	129,806	218,058
Management and development fees	73,750	-	**73,750**	100,720	-	100,720
Sub-total for business development	73,750	-	**73,750**	100,720	-	100,720
Contributions from institutions	46,381	-	**46,381**	6,920	-	6,920
Sub-total for research and evaluation	46,381	-	**46,381**	6,920	-	6,920
Total income from charitable activities	137,391	743,350	**880,741**	195,892	**129,806**	325,698

4. Income from other fundraising activities

	Unrestricted £	Restricted £	**2022 Total £**	Unrestricted £	Restricted £	2021 Total £
Carol concert, Christmas cards and merchandise	61,271	-	**61,271**	82,703	-	82,703
Income from trading subsidiary	37,409	-	**37,409**	12,506	-	12,506
	98,680	-	**98,680**	95,209	-	95,209

5a. Analysis of expenditure (current year)

		Charitable activities								
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2022 Total £**	2021 Total £
Staff costs (note 8)	1,859,480	3,105,593	610,506	220,390	547,103	504,100	157,711	1,153,612	**8,158,495**	6,216,212
Direct activity costs	1,436,772	2,551,511	-	-	402,926	103,196	-	-	**4,494,405**	1,988,301
IT and telephone	67,151	94,423	85	-	489	-	-	518,466	**680,614**	512,606
Office and administration costs	256,727	10,921	1,835	1,999	34,406	1,843	7,431	590,957	**906,119**	394,493
Professional fees	229,991	1,088	-	-	116,074	-	11,680	161,405	**520,238**	408,311
Premises	-	-	-	-	-	-	-	370,416	**370,416**	415,670
	3,850,121	5,763,536	612,426	222,389	1,100,998	609,139	176,822	2,794,856	**15,130,287**	9,935,593
Support costs	726,664	1,397,428	223,588	55,897	167,691	223,588	-	(2,794,856)	-	-
Governance costs	45,974	88,411	14,146	3,536	10,609	14,146	(176,822)	-	-	-
Total expenditure 2022	**4,622,759**	**7,249,375**	**850,160**	**281,822**	**1,279,298**	**846,873**	**-**	**-**	**15,130,287**	-

5b. Analysis of expenditure (prior year)

		Charitable activities							
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2021 Total £**
Staff costs (note 8)	1,439,807	2,502,378	457,131	126,282	291,978	455,058	114,363	829,215	**6,216,212**
Direct activity costs	750,987	683,471	83	(252)	458,461	95,551	-	-	**1,988,301**
IT and telephone	36,961	73,715	-	215	467	-	-	401,248	**512,606**
Office and administration costs	145,849	5,286	563	203	27,573	-	1,349	213,670	**394,493**
Professional fees	238,744	18,522	-	-	74,019	-	15,500	61,526	**408,311**
Premises	-	-	-	-	-	-	-	415,670	**415,670**
	2,612,348	3,283,372	457,777	126,448	852,498	550,609	131,212	1,921,329	**9,935,593**
Support costs	499,545	960,665	153,706	38,427	115,280	153,706	-	(1,921,329)	-
Governance costs	34,115	65,606	10,497	2,624	7,873	10,497	(131,212)	-	-
Total expenditure 2021	**3,146,008**	**4,309,643**	**621,980**	**167,499**	**975,651**	**714,812**	**-**	**-**	**9,935,593**

6. Grant making

Cost	Grants to institutions £	**2022 £**	2021 £
Admiral Nursing projects	2,480,430	**2,480,430**	616,535
At the end of the year	2,480,430	**2,480,430**	616,535

The charity provided half funding for two years for the recruitment of Admiral Nurses in 22 (2021: 6) health institutions. These costs are included in note 5 under 'direct activity costs'. Further details can be found on our website dementiauk.org.

7. Net income/(expenditure) for the year

This is stated after charging:

	2022 £	2021 £
Depreciation	**66,563**	76,711
Operating lease rentals:		
Property	**352,289**	378,288
Other	**71,611**	97,386
Auditors' remuneration (excluding VAT):		
Audit – current year	**18,700**	17,800
Audit – previous year over-accrual	**(1,550)**	-

8. Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2022 £	2021 £
Salaries	**6,481,622**	5,089,287
Termination/redundancy costs	**36,069**	24,400
Employer's National Insurance contributions	**692,392**	529,903
Employer's contributions to defined contribution pension scheme	**373,852**	302,844
Employer's contributions to defined benefit pension scheme	**187,489**	122,600
Other staff related costs	**387,070**	147,178
	8,158,494	6,216,212

The following number of employees received employee benefits (excluding employer pension costs and employer's national insurance) during the year between:

	2022 No.	2021 No.
£60,000-£69,999	**9**	3
£70,000-£79,999	**2**	1
£80,000-£89,999	**4**	3

The total employee benefits (including pension contributions and employer's national insurance) of the key management personnel were £401,682 (2021: £392,365).

The charity trustees were neither paid nor received any other benefits from employment with the charity in the year (2021: £nil). No charity trustee received payment for professional or other services supplied to the charity (2021: £nil).

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs totalling £2,581 (2021: £2,092) incurred by two (2021: three) members relating to attendance at meetings. The charity also incurred £nil expenditure on Trustees' meetings in the year (2021: £nil).

9. Staff numbers

The average number of employees (head count based on number of staff paid per month) during the year was 183 (2021: 154).

This includes sessional employees and other employees who received no pay in certain months (head count based on number per month) during the year was 26 (2021: 20).

	2022 No.	2021 No.
Raising funds	**43**	36
Admiral Nursing projects	**82**	59
Business development	**11**	10
Research and publications	**4**	2
Public awareness	**13**	8
Practice development	**9**	11
Support	**22**	27
	183	154

10. Related party transactions

There are no related party transactions to disclose for 2022 (2021: none) other than those already disclosed in note 8.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

The total amount of donations received from related parties, without conditions, was £9,639 (2020-2021: £nil).

11. Taxation

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purposes. The charity's trading subsidiary Dementia UK Trading Limited Gift Aids available profits to the parent charity depending upon operational requirements. In 2021-2022, Dementia UK Trading Limited Gift Aided £4,164 (2021: £nil) of profits to the charity. Its charge to corporation tax in the year was £1,512. (2021: £878)

12. Tangible fixed assets

Group and charity	Fixtures and fittings £	IT hardware and software £	**Total £**
Cost			
At the start of the year	206,869	165,213	**372,082**
Disposals in year	**-**	(82,285)	**(82,285)**
At the end of the year	206,869	82,928	**289,797**
Depreciation			
At the start of the year	99,987	47,461	**147,448**
Charge for the year	41,374	25,189	**66,563**
Eliminated on disposal	-	(12,844)	**(12,844)**
At the end of the year	141,361	59,806	**201,167**
Net book value			
At the end of the year	65,508	23,122	**88,630**
At the start of the year	106,882	117,752	**224,633**

All of the above assets are used for charitable purposes.

13. Investment in subsidiary undertaking

	The group		The charity	
	2022 £	2021 £	**2022 £**	2021 £
At the start and the end of the year	**-**	-	**1**	1

14. Subsidiary undertaking

The charitable company owns the whole of the issued ordinary share capital of Dementia UK Trading Limited, a company registered in England. The subsidiary was used to develop the Compass database for the charity. This transferred to the charity in 2019-20 for non-primary purpose trading activities. All activities have been consolidated on a line by line basis in the statement of financial activities. A summary of the results of the subsidiary is shown below:

	2022 £	2021 £
Turnover	**37,409**	12,506
Cost of sales	**(23,677)**	(5,369)
Gross profit	**13,732**	7,137
Administrative expenses and taxation charge	**(1,621)**	(3,568)
Profit on ordinary activities before taxation	**12,111**	3,569
Taxation on profit on ordinary activities	**(1,512)**	(678)
Profit for the financial year	**10,599**	2,891
Total retained earnings brought forward	**(4,435)**	(7,326)
Distribution under Gift Aid to parent charity	**(4,164)**	-
Total retained earnings carried forward	**2,000**	(4,435)
The aggregate of the assets, liabilities and funds was:		
Assets	**7,778**	24,649
Liabilities	**(5,777)**	(29,083)
Funds	**2,001**	(4,434)

15. Parent charity

The parent charity's gross income and the results for the year are disclosed as follows:

	2022 £	2021 £
Gross income	**17,093,863**	15,799,149
Result for the year	**1,990,383**	5,873,172

16. Debtors

	The group		The charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Trade debtors	**354,084**	112,470	**354,084**	112,351
Other debtors	**1,800**	6,174	**1,800**	6,174
Prepayments	**755,865**	520,971	**755,865**	520,970
Accrued income	**971,653**	1,492,812	**971,653**	1,492,812
Amounts due from group undertakings	**-**	-	**-**	22,434
	2,083,402	2,132,427	**2,083,402**	2,154,741

The Charity received notifications regarding a number of legacies before the year end totalling £1,367,685. However, these legacies did not meet the full income recognition criteria as per the accounting policy as at 31st March 2022, and therefore, have not been accrued in the 2021-2022 financial statements (2020-2021: £1,505,641).

17. Creditors: amounts falling due within one year

	The group		The charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Trade creditors	**490,176**	397,509	**490,176**	397,509
Taxation and social security	**205,971**	244,447	**202,014**	241,268
Taxation – VAT payable	**91,000**	-	**91,000**	-
Other creditors	**13,530**	36,779	**13,530**	36,779
Accruals	**484,675**	274,817	**482,855**	271,347
Deferred income	**44,917**	26,250	**44,917**	26,250
Admiral Nurse projects – grant accruals	**1,719,715**	906,584	**1,719,715**	906,584
Amounts due to group undertakings	**-**	-	**1,509**	-
	3,049,984	1,886,386	**3,045,716**	1,879,737

18. Creditors: amounts falling due after one year

	The group		The charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Admiral Nurse projects – grant accruals	**1,257,791**	194,426	**1,257,791**	194,426
Rent-free provision	**98,500**	177,849	**98,500**	177,849
	1,356,291	372,275	**1,356,291**	372,275

Total grant commitments outstanding as at 31st March 2022 relating to the recruitment of Admiral Nurses payable to health institutions were £2,977,506 (2021: £1,101,011), of which payable within one year were £1,719,714 (2021: £906,584) and after one year were £1,257,792 (2021: £194,426). The amounts due within one year are included within accruals in note 17 above.

19. Pension schemes

The charity operates two pension schemes, a stakeholder pension scheme, administered by Aviva, and NHS Pensions. As at 31st March 2022, the amounts owed to the schemes were Aviva £3,829 (2021: £87,635) and NHS £nil (2021: £nil). The number of members in Aviva are 132 and NHS 31. The NHS Pension Scheme is an unfunded occupational scheme backed by the Exchequer, which is open to all NHS employees and certain employees of other approved organisations. Dementia UK is an approved organisation. The Scheme provides pensions, based on final salary, in varying circumstances for employees of participating employers. The Scheme receives contributions from employees and employers to defray the costs of pensions and other benefits. From 1st April 2006 the NHS Business Services Authority (the Authority) has been the body responsible for the administration of the NHS Pension Scheme for England and Wales. In support of the Authority, NHS employers are required to explain the Scheme to the employees. In addition, they submit pension data to the NHS Business Services Authority (NHSBSA). Every four years the Government Actuary conducts a full actuarial review of contribution rates. In order to defray the costs of benefits, in 2021/22 employers paid contributions of 14.38% of pensionable pay and employees contributed on a tiered scale from 5%-14.5% of their pensionable pay depending on total earnings. Further information on benefits can be obtained from the NHS Pension Scheme website: nhsbsa.nhs.uk/nhs-pensions.

20a. Analysis of group net assets between funds (current year)

	General unrestricted £	Restricted funds £	**Total funds £**
Tangible fixed assets	88,630	-	**88,630**
Net current assets	11,723,229	2,898,482	**14,621,711**
Long term liabilities	(98,500)	(1,257,791)	**(1,356,291)**
Net assets at 31st March 2022	**11,713,359**	**1,640,691**	**13,354,050**

20b. Analysis of group net assets between funds (prior year)

	General unrestricted £	Restricted funds £	**Total funds £**
Tangible fixed assets	224,634	-	**224,634**
Net current assets	9,789,755	1,715,115	**11,504,870**
Long term liabilities	(177,849)	(194,426)	**(372,275)**
Net assets at 31st March 2021	**9,836,540**	**1,520,689**	**11,357,229**

21a. Movements in funds (current year)

	At 1st April 2021 £	Income and gains £	Expenditure and losses £	Transfers £	**At 31st March 2022 £**
Restricted funds:					
Admiral Nursing projects (Helpline and professional and practice development)	-	529,550	(529,550)	-	**-**
Admiral Nursing Learning and Disability Service and new nurses (national)	27,272	3,500	(3,500)	-	**27,272**
Admiral Nursing projects (geographical funds):					
Buckinghamshire	27,907	-	-	-	**27,907**
Cambridgeshire	47,126	64	-	-	**47,190**
Cornwall	37,619	300,310	(334,297)	-	**3,632**
Cumbria	28,606	35,019	-	-	**63,625**
Derbyshire	211,148	3,140	(54,030)	-	**160,258**
Devon	13,460	348,099	(205,063)	-	**156,496**
Essex	9,955	(47,711)	47,751	-	**9,995**
Leeds	-	299,206	(162,775)	-	**136,431**
Leicestershire	32,050	22,674	(24,706)	-	**30,018**
London	21,590	10,370	-	-	**31,960**
Manchester	-	22,000	-	-	**22,000**
National	-	140,050	(140,860)	11,180	**10,370**
Northamptonshire	41,682	95	-	-	**41,777**
Nottinghamshire	117,172	-	(53,850)	-	**63,323**
Scotland	215,268	3,411	(83,265)	-	**135,414**
Staffordshire	123,086	14,963	(44,033)	-	**94,016**
Sussex	122,284	16,902	(53,850)	-	**85,337**
Teesside (Newcastle)	50,000	-	(12,240)	-	**37,760**
Wales	28,801	46,245	(7,000)	-	**68,046**
West Midlands	18,187	450	(3,500)	-	**15,137**
Yorkshire	39,145	29,043	(15,278)	-	**52,910**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2022)	46,860	59,549	(24,577)	-	**81,832**
YDUK projects	261,471	169,876	(193,361)	-	**237,986**
Total restricted funds	1,520,689	2,006,805	(1,897,983)	11,180	**1,640,691**
Unrestricted funds					
Designated funds					
Admiral Nursing development programme	-	-	(540,000)	1,300,000	**760,000**
Designated new nurse fund	2,000,000	-	(1,415,128)	1,500,000	**2,084,872**
Total designated funds	2,000,000	-	(1,955,128)	2,800,000	**2,844,872**
General funds	7,836,540	15,120,303	(11,277,176)	(2,811,180)	**8,868,487**
Total unrestricted and designated funds	9,836,540	15,120,303	(13,232,304)	(11,180)	**11,713,359**
Total funds	**11,357,229**	**17,127,108**	**(15,130,287)**	-	**13,354,050**

21b. Movements in funds (prior year)

	At 1st April 2020 £	Income and gains £	Expenditure and losses £	Transfers £	At 31st March 2021 £
Restricted funds:					
Admiral Nursing projects (Helpline and professional and practice development)	-	1,109,875	(1,109,875)	-	**-**
Admiral Nursing Learning and Disability Service and new nurse (national)	3,907	27,084	(3,978)	259	**27,272**
Admiral Nursing projects (geographical funds):					
Buckinghamshire	27,907	-	-	-	**27,907**
Cambridgeshire	47,126	-	-	-	**47,126**
Cornwall	37,556	63	-	-	**37,619**
Cumbria	19,290	16,316	(7,000)	-	**28,606**
Derbyshire	217,398	-	(6,250)	-	**211,148**
Devon	42,545	93,817	(240,304)	117,402	**13,460**
Essex	33,379	90,172	(113,596)	-	**9,955**
Gloucestershire	20,199	275	(20,474)	-	**-**
Leicestershire	151,772	22,791	(142,513)	-	**32,050**
London (Imperial College)	36,500	-	(14,910)	-	**21,590**
Northamptonshire	42,432	-	(750)	-	**41,682**
Nottinghamshire	116,563	609	-	-	**117,172**
Scotland	215,191	77	-	-	**215,268**
Staffordshire	121,076	2,010	-	-	**123,086**
Sussex	113,222	9,742	(680)	-	**122,284**
Teesside (Newcastle)	-	50,000	-	-	**50,000**
Wales	50,164	32,056	(121,500)	68,081	**28,801**
West Midlands	20,667	-	(8,312)	5,832	**18,187**
Yorkshire	57,461	11,601	(29,917)	-	**39,145**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2020)	31,871	83,103	(114,506)	46,392	**46,860**
YDUK Projects	-	357,319	(95,848)	-	**261,471**
Total restricted funds	1,406,226	1,906,910	(2,030,413)	237,966	**1,520,689**
Unrestricted funds:					
Designated funds:					
Admiral Nursing projects (geographical funds)			78,932	(78,932)	**-**
Designated new nurse fund	-	-	-	2,000,000	**2,000,000**
Total designated funds	-	-	78,932	1,921,068	**2,000,000**
General funds	4,074,941	13,904,745	(7,984,112)	(2,159,034)	**7,836,540**
Total unrestricted funds	4,074,941	13,904,745	(7,905,180)	(237,966)	**9,836,540**
Total funds	5,481,167	15,811,655	(9,935,593)	-	**11,357,229**

22. Purposes of restricted and designated funds

Restricted funds
Admiral Nursing projects are funded by donations specifically for the development and support of the services which Admiral Nurses provide.

The total restricted funds were raised by individuals, corporates, charitable trusts and fundraisers throughout the UK for the provision of services.

YDUK projects relate to funds transferred from YoungDementia UK when the charity became part of Dementia UK in November 2020. The funds will continue to be used for activities in line with YoungDementia UK's charitable objects.

Designated funds
Designated funds relate to funding new Admiral Nurse services.

23. Reconciliation of net income to net cash flow from operating activities

	2022 £	2021 £
Net income/expenditure for the reporting period (as per the statement of financial activities)	**1,996,821**	5,876,062
Depreciation charges	**66,563**	76,711
Interest receivable	**(8,145)**	(23,697)
Loss on the sale of fixed assets	**69,441**	-
Decrease/(increase) in debtors	**49,025**	(1,359,656)
Decrease in creditors	**2,147,614**	254,743
Net cash provided by operating activities	**4,321,319**	4,824,163

24. Operating lease commitments

	Property		Equipment	
	2022	2021	**2022**	2021
Periods:	**£**	£	**£**	£
Less than one year	**357,759**	352,287	**79,188**	75,691
One to five years	**817,270**	1,144,932	**38,597**	107,586
	1,175,029	1,497,219	**117,785**	183,277

The 2021 lease commitments disclosure has been restated, property one to five years from £1,131,004 to £1,144,932, equipment under one year from £119,964 to £75,691 and one to five years from £141,796 to £107,586. This accurately reflects the outstanding position on operating leases.

Contingent liability
Dementia UK has entered into a rent lease agreement, that expires in June 2025. The rent agreement includes a probability of 10% rent increase.

25. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Thank you

We are so grateful to everyone who has supported us over the past year, including our Volunteer Ambassadors. Because of you, more families can receive the life-changing support of a specialist dementia nurse. In particular, we would like to thank the following supporters:

41 Club
abrdn
Alpi UK
Aon
Bank ABC
Johnnie Ball
Barita Smith
Berry's Jewellers
Tapas Bhattacharyya
Calleva Foundation
Central England Co-operative
David and Elizabeth Challen
Mr and Mrs N Corner
Dementia UK Carol Concert Committee
Dementia UK Development Group
Droitwich Golf Club
Earlsmead Charitable Trust
Ecclesiastical Insurance, proudly part of the Benefact Group
Eden Valley Friends of Dementia UK
esure Group
Mr and Mrs Fenning
Garfield Weston Foundation
Helianthus Charitable Trust
Johnson Controls
Manny Singh Kang
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Kenilworth Golf Club
Leeds Building Society
Leicestershire Fundraising Group
Lloyds Bank, Coverage Capital Management
Lord and Lady Barnard
MJC Stone Charitable Trust
Marks & Spencer
Frank and Maggie Marshall
Janet Mee
Moondance Foundation
National Energy Efficiency Awards
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Purbeck Fundraising Group (Dorset)
Shears Foundation
Sid Valley Memory Café
Simmons & Simmons LLP
Ali Stearn
Mr and Mrs Mark Stroyan
Barry Summerfield
Swire Charitable Trust
Thames Water Utilities Ltd

The 29th May 1961 Charitable Trust
The Adint Charitable Trust
The Art File
The Assura Community Fund
The Banbury Club
The Barratt Foundation
The Charles Skey Charitable Trust
The February Foundation
The Hodge Foundation
The Invesco Cares Foundation
The Kirby Laing Foundation
The Klondyke Group
The Openwork Foundation
The PF Charitable Trust
The Sobell Foundation
The Zochonis Charitable Trust
Ben and Harriet Thorpe
Tokio Marine HCC International Group
Steve Tunnicliffe
Verdant Leisure
Wildernesse Golf Club
Winckworth Sherwood LLP
Zurich Community Trust

We also thank all our kind legators who generously left a gift in their Will, as well as our supporters who wish to remain anonymous.

DementiaUK
Helping families face dementia

The Admiral Nurse Dementia Helpline provides life-changing support for families affected by all forms of dementia – including Alzheimer's disease.

Call 0800 888 6678 or email helpline@dementiauk.org
Open Monday-Friday, 9am-9pm
Saturday and Sunday, 9am-5pm
Every day except 25th December

Virtual clinics: dementiauk.org/book-a-clinic-appointment

dementiauk.org • 020 8036 5400 • info@dementiauk.org

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC047429). Company number: 02944156

Registered with FUNDRAISING REGULATOR

DEMENTIA UK

England & Wales - Charity number 1039404

Accounts

Against the odds

A year of challenges and successes

DementiaUK
Helping families face dementia

For the year ended 31st March 2021

Trustees' report and consolidated financial statements

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About Dementia UK

Our mission: to lead and deliver high quality, expert and accessible dementia care through Admiral Nursing.

Our vision: specialist and compassionate dementia support for all families that need it.

Our values:

- We listen, learn and collaborate
- We are empowering, supportive and respectful
- We act with integrity, transparency and accountability
- We encourage creativity and innovation

Dementia UK is the specialist dementia nurse charity.

Dementia is a huge and growing health crisis. Almost all of us will know someone with dementia – whether it's a family member or a friend.

There is no cure for dementia. But there is care. And care can change lives.

That's why Dementia UK is here. Our nurses, called Admiral Nurses, who we continually support and develop, provide life-changing care for families living with all forms of dementia – including Alzheimer's disease.

For families affected by dementia, they can be a lifeline.

When you support our charity, you're helping us grow the number of specialist dementia nurses. With your help, no one will have to face dementia alone.

"The support from the Admiral Nurses was amazing: they listened, gave me time and understood completely what I was going through. They were professional and personal."

Carer

Chair and Chief Admiral Nurse/Chief Executive Officer's report

Who would have predicted that a pandemic would cause such widespread devastation throughout 2020-21?

Covid-19 has had a disproportionately negative effect on families living with dementia, with services and support stopping suddenly and, in many cases, not restarting. This has caused immense distress for families trying to cope not only with the Covid-19 restrictions on their own lives, but also on the lives of their loved ones with dementia.

Many people with dementia could not understand the restrictions and the reasons for them, leading to conflict within the family or the wider community. We received an increase in calls to the Helpline asking for information on how to access advice and support, and how to explain Covid-19 restrictions to their loved one.

As a result of the pandemic, many referrals to memory assessment services were postponed or cancelled. Callers to our Helpline were desperate to get an assessment and diagnosis of their family member, and in need of our Admiral Nurses' advice on how best to approach their GP for a referral.

Covid-19 affected our working practices, and with the lockdown announcement, we had to make rapid plans for how we could still work effectively as a charity. All of our staff had to start working from home, and the necessary adaptations and equipment were put into place at a moment's notice.

Community and Events fundraising, for instance, had to stop abruptly and move to a virtual environment. As a charity, we depend on income from these events, so we had to rethink our strategy and budgeting for the year in order to cut expenditure and maximise income.

I am pleased to say we succeeded in trying new approaches to raising funds. The 'March Dog-Walking Challenge' was a particular success, raising over £2 million: a record amount for the charity from one event.

Increasing the number of Admiral Nurses in a time of national crisis was a challenge, but we remained committed to making sure that all families who needed their specialist advice and support could access it through local services and the Admiral Nurse Dementia Helpline. On the Helpline alone, we supported over 29,000 families living with dementia during 2020-21 – an increase of 31%.

All Admiral Nurses are supported and developed by Dementia UK, and we have been able to continue this online during the pandemic. This has been essential for our nurses, who have had to cope with the distress of families trying to cope with a lack of support and services, and, in some cases, with the death of loved ones who they were unable to visit at the end of life or for many months previously.

In November 2020, Dementia UK and YoungDementia UK merged to form one stronger, more influential organisation providing information, support and advice for people with young onset dementia –

a diagnosis of dementia at the age of 65 or under. As a result of the merger, we now have six specialist young onset dementia Admiral Nurses and plan to expand the team further in the year ahead.

We significantly raised our profile with the Government, other charities and the media during 2020-21. We started to work together with other charities as 'One Dementia Voice', developing clear strategies to provide the best possible support to people living with dementia and their families with minimal overlap. As a group, we delivered and supported a campaign on safe care home visiting during 2020-21, which attracted media and Government attention.

In the year ahead, we plan to develop additional Admiral Nurse services and support throughout the UK by increasing shifts on the Helpline, rolling out new Admiral Nurse clinics, and investing in new Admiral Nurse posts in primary and acute care and diverse communities.

This has been our most challenging year ever, but nevertheless, our success has been phenomenal. None of this would have been possible without the hard work and dedication of our many supporters, donors, and, of course, our wonderful Admiral Nurses and Dementia UK staff.

Thank you all so much for your support.

Professor David Croisdale-Appleby, Chair of Trustees, and Dr Hilda Hayo, Chief Admiral Nurse/CEO

Meet our Admiral Nurses

Admiral Nurses are specialist dementia nurses who are continually supported and developed by Dementia UK. They provide life-changing support for families affected by all forms of dementia.

Our nurses are here when people need help. They have the time to listen and the knowledge to solve problems.

Admiral Nurses help families manage complex needs. They consider the individual circumstances of the person living with dementia and the people around them. They can also advise other healthcare professionals.

When people are struggling, our nurses help them take back control. When friends and family are worried about a loved one, they give them confidence to manage their future with dementia.

Our nurses help people living with dementia stay independent for longer. They support the people who care for them so they have the strength to cope with the bad days, and the energy to enjoy the good days.

Dementia facts and figures

Dementia is the term used to describe a range of neurological conditions affecting the brain that get worse over time. It can affect people's ability to remember, speak and think, and to do everyday activities.

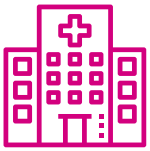
There are **850,000 people with dementia in the UK**. This will increase to over one million by 2025 and **1.6 million by 2040**

Dementia, including Alzheimer's disease, is the leading cause of death in the UK, **responsible for more than 12% of all deaths**

One in three people born in the UK this year will develop dementia in their lifetime

20%

of hospital admissions of people living with dementia are for preventable conditions



Young onset dementia

- Young onset dementia affects people aged 65 and under
- Over 42,300 people, or 5.2% of the total number of people with dementia, are estimated to have a diagnosis of young onset dementia, although the actual number may be much higher
- Awareness of young onset dementia among GPs is still relatively low, and symptoms are often attributed to stress or depression.
- It can take twice as long for a person living with young onset dementia to get a diagnosis compared to people who develop dementia later in life
- Rates of young onset dementia in Black and ethnic minority groups are higher than in the rest of the population
- People with a learning disability are also at greater risk of developing dementia at a younger age

"My Admiral Nurse has been amazing in helping our two girls understand my husband's [young onset dementia] diagnosis."

Carer

Rising to the challenge

At the start of the year, it became evident that we would face many challenges over the months ahead due to the Covid-19 pandemic. These included:

Adjusting to homeworking online or by phone for the majority of staff. This resulted in the pressure of juggling private home space with workspace, along with occasional technology issues, and led to a very intense period of work for many teams.

As restrictions eased, we introduced a new, hybrid arrangement where the team could access the office safely.

Navigating the complexities of working with other Dementia UK teams remotely. Some projects that involved teams collaborating to create and develop resources took longer than they would have face to face, although others were unaffected due to the effectiveness of online tools.

Implementing new projects at speed. Projects like a Covid-19 survey became a priority for our Research and Publications Team.

Launching alternative fundraising campaigns such as Facebook and virtual challenges, and moving others, including 'Time for a Cuppa', online (many of our existing mass participation fundraising events became impossible because of Covid-19 restrictions.)

Responding to an to an increase of 31% in contacts to our Admiral Nurse Dementia Helpline compared to the year ending March 2020. Many of these calls related directly to the impact of Covid-19.

With a diagnosis backlog resulting from the pandemic, we expect to see more families needing the specialist advice and support of our Admiral Nurses – on our Helpline, in the community and in primary care settings.

Postponing some of our planned activity, such as the launch of 'Only together' – a campaign highlighting the shortcomings in dementia care, and calling for better access to quality care.

These activities were replaced by others in response to the pandemic, including our 'Lives on Hold' campaign and a digital survey of Helpline callers.

"Thank goodness for the Admiral Nurse Helpline. They have helped me as a carer keep my sanity and filled the gaps left by [pandemic restrictions]."
Carer

AdmiralNurses
AdmiralNurses

Marilyn's story

Marilyn explains how an Admiral Nurse helped prepare for her husband to return home after a spell in hospital.

David was diagnosed with vascular dementia in February 2018 at the age of 74. As David's dementia progressed, Marilyn – his wife of 56 years – supported him at home through his daily challenges.

"When David lost his ability to swallow, I was there to reassure him whenever he got distressed," Marilyn says. "When he lost his ability to drive, I supported him by driving him to medical appointments."

In December 2020, David contracted sepsis. He became semi-conscious and very agitated. Their doctor immediately called an ambulance to their home.

"David wouldn't have thought to ring me"

Covid-19 restrictions meant that Marilyn couldn't go with David in the ambulance or visit him in hospital. "Given David's dementia, he wouldn't have thought to ring me – he just couldn't," says Marilyn.

"I needed David back so I could care for him in our home."

Thankfully, Marilyn could rely on Kerry Lyons, Admiral Nurse for Royal Bolton Hospital, who she had met previously through a dementia support group.

After an 8am phone call from Marilyn, Kerry visited the hospital wards to find out about David's health and where he was. Every morning, she set up a FaceTime call for Marilyn to check in on David; she shaved and cleaned him before the calls.

"An endoscopy revealed advanced sepsis"

Kerry's close bond with David meant she could anticipate problems with his health.

"Kerry told me once that David's health looked like it was deteriorating," explains Marilyn. "Her intervention meant that he was taken down for an endoscopy, which revealed advanced sepsis."

"It was a worrying time, of course, but I knew what was happening through Kerry."

The next 24 hours were critical, according to the doctors. "It was a worrying time, of course, but I knew what was happening through Kerry," says Marilyn.

David's health soon stabilised with close monitoring of his fluid intake and antibiotics. However, Marilyn and Kerry feared that the longer he was away from home, the more he would deteriorate.

"I needed David back so I could care for him in our home," says Marilyn.

Kerry knew how important home life was to both David and Marilyn, so she met with a social worker based in the hospital to make plans to bring David home. She arranged a care package, with physiotherapists to aid his mobility, speech therapists to help with his difficulty in swallowing, and nutritionists to help decide the foods he could eat.

All of this meant that David could be discharged and supported at home, and that Marilyn could care for him confidently.

"Kerry knew how much home meant to us"

For Marilyn, the benefits of David being back at home are clear.

"When David came home from hospital, he couldn't do anything, but within a week he was able to walk with his Zimmer frame. Now, I love being at home with him. We have everything in place for him, including an indoor wheelchair," says Marilyn.

"Without Kerry, I think David would have been readmitted to hospital unnecessarily, or he simply wouldn't be here. Kerry knew how much home meant to us, and we are so grateful to her for bringing David back."

For Kerry, it is a privilege to support families like Marilyn's in this way.

"As a hospital-based Admiral Nurse, I help staff to understand how dementia affects patients," she says. "I also act as a vital communication link to families, and coordinate care plans for a return to home. All of this has increased in urgency due to Covid-19."

Here when people need us most

Ensuring families facing dementia have the advice and compassion they need is central to our work. Our Admiral Nurses provide the life-changing support they need to face the future with confidence.

What we said we would do...

Increase the number of Admiral Nurses on the Dementia Helpline each weekday, so that more people could get through to us first time without leaving a message. If a message is left, we aim to call back within 24 hours.

What we did

Extended the opening hours of our Admiral Nurse Dementia Helpline. From April 2020, we opened the Helpline seven days a week: Monday to Friday 9am-9pm, and Saturday and Sunday 9am-5pm, including all Bank Holidays (except 25th December.) Previously, the Helpline was closed on Bank Holidays. We also recruited five new Helpline nurses.

Sixty-four percent of callers got through to us on their first try. Of those who didn't, 79% were called back within 12 hours, and 95% within 24 hours.

Gave vital support during the year to more than 29,000 families affected by dementia through our Helpline. That's a 31% increase on the previous year. Our nurses' expertise and care brought hope and comfort to some of the UK's most vulnerable people in difficult circumstances during the pandemic.

Ninety-six percent of people who responded to our carers' survey said they would be 'extremely likely' or 'likely' to recommend our Helpline to someone who needed similar support.

What we said we would do...

Focus on developing and increasing the number of Admiral Nurses working in acute care, GP practices and other primary care settings, including opening new Admiral Nurse services in areas that don't currently have one.

What we did

Opened 20 new Admiral Nurse services in eight new areas. This includes our West Wales service, which has eight new nurses covering Carmarthenshire, Ceredigion and Pembrokeshire. They will support people in this region through an exciting collaboration with our partners: the Hywel Dda University Health Board and local authorities. The initiative is in line with the Welsh Government's Dementia Action Plan for Wales 2018-2022.

What we said we would do...

Increase the number of Admiral Nurse clinics, enabling more people to see an Admiral Nurse in the workplace or in a GP clinic. Admiral Nurse clinic appointments give families the opportunity to seek specialist advice, support and clinical guidance about dementia, in confidence.

What we did

Started five new Admiral Nurse clinic pilot projects, partnering with primary care networks (GP clinics) across the UK. These are based in East Sussex, Derbyshire, Nottingham, Staffordshire and Edinburgh, and hosted by GP practices.

What we said we would do...

Increase the number of Admiral Nurses working with under-served communities, such as Black, Asian and ethnic minority groups, younger people, and people with learning disabilities. Our aim is to develop more accessible services for these groups.

What we did

Introduced a specialism-focused approach to our work, rather than one based on geography. Previously, clients received help only from Admiral Nurses in their region, who gave support and advice across all specialisms. We now have specific team members who apply their expertise in the following areas to help clients:

- learning disabilities
- young onset dementia
- social care: care homes, domiciliary care, social services
- primary care
- end of life
- community services
- diverse and under-served communities
- acute care

Appointed our first learning disabilities Admiral Nurse in June 2020 through a partnership with MacIntyre. This national charity supports around 1,200 children, young people and adults with learning disabilities and/or autism. The role, funded through a MacIntyre award, promotes best practice and education, raises awareness of dementia, and directly supports clients.

"I was reluctant and sceptical [about changing to virtual supervision] initially as I always enjoyed the in-person clinical supervision. I now realise I was wrong and this method has been hugely beneficial to me."

Admiral Nurse

What we said we would do...

Develop new ways of offering professional and practice development through a new Admiral Nurse Academy, online and in service locations.

What we did

Held 'Resilience and Wellbeing': our first live virtual Admiral Nurse forum. This annual conference for Admiral Nurses was previously held face to face but moved online due to Covid-19 restrictions.

More than 250 Admiral Nurses attended this Zoom event dedicated to supporting them with the increasing challenges and emotional distress presented by their work. Ninety-six percent rated the forum 'excellent' or 'good'.

Moved the clinical supervision of our Admiral Nurses in-house and online. Clinical supervision is essential in providing support to our nurses and allowing them to reflect on their practice. Our in-house experts were trained to facilitate the process and work with the nurses through clinical supervision and Practice Action Learning Sets (PALS.)

By September 2020, 18 facilitators were trained and 34 supervision groups were running. We have achieved an attendance rate of 74% and many positive evaluations.

Launched our new learning and development platform, Blackboard. This university-based system has enabled us to shift to more online learning and create bespoke courses and 14 learning units.

Ran a programme of 11 webinars for Admiral Nurses on topics including domestic abuse, caring from a distance and supporting families with young onset dementia. Our session on supporting families affected by Lewy body dementia attracted the most attendees.

AdmiralNurses
Tracy Chapman

We also...

Welcomed a total of 38 new Admiral Nurses throughout the year, bringing our team total to 306.

Attracted 831 attendees to the first sessions of our joint project with the Charity for Civil Servants, 'Talk Dementia'. The project offers civil servants and their families specialist emotional, practical and psychological support and general information on dementia. They can engage with the help we offer through a bespoke website, virtual chat and group sessions, and telephone consultations with Admiral Nurses.

The virtual 'Talk Dementia' sessions were so popular that 18 more have been commissioned for 2021.

Adapted our entire way of working, quickly and innovatively, to cope with the pandemic. We adjusted our structure and rethought the way we supported our clients. This ensured our teams could continue to give people living with dementia and their families the compassion and support they urgently needed.

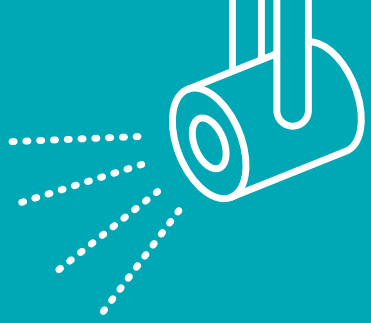
We enabled many of our Admiral Nurses to handle their cases by telephone and online from home. We ensured they had the necessary equipment such as monitors, keyboards and printers, and provided technical support to enable them to work efficiently from home.

Issued 19 editions of our Admiral Nurse bulletin. We launched this initiative at the beginning of the first lockdown in March 2020 to support our nurses during the pandemic.

The bulletin, received by 357 Admiral Nurses and Dementia UK employees, covers important topics around dementia care and shares updates and resources from teams across Dementia UK.

Celebrated the recognition of our professional development work for our nurses during the pandemic at the National Dementia Care Awards 2020. We were named finalists in the Best Dementia Training Initiative category.

We welcomed a total of 38 new Admiral Nurses throughout the year, bringing our team total to 306.



Spotlight

Our merger with YoungDementia UK

We merged with YoungDementia UK to become one charity in November 2020. This exciting venture was agreed by both Boards of Trustees after careful consideration, and in recognition of our organisations' effective collaboration over several years.

The merger will help us create a much stronger, more influential organisation providing help for people living with young onset dementia – that is, anyone diagnosed with dementia aged 65 or under.

The combination of our two charities is especially timely and important to tackle the devastating and disproportionate impact of Covid-19 on people of all ages who are affected by dementia.

Our powerful union will give people living with young onset dementia and their families a louder voice and allow us to develop more specialist support. It will also enable Dementia UK to become a leading centre of expertise for young onset dementia.

"The timely union of our charities sets up an amazing and deeply satisfying opportunity for us," says Tessa Gutteridge, Young Onset Dementia Programme Director. "We have the potential to offer younger people with dementia and their families the accessible, reassuring expertise that they desperately need. The impact of dementia in mid-life can be devastating without support. We can change that now, and help people affected to have a more positive future."

We now have six specialist young onset dementia Admiral Nurses and plan to recruit a seventh this year. We are also supporting our other Admiral Nurses to develop and enhance their young onset dementia knowledge and skills. More than 70 Admiral Nurses joined our young onset dementia webinar at the beginning of March 2021.

Three Young Onset Dementia Advisors based in Oxfordshire have joined the Dementia UK team from YoungDementia UK. Their work includes offering post-diagnostic support through a programme called Adapt. They also offer a wealth of social, creative and practical sessions and activities to families in the county experiencing dementia.

Samantha and her husband Edward, who has young onset dementia, have been supported by the Young Dementia Oxfordshire service. She says: "It's not been the greatest year for us (along with a lot of other people), and we have found it really tough at times. However, the Zoom groups you have organised have been a lifesaver – something to look forward to, and for Edward to feel involved in something important. Without [the] groups and support, I really don't know how we would have got through this year."

Dementia UK also now hosts the Young Dementia Network, formed by YoungDementia UK in 2016. The Network is a collaboration between people affected by and working in the field of young onset dementia, and has over 4,000 members. The Network campaigns to bring about improvements for people living with young onset dementia now and in the future.

An estimated 42,300 people – 5.2% of the total number living with dementia – have a diagnosis of young onset dementia, although the actual figure may be much higher.

Rachel Thompson,
Consultant Admiral Nurse
for Lewy body dementia

Spotlight

"The most common disease you've never heard of"

Since starting her two-year post in November 2019, Rachel Thompson, our first Consultant Admiral Nurse for Lewy body dementia, has delivered training to more than 180 Admiral Nurses.

"Lewy body dementia is sometimes described as 'the most common disease you have never heard of'," says Rachel. This complex, challenging and often misdiagnosed condition, caused by abnormal clumps of protein (Lewy bodies) gathering in the brain, affects around 100,000 people in the UK. It is the third most common cause of dementia, thought to account for 10-15% of cases, but is frequently misdiagnosed.

Lewy body dementia is an umbrella term for two different types of dementia: dementia with Lewy bodies and Parkinson's disease dementia.

Lewy bodies build up in brain areas responsible for thought, movement, and visual perception, and in those regulating sleep and alertness. Its distressing symptoms can include hallucinations, delusions, and changes in alertness and sleep.

Rachel's role includes supporting professionals working with people affected by Lewy body dementia, and encouraging links between research and practice. She is also developing new materials. These include new resources in collaboration with the Lewy Body Society, educational resources for healthcare professionals to raise awareness and improve diagnosis, and a Lewy body dementia leaflet for families.

"Having worked in dementia care for over 20 years, I am pleased to be able to highlight the needs of those who are facing perhaps one of the most complex types of dementia," Rachel says. "I have received some lovely feedback from the people I have supported, and knowing that I can offer support and guidance, especially when families have been so greatly impacted by the pandemic, is hugely rewarding."

Dementia UK works in partnership with the Lewy Body Society, which funds research into Lewy body dementia and raises awareness of the disease. The Society funds Rachel's post and makes referrals to the Admiral Nurse Dementia Helpline.

"Having worked in dementia care for over 20 years, I am pleased to be able to highlight the needs of those who are facing perhaps one of the most complex types of dementia."

What we'll do next – our priorities for 2021-22

Ensure our Admiral Nurse Dementia Helpline reaches and supports even more families living with dementia. We will continue its expansion to ensure more callers get through on their first attempt by recruiting more dementia specialist Admiral Nurses.

Increase the number of new Admiral Nurses in primary care by at least 22. We'll also increase the number of new nurses in acute care by at least eight.

Recruit at least four more nurses to support people from under-served communities, such as those with young onset dementia and people from ethnic minority communities. We will also recruit specialist nurses for specific areas including care homes and hospitals.

Deliver our first ever virtual summer school for health and social care staff who care for people with dementia and their families at all levels. It will involve a series of webinars looking at topics including telephone skills, assessment and diagnosis, distressed behaviour, and planning.

Plan and develop our Admiral Nurse Academy to ensure it supports the increasing number of nurses who would like to join the Admiral Nurse team. It will also be a resource for other nurses who want to improve their knowledge and skills in dementia. We will extend the learning units, modules and opportunities we offer on Blackboard.

Admiral Nurses
Joe Costello

Julie's story

Julie explains how the Admiral Nurse Dementia Helpline supported her in seeking a dementia diagnosis for her aunt.

"Dolores was the most beloved and glamorous aunt," says her niece, Julie. "She was a terrific watercolour artist – better than her teacher – and was able to sell her work. Her painting took her to Holland with her art groups, and she painted boats while based in Bristol."

Dolores and Julie had a very close relationship. "I was like her surrogate daughter, and she came to live near me in Kent when she was 70 in around 2004. This was after her second husband died."

In 2017, Julie began to notice that her aunt was experiencing memory problems. "She became increasingly forgetful," Julie says. "She didn't recognise herself after she had done her hair, and she was constantly losing the house keys."

"My concern for her safety increased"

Julie found herself worrying that Dolores's behaviours were putting her at risk. "My concern for her safety increased when I'd get phone calls from neighbours saying that Dolores was outside. She was telling everyone she was waiting to go shopping with her family – there were no shopping trips planned. I quickly saw dementia as the likely cause for her behaviour changes."

It took some time for Julie to pluck up the courage to ring the Admiral Nurse Dementia Helpline. "I remember seeing the number for the Helpline but it took a long time for me to contact them," she explains. "I think ringing would have made me feel inadequate. In reality, I wish I had phoned sooner."

Julie rang the Helpline after the GP referred her aunt for a brain scan. "I knew that this would be a huge effort for her, and she would be confused. I asked the nurse what the point was of having a diagnosis when it was so clear to me that it was dementia."

The Helpline nurse helped Julie understand the benefits of seeking a dementia diagnosis for her aunt. "In such a kind, understanding and compassionate way, the Admiral Nurse confirmed that a diagnosis would give my aunt better access to local services to help her stay at home longer. This included someone from the council making improvements to the bathroom. Without this advice, there would have been more pressure."

Eventually, in June 2019, Dolores was diagnosed with mixed dementia (vascular and Alzheimer's.) She was 85 years old.

Julie turned to the Admiral Nurse Dementia Helpline again when she needed information and support. "That first call to the Helpline encouraged me to ring again when I needed advice," Julie explains.

"For example, right in the middle of the pandemic when I was out shopping, a store worker said I couldn't take two packs of toilet rolls. I said it

"The Admiral Nurses gave me the confidence to contact the GP."

was for my aunt. Their response was: 'Well, she should be here!'

When I spoke to the Admiral Nurses, they advised that I should take a letter of her diagnosis round with me, pointing to the fact that I was a carer. They gave me guidance when everything was too overwhelming."

"The Admiral Nurse knew who I should contact"

The Helpline continued to support Julie as her aunt's condition deteriorated. "My final contact with the Helpline was when Dolores had a water infection," she explains. "The Admiral Nurses knew who I should contact to expedite my aunt's care. In this case, it was the GP.

With all the pressure facing services due to Covid-19, I wouldn't have thought to contact the GP, but the Admiral Nurses gave me the confidence to do that.

I truly believe that call made me see that my aunt was at the end of her life. I arranged carers and the delivery of a hospital bed to her home soon after."

The advice from the Helpline helped Julie care for Dolores at home until the end. "My aunt died on 10th October 2020 in her own home, which is what she wanted," Julie says. "The support from the Helpline was vital in allowing this to happen and making us live confidently throughout the stages of the condition. I wish I had phoned sooner."

Recording our impact: evaluating the effectiveness of our Admiral Nurses and Dementia Helpline

Collecting evidence of the effectiveness of our Admiral Nurse service and Helpline through surveys of carers and professionals is crucial in helping us improve our service.

What we said we would do...

Continue to collect feedback from families and professionals, with a particular focus on the work of Admiral Nurses on the Helpline and in primary and acute healthcare settings. This would enable us to better understand the needs and experiences of families living with dementia and help us to improve the specialist dementia support offered by Admiral Nurses.

What we did

Surveyed 76 carers and 93 professional partners, including GPs, Consultants, Social Workers and Occupational Therapists, about the work of our Helpline and Admiral Nurse services. Although these figures were lower than usual due to Covid-19, every response gave us an important insight into the impact of the Helpline.

Our key findings

Surveying the impact of Covid-19

169 family carers responded to this survey which was sent out in August and September 2020.

We found...

- **85%** of carers felt lonely and 89% felt isolated
- **86%** hadn't been able to access all the care and support services the person with dementia needed
- **88%** couldn't access all the care and support services they needed for themselves as a carer
- **78%** said there had been a negative impact on the wellbeing of the person with dementia
- **86%** of carers said there had been a negative impact on their own wellbeing

"Ever since lockdown, [my father] has gone back to that glazed look and I'm just not sure he knows who I am anymore."

Carer

Contacting our Admiral Nurse Dementia Helpline

We asked carers about their experiences of contacting our Helpline.

- **100%** of respondents said the Helpline Admiral Nurse they spoke to was helpful in sharing information and explaining the impact of dementia
- **99%** of carers said that the Admiral Nurse was good at listening to them, showing compassion and explaining things in a way they could easily understand
- **99%** who received a personalised letter or email from the Admiral Nurse following their call found this helpful
- **97%** said the Admiral Nurse was helpful in providing them with emotional support
- **96%** said that the Admiral Nurse was helpful in providing support to manage risk and prevent possible crisis
- **96%** said they would recommend Admiral Nurses to family and friends
- **94%** said the Admiral Nurse had made a positive difference to their ability to take care of the person they look after
- **90%** said the Admiral Nurse had made a positive difference to their ability to communicate with the person they look after

Why did people contact our Helpline?

There are 33 categories that our Admiral Nurses can use to record reasons for contact. A total of 59,185 reasons were recorded in these categories, with over 29,000 cases handled this year. This represents an average of two reasons per case.

The most common reasons people contacted the Helpline in the year to March 2021 were:

- accessing support
- Covid-19
- behavioural issues
- psychological and emotional support
- getting a diagnosis
- dementia understanding and support
- requesting an Admiral Nurse

Evaluating our Admiral Nurse services

We collected feedback from professionals such as GPs and paid carers who have had contact with an Admiral Nurse service via an online survey. In 2020-21 we collated the results of cumulative feedback from 285 professionals. Most said the Admiral Nurse service had:

- improved case management/coordination for families living with dementia (96%)
- increased their understanding of dementia and its effects (91%)
- increased their confidence in assessing the needs of families living with dementia (89%)

We also asked health and social care professionals how the Admiral Nurse service had made a difference to people living with dementia.

- **99%** said the Admiral Nurse service had improved care and quality of life for families
- **98%** said the service had enabled families to be included in decisions about care
- **97%** said the service had the potential to delay long-term care home placements
- **96%** said the service had the potential to reduce unplanned hospital admissions
- **94%** said the service had helped avoid crisis points for families

"The Admiral Nurses have been invaluable as a source of information, preventing crisis and enabling me to find the best possible outcome."
Social Worker

What we said we would do...

Collate and analyse larger collections of data to make our surveys and evaluations more robust and representative.

What we did

Assessed the impact of Covid-19 on families affected by dementia by surveying carers through channels including the website, social media and newsletters.

Carried out a Dementia UK digital survey about our clients' digital use to better inform our future online work.

Understanding digital use

In March 2021 we launched an online digital survey. Our objective was to find out about people's experiences of accessing dementia information, care and support digitally during the pandemic. This will enable us to develop and improve our digital services.

We also asked people living with young onset dementia and their carers to complete our digital survey. We are using these results to consider how we can develop our digital offer for people and families affected by young onset dementia, for example through webinars and online support groups.

Some of our findings...

- **95%** of respondents said they were online at least once every day
- **75%** said they were confident in using digital technology to access health information, care or support
- **75%** said they had used digital services to access dementia information, care or support during the pandemic
- **73%** said they had accessed resources or support on the Dementia UK website

What we'll do next – our priorities for 2021-2022

Ensure that our insights and evaluation work effectively supports Dementia UK's strategy. We'll do this by collecting, analysing and reporting evidence of the impact of Admiral Nurses and wider Dementia UK activities, and using this information to develop campaign activities.

Publish external reports and resources on Dementia UK surveys of carers and professionals. These reports will show the impact that our nurses are having and help us to build the evidence base for Admiral Nursing.

Researching dementia care

Our respected research inspires best practice nationally to help people with dementia and their families get the support they need.

We contribute our expertise to the wider field of research into the optimum care for people affected by dementia, and we are partners and collaborators in a range of research studies. We offer expert advice, support participant recruitment and support dissemination of research across a wide range of stakeholders.

What we said we would do...

Increase the capacity of our Research and Publications Team so it could offer more support to Admiral Nurses as they move from practice development projects to more formal research.

What we did

Developed the research capacity of our Research and Publications Team through our two Admiral Nurse Research Fellows. One will complete their doctoral studies with De Montfort University this year. The other is in their first year of combined MSc and PhD degrees at University College London.

What we said we would do...

Develop 'Dementia FAQs for family and friends: what you really want to know about life with dementia' – a book of questions asked by families and answered by Admiral Nurses.

What we did

Postponed the book project due to the pandemic – it is now scheduled for early 2022.

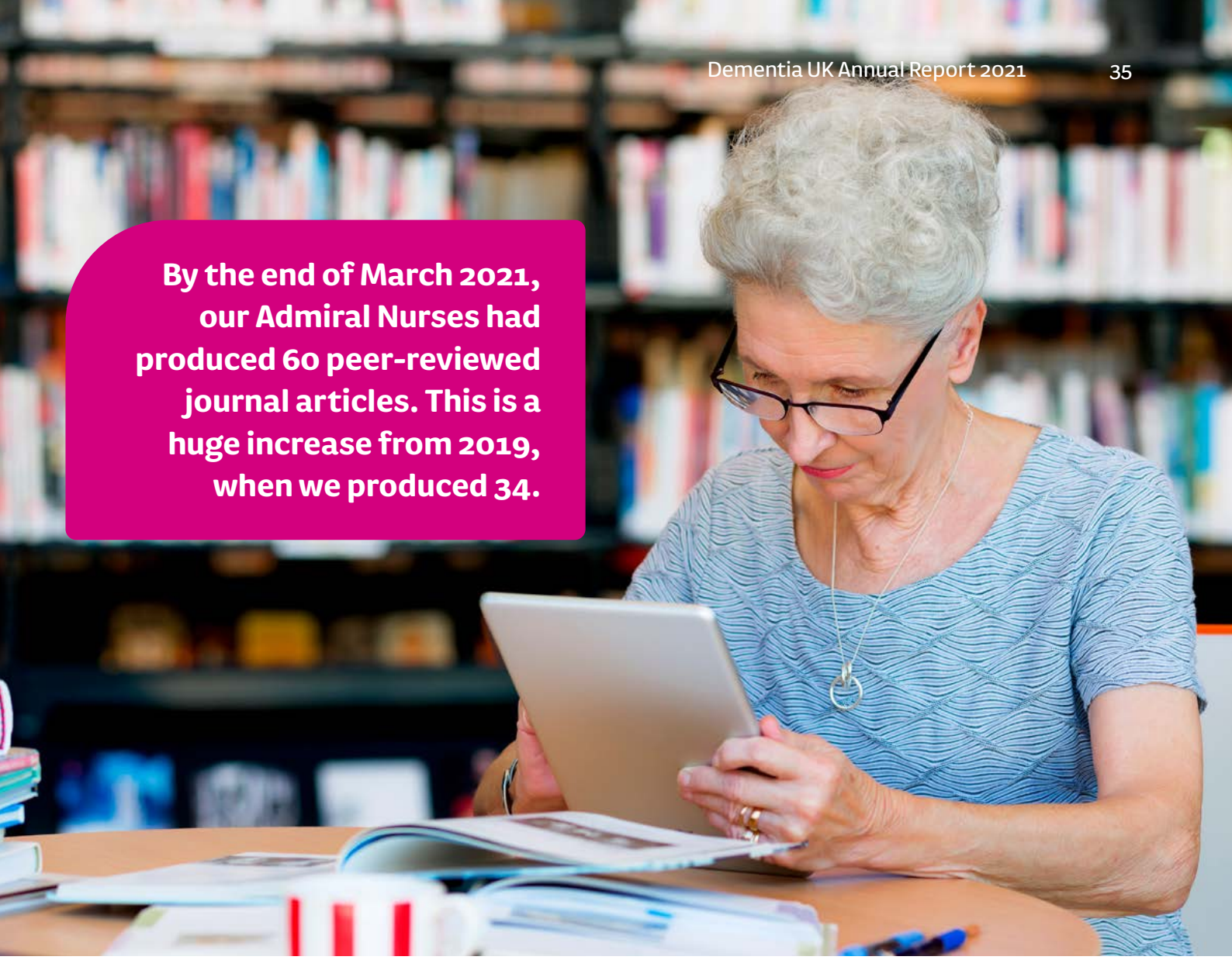
We also...

Supported our nurses to write and disseminate their work to audiences outside Dementia UK. By the end of March 2021, they had produced 60 peer-reviewed journal articles. This is a huge increase from 2019, when we produced 34. The subjects mainly evolved from practice development projects and illustrative practice case studies.

We expect our peer-reviewed articles to powerfully inform and influence policy, practice and research that will change the lives of people affected by dementia.

Contributed to more than 20 research studies concerning dementia care on topics ranging from continence to the anticipatory grief of family members. We are developing a comprehensive portfolio of collaborative research with many UK – and several international – universities.

Developed ideas for new publications to support under-served populations such as people living with dementia in prison and people with dementia in LGBTQi populations. We will be supporting Admiral Nurses to write these based on their own practice and experience.



By the end of March 2021, our Admiral Nurses had produced 60 peer-reviewed journal articles. This is a huge increase from 2019, when we produced 34.

What we'll do next – our priorities for 2021-2022

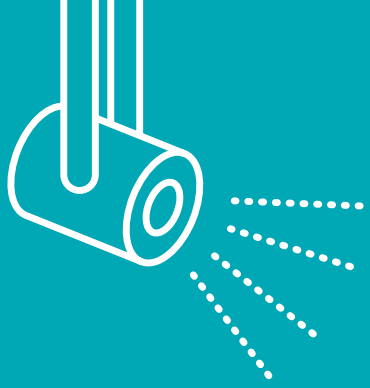
Continue with our plans to publish 'Dementia FAQs for family and friends: what you really want to know about life with dementia'.

Develop a research plan for Dementia UK focused on commissioning the research needed to support our strategy. We aim to hold a focus group to plan the direction of our future research.

Help Admiral Nurses turn their projects and activities into compelling research. We will support and guide them from the outset to help them produce projects that result in new evidence, extending the organisation's research capability beyond the Research and Publications Team.

Produce even more peer-reviewed publications to disseminate the activity of Admiral Nurses and evidence of how best to help people with dementia.

Zena Aldridge
Admiral Nurse Research Fellow at Dementia UK



Spotlight

Vital support during the pandemic

In March 2020, Zena Aldridge, Admiral Nurse Research Fellow at Dementia UK, temporarily returned to the Central Norfolk Admiral Nurse Team. Zena was the first Admiral Nurse appointed to the area in 2014. Her return, for two days a week until June 2020, was supported by NHS Norfolk and Waveney Clinical Commissioning Group and Dementia UK.

Zena's responsibilities included triaging the waiting list of families affected by dementia who needed help, and responding to calls where people were experiencing significant distress. She ensured families had a supply of essential items like food and medication and checked in on those who were feeling isolated.

She was also a vital touchstone for health and social care professionals needing more information about the implications of Covid-19 for people with dementia, and how to support them.

"It was so important for me to be able to return to the Admiral Nurse team in Norfolk," says Zena. "The compassion and willingness of all of the team to help families affected by dementia, however much they could, was a shining beacon of positivity in very trying times. It was great to be able to support them during this difficult time, too."

Liz Waddy, Clinical Lead for Dementia in Norfolk and Waveney, worked with Zena during her secondment. "Zena was highly effective in reducing the waiting list and assisted tirelessly in triaging incoming calls," says Liz. "Her input led to a revision of the referral form and a clearer plan of integrated working with the dementia support workers going forward."

"The compassion and willingness of all of the team to help families affected by dementia, however much they could, was a shining beacon of positivity in very trying times."

Raising awareness and sharing information

Highlighting the difficulties faced by people with dementia and their family members is central to our work. We also publicise our life-changing support and expertise, and produce extensive resources for families facing dementia.

What we said we would do...

Deepen the public's understanding of Dementia UK's work through strategic media opportunities, our social media networks and our work with Celebrity Ambassadors and partnerships.

What we did

Focused our media work on highlighting the issues that families affected by dementia have faced throughout the pandemic. Our Chief Admiral Nurse/CEO, Dr Hilda Hayo, appeared on BBC Breakfast in September 2020. She discussed the distressing lack of visitation rights for families with relatives in care facilities.

Our Director of Clinical Services, Paul Edwards, featured in more than 200 pieces of media coverage after commenting on last-minute lockdown guidance updates and the impact on the vulnerable.

Gave a voice to individual families affected by dementia who felt left behind by the pandemic. We supported several to tell their stories to the media. These included Hannah Riches from our Lived Experience Advisory Panel (LEAP.)

Hannah's appearance in a Sky News broadcast and online feature revealed the difficulties of looking after her husband, who has young onset dementia, as well as their school-age children in the pandemic.

Her story prompted an increase in calls to our Admiral Nurse Dementia Helpline and led to 52 pieces of additional coverage in regional and broadcast media. These included Heart Radio, Capital Radio and Classic FM.

Launched our 'Lives on Hold' campaign in June, which achieved extensive media coverage. This included our Celebrity Ambassador Naughty Boy featuring on ITV's Lorraine, an interview with Celebrity Supporter Georgia Kousoulou in the Mail Online, coverage in the Journal of Dementia Care, and numerous items in the regional press. The campaign also featured on the Government's Let's Talk Loneliness website.

Social media in numbers – 2020-21

- Instagram followers: **28,445 – up 59%**
- LinkedIn followers: **20,365 – up 106%**
- Facebook likes: **61,509 – up 29%**
- Twitter followers: **109,949 – up 3%**

Increased our social media engagement over the year by introducing our existing and new followers to a wider range of lively and original content. This included poems written by Volunteer Ambassadors and other supporters, and slideshows on subjects ranging from dementia risk factors to exercise.

We also increased our use of videos and infographics to build our social media presence and drive engagement.

During the 'Lives on Hold' campaign we shared 38 posts across our four social media channels. Some of our Celebrity Ambassadors and Celebrity Supporters also posted on their channels.

Other social media successes included Neville Southall's Twitter takeover in November 2020 and our monthly quizzes.

What we said we would do...

Develop further our supportive and expert information through a range of new advice leaflets and videos, ensuring that all the advice they give is of the highest standard and informed by the feedback we have received.

Increase significantly our delivery of impactful and relevant content highlighting the difference our Admiral Nurses make.

What we did

Published new information leaflets, working towards our goal of publishing advice on every topic facing families living with dementia.

Titles published this year include: Getting the most out of a remote consultation; Practical guide to getting the best out of GP and other health appointments; Next steps checklist; Lewy body dementia; and our Admiral Nurse Clinics leaflet.

What we said we would do...

Develop our campaigning and influencing work to promote the needs of people with dementia and their families to inform national policy and guidance.

What we did

Delivered our first campaign – 'Only together' – to improve local support for families following a diagnosis of dementia. This campaign placed the voices and experiences of families and other key stakeholders, such as GPs and health and social care professionals, at its core.

Built relationships with MPs to support the development of local Admiral Nurse services.

Continued our representation in the National Dementia Action Alliance: a group of organisations across England that connect, share best practice and take action on dementia. We also ensured we were members of key charity alliances including the Care and Support Alliance and Continuing Healthcare Alliance.

"Carers that I meet through Dementia UK often tell me their life is on hold: the person they care for must come first."

Spotlight

‘Lives on Hold’

Natalie Tomlinson, Head of Marketing and Communications, explains why Dementia UK launched ‘Lives on Hold’ during the pandemic.

It was two weeks into lockdown that the campaign idea for ‘Lives on Hold’ came to me. Talking to colleagues about our feelings, our missed freedoms and contacts, made me realise that lockdown for carers of people living with dementia was probably little different from their lives before.

Carers that I meet through Dementia UK often tell me their life is on hold: the person they care for must come first. Friendships, hobbies and free time fall by the wayside. I had also seen the impact of my dad’s dementia on my parents’ relationship.

I felt lockdown was the best time to help the general public understand why our Admiral Nurses are so vital. I sensed people would begin to understand social isolation and could start to empathise with the difficulties of life as a 24/7 carer. They would hopefully understand what it’s like to not be able to live the life you once had.

Our Marketing and Communications Team worked quickly and remotely to turn these thoughts into a campaign reflecting our organisation’s strategy and objectives. Video Producer Tony Lundon and Celebrity Manager Rachel Braier were key in identifying contributors and putting the plan into action.

All contributors, including Celebrity Ambassadors, Admiral Nurses, carers and members of Dementia UK staff, rose to the occasion of online filming. They downloaded new apps, found quiet corners of lockdown locations, tweaked the lighting and recorded audio on their smartphones. And, trustingly, they opened up their lives and their hearts to a Video Producer they had only ever met on a screen.

Some amazing carers shared their stories. Their honesty and obvious admiration for the Admiral Nurses that support them made our jobs relatively easy.

After six weeks, six videos, three supporter stories, four new website pages, copy written, social media images created, and a great team effort, we launched ‘Lives on Hold’ on 15th June 2020. We chose this date because of non-essential shops re-opening and some children being back at school.

For many people, their lives would be getting back to normal, but we knew that for the more than 700,000 people across the UK caring for someone with dementia, their lives would still be on hold. Their isolation would continue and so would their need for our Admiral Nurses’ support.

Personally, I’ve dedicated this campaign to my dad, Barry Spencer. He lived with dementia for several years before he died from Covid-19 on 11th April 2020. My dad always taught me that if a job was worth doing, it was worth doing right. I think we did that with ‘Lives on Hold’.

What we'll do next – our priorities for 2021-2022

Strengthen our social media presence through Facebook, Twitter, Instagram and LinkedIn to ensure that every post reaches the people who need to see it, and that our key messages are always clear.

Provide excellent, supportive information for people before and after a diagnosis of dementia. We'll do this by enshrining the expertise of Admiral Nurses through information on our website, in leaflets, on video, on social media and through other new and emerging channels.

Deliver excellent digital activity, and capitalise on new technology and technological trends in order to reach particular audiences in the way that best suits them.

Raise awareness of Dementia UK's clinical services, influencing work and fundraising by incorporating our new key messaging into all our communications and delivering a series of proactive integrated awareness campaigns.

Ensure we are delivering our messages effectively to under-served communities, for example people from ethnic minority and LGBTQi communities, by working with people with lived experience.

Run a series of campaigns throughout the year. These will be supported by our high quality content including compelling case studies, respected research and relevant spokespeople. Our main campaign will focus on continuing healthcare and will launch in November 2021. We will also start to work on an integrated awareness campaign to raise knowledge and understanding of the charity and the support our nurses can provide.

Research and further develop ways in which we can support people through digital services.

Campaigning during the pandemic

Too often, families are left facing dementia alone, or with very limited access to support and information – a situation that was exacerbated by the pandemic. Clinically vulnerable people who were shielding found themselves without access to food; face to face medical appointments became remote; and families were unable to visit their loved ones in care homes or hospital.

To tackle these problems, we joined forces with other dementia charities to lobby MPs and other Parliamentarians about the needs of people with dementia and their families, raising awareness of how they were disproportionately affected by Covid-19.

Our campaign actions included:

- giving evidence to the All-Party Parliamentary Group (APPG) on coronavirus about the impact of the pandemic on families affected by dementia
- sharing our recommended approach for safe care home visiting during the pandemic with the Government and other key Parliamentarians
- working collaboratively with the Government, supermarkets and other charities to ensure people who were clinically vulnerable and/or shielding had access to essential food supplies
- joining with other dementia charities including Alzheimer's Society, Alzheimer's Research UK and John's Campaign as One Dementia Voice to campaign on behalf of people with dementia and their families
- calling for national and local support for people affected by dementia on Coronavirus Action Day on 1st March 2021

Neil's story

Neil shares how Admiral Nurse Kerry supported the family when his dad was in hospital during the Covid-19 lockdown.

In 2014, Neil's dad David – a retired teacher, keen traveller and a lifelong sports fan – was diagnosed with Alzheimer's disease.

At first, David's dementia progressed slowly. "It wasn't really until 2018 that he began to need support with everyday living," explains Neil. "Then, during a hospital admission in 2019 for a suspected hernia, he suffered a minor stroke, as well as delirium, leading to a steep decline in his health once he returned home."

With the support of their family, friends and neighbours, Neil's parents were able to continue to do the things that mattered to them and keep connected, despite David's dementia. "While everyday life was challenging, my dad remained contented, often laughing with my mum when he forgot words or how to do various things, rather than becoming distressed."

"We waved him goodbye in the back of an ambulance"

However, during the Covid-19 pandemic and lockdown, David's health and wellbeing deteriorated. "My mum was struggling to support my dad without outside help, and she had to call in paramedics on several occasions to help him get up after a fall," Neil remembers. "He was also less and less willing to cooperate with us or with the paid carers we briefly brought in."

One morning, Neil and his mum noticed that David was struggling to stand or walk unaided. "We feared it may have been another stroke, so we called 999, and this time, the paramedics felt he should be admitted," says Neil. "We couldn't go with him because of a local lockdown, so we waved him goodbye in the back of an ambulance. We were worried sick."

During a previous hospital admission, Neil and his mum constantly had to remind the doctors that David had dementia, despite it being written in his notes – but this time, they were unable to visit and act as his advocate.

"When, after a few hours, an A&E doctor called my mum and said: 'Your husband appears very alert, but when I ask him questions he appears confused and struggles to answer', alarm bells began to ring," Neil says. "Sure enough, when my mum advised the doctor of my dad's Alzheimer's, she indicated that she had been unaware."

"Kerry brought my mum cups of tea when she stayed at my dad's bedside"

Luckily, the hospital had a dementia specialist Admiral Nurse, Kerry. "The first thing she did was find out who my dad was and what

"Our Admiral Nurse helped us feel that someone cared about my dad – and about us, too."

mattered to him, not what was wrong with him," says Neil. "She gave us so much practical support and advice to help us understand what was happening in hospital, when sometimes the information was inconsistent, alarming or in short supply."

Kerry supported the family as David's dementia progressed. "She called us in the mornings to let us know how my dad was when we couldn't be there, and brought my mum cups of tea when, towards the end, she'd stayed overnight to be by his bedside," Neil remembers.

"She made us feel like someone cared"

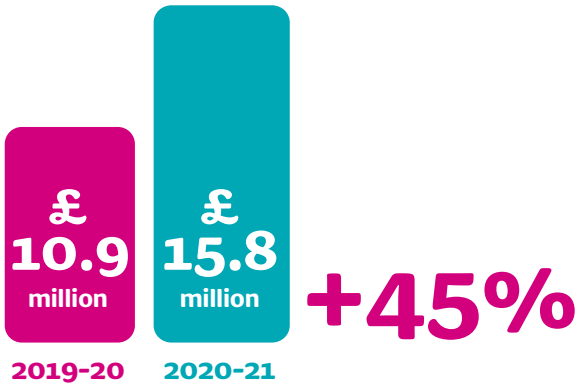
"Kerry gave us honest, sensitive counsel about whether continued treatment was in my dad's best interests, and helped ensure we could be with him at the end of his life. Above all, she made us all feel like someone cared about my dad – and about us, too."

Throughout Kerry's time supporting the family, her empathy shone through. "She came into our lives when it mattered most," Neil says. "She helped my dad have the best possible end to his life, and gave us the strength we needed to be there for him."

Giving and fundraising: our amazing supporters

The incredible generosity of our supporters throughout the year helped us exceed our fundraising targets despite the challenges of Covid-19 restrictions.

We raised £15.8 million in 2020-21, compared to £10.9 million the previous year – an increase of 45%. This was an enormous collective effort by all our supporters, to whom we are extremely grateful.



What we said we would do...

Adapt our fundraising in response to Covid-19 and social distancing, embedding virtual fundraising in all we do.

What we did

Created a special fundraising appeal in place of our annual carol concert, which was cancelled due to Covid-19 restrictions. This was fronted by Glenda Jackson CBE, and raised £48,000.

Shifted our fundraising campaigns such as 'Time for a Cuppa' to online environments.

Participated in 'The 2.6 Challenge' when the London Marathon was cancelled. This was based on the principle that the London Marathon would have taken place on 26th April 2020. We asked our supporters to dream up a fundraising activity based around the numbers 2.6 or 26. Ideas ranged from children learning to say hello in different languages to a sponsored headstand.

What we said we would do...

Develop existing and new fundraising ideas and activities that people would enjoy and that would raise valuable funds for Dementia UK.

What we did

Launched three Facebook challenge events – 'Walk 30 Challenge' in September, 'Jog 50 miles in November', and our '100km March Dog-Walking Challenge'. These events have to date raised £3.4 million in total – an incredible £2.1 million through the dog walk alone, in which 25,000 supporters participated. This was the largest amount ever raised from a Dementia UK event.

What we said we would do...

Build deeper long-term relationships with our current supporters and Volunteer Ambassadors, including through virtual events where they could meet our Admiral Nurses, while continuing to recruit new supporters.

What we did

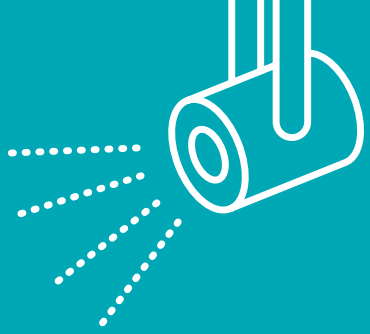
Worked with the Individual Giving Team to implement the first stage of our new supporter journey. This is a survey that enables new supporters to tell us what is most important to them, and what kind of communications and other contact they would prefer to receive in future. We also planned an online supporter event for May 2021.

What we said we would do...

Continue to raise awareness of the importance of gifts in Wills and In Memory donations, to ensure supporters and Admiral Nurses understand the difference these gifts make to Dementia UK.

What we did

Increased the number of people pledging to leave a gift in their Will to Dementia UK by an amazing 328% in 2020-21, compared to the year before.



Spotlight

Celebrating Individual Giving

The number of people pledging to leave a gift in their Will to Dementia UK soared in 2020-2021. Their pledges represent £2.38 million – our highest amount ever. We are so grateful for their support.

Throughout the year, people also donated generously in memory of their loved ones. Our online tribute pages provided an invaluable source of support and comfort to families. They also facilitated many funeral collections during the pandemic. Donations raised through these pages have increased by 366%.

Poignantly, our Christmas 'Remember a Star' campaign offered supporters the opportunity to remember someone special to them and add their names to our online Christmas tree.

Their touching responses raised over £100,000 – our most successful Christmas campaign ever.

The campaign focused on the story of Marion, who cared for her husband Ian, who lived with young onset dementia and died in early 2020.

We are very thankful for all the supporters who raised money for us through their birthday fundraising on Facebook. During the year, their combined efforts led to a 127% increase in income on last year.

"I found the experience of the creating the [memory] page to be therapeutic and comforting. I like that I can go back to it whenever I want, which I do regularly. I get a lot of comfort from looking at the posts, candles and photos."

Carer

Growing giving in pandemic times

We were very concerned at the start of the pandemic that our income would drop, but we actually saw growth in Individual Giving, gifts in Wills, charitable trusts and challenge events. Our In Memory and corporate income was broadly the same as last year.

Our community fundraising did fall significantly due to the Covid-19 restrictions, but our challenge events fundraising was completely transformed as we pivoted to an online operation. In so doing, we attracted thousands and thousands of new supporters.

We also had a record year for gifts in Wills, the result, we believe, of highlighting to people over several years that Dementia UK relies on voluntary income including gifts in Wills.

We are so grateful to all the individuals and organisations that supported us through such a difficult time. Their generosity was incredible.

"I'm leaving a gift in my Will to Dementia UK because no one should face dementia alone. It is an honour and privilege to support the vital work they do."

Dementia UK supporter

What we'll do next – our priorities for 2021-2022

Launch our exciting project, 'Closer to Home' – funded by Leeds Building Society. This aims to bring the expertise of Admiral Nurses to families at a time and place that suits them, through access to dementia specialist clinics.

Hold online and in-person events including Facebook challenge events and our annual carol concert in December 2021 (subject to Covid-19 restrictions) to grow our fundraising and the involvement of our supporters.

Extend our 'Dementia at Work' offering for companies to help them support their employees and customers through the hardships of dementia.

Recruit our largest ever team for the London Marathon.

Ensure that our fundraising activities remain fully compliant with all regulations, and we continue to offer supporters as much ownership as possible over how their data is used. We want to ensure everyone has the best experience possible of supporting Dementia UK.

"Becoming a Volunteer Ambassador, you get to share your experiences with others who may never get the opportunity or even know how to get involved. Volunteering is a wonderful thing to do and benefits my wellbeing, as well as making a huge difference to so many others."

Manny, Volunteer Ambassador

Spotlight

Amazing partnerships – corporate and trusts

Despite the unprecedented challenges that we faced in the year to March 2021, our corporate and trust partnerships helped us beat many of our fundraising targets.

At the beginning of the pandemic, we launched an emergency appeal to increase the number of Admiral Nurses working on our Helpline. It raised £750,000, thanks to our corporate partners, trusts, and individuals.

Their support enabled us to increase the number of nurses on each weekday shift from 10 to 14, and from three to five on each weekend shift, to cope with increased demand.

Our partner **Central England Co-operative** worked tirelessly to raise funds for Dementia UK. Individual stores and staff took on challenges such as litter-picking, running the virtual London Marathon, and 'Time for a Cuppa' events. In spring 2020, their fundraising for us hit an incredible £1.5 million.

We found out in April 2021 that our new partnership with **Leeds Building Society** raised £200,000 during its first year, significantly beating our target of £125,000. Employees took part in fundraising activities like the '50/50 Challenge', where they completed challenges in pairs. In addition, many supported us through the 'Your Interest in Theirs' scheme, rounding up the interest on their savings and donating it to Dementia UK.

Our partner **Zurich Community Trust** donated £200,000 in the year to March 2021, including £20,000 to our winter appeal in December 2020. Zurich is also supporting three Dementia UK colleagues to attain a specialist Diploma in Fundraising. This will help us build even more successful donor relationships so we can support more families facing dementia.

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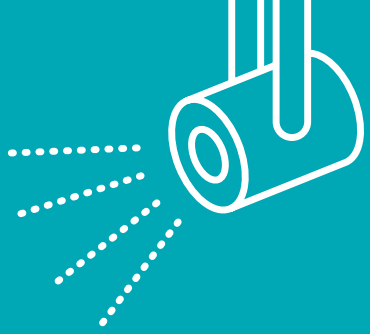
A truly collaborative partnership

"We asked members and colleagues about causes that were important to them and through an application process, followed by a colleague and member vote, Dementia UK was selected. As a society we wanted to partner with a charity that had ambition and aligned with our purpose and values.

Over the duration of our partnership so far, the team at Dementia UK has, without exception, worked hard to understand our business and get to know our people. As a result it's proving to be a truly collaborative partnership."

Holly Buckley, Community Manager at Leeds Building Society



Spotlight

Our fundraising approach

Covid-19 saw one of the biggest shocks to fundraising in many of our working lives. Overnight, income from challenge events and community and corporate fundraising, amongst others, looked set to drop dramatically.

The Fundraising Team worked flexibly, adaptably, creatively and collaboratively to rise to the challenge.

We overhauled our fundraising webpages to ensure all ideas were geared to a socially distanced lockdown world. Online activity included the 24/7 'Do your Distance for Dementia Nurses' challenge and 'Donate it for Dementia Nurses', where we encouraged supporters to donate the cost of an everyday item they were no longer buying, such as the price of their daily train ticket. We also completely changed our challenge events programme, focusing on virtual challenges rather than large, in-person events.

Supporters: at the heart of what we do

By pulling together, our fundraising initiatives delivered the income needed to sustain and expand the charity's Helpline and clinical services, supporting some of the most vulnerable people during the pandemic – people living with dementia.

Placing supporters at the heart of everything we do, we revisited the supporter experience to increase the level of stewardship alongside more fundraising requests. For example, our Volunteer Ambassadors now send handwritten thank you cards to everyone signing up to a Direct Debit.

While we initially put all recruitment on hold due to the pandemic, towards the very end of the year we started recruiting additional staff. We believe this investment will help to fund the growth of the charity's services in future years. The current outlook is more promising, although we are still cautious given the level of uncertainty.

Indebted to our Ambassadors

We have continued to strengthen our Volunteer Ambassador network, and recruited 26 new Ambassadors. During the pandemic they quickly adapted to supporting us in different ways, from raising awareness through their virtual networks and engaging with audiences on social media, to sending thank you cards, as above. We remain indebted to our Ambassadors for the commitment they give to Dementia UK.

We still do as much of our fundraising as possible in-house, relying on cost-effective suppliers where appropriate. We value every interaction with our donors, and are proud to steward them through our Supporter Care Team.

This team also processes all donations and fundraising appeal responses, and our income processes are continually reviewed and updated to ensure maximum security, efficiency and accuracy. Our payment processing is compliant with PCI DSS (Payment Card Industry Data Security Standard.)

We did not have relationships with any professional fundraisers during the year.

When companies approach us about commercial participator relationships, we complete careful and considered due diligence. Following this process, in 2020-21 we entered into a small number of such partnerships where we felt the time and effort invested would be positively outweighed by the income the charity would likely receive.

Finally, we continue to keep at the forefront of our minds that our work supporting families living with dementia simply wouldn't be possible without our supporters, donors, partners, volunteers and fundraisers.

Taking concerns seriously

As members of the Chartered Institute of Fundraising and the Fundraising Regulator, we adhere to the Code of Fundraising Practice and are committed to the Fundraising Promise.

Although there were no instances of non-compliance with the Code during the year, we received 127 complaints. This is a very small percentage of our thousands of interactions with supporters, but we take every complaint seriously. Our Supporter Care Team responded to each and every complaint, and we used them as opportunities to improve our future service and performance.

The most common complaints related to supporters feeling they were receiving fundraising appeals/emails too frequently. In light of this, we regularly review our supporter journey, ensuring we are aware of the various communications we send and allowing sufficient time between communications for supporters to unsubscribe from emails and/or request to be removed from our mailing list.

We make it easy for people to contact us with their complaint, and are committed to putting each one right. Supporters can register their complaint using an online form, or by phone, email or post. All complaints are forwarded to the Supporter Care Team straight away, and depending on the severity, may be escalated to more senior members of staff.

We involve the supporter in resolving their complaint and record the process and resolution on our database.

We also categorise all complaints according to severity, from level 1 (most serious) to level 4 (least serious). All 127 complaints received in 2020-21 were classed as level 3 (42) or 4 (85) – the two least serious levels.

The number of complaints we received in 2020-21 was higher than in 2019-20, but this reflects the increased fundraising activity during the past year. Level 4 complaints in particular were a direct result of increased fundraising activity and mostly made up of supporters who wanted to stop receiving mailings.

We continue to take data protection seriously and ensure we comply with all regulations in this area. We only process information where we have a legal basis to do so. All staff are required to complete data protection training and this is built into the induction process for new starters. Internal policies governing data use are reviewed regularly and updated where necessary, and new policies are implemented on an ongoing basis to reflect our evolving fundraising programme.

Our up-to-date Privacy Policy is available on our website, and we ensure that all supporters know how to view this. We also clearly communicate to our supporters that they can change how they hear from us at any time.

We are acutely aware of our responsibilities to vulnerable people as a charity focused on dementia care. All staff are aware of the need to raise concerns if they suspect someone is vulnerable, in consultation with one of our dementia specialist Admiral Nurses if need be.

Our Supporter Care Team responded to each and every complaint, and we used them as opportunities to improve our future service and performance.

Running our organisation well

Good governance and efficiency underpin everything we do. This work may not capture headlines, but it takes a lot of detailed behind-the-scenes effort.

What we said we would do...

Help our staff work as flexibly as possible, given the impact of Covid-19, including through IT that enabled them to do this.

What we did

Adapted ways of working across the organisation to enable parents, guardians and carers to continue to support their families during the pandemic. Our employees were given the resources and equipment to work effectively remotely, and we made our London office as safe as possible for employees who needed to continue to work there.

What we said we would do...

Continue to develop our People Strategy so we could function well in a time of unprecedented change due to the pandemic.

What we did

Introduced a new way of recruiting. This involved anonymising our application process to ensure transparency and fairness while being more committed to promoting equality, diversity and inclusion (EDI.)

We also improved our shortlisting process to ensure we drew from a wider talent pool. This involved working closely with managers to support more effective recruitment and increase retention. We ensured our new processes were supported by best practice training.

Updated and improved our people processes and policies to ensure they are fit to help us to support our colleagues across Dementia UK.

Provided Emerging Leaders training for our new and potential managers to encourage better people management. We are also looking for and evaluating more collaborative learning and development opportunities for our employees.

Used the Coronavirus Job Retention Scheme (furlough) to ensure that our organisation continued to operate efficiently during the pandemic. We also temporarily put all recruitment on hold, but later in the year we were able to recruit for existing vacancies.

Introduced new ways to support employees during and beyond Covid-19.

Surveyed our employees to establish how we are doing as an organisation and what we can do better regarding EDI.

We are also engaging Diversity Champions to represent employees across Dementia UK. We want all employees to be able to improve EDI and influence change.

Other employee surveys carried out during the year focused on how we supported staff during the pandemic and their reactions to changes we made. The response indicated that employees felt mostly positive about how the organisation responded to the challenges of homeworking, providing practical and emotional support while maintaining high standards.

Promoted the wellbeing of our employees through our new Wellbeing Hub. Our Employee Assistance Programme offers employees and their families opportunities including personal counselling, which many have found beneficial during the pandemic.

What we said we would do...

Ensure governance and quality assurance processes are in place to enable safe delivery of the Dementia UK strategy. This allows the different areas of the charity to grow and develop in a safe and effective way while minimising risk to Dementia UK and its stakeholders.

What we did

Introduced a Governance and Regulatory Advisor to drive process improvements, provide legal advice on contracting arrangements, and advise on risk management and mitigation across the charity.

What we said we would do...

Develop more efficient and standardised reporting across Dementia UK's management meetings. This helps provide transparency and allows us to effectively demonstrate achievement against our strategy.

What we did

Implemented improved recording and reporting mechanisms regarding safeguarding incidents and concerns. Any safeguarding concern is investigated where appropriate, actioned and closed once it has been dealt with. Oversight and scrutiny from our senior managers ensures that all incidents are managed appropriately, and lessons learned are cascaded throughout the organisation.

Launched a business analysis function. This will ensure that our IT systems, data requirements, project planning, reporting and other processes are all effectively focused on fulfilling our strategy.

We launched a business analysis function. This will ensure that our IT systems, data requirements, project planning, reporting and other processes are all effectively focused on fulfilling our strategy.

AdmiralNurses

Spotlight

Taking on the challenge – Information Services

Throughout the unprecedented challenges presented by the pandemic, our Information Services Team kept our organisation running. Thanks to its foresight, skills and planning, we continued to provide life-changing support to the people who needed it most.

Andrew Holt, Head of Information Services, Strategy and Delivery, looks back.

As early as January 2020, we raised concerns through our Disaster Recovery/Business Continuity Group about the likely global impact of the coronavirus crisis emerging in parts of China.

We envisioned the closure of the London office, and put contingencies in place for that. This involved assessing the IT needs of the 60% of our staff who usually worked in the office before the pandemic, as well as the 40% who were already homeworking. Consequently, when the office closed in March 2020 because of the first national lockdown, there was relatively minimal business interruption.

We ensured all employees were equipped to work from home using our cloud-based technologies: this was a huge increase on 'normal' times and a major undertaking for our Information Services Team. Each piece of equipment had to be set up with additional security layers. Against this backdrop, we undertook vital projects on network maintenance and cyber security.

Driving forward our other pre-pandemic projects had to continue too. This included rolling out Compass, our state-of-the-art clinical database, designed by and for our Admiral Nurses. It now captures data from our Helpline and Admiral Nurse clinics, such as the reasons for each contact, what was discussed, and the outcome of each.

Finally, lockdown brought an unexpected benefit in helping us fulfil our strategy of growing digital skills across the organisation. Homeworking for all meant everyone had to learn to use Microsoft Teams!

What we'll do next – our priorities for 2021-2022

Develop a rewards scheme which will support development and succession planning and recognise the loyalty of employees who remain in post for an extended period.

Continue our work to ensure that our employees feel valued throughout their time at Dementia UK. We will also continue to work towards achieving the Mayor's Good Work Standards Accreditation. To receive the accreditation, a London-based employer must meet a set of criteria covering fair pay and conditions, wellbeing, skills, diversity and recruitment.

Develop our Employee Learning and Development Strategy to improve opportunities for all employees. As part of this we will carry out a skills audit across the organisation. We want to establish the expertise we have and any skills gaps.

Work with Dementia UK's Senior Management Team and the Board of Trustees to demonstrate the principles outlined in the Charity Governance Code. The code is a practical tool to help charities develop high standards of governance and regulatory compliance, covering areas such as leadership, EDI and accountability.

Collaborate with Information Services to implement a common reporting framework which will allow real-time oversight and reporting across all departments of the charity. This will help to increase transparency and reduce repetitive reporting and recording of key performance indicators.

Increase resource in the Governance Team by recruiting new team members and providing tools to ensure that the whole charity can function to its full potential in a safe and measured way.

Financial review

The Trustees present their report and audited consolidated financial statements for the year ended 31st March 2021.

All Trustees are also Directors for the purpose of company law, and the Trustees' Report represents the Directors' Report required by S417 of the Companies Act 2006.

Objectives and activities for public benefit

The Trustees confirm that they have referred to the Charity Commission's guidance on public benefit when reviewing the aims and objectives in planning future activities.

This is the sixth year in which the charity has achieved a significant increase in voluntary income.

Financial review

The financial statements have been prepared in accordance with applicable accounting standards, current statutory requirements, the requirements of the Statement of Recommended Practice (SORP), Accounting and Reporting by Charities (SORP 2015), and the charity's governing document.

Total incoming resources for the year were £15.8 million (2020: £10.9 million) and total expenditure was £9.9 million (2020: £8.8 million) giving a net surplus for reinvestment of £5.9 million (2020: £2.1 million.)

Net assets totalled £11.4 million (2020: £5.5 million) with net current assets of £11.6 million (2020: £5.8 million.) The liquid cash balance (accessible within one year) was £11.3 million (2020: £6.5 million.)

This is the sixth year in which the charity has achieved a significant increase in voluntary income, which again reflects the organisation's investment in fundraising and communications, as well as the increase in the number of families affected by dementia.

Finally, the Trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. This is based on a detailed budget, cash-flow and reserves forecast exercise for 2021-22.

Our surplus for reinvestment

At year end, despite the many challenges we faced due to Covid-19, the charity had surplus for reinvestment of £5.9 million.

This is the result of our prudence in light of the uncertainties of the pandemic, and our carefully formulated fundraising strategy that enabled us to fundraise despite the many restrictions imposed on our usual activity.

We significantly reduced our expenditure at the start of the pandemic to accommodate the dramatic drop we expected in many of our income streams. Indeed, in the first few months of the year, income was significantly reduced in some areas, although in others, it was better than we forecast.

Later in the year, however, we tested Facebook events which performed very well – particularly our March 2021 'Dog-Walking Challenge'. Thanks to the generosity of our supporters, it performed exceptionally well, but due to the timing of the event at year end, this left us no time to spend the extra funds raised.

As a result, in line with our strategy, we are now investing in and implementing a £2 million Admiral Nurse Development Fund, and are already putting new nursing services in place thanks to our position being much stronger than expected.

Structure, governance and management

Board of Trustees

The Board of Trustees is the governing body that administers the charity. All major decisions are made by the Board, which meets at least four times a year to discuss and formulate policy and strategic direction.

The Trustees of the charity are also the Directors of the company for the purpose of company law, and any reference to Trustees is therefore also to Directors. None of the Trustees has a beneficial interest in the company, and the charitable company held third-party indemnity insurance on behalf of the Trustees during the current and prior year.

Trustees who have been in office since 1st April 2020 are:

- Professor David Croisdale-Appleby OBE (Chair)
- Philippa Armitage
- Steven Clarke CPFA (Treasurer)
- Emma Crozier (appointed 1st November 2020)
- Steve Jamieson
- Anna Morgan (appointed 1st April 2021)
- Dr Emma Pennery CBE (resigned 31st October 2020)
- Gavin Sanderson
- Mark Stroyan
- William Roe

The Trustees would like to put on record their thanks to Dr Emma Pennery for her time served as Trustee, and their particular thanks for her advice and support throughout the merger with YoungDementia UK.

To assist in the smooth running of the charity, the Trustees have set up sub-committees that oversee and advise on the charity's work.

Trustee recruitment, appointment and induction

The existing Trustees of Dementia UK are empowered under the Articles of Association to elect new Trustees at the Annual General Meeting of the charity and to make co-options at any other time. Dementia UK seeks to embrace a range of skills within the Board of Trustees and as part of our governance process, Trustees identify and remedy any skills deficits on the Board.

New Trustees are recruited in a number of ways, including advertising and previous involvement and interest in dementia care. Potential new Trustees are invited to attend as observers in at least one Board meeting, to assist them in their decision-making process about whether to agree to become a Trustee.

All new Trustees attend the Dementia UK induction programme, meeting with the Chief Admiral Nurse/CEO and members of staff working in the charity. They also receive relevant historical documentation.

Sub-committees of the Board of Trustees

To assist in the smooth running of the charity, the Trustees have set up sub-committees that oversee and advise on the charity's work and they report to the Board of Trustees. These sub-committees are:

- Clinical and Professional Committee
- Finance, Risk and Audit Committee

Both committees meet at least four times a year and have at least two Trustees in their membership, with one chairing the meeting. The Trustees on each committee have relevant interests and skills that they bring to the work of the committees.

A scheme of delegation is in place, and day-to-day responsibility for the affairs of the charity, including operational matters, rests with the Chief Admiral Nurse/CEO and the Executive Team.

Dementia UK Executive Team members are:

- Dr Hilda Hayo, Chief Admiral Nurse/CEO
- Martin Bishop, Director of Fundraising, Marketing and Communications
- Paul Edwards, Director of Clinical Services
- Niall Larkin, Director of Operations

Dementia UK Trading Limited

Dementia UK Trading Limited develops commercial opportunities and covenants its profits to the charity. Its results are included with the consolidated financial statements.

Risk management

The Board of Trustees is responsible for the management of the risks faced by the charity. A Risk Register identifies the potential and actual risks, the nature of the risks, the likelihood and impact of the risks happening, and the measures taken to prevent or manage them. The Trustees review this Risk Register formally at all Board meetings as well as discussing and updating it at committee meetings.

The main risks identified that the charity faces are:

Inability to deliver income at the correct level required to expand the charity's services in line with the strategy, due to the ongoing effects of the Covid-19 pandemic. This is mitigated by close monthly monitoring of income and expenditure.

Monitoring income:

- ensuring our fundraising strategy is fit for purpose and updated where necessary
- investing in a diverse range of income streams
- encouraging and facilitating innovation, such as online and hybrid events
- continually developing ways for donors to support and engage with the charity online
- launching specific appeals where needed

Monitoring expenditure:

- monitoring expenditure and making decisions in a timely manner to ensure activity happens at the optimum time
- maximising the benefits of home/agile working, eg continuing to use video conferencing to save on travel costs, even where travel is possible
- collaborating with other organisations to avoid duplication of activity

Inability to deliver and grow income outside of Covid-19 effects. This is mitigated by our robust fundraising strategy, diverse range of income streams, specific targets and KPIs, and consistent reporting to the Board of Trustees.

Loss of our reputation and damage to the Admiral Nurse brand. This is mitigated by ensuring all the systems, processes and support are in place to ensure the effective recruitment, maintenance and development of Admiral Nurses and Admiral Nurse services. As of February 2021, we have launched a virtual Admiral Nurse Academy to be used as part of our commitment to continuing professional development, with plans in place to engage more of our nurses.

Insufficient internal infrastructure. This is mitigated by continually assessing and evolving the infrastructure as the charity grows, while taking into account the needs for the coming years, including adjusting to the 'new normal' and planning a safe and robustly structured office space at our office in One Aldgate.

Breaches in data protection and governance standards. This is mitigated by maintaining a robust data protection policy and process, educating staff on best practice with regard to data standards. Similarly, our Governance Team ensures that the charity works towards, achieves and maintains best governance practice.

With signs of economic recovery, the charity's intentions are to increase its activities.

Adverse publicity. This is mitigated by ensuring that there are high standards of communication both within and outside the charity, in dealing with both clinical matters and public/supporter queries.

Dementia UK has in place a Data Continuity Plan, which ensures that the charity has contingencies in place should any serious incident occur, such as fire, flood, pandemic or act of terror. By ensuring that our Business Continuity Plan was up to date, and with regular planning meetings ahead of the UK feeling the full effects of the Covid-19 pandemic, the charity was able to move with sufficient agility to ensure that staff were equipped to work from home, as per Government guidance.

The Executive Team and Trustees are now reviewing this situation, with a view to utilising our office space in the safest and most efficient way as lockdown restrictions ease.

Insurance cover is in place and is reviewed annually to ensure it is providing the most appropriate cover.

Reserves policy

The charity holds unrestricted reserves to ensure we can continue to operate in the event of any unforeseen and significant decreases in income.

The Board of Trustees' policy with regards to unrestricted reserves has been set at three to six months of projected unrestricted expenditure.

The Trustees aim to achieve this by judicious management of the charity's resources.

The Trustees review the reserves policy at least annually.

At 31st March 2021, we held £7.6 million in unrestricted reserves after deducting the Net Book Value of Fixed Assets (2020: £3.9 million.) This increase was due to a combination of increased income, and reduction in planned expenditure due to Covid-19 and government guidelines on social distancing. In addition, the Trustees have designated £2 million to fund new Admiral Nurse services.

With signs of economic recovery, the charity's intentions are to increase its activities so unrestricted reserves are aligned with the reserves policy of three to six months. The Trustees are of the opinion that this level is prudent considering uncertainties and is in line with the best practice on reserves policies within the charity sector.

Investment policy

The Trustees' investment powers are governed by the Memorandum and Articles of Association, which permit the charity's funds to be invested in a wide range of securities and assets. Funds are currently held on bank deposit.

Pay for the Senior Management Team

Dementia UK has a remuneration policy and Senior Leadership pay is decided by Trustees, who review pay based on market rates and benchmarking against charities of comparable size.

References and administrative details

Legal status

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC047429 (Scotland.) The charity's affairs are governed by its Memorandum and Articles of Association dated 17th June 1994 (and updated on 4th November 2019), which allow for any activities covered by the charity's objectives with no specific restrictions. The liability of the members in the event of the company being wound up is limited to a sum not exceeding £1.

Dementia UK is established as a charitable company limited by guarantee and is registered with the Charity Commission under charity number 1039404 (England and Wales) and SC047429 (Scotland.)

Trustees' responsibilities in relation to the financial statements

The charity's Trustees (who are also the Directors of Dementia UK for the purposes of company law) are responsible for preparing a Trustees' Annual Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires the charity's Trustees to prepare financial statements for each year, which give a true and fair view of the state of affairs of the charitable company and the group, and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing the financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue to operate

The Trustees are responsible for keeping adequate accounting records that disclose, with reasonable accuracy at any time, the financial position of the charity and to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and the group, and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Statement as to disclosure to our Auditor

In so far as the Trustees are aware at the time of approving our Trustees' Annual Report:

- there is no relevant audit information of which the charitable company's Auditor is unaware
- the Trustees have taken all appropriate steps to ensure the Auditor is aware of any relevant audit information

Approved by the Trustees on 10th August 2021 and signed on their behalf by:

Professor David Croisdale-Appleby OBE
Chair of Trustees

Independent Auditor's report to the members of Dementia UK

Opinion

We have audited the financial statements of Dementia UK (the 'parent charitable company') and its subsidiary (the 'group') for the year ended 31st March 2021 which comprise the consolidated statement of financial activities, the group and parent charitable company balance sheets, the consolidated statement of cash flows and the notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice.)

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31st March 2021 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulation 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate. Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Dementia UK's ability to continue as a going concern for a period of at least 12 months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the Trustees' Annual Report, including the strategic report, other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information contained within the Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance

conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' Annual Report, including the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The Trustees' Annual Report, including the strategic report, has been prepared in accordance with applicable legal requirements

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report, including the strategic report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and Charities Accounts (Scotland) Regulations 2006 (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit

Responsibilities of Trustees

As explained more fully in the statement of Trustees' responsibilities set out in the Trustees' Annual Report, the Trustees (who are also the Directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, the Trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management and the Finance, Risk and Audit Committee, which included obtaining and reviewing supporting documentation, concerning the group's policies and procedures relating to:
  - identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance
  - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud
  - the internal controls established to mitigate risks related to fraud or noncompliance with laws and regulations
- We inspected the minutes of meetings of those charged with governance
- We obtained an understanding of the legal and regulatory framework that the group operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the group from our professional and sector experience
- We communicated applicable laws and regulations throughout the audit team and remained alert to any indications of non-compliance throughout the audit
- We reviewed any reports made to regulators
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting

estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Noelia Serrano (Senior Statutory Auditor)

8th November 2021

For and on behalf of Sayer Vincent LLP, Statutory Auditor, Invicta House, 108-114 Golden Lane, London, EC1Y 0TL. Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006

Consolidated statement of financial activities
(incorporating an income and expenditure account)

For the year ended 31st March 2021

	Note	Unrestricted £	Restricted £	**2021 Total £**	Unrestricted £	Restricted £	2020 Total £
Income from:							
Donations and legacies	2	13,462,413	1,463,591	**14,926,004**	9,241,820	1,411,693	10,653,513
YDUK transfer of net assets	2	-	313,513	**313,513**	-	-	-
Charitable activities							-
Admiral Nursing projects	3	88,252	129,806	**218,058**	12,573	-	12,573
Business development	3	100,720	-	**100,720**	78,434	-	78,434
Research and publications	3	6,920	-	**6,920**	25,068	-	25,068
Other fundraising activities	4	95,209	-	**95,209**	80,723	-	80,723
Investments		23,697	-	**23,697**	41,774	-	41,774
Other		127,534	-	**127,534**	1,967	-	1,967
Total income		13,904,745	1,906,910	**15,811,655**	9,482,359	1,411,693	10,894,052
Expenditure on:							
Raising funds	5	3,138,091	7,917	**3,146,008**	2,807,199	-	2,807,199
Charitable activities							-
Admiral Nursing projects	5	2,375,079	1,934,564	**4,309,643**	2,524,308	1,079,201	3,603,509
Business development	5	621,980	-	**621,980**	673,231	-	673,231
Research and publications	5	167,499	-	**167,499**	162,842	-	162,842
Public awareness	5	975,651	-	**975,651**	656,684	-	656,684
Practice development	5	626,880	87,932	**714,812**	936,365	-	936,365
Total expenditure		7,905,180	2,030,413	**9,935,593**	7,760,629	1,079,201	8,839,830
Net income/expenditure for the year	7	5,999,565	(123,503)	**5,876,062**	1,721,730	332,492	2,054,222
Transfers between funds		(237,966)	237,966	**-**	(17,840)	17,840	-
Net movement in funds		**5,761,599**	**114,463**	**5,876,062**	1,703,890	350,332	2,054,222
Reconciliation of funds:							
Total funds brought forward		4,074,941	1,406,226	**5,481,167**	2,371,051	1,055,894	3,426,945
Total funds carried forward	21	**9,836,540**	**1,520,689**	**11,357,229**	4,074,941	1,406,226	5,481,167

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 21a to the financial statements.

Balance sheets

As at 31st March 2021

Company no. 02944156

		The group		The charity	
		2021	2020	**2021**	2020
	Note	£	£	£	£
Fixed assets:					
Tangible assets	12	**224,633**	202,852	**224,633**	202,852
Investments	13	**-**	-	**1**	1
		224,633	202,852	**224,634**	202,853
Current assets:					
Debtors	16	**2,132,427**	772,771	**2,154,741**	772,771
Short term deposits		**6,533,596**	5,265,421	**6,533,596**	5,265,421
Cash at bank and in hand		**4,725,234**	1,244,041	**4,700,705**	1,232,977
		13,391,257	7,282,233	**13,389,042**	7,271,169
Liabilities:					
Creditors: amounts falling due within one year	17	**(1,886,386)**	(1,519,171)	**(1,879,737)**	(1,500,783)
Net current assets		**11,504,871**	5,763,062	**11,509,305**	5,770,386
Total assets less current liabilities		**11,729,504**	5,965,914	**11,733,939**	5,973,239
Creditors: amounts falling due after one year	18	**(372,275)**	(484,747)	**(372,275)**	(484,747)
Total net assets	20	**11,357,229**	5,481,167	**11,361,664**	5,488,492
Funds:	21				
Restricted income funds		**1,520,689**	1,406,226	**1,520,689**	1,406,226
Unrestricted income funds					
Designated new nurse funds		**2,000,000**	-	**2,000,000**	-
General funds - balance c/fwd		**7,836,540**	4,074,941	**7,840,975**	4,082,266
Total unrestricted funds		**9,836,540**	4,074,941	**9,840,975**	4,082,266
Total funds		**11,357,229**	5,481,167	**11,361,664**	5,488,492

Approved by the Trustees on 10th August 2021 and signed on their behalf by:

Professor David Croisdale-Appleby OBE
Chair

Steve Clarke CPFA
Treasurer

Consolidated statement of cash flows
For the year ended 31st March 2021

	2021		2020	
	£	£	£	£
Net cash provided by operating activities		**4,824,163**		1,755,142
Cash flows from investing activities:				
Interest and dividends receivable	**23,697**		41,774	
Purchase of fixed assets	**(98,492)**		(37,258)	
Investments in short term deposits	**(1,268,175)**		(2,265,421)	
Net cash used in investing activities		**(1,342,970)**		(2,260,905)
Change in cash and cash equivalents in the year		**3,481,193**		(505,763)
Cash and cash equivalents at the beginning of the year		**1,244,041**		1,749,804
Cash and cash equivalents at the end of the year		**4,725,234**		1,244,041

Notes to the financial statements: For the year ended 31st March 2021

1 Accounting policies

a Statutory information

Dementia UK is a charitable company limited by guarantee and is incorporated in England and Wales. The registered office address and principal place of business is 7th Floor, One Aldgate, London EC3N 1RE.

b Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) – (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiary Dementia UK Trading Limited on a line by line basis. Transactions and balances between the charitable company and its subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

c Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The Trustees have reviewed the challenges presented by Covid-19 and are of the view that the immediate future of the charity for the next 12 months is secure on the basis of confirmation of continuing income streams and fundraising activity to generate additional income streams. Accordingly, the financial statements have been prepared on the going concern basis.

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For legacies, entitlement is taken at the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f Donations of gifts, services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

g Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

h Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes.

i Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required, and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose
- Expenditure on charitable activities includes the costs of delivering services and other educational activities undertaken to further the purposes of the charity and their associated support costs.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

j Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation that they will receive a grant and that any condition attaching to the grant is outside of the control of the charity.

k Allocation of support costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

Where such information about the aims, objectives and projects of the charity is also provided to potential donors, activity costs are apportioned between fundraising and charitable activities on the basis of area of literature occupied by each.

Support costs are the cost of overalll direction and administration, comprising the salary and overhead costs of the central function.

k Allocation of support costs continued

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

Admiral Nursing projects	50%
Business development	8%
Research and publications	2%
Public awareness	6%
Practice development	8%
Raising funds	26%

i Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

m Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £1,500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

Fixtures and fittings	15%-33% per annum, straight line
IT hardware and software	15%-33% per annum, straight line

n Investments in subsidiaries

Investments in subsidiaries are at cost.

o Admiral Nurse services

Funding is made available to employing authorities to meet employment, travelling and training costs incurred by them in the provision of Admiral Nurse services. The funding is accrued and recognised in the accounts in line with the provision of these services.

p Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

q Short term deposits

Short term deposits include cash balances that are invested in accounts with a maturity date of between three and 12 months.

r Cash at bank and in hand

Cash at bank and cash in hand include cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

s Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

t Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

u Pensions

The charity subscribes to a defined contribution scheme for the benefit of its employees. Contributions payable are charged to the Statement of Financial Activities (SOFA) in the year they are payable.

The charity also subscribes to the NHS Pension Scheme, a multi-employer defined benefit pension scheme. It is not possible to identify the assets or liabilities relating to the charity, therefore the charity accounts for contributions to the scheme as if it were a defined contribution scheme. Contributions payable are charged to the SOFA in the year they are payable.

2. Income from donations and legacies

	Unrestricted £	Restricted £	**2021 Total £**	Unrestricted £	Restricted £	2020 Total £
Legacies	2,359,992	-	**2,359,992**	1,268,054	-	1,268,054
Voluntary donations	11,102,421	1,463,591	**12,566,012**	7,973,766	1,411,693	9,385,459
	13,462,413	1,463,591	**14,926,004**	9,241,820	1,411,693	10,653,513
YDUK transfer of net assets	-	313,513	**313,513**	-	-	-

On 1 November 2020, YoungDementia UK became part of Dementia UK by transferring all its activities and net assets to Dementia UK at nil consideration. The net assets transferred are continued to be expended towards the charitable objects of YoungDementia UK.

3. Income from charitable activities

	Unrestricted £	Restricted £	**2021 Total £**	Unrestricted £	Restricted £	2020 Total £
Fees and contributions from institutions	88,252	129,806	**218,058**	12,573	-	12,573
Sub-total for Admiral Nursing projects	88,252	129,806	**218,058**	12,573	-	12,573
Management and development fees	100,720	-	**100,720**	78,434	-	78,434
Sub-total for business development	100,720	-	**100,720**	78,434	-	78,434
Contributions from instituitions	6,920	-	**6,920**	25,068	-	25,068
Sub-total for research and evaluation	6,920	-	**6,920**	25,068	-	25,068
Total income from charitable activities	195,892	129,806	**325,698**	116,075	**-**	116,075

4. Income from other fundraising activities

	Unrestricted £	Restricted £	**2021 Total £**	Unrestricted £	Restricted £	2020 Total £
Carol concert, Christmas cards and merchandise	82,703	-	**82,703**	80,723	-	80,723
Income from trading subsidiary	12,506	-	**12,506**	-	-	-
	95,209	-	**95,209**	80,723	-	80,723

5a. Analysis of expenditure (current year)

		Charitable activities								
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2021 Total £**	2020 Total £
Staff costs (note 8)	1,439,807	2,502,378	457,131	126,282	291,978	455,058	114,363	829,215	**6,216,212**	5,529,093
Direct activity costs	750,987	683,471	83	(252)	458,461	95,551	-	-	**1,988,301**	1,836,899
IT and telephone	36,961	73,715	-	215	467	-	-	401,248	**512,606**	443,689
Office and administration costs	145,849	5,286	563	203	27,573	-	1,349	213,670	**394,493**	344,797
Professional fees	238,744	18,522	-	-	74,019	-	15,500	61,526	**408,311**	222,987
Premises	-	-	-	-	-	-	-	415,670	**415,670**	462,365
	2,612,348	3,283,372	457,777	126,448	852,498	550,609	131,212	1,921,329	**9,935,593**	8,839,830
Support costs	499,545	960,665	153,706	38,427	115,280	153,706	-	(1,921,329)	-	-
Governance costs	34,115	65,606	10,497	2,624	7,873	10,497	(131,212)	-	-	-
Total expenditure 2021	**3,146,008**	**4,309,643**	**621,980**	**167,499**	**975,651**	**714,812**	**-**	**-**	**9,935,593**	-

5b. Analysis of expenditure (prior year)

		Charitable activities							
	Raising funds £	Admiral Nursing projects £	Business development £	Research and publications £	Public awareness £	Practice development £	Governance costs £	Support costs £	**2020 Total £**
Staff costs (note 8)	1,297,720	2,165,615	460,489	112,073	256,137	435,161	-	801,898	**5,529,093**
Direct activity costs	745,025	399,670	48,928	18,680	212,756	345,904	11,210	54,726	**1,836,899**
IT and telephone	46,678	47,644	4	-	2,216	200	-	346,947	**443,689**
Office and administration costs	108,354	12,234	8,917	1,110	31,786	207	8,340	173,849	**344,797**
Professional fees	98,272	2,514	-	-	45,363	-	42,393	34,445	**222,987**
Premises	-	-	-	-	-	-	-	462,365	**462,365**
	2,296,049	2,627,677	518,338	131,863	548,258	781,472	61,943	1,874,230	**8,839,830**
Support costs	494,797	944,612	149,938	29,988	104,957	149,938	-	(1,874,230)	-
Governance costs	16,353	31,220	4,955	991	3,469	4,955	(61,943)	-	-
Total expenditure 2020	**2,807,199**	**3,603,509**	**673,231**	**162,842**	**656,684**	**936,365**	**-**	**-**	**8,839,830**

6. Grant making

Cost	Grants to institutions £	**2021 £**	2020 £
Admiral Nursing projects	616,535	**616,535**	325,000
At the end of the year	616,535	**616,535**	325,000

The charity provided half funding for two years for the recruitment of Admiral Nurses in a number of health institutions. These costs are included in note 5 under 'direct activity costs'.

7. Net income/expenditure for the year

This is stated after charging:

	2021 £	2020 £
Depreciation	**76,711**	50,429
Operating lease rentals:		
Property	**378,288**	407,425
Other	**97,386**	159,192
Auditors' remuneration (excluding VAT):		
Audit – current year	**17,800**	17,500
Audit – previous year under-accrual	**-**	2,830

8. Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2021 £	2020 £
Salaries	**5,089,287**	4,619,790
Termination/redundancy costs	**24,400**	-
Employer's National Insurance contributions	**529,903**	473,976
Employer's contributions to defined contribution pension scheme	**302,844**	278,275
Employer's contributions to defined benefit pension scheme	**122,600**	95,234
Other staff related costs	**147,178**	61,818
	6,216,212	5,529,093

The following number of employees received employee benefits (excluding employer pension costs and employer's national insurance) during the year between:

	2021 No.	2020 No.
£60,000 - £69,999	**3**	4
£70,000 - £79,999	**1**	-
£80,000 - £89,999	**3**	3
> £90,000	**-**	-

The total employee benefits (including pension contributions and employer's National Insurance) of the key management personnel were £392,365 (2020: £379,197.)

The charity Trustees were neither paid nor received any other benefits from employment with the charity in the year (2020: £nil.)
No charity Trustee received payment for professional or other services supplied to the charity (2020: £nil.)

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs totalling £2,092 (2020: £2,474) incurred by three (2020: three) members relating to attendance at meetings. The charity also incurred £nil expenditure on Trustees' meetings in the year (2020: £nil.)

9. Staff numbers

The average number of employees (head count based on number of staff paid per month) during the year was 154 (2020: 143.)

This includes sessional employees and other employees who received no pay in certain months (head count based on number per month) during the year was 20 (2020: 29.)

	2021 No.	2020 No.
Raising funds	**36**	33
Admiral Nursing projects	**59**	63
Business development	**10**	10
Research and publications	**2**	2
Public awareness	**8**	7
Practice development	**11**	10
Support	**27**	18
	154	143

10. Related party transactions

There are no related party transactions to disclose for 2021 (2020: none) other than those already disclosed in note 8.

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

11. Taxation

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purposes. The charity's trading subsidiary Dementia UK Trading Limited gift aids available profits to the parent charity. Its charge to corporation tax in the year was £878 (2020: £3,313.)

12. Tangible fixed assets

Group and charity	Fixtures and fittings £	IT hardware and software £	**Total £**
Cost			
At the start of the year	206,869	66,720	**273,589**
Additions in year	**-**	98,492	**98,492**
At the end of the year	206,869	165,213	**372,081**
Depreciation			
At the start of the year	58,613	12,124	**70,737**
Charge for the year	41,374	35,337	**76,711**
At the end of the year	99,987	47,461	**147,448**
Net book value			
At the end of the year	106,882	117,752	**224,633**
At the start of the year	148,256	54,596	**202,852**

All of the above assets are used for charitable purposes.

13. Investment in subsidiary undertaking

	The group		The charity	
	2021 £	2020 £	**2021 £**	2020 £
At the start and the end of the year	-	-	**1**	1

14. Subsidiary undertaking

The charitable company owns the whole of the issued ordinary share capital of Dementia UK Trading Limited, a company registered in England. The subsidiary was used to develop the Compass database for the charity which was transferred to the charity in 2019-20 and for non-primary purpose trading activities. All activities have been consolidated on a line by line basis in the statement of financial activities. Available profits are gift aided to the charitable company. A summary of the results of the subsidiary is shown below:

	2021	2020
	£	£
Turnover	**12,506**	225,000
Cost of sales	**(5,369)**	(22,065)
Gross profit	**7,137**	202,935
Administrative expenses and taxation charge	**(3,568)**	(4,057)
Profit on ordinary activities before taxation	**3,569**	198,878
Taxation on profit on ordinary activities	**(678)**	(3,313)
Profit for the financial year	**2,891**	195,565
Total retained earnings brought forward	**(7,326)**	(202,891)
Total retained earnings carried forward	**(4,435)**	(7,326)
The aggregate of the assets, liabilities and funds was:		
Assets	**24,649**	43,999
Liabilities	**(29,083)**	(51,324)
Funds	**(4,434)**	(7,325)

15. Parent charity

The parent charity's gross income and the results for the year are disclosed as follows:

	2021	2020
	£	£
Gross income	**15,799,149**	10,669,052
Result for the year	**5,873,172**	1,858,655

16. Debtors

	The group		The charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Trade debtors	**112,470**	25,431	**112,351**	25,431
Taxation and social security	**-**	99,143	**-**	99,143
Other debtors	**6,174**	21,887	**6,174**	21,887
Prepayments	**520,971**	276,479	**520,970**	276,479
Accrued income	**1,492,812**	349,831	**1,492,812**	349,831
Amounts due from group undertakings	**-**	-	**22,434**	-
	2,132,427	772,771	**2,154,741**	772,771

The charity received notifications regarding a number of legacies before the year end totalling £1,505,641. However, these legacies did not meet the full income recognition criteria as per the accounting policy as at 31st March 2021, and therefore, have not been accrued in the 2020-21 financial statements (2019-20: £1,458,820.)

17. Creditors: amounts falling due within one year

	The group		The charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Trade creditors	**397,509**	346,730	**397,509**	344,738
Taxation and social security	**244,447**	244,904	**241,268**	197,073
Other creditors	**36,779**	44,896	**36,779**	44,896
Accruals	**274,817**	106,903	**271,347**	105,403
Deferred income	**26,250**	17,387	**26,250**	17,387
Admiral Nurse projects – grant accruals	**906,584**	758,351	**906,584**	758,351
Amounts due to group undertakings	**-**	-	**-**	32,935
	1,886,386	1,519,171	**1,879,737**	1,500,783

18. Creditors: amounts falling due after one year

	The group		The charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Admiral Nurse projects – grant accruals	**194,426**	484,747	**194,426**	484,747
Rent-free provision	**177,849**	-	**177,849**	-
	372,275	484,747	**372,275**	484,747

Total grant commitments outstanding as at 31st March 2021 relating to the recruitment of Admiral Nurses payable to health institutions were £1,101,011 (2020: £1,243,098), of which payable within one year were £906,584 (2020: £758,351) and after one year were £194,426 (2020: £484,747.) The amounts due within one year are included within accruals in note 17 above.

19. Pension schemes

The charity operates two pension schemes: a stakeholder pension scheme, administered by Aviva, and NHS Pensions. As at 31st March 2021, the amounts owed to the schemes were Aviva £87,635 (2020: £67,806) and NHS £nil (2020: £nil.) The number of members in Aviva are 96 and NHS 18. The NHS Pension Scheme is an unfunded occupational scheme backed by the Exchequer, which is open to all NHS employees and certain employees of other approved organisations. Dementia UK is an approved organisation. The Scheme provides pensions, based on final salary, in varying circumstances for employees of participating employers. The Scheme receives contributions from employees and employers to defray the costs of pensions and other benefits. From 1st April 2006 the NHS Business Services Authority (the Authority) has been the body responsible for the administration of the NHS Pension Scheme for England and Wales. In support of the Authority, NHS employers are required to explain the scheme to the employees. In addition, they submit pension data to the NHS Business Services Authority (NHSBSA.) Every four years the Government Actuary conducts a full actuarial review of contribution rates. In order to defray the costs of benefits, in 2020-21 employers paid contributions of 14.38% of pensionable pay and employees contributed on a tiered scale from 5%-14.5% of their pensionable pay depending on total earnings. Further information on benefits can be obtained from the NHS Pension Scheme website.

20a. Analysis of group net assets between funds (current year)

	General unrestricted	Restricted funds	**Total funds**
	£	£	**£**
Tangible fixed assets	224,633	-	**224,633**
Net current assets	9,789,756	1,715,115	**11,504,871**
Long term liabilities	(177,849)	(194,426)	**(372,275)**
Net assets at 31st March 2021	**9,836,540**	**1,520,689**	**11,357,229**

20b. Analysis of group net assets between funds (prior year)

	General unrestricted £	Restricted funds £	**Total funds £**
Tangible fixed assets	202,852	-	**202,852**
Net current assets	3,872,089	1,890,973	**5,763,062**
Long term liabilities	-	(484,747)	**(484,747)**
Net assets at 31st March 2021	**4,074,941**	**1,406,226**	**5,481,167**

21a. Movements in funds (current year)

	At 1st April 2020	Income and gains	Expenditure and losses	Transfers	At 31st March 2021
	£	£	£	£	£
Restricted funds:					
Admiral Nursing projects (Helpline and professional and practice development)	-	1,109,875	(1,109,875)	-	**-**
Admiral Nursing Learning & Disability Service and new nurses (national)	3,907	27,084	(3,978)	259	**27,272**
Admiral Nursing projects (geographical funds):					
Buckinghamshire	27,907	-	-	-	**27,907**
Cambridgeshire	47,126	-	-	-	**47,126**
Cornwall	37,556	63	-	-	**37,619**
Cumbria	19,290	16,316	(7,000)	-	**28,606**
Derbyshire	217,398	-	(6,250)	-	**211,148**
Devon	42,545	93,817	(240,304)	117,402	**13,460**
Essex	33,379	90,172	(113,596)	-	**9,955**
Gloucestershire	20,199	275	(20,474)	-	**-**
Leicestershire	151,772	22,791	(142,513)	-	**32,050**
London – Imperial College	36,500	-	(14,910)	-	**21,590**
Northamptonshire	42,432	-	(750)	-	**41,682**
Nottinghamshire	116,563	609	-	-	**117,172**
Scotland	215,191	77	-	-	**215,268**
Staffordshire	121,076	2,010	-	-	**123,086**
Sussex	113,222	9,742	(680)	-	**122,284**
Teeside (Newcastle)	-	50,000	-	-	**50,000**
Wales	50,164	32,056	(121,500)	68,081	**28,801**
West Midlands	20,667	-	(8,312)	5,832	**18,187**
Yorkshire	57,461	11,601	(29,917)	-	**39,145**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2021)	31,871	83,103	(114,506)	46,392	**46,860**
YoungDementia UK projects	-	357,319	(95,848)	-	**261,471**
Total restricted funds	1,406,226	1,906,910	(2,030,413)	237,966	**1,520,689**
Unrestricted funds	-	-	-	-	**-**
Designated funds	-	-	-	-	**-**
Admiral Nursing projects (non-geographical funds)	-	-	78,932	(78,932)	**-**
New nurse	-	-	-	2,000,000	**2,000,000**
Total designated funds	-	-	78,932	1,921,068	**2,000,000**
General funds	4,074,941	13,904,745	(7,984,112)	(2,159,034)	**7,836,540**
Total unrestricted and designated funds	4,074,941	13,904,745	(7,905,180)	(237,966)	**9,836,540**
Total funds	**5,481,167**	**15,811,655**	**(9,935,593)**	-	**11,357,229**

21b. Movements in funds (prior year)

	At 1st April 2019 £	Income and gains £	Expenditure and losses £	Transfers £	**At 31st March 2020 £**
Restricted funds:					
Admiral Nursing projects (Helpline and professional and practice development)	-	507,299	(507,299)	-	**-**
Admiral Nursing Lewy body dementia	-	15,000	(15,000)	-	**-**
Admiral Nursing Learning and Disability Service	-	139,741	(140,000)	-	**(259)**
Admiral Nursing new nurses (national):	-	4,166	-	-	**4,166**
Buckinghamshire	32,671	-	(4,764)	-	**27,907**
Cambridgeshire	21,166	9,500	16,460	-	**47,126**
Cumbra	1,129	18,161	-	-	**19,290**
Cornwall	33,614	3,942	-	-	**37,556**
Derbyshire	155,132	112,266	(50,000)	-	**217,398**
Devon	5,664	40,086	(4,890)	1,685	**42,545**
Essex	23,259	10,120	-	-	**33,379**
Gloucestershire	20,199	-	-	-	**20,199**
London (Imperial College – young onset dementia)	26,500	10,000	-	-	**36,500**
Leicestershire	157,488	114,284	(120,000)	-	**151,772**
Northamptonshire	31,390	11,042	-	-	**42,432**
Nottinghamshire	109,464	7,099	-	-	**116,563**
Scotland	36,937	178,254	-	-	**215,191**
Staffordshire	82,444	21,965	16,667	-	**121,076**
Sussex	83,519	30,338	(635)	-	**113,222**
Wales	25,344	24,820	-	-	**50,164**
West Midlands	30,415	25,252	(35,000)	-	**20,667**
Yorkshire	46,597	27,732	(16,868)	-	**57,461**
Other geographical restricted funds (Less than £10,000 balances at 31st March 2020)	132,962	100,626	(217,872)	16,155	**31,871**
Total restricted funds	1,055,894	1,411,693	(1,079,201)	17,840	**1,406,226**
Unrestricted funds:					
General funds	2,371,051	9,482,359	(7,760,629)	(17,840)	**4,074,941**
Total unrestricted funds	2,371,051	9,482,359	(7,760,629)	(17,840)	**4,074,941**
Total funds	3,426,945	10,894,052	(8,839,830)	-	**5,481,167**

22. Purposes of restricted and designated funds

Restricted funds
Admiral Nursing projects are funded by donations specifically for the development and support of the services which Admiral Nurses provide.

The total restricted funds were raised by individuals, corporates, charitable trusts and fundraisers throughout the UK for the provision of services.

YoungDementia UK projects relate to funds transferred from YoungDementia UK when the charity became part of Dementia UK in November 2020. The funds will continue to be used for activities in line with YoungDementia UK's charitable objects.

Designated funds
Designated funds relate to funding new Admiral Nurse services.

23. Reconciliation of net income to net cash flow from operating activities

	2021	2020
	£	£
Net income/expenditure for the reporting period (as per the statement of financial activities)	**5,876,062**	2,054,222
Depreciation charges	**76,711**	50,429
Interest receivable	**(23,697)**	(41,774)
(Increase)/Decrease in debtors	**(1,359,656)**	108,110
Decrease/(Increase) in creditors	**254,743**	(415,845)
Net cash provided by operating activities	**4,824,163**	1,755,142

24. Operating lease commitments

	Property		Equipment	
	2021	2020	**2021**	2020
Periods:	**£**	£	**£**	£
Less than one year	**352,287**	354,660	**119,964**	132,146
One to five years	**1,207,346**	1,418,640	**141,796**	168,644
	1,559,633	1,773,300	**261,760**	300,790

Contingent Liability
Dementia UK has entered into a rent lease agreement that expires in June 2025. The rent agreement includes a probability of 10% rent increase.

25. Legal status of the charity

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Thank you

We're so grateful to everyone who has supported us over the past year, including our Volunteer Ambassadors. You make our life-changing work possible. In particular, we'd like to thank the following supporters:

The 29th May 1961 Charitable Trust
41 Club
AbbVie Ltd
Abrdn
The Adint Charitable Trust
The Admiral Support Fund
Ali Stearn
The Andrée Griotteray White Charitable Trust
Ann and Barry Evans
AON
The Art File
Assura plc
Aviva UK
Ballards Gore Golf Club
Bancroft School
The Barratt Foundation
The Basil Samuel Charitable Trust
Budleigh League of Friends
Calleva Foundation
The Carol Concert Executive Committee
Cenkos Securities plc
Central England Co-operative Limited
The Charles Skey Charitable Trust
Charlotte Heber-Percy
Corporate Services Division on behalf of Sainsbury's Supermarkets Ltd
Earlsmead Charitable Trust
East Sussex Fundraising Group
Eden Valley Friends of Dementia UK
Euromonitor International
Exmouth League of Friends
The February Foundation
Forrester Family Trust
Garfield Weston Foundation
The Helianthus Charitable Trust
The Hodge Foundation
Huntsman
Infinis Energy Services Limited
Invesco UK
IQE plc
Jan Priest
The John Coates Charitable Trust
John O'Gaunt Golf Club
Joseph Levy Foundation
Julia and Hans Rausing
The Kirby Laing Foundation
The Klondyke Group
The Knitting Network
Leeds Building Society
Leicestershire Fundraising Group
Lennox Hannay Charitable Trust
Linbury Trust

Marks and Spencer
Medical Protection Society
Medline International BV
Milliman LLP
Morrisons Foundation
Mr and Mrs J A Pye's Charitable Settlement
National Lottery Community Fund
Nikon UK
The Paragon Trust
Paula Storer
Perrigo UK
Postcode Community Trust
Purbeck Fundraising Group
Richard Burt
Sheffield & District Landlord Association
Sid Valley Memory Cafe
Simpson Thacher & Bartlett LLP
The Sobell Foundation
The Souter Charitable Trust
The Swire Charitable Trust
This is Dementia
Tokio Marine HCC International Group
Tony and Trish Trahar
Valley Park School
Wales & West Housing
Zurich Community Trust

We also thank all our kind legators who generously left a gift in their Will, as well as our supporters who wish to remain anonymous.

DementiaUK
Helping families face dementia

The Admiral Nurse Dementia Helpline provides life-changing support for families affected by all forms of dementia – including Alzheimer's disease. Our nurses have the time to listen and the knowledge to solve problems.

Call 0800 888 6678 or email helpline@dementiauk.org
Open Monday-Friday, 9am-9pm
Saturday and Sunday, 9am-5pm

Every day except 25th December

dementiauk.org • 020 8036 5400 • info@dementiauk.org

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC047429.) Company number: 02944156

Registered with FUNDRAISING REGULATOR