



Department
of Health

Prime Minister's Challenge on Dementia 2020

Implementation Plan
Annex 2: Roadmaps to 2020 Delivery

March 2016

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Annex 2: Roadmaps to 2020 Delivery

The following tables set out indicative plans to fully deliver the commitments within the 2020 Challenge. Whilst every effort has been made to ensure the content is accurate, the detail within the tables should be seen as illustrative and may change in the future in light of developments around dementia care, awareness and research, and of course future resource requirements.

The review and refresh of this plan in 2018 will build upon this content and set out firm deliverables for the final two years of the 2020 Challenge. The following tables thus show what we expect to happen in the future, based upon what we know today. As we look further into the future, plans may be described as planned to occur in a quarter of the year, or there may be blanks where this detail is currently unavailable.

Risk Reduction

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|----------|--|----------------|--------------|--|
| Improved public awareness and understanding of the factors, which increase the risk of developing dementia and how people can reduce their risk by living more healthily. This should include a focus on health inequalities, a new healthy ageing campaign and access to tools such as a personalised risk assessment calculator as part of the NHS Health Check. (part 1) | PHE | 1. A new personalised risk assessment calculator for members of the public to identify personal risk of cognitive decline | 1. April 2015 | 1. Dec 2016 | Using the British Social Attitudes survey results as a baseline, awareness of dementia and dementia risk reduction has increased. Improved quality of the dementia component of the NHS health check; measured through an evaluation of the dementia component Dementia profile risk reduction indicators (DIN) have improved Increase in funding for risk reduction research |
| | | 2. Brain Age Tool embedded and promoted through One You campaign | 2. April 2017 | 2. Mar 2018 | |
| | | 3. Evaluation of Brain Age Tool | 3. April 2017 | 3. Mar 2018 | |
| | | 4. Establish a multi-agency communication strategy for disseminating NICE guidance messages on mid-life approaches | 4. Mar 2016 | 4. Mar 2017 | |
| | | 5. Promotion of risk reduction messages through PHE's One You Campaign, working collaboratively with system partners both nationally and locally | 5. April 2016 | 5. Mar 2020 | |
| | | 6. An evaluation of the dementia component of the NHS health check | 6. Mar 2016 | 6. Dec 2016 | |
| | | 7. Enhanced NHS Health Check training package | 7. Mar 2016 | 7. July 2017 | |
| | | 8. Test and evaluate dementia awareness and risk reduction approaches within the NHS Health Check, with up to 3 pilot sites, for people under 65 years to support evidence base for expansion of age range | 8. April 2016 | 8. Dec 2018 | |
| | | 9. Dementia Current Awareness Service revised and enhanced | 9. Mar 2016 | 9. Mar 2018 | |
| | | 10. Work with the Alzheimer's Society to embed risk reduction messages within Dementia Friends | 10. April 2016 | 10. Mar 2018 | |
| | | 11. Strengthen the role of Dementia Champions as a mechanism for promoting risk reduction messages | 11. Mar 2016 | 11. Mar 2020 | |
| | | 12. Create a JSNA commissioning resource for dementia to support commissioning | 12. Dec 2015 | 12. Dec 2016 | |
| | | 13. Produce a Return on Investment tool for dementia to support commissioning | 13. Dec 2015 | 13. Nov 2016 | |
| | | 14. Develop the Dementia Intelligence Network portal as a mechanism for hosting and signposting Local Authorities to key dementia material, tools and resources | 14. Oct 2015 | 14. Mar 2017 | |
| | | 15. Capture of Dementia Friendly Communities BSI guidance data through the Dementia Intelligence Network | 15. Mar 2015 | 15. Mar 2018 | |
| | | 16. Ongoing refinement of tools available, through the Dementia Intelligence Network | 16. April 2016 | 16. Mar 2020 | |
| | | 17. Identify dementia data indicators that can support the academic research base, through continued development of the Dementia intelligence Network | 17. April 2016 | 17. Mar 2017 | |
| | | 18. Produce a joint communication plan with key partners to disseminate research findings and key messages | 18. Dec 2016 | 18. Mar 2017 | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|-------------------------|---|--|---|---|
| <p>Improved public awareness and understanding of the factors, which increase the risk of developing dementia and how people can reduce their risk by living more healthily. This should include a focus on health inequalities, a new healthy ageing campaign and access to tools such as a personalised risk assessment calculator as part of the NHS Health Check. (part 2)</p> | <p>PHE</p> <p>ADASS</p> | <p>19. Health equity assessment undertaken for dementia risk reduction programme</p> <p>20. Embed dementia risk reduction messages within the prevention of Diabetes, CVD and blood pressure programmes</p> <p>21. Series of data briefings published on the Dementia Intelligence Network with dementia inequalities as one of the key focus areas throughout. Q1 2016/17 – Q4 2017/18</p> <p>22. Webinar held on dementia and inequalities</p> <p>23. Promoting the Chief Medical Officer’s Health Benefits of Physical Activity for Adults infographic that incorporates dementia risk</p> <p>24. Engaging employers through publication of a dementia topic guide associated with the Workplace Wellbeing Charter</p> <p>ADASS will encourage its members to ensure that councils public health functions to work closely with PHE to link into national healthy lifestyle and risk reduction campaigns – to promote and assist in delivery locally</p> | <p>19. April 2016</p> <p>20. July 2016</p> <p>21. Mar 2016</p> <p>22. April 2016</p> <p>23. Mar 2015</p> <p>24. Oct 2016</p> <p>April 16</p> | <p>19. Mar 2018</p> <p>20. Mar 2020</p> <p>21. Mar 2018</p> <p>22. Mar 2018</p> <p>23. Mar 2017</p> <p>24. Mar 2020</p> <p>March 20</p> | <p>Using the British Social Attitudes survey results as a baseline, awareness of dementia and dementia risk reduction has increased.</p> <p>Improved quality of the dementia component of the NHS health check; measured through an evaluation of the dementia component</p> <p>Dementia profile risk reduction indicators (DIN) have improved</p> <p>Increase in funding for risk reduction research</p> |
| <p>A developed global consensus that risk reduction is a key means through which the global burden of dementia can be reduced. As such, risk reduction will play a central role in public health policies and campaigns and non-communicable disease actions plans around the world.</p> | <p>PHE & DH</p> | <p>Support the Global Dementia Framework and develop a collaborative approach to risk reduction with the Devolved Nations, sharing good practice and learning from research</p> <p>Explore potential for Dementia Intelligence Network to play a leading contributory role to the WHO global observatory</p> | <p>Spring 2017</p> | | |

Health and Care – Delivery

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|-------------|---|--------------------------------------|--|--|
| In every part of the country people with dementia having equal access to diagnosis as for other conditions, with an expectation that the national average for an initial assessment should be 6 weeks following a referral from a GP (where clinically appropriate), and that no one should be waiting several months for an initial assessment of dementia. | DH/ NHSE | <ul style="list-style-type: none"> The diagnosis rate of 2/3rds prevalence was achieved in November 2015, NHS England Business Plan sets out to maintain that rate. NHS England to provide Intensive Support Team to commissioners to help reduce variation between CCGs. Develop an evidence based framework for a national treatment and care pathway and agree an affordable implementation plan for the Prime Minister's Challenge on Dementia 2020, including to improve the quality of post-diagnosis treatment and support. | April 2016 April 2016 Feb 2016 | March 2020 March 2017 March 2017 | <p>Monthly QOF reporting against CFASII prevalence.</p> <p>Recovery plans developed and increase in QOF.</p> <p>DIN providing time from first presentation to accurate diagnosis, wherever in the system that may occur.</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|---------------------------------------|---|--|--|---|
| All Clinical Commissioning Groups and Local Health and Wellbeing Boards having access to improved data regarding the prevalence of dementia at local and national level and using this data to inform the commissioning and provision of services so that more people with dementia receive a timely diagnosis and appropriate post-diagnosis support. | NHSE/ PHE | <p>The DIN will provide access to timely data from all aspects of the well pathway and present it to commissioners and local health and wellbeing boards through the 'fingertips' tool that has been live since 12th January 2016.</p> <ul style="list-style-type: none"> • Develop online forum for sharing of information and best-practice sharing. | <p>Jan 2016</p> <p>Mar 2016</p> | <p>Mar 2020</p> <p>Feb 2017</p> | <p>Outputs from DIN Fingertips Tool.</p> |
| An increase in the numbers of people of Black, Asian and Minority Ethnic origin and other seldom heard groups who receive a diagnosis of dementia, enabled through greater use by health professionals of diagnostic tools that are linguistically or culturally appropriate. | PHE/ NHSE DH/ NHSE/ HSCIC | <ul style="list-style-type: none"> • NHS England, PHE and LGAs will work together through the 'Protected Characteristics and Hard to Reach' Working group on the wider equalities agenda. • HEE to commission a film that focuses on the specific needs of the African Caribbean community within the care process. • Work ongoing with NHS England around GPES/QOF negotiations towards measuring diagnosis in Black, Asian and Minority ethnic origin and other seldom heard groups. | <p>January 2016</p> <p>Ongoing</p> <p>Dec 2015</p> | <p>March 2020</p> <p>June 2016</p> <p>April 2018</p> | <p>Quarterly review meeting</p> <p>QOF measurement of PC for people with dementia</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|--|--|---|---|--|
| <p>The UK playing a key role in advancing care and support for people with dementia, through Scotland's leadership of the EU Joint Action on Dementia.</p> | DH | <p>The Scottish Government will lead the overall Joint Action but DH is supporting by leading work package 7 on dementia friendly communities. The three-year project involves:</p> <ul style="list-style-type: none"> Year 1 – collecting and collating evidence on best practice in creating and maintaining a dementia friendly community, using the findings to inform the development of a tool kit to test in pilot sites to be identified here in England and in work package partner countries, Bulgaria and Greece. Year 2 – the tool kit will be tested in the pilot sites with in-year adaptations to be made as necessary. Year 3 – the pilots will be evaluated and a final tool kit and learnings from the pilots will be published and shared with EU28 to spread best practice throughout the EU. | March 2016 | February 2019 | <p>The European Commission's funding agency, CHAFEA and the EU Joint Action lead, the Scottish Government, will lead on monitoring, evaluating and performance managing the project through a common set of tools for each WP.</p> |
| <p>GPs playing a leading role in ensuring coordination and continuity of care for people with dementia, as part of the existing commitment that from 1 April 2015 everyone will have access to a named GP with overall responsibility and oversight for their care.</p> | NHSE/ HEE NHSE/ ADASS NHSE | <ul style="list-style-type: none"> HEE has commissioned the National Association of Primary Care to develop, implement and independently evaluate dementia training for Primary Care Navigators. HEE will continue to work with the primary care sector to promote this training. Agreed Multi-Disciplinary Team protocols to ensure that regular GP involvement amongst other clinical, support and social care staff within care homes. GPs to support the development and implementation of personalised care plans. ADASS will encourage its members to support the above. | January 2016 March 2016 Sept 2015 | August 2016 June 2016 Sept 2016 | <p>80% staff trained by March 2019.</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|-----------------------------------|---|---|--|---|
| <p>Every person diagnosed with dementia having meaningful care following their diagnosis, which supports them and those around them, with meaningful care being in accordance with published National Institute for Health and Care Excellence (NICE) Quality Standards. Effective metrics across the health and care system, including feedback from people with dementia and carers, will enable progress against the standards to be tracked and for information to made publicly available.</p> | <p>NHSE. DH/ ADASS/ PHE / LGA</p> | <ul style="list-style-type: none"> • Explore and develop a nationally agreed template to support services to move towards delivery of personalised and integrated care across the Well Pathway • Identify best practice, impact in terms of improved clinical and non-clinical outcomes and facilitate adoption at scale with consistent national coverage • Effective metrics across the health and care system, including feedback from people with dementia and carers, will be provided through the DIN 'fingertips' tool and will enable progress against the national treatment and care pathway to be tracked and for information made publicly available, while also driving improvements in performance and reducing variation. • Survey of the provision of dementia advisers (Age UK) to address: <ul style="list-style-type: none"> – commissioning of dementia adviser services – the range and coverage of dementia advisers – the functions of a dementia adviser (who they engage with on behalf of PWD and their carers, how they communicate and what other services (if any) they provide) – what alternative services are available where no dementia adviser service exists and – whether a service area has plans to introduce a service in future. • Pilot programme and qualitative and economic case evaluation of a dementia advisor/navigator service • ADASS will encourage its members to provide appropriate signposting to information and advice and local services including community services who can provide alternative support <p>ADASS will encourage it members to develop develop user led commissioning to influence dementia services:</p> <ul style="list-style-type: none"> • ADASS will encourage its members to ensure that as many people as possible with dementia and their carer's will receive a social care assessment, and if eligible for funding will receive a personal budget. If not eligible for state funding will still receive information and advice and appropriate signposting to services and as a minimum support to navigate the social care system • ADASS will encourage its members to work in partnership with CCGs to develop integrated care in the community and to work towards joint health and social care support planning and the development of joint health and social care personal budgets. | <p>April 2016</p> <p>April 2016</p> <p>March 2015</p> <p>April 2016</p> <p>April 2015</p> <p>April 2015</p> <p>April 2015</p> <p>April 2016</p> | <p>April 2017</p> <p>March 2020</p> <p>Jan 2016</p> <p>July 2017</p> <p>March 2020</p> <p>March 2020</p> <p>March 2020</p> | <p>Improved quality of experience for the person with dementia</p> <p>Improved quality of experience for the carer</p> <p>Reduction in non-elective admission to hospital.</p> <p>Reduction in permanent residential admissions.</p> <p>Increased carer's resilience.</p> <p>Reduction in delayed discharges from both older people's acute and mental health wards.</p> <p>More people maintained in their own home or in the community.</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|---------------|--|---|---|-----------------------------|
| <p>This care may include for example:</p> <ul style="list-style-type: none"> - receiving information on what post-diagnosis services are available locally and how these can be accessed, through for example an annual 'information prescription'. - access to relevant advice and support to help and advise on what happens after a diagnosis and the support available through the journey. - carers of people with dementia being made aware of and offered the opportunity for respite, education, training, emotional and psychological support so that they feel able to cope with their caring responsibilities and to have a life alongside caring. | ADASS/ LGA | <ul style="list-style-type: none"> • ADASS will encourage its members to promote the development of dementia friendly environments in all health and social care settings. • ADASS and LGA will encourage councils to work in partnership with NHS to facilitate timely and safe discharges from hospital back into the community to reduce delayed transfers of care. • DH to work with ADASS, LGA, the Home Office and Ministry of Justice to consider how to support and spread best practice to better treat and manage offenders and ex-offenders with dementia. | <p>April 2015</p> <p>April 2016</p> <p>2016</p> | <p>March 2020</p> <p>March 2020</p> <p>March 2020</p> | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|--|--|--|---|---|
| More employers having carer friendly policies and practice enabling more carers to continue working and caring. | DH | Proposals being considered by Ministers for Workforce Advisory Group projects to support work in this area. Also being addressed through work with employers as part of DFCs work programme - a pilot programme is currently underway with 15 organisations, who have been issued with an employers toolkit. If successful the pilot can be extended to reach more businesses. | April 2015 | March 2017 | |
| Increased numbers of people with dementia being able to live longer in their own homes when it is in their interests to do so, with a greater focus on independent living. | SfC/ NHSE NHSE/ ADASS ADASS/ NHSE ADASS/ NHSE ADASS/ NHSE ALZ SOC | <ul style="list-style-type: none"> • Develop specialised Home Care Staff training Standards, and deliver training to all HCAs. • Assess availability, define and agree procurement protocols for assistive technology solutions to deliver remote access monitoring, support and accessibility. • ADASS will encourage its members to commission training and Psychological Support packages for Carers. • ADASS will encourage its members to support the development of personalised health & social care budgets, based upon integrated and personalised care plans. • ADASS will encourage its members to work towards the development of a catalogue of providers for people with dementia to commission their own services through personalised health & social care budgets. • Increase the numbers of Dementia friendly communities. | March 2016 March 2016 March 2016 March 2015 March 2016 March 2015 | August 2016 Sept 2017 Dec 2017 June 2017 Sep 2017 March 2020 | Measure no of HCAs trained over total no of HCAs. |
| Fewer people with dementia being inappropriately admitted to hospital as an emergency through better provision of support in community settings, which enables people to live independently for longer. | NHSE/ ADASS | <ul style="list-style-type: none"> • HEE has commissioned the National Association of Primary Care to develop, implement and independently evaluate dementia training for Primary Care Navigators. HEE will continue to work with the primary care sector to promote this training. • Build on the NHS England Vanguards and new models of care to develop new care pathways at acute hospitals, to utilise more ambulatory care, intensive support. • Develop integrated approach to transfer of care to residence of choice. | January 2016 March 2016 March 2016 | August 2016 Sep 2016 October 2016 | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|--------------------------------------|---|------------|------------|--|
| A continued significant reduction in the inappropriate prescribing of antipsychotic medication for people with dementia and less variation across the country in prescribing levels. | NHSE | <ul style="list-style-type: none"> • Mental Health Pharmacists are being recruited to support the Older People's Mental Health and Dementia programmes. • Monitoring through the fingertips tool will take place to ensure reductions in prescribing of anti-psychotic drugs. | March 2016 | March 2017 | 67% National reduction in anti psychotics by March 2019. |
| When the person's needs are complex, that there is skilled assessment and care available so that the person is not disabled or harmed by inappropriate care or prescribed inappropriate medication. | HEE/ NHSE/ SfH/SfC | <ul style="list-style-type: none"> • A Dementia Knowledge and Skills Framework has been completed, supported by funding from DH, to support the development of Tier 1, 2 and 3 training for all staff who engage with people with dementia. | March 2015 | Ongoing | Dementia Core Skills Education and Training Framework produced (complete). Successful launch of the Dementia Core Skills Education and Training Framework identifying development of Tier 2 and 3 training. |
| All people with a diagnosis of dementia being given the opportunity for advanced care planning early in the course of their illness, including plans for end of life. | DH/ NHSE PHE ADASS/ NHSE | <ul style="list-style-type: none"> • DH is creating an Action Plan that will align two key ambitions over improving quality of End of Life care especially in hospitals and improving choice. It will incorporate advanced care planning with the Electronic Palliative Care Coordination System (EPaCCS). NHS' ambition is for EPaCCS to reach national coverage. • PHE research on EoL care. • NHSE developing an integrated personalised care plan template for people with dementia. • ADASS will encourage its members to support and implement this commitment. | March 2015 | March 2017 | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|---|---|---------------------------------------|------------------------------------|---|
| <p>All people with dementia and their carers receiving co-ordinated, compassionate and person-centred care towards and at the end of life including access to high quality palliative care from health and social care staff trained in dementia and end of life, as well as bereavement support for carers.</p> | <p>NHSE DH NHSE/ HEE</p> | <ul style="list-style-type: none"> • NHS England are providing a response into the Review into End of Life Care. • DH is working with NHS England on its 'Ambitions for End of Life Care' and will review if dementia can be incorporated into the Ambitions for End of Life Care. • HEE to work with NHS England, Skills for Health and Skills for Care to develop a Workforce Competency Framework for End of Life Care. | <p>Feb 2016</p> | <p>March 2017</p> | <p>The production and successful launch of the Workforce Competency Framework for End of Life Care.</p> |
| <p>A right to stay for relatives when a person with dementia is nearing the end of their life, either in hospital or in the care home.</p> | <p>NHSE</p> | <ul style="list-style-type: none"> • NHS England have developed a local CQUIN to incentivise acute trusts to adopt John's Campaign. | <p>March 2016</p> | <p>April 2017</p> | <p>No of carers and families offered a right to stay.</p> |
| <p>A national simple to use and regularly updated online resource to enable people with dementia and carers to access assistive technology.</p> | <p>NHSE/ PHE/ ALZ SOC</p> | <ul style="list-style-type: none"> • Development of an online resource to share best-practice and evidence based interventions, new technology and ideas. • Catalogue of assisted technology that may be procured through personal health budgets. | <p>March 2015 March 2015</p> | <p>February 2017 Sept 2017</p> | |

Health and Care – Workforce

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|-----------------|--|------------|---------|---|
| All relevant health and care staff who care for people with dementia being educated about why challenging behaviours can occur and how to most effectively manage these. | HEE/ SfC/SfH | HEE – a Dementia Core Skills Education and Training Framework supported by funding from DH, to support the development of Tier 1, Tier 2 and 3 training. Clear access to tools and training opportunities. | March 2015 | Ongoing | Dementia Core Skills Education and Training Framework produced (November 2015). |
| | SfC | Skills for Care continue to promote Common Core Principles which cover the management of behaviours that we may find challenging. | April 2015 | Ongoing | Monitor electronic access and usage by social care providers |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|--|--|--|--|---|
| <p>All NHS staff having received training on dementia appropriate to their role.</p> <p>Newly appointed healthcare assistants and social care support workers, including those providing care and support to people with dementia and their carers, having undergone training as part of the national implementation of the Care Certificate, with the Care Quality Commission asking for evidence of compliance with the Care Certificate as part of their inspection regime.</p> <p>An expectation that social care providers provide appropriate training to all other relevant staff.</p> | <p>HEE/ SfH AS ADASS SfC</p> | <p>Mandate Target of 350,000 staff trained in dementia awareness (tier 1) exceeded (over 515,000 staff trained by March 2015). HEE to continue to monitor dementia awareness training through a biannual survey.</p> <p>Dementia tier 1 tools and training opportunities to be made available to all NHS staff by end 2018.</p> <p>HEE – a Dementia Core Skills Education and Training Framework supported by funding from DH, to support the development of Tier1, 2 and 3 training.</p> <p>HEE – commissioned the National Association of Primary Care to develop, implement and evaluate Primary Care HEE will continue to work with the primary care sector to promote this training.</p> <p>HEE will work with NHS Trusts to ensure (a) availability of tier 1 dementia awareness training to all staff and (b) all staff treating NHS patients working regularly with people with dementia undertake more in depth training appropriate to their role as outlined in the Dementia Core Skills Education and Training Framework.</p> <p>HEE to work with education providers to influence the appropriate training as set out in the Dementia Core Skills Education and Training Framework within curricula.</p> <p>AS providing training to people across health and social care working with people affected by dementia.</p> <p>Development of appropriately skilled workforce to improve quality of care delivered.</p> <p>ADASS will encourage its members to ensure that commissioned services contractually specify the minimum standards of training required for providers who care for people with dementia including residential, nursing and domiciliary care settings.</p> <p>Skills for Care continues to promote the uptake and implementation of the care certificate to social care providers. The care certificate has a dementia component. Skills for Care monitor the uptake of the certificate and the previous induction standards in social care which also had a dementia component.</p> | <p>Ongoing</p> <p>2014</p> <p>April 2014</p> <p>April 2014</p> <p>April 2014</p> <p>March 2015</p> <p>April 2015</p> <p>Apr 2015</p> | <p>2018</p> <p>Nov 2015</p> <p>March 2018</p> <p>Biannually to Dec 2018</p> <p>July 2018</p> <p>Mar 2020</p> <p>March 2018</p> | <p>HEE Mandate target already exceeded. HEE to continue to monitor dementia awareness training through biannual survey.</p> <p>Successful launch of the Dementia Core Skills Education and Training Framework identifying development of Tier 2 and 3 training.</p> <p>Evidence of trained Primary Care navigators in skills that enables them to improve care and support for people with dementia in GP practices and pharmacies.</p> <p>NHS trusts to evidence compliance with requirement as part of annual monitoring processes.</p> <p>NHS trusts to evidence that appropriate dementia training embedded in the care certificate as part of formal evaluation and quality assurance as part of annual monitoring processes</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|--|--|---------------------------------|--------------------------------|--|
| | | | | | <p>Higher Education Institutions to provide evidence of compliance to HEE Local Offices that appropriate dementia training embedded in curricula as part of annual monitoring processes.</p> <p>Data provided by the National Minimum Data Set for Social Care</p> |
| <p>A clear evidence base for what works in training on dementia for health and social care staff, which can be used to develop smarter education and training programmes.</p> | HEE/DH | <p>HEE – working with the DH Policy Research Programme, has commissioned a two year research project led by Leeds Beckett University to consider the impact of dementia training on improving outcomes for people who use services. Skills for Care and Skills for Health are on the steering group for this work.</p> | April 2015 | July 2017 | <p>Creation of evidence base.</p> <p>Production and dissemination of Research Report findings</p> |
| <p>All relevant social care staff working with adults and older people accessing social care services being supported to spot the early signs and symptoms of dementia and helping people with the condition to access high quality care and support.</p> | HEE/SfC SfC | <p>HEE – commissioning training film on the care of people with dementia in Social Care Settings</p> <p>Skills for Care has developed the Common Core Principles which cover signs and symptoms and also a support guide for workers concerned that someone they are supporting may have dementia – these resources are promoted on an on-going basis to providers and the wider workforce</p> | <p>Apr 2014</p> <p>Apr 2015</p> | <p>June 16</p> <p>March 18</p> | <p>Successful commissioning, delivery and dissemination of film focusing on the care of people with dementia in Social Care Settings.</p> <p>Monitor electronic access and usage by social care providers</p> |
| <p>All relevant staff able to signpost interested individuals to research via 'Join Dementia Research'.</p> | NHSE/ SfC/SfH HEE/ ARUK/ AS/DH | <p>DH to work with system partners to support primary care, voluntary sector and memory services staff to signpost to JDR effectively</p> | 2016 | | |

Dementia Awareness and Social Action

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|--------------------|---|---------|---|--|
| All hospitals and care homes meeting agreed criteria to becoming a dementia-friendly health and care setting. | DH/NHSE/ AS/DAA | Supporting the “Dementia Friendly Hospital Charter” (formerly known as the Right Care), the DAA’s Call to Action on dementia friendly hospitals. Alzheimer’s Society published a report in October 2015 on steps hospitals can take to become Dementia Friendly and how patients and carers can obtain information to establish how dementia friendly hospitals are. | Ongoing | | Number of hospitals signed up to and delivering the Dementia Friendly Hospitals Charter. Evaluation of Dementia Friendly Hospitals Call to Action by DAA |
| Alzheimer’s Society delivering an additional 3 million Dementia Friends in England, with England leading the way in turning Dementia Friends into a global movement including sharing its learning across the world and learning from others | AS (DH) | <ul style="list-style-type: none"> • Build on social action by Dementia Friends and Dementia Friends Champions by diversifying opportunities for action and delivering new engagement channels: <ul style="list-style-type: none"> – New volunteering opportunities – Campaigning on and offline – Champion Forum network • Maintain a coordinated network of staff who induct Dementia Friends Champions. • Deliver a sustained push through social media to reach digital audience • Target involvement of big employers with the aim of reaching over 1.5m Friends through this route by 2020. • Package Dementia Friends to business using the three days per year workforce volunteering. | ongoing | March 2020 for the total of 4 m friends (expect this to continue after that date) | Impact measurement framework being developed with NPC and University of Hertfordshire to be delivered at the start of Feb 2017 Stated behaviour change polling – targets for polling – to be guided by preliminary work of the evaluation |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|------------------------|--|--|---|--|
| <p>Over half of people living in areas that have been recognised as Dementia Friendly Communities, according to the guidance developed by Alzheimer's Society working with the British Standards Institute. Each area should be working towards the highest level of achievement under these standards, with a clear national recognition process to reward their progress when they achieve this. The recognition process will be supported by a solid national evidence base promoting the benefits of becoming dementia friendly.</p> | <p>AS (DH/LGA)</p> | <ul style="list-style-type: none"> • Make the British Standards Institute Publicly Available Specification called Guide to creating Dementia Friendly Communities free for all • Launch a revised recognition process incorporating the BSI guidance on dementia-friendly communities and delivering a broad definition of community and providing for staged recognition of achievement. • Use the results of the dementia friendly business pilot to drive local branches of national businesses to become part of local dementia-friendly communities. • Work with Local authorities to support Dementia Friendly communities. • Define what dementia friendly means for any community. • 25 Local Authorities to become Dementia Friendly per year until 2020 • Work with large organizations contributing to the Prime Minister's Challenge Champion Group on dementia friendly communities to support work around Dementia Friendly Communities. • Disseminate resources generated through PR, comms and local networks. • Build on the success of the Dementia Friendly Awards 2014 and 2015 to deliver higher profile Dementia Friendly awards in 2016 and for each year of the Challenge thereafter. • Demonstrate the benefits of resilient communities to health and social care organisations. • All health and social care organisations over time recognise dementia friendly communities and the benefit of them and sign post people affected by dementia to their local dementia friendly community. • Home Office is leading a refresh of the previous Government's Missing Children and Adults Strategy (2011) in conjunction with the key Government Departments (DfE, DH, DCLG, MoJ and FCO) as well as the statutory agencies, inspectorates and the voluntary sector. | <p>Feb 2016 May 2016 June 2016 Ongoing Ongoing Ongoing Oct 2016 Summer 2016</p> | <p>March 2020 for 50% of people to live in DFCs (expect this to continue after that date)</p> | <p>Impact measurement framework being developed with NPC and University of Hertfordshire to be delivered at the start of Feb 2017</p> <p>Evidence of # of communities climbing up the ladder of recognition</p> <p>50% of Local authority areas to be Dementia Friendly by 2020. -75 Local Authorities</p> <p>Survey of people affected by dementia in relation to the I statements</p> <p>Qualitative evidence gathered from people affected by dementia about their experiences in family, with friends, in the workplace and in organisations</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|-------------------------|--|--|-------------------------------------|---|
| <p>All businesses encouraged and supported to become dementia friendly, with all industry sectors developing Dementia Friendly Charters and working with business leaders to make individual commitments (especially but not exclusively FTSE 500 companies). All employers with formal induction programmes invited to include dementia awareness training within these programmes.</p> | <p>AS</p> <p>Age UK</p> | <ul style="list-style-type: none"> • Carry out Dementia Friendly Business Pilot Oct 15-May 2016. • Release Dementia Friendly Business Evaluation report June 2016. • Provide resources for Dementia Friends Champions to approach businesses on the high street about joining Dementia Friends and becoming dementia friendly. • Provide a network for big business to belong to (Prime Minister's Challenge Champion group on Dementia Friendly Communities and be recognized for their efforts in this area (Dementia Friendly Awards). • National DAA to continue to co-ordinate members' action plans and put calls to action together. • Delivery of Task and Finish groups to support development of charters. • Develop a clear and simple offer to becoming a dementia friendly organization (with targeted variations of guides and checklists). • Age UK hosted World Economic Forum Global Council on Ageing Symposium on dementia-friendly banking on 3 and 4 Feb with key stakeholders in the field, this will result in a report with recommendations for this sector. | <p>Ongoing, pilot complete June 2016</p> <p>Feb 2016</p> | <p>March 2020, but ongoing work</p> | <p>25% of FTSE 500 to be dementia friendly by March 2020</p> <p>Annual/bi-annual surveys of health and social care orgs</p> <p># of referrals passed on to other teams eg training and consultancy, regional fundraising, corporate engagement, volunteering, e-campaigning</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
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| All Dementia Friends Champions offered support to take new opportunities and action, for example through a dedicated volunteering network to maintain and build the momentum. | AS | <ul style="list-style-type: none"> • Start up and support a Champion Forum, for the views of volunteers “on the ground” to inform programme development. • Carry out research to better understand audiences within Champions, to support them on their volunteer journey. • Work closely with other Alzheimer’s Society teams (e.g. Volunteering, Fundraising, Research) to provide other opportunities to Champions. | Ongoing | Ongoing | Champion productivity and retention |
| All primary and secondary schools being encouraged to include dementia awareness in their work programmes leading to the creation of a dementia-friendly generation and all Further Education Colleges and Universities being encouraged to include dementia awareness in their work programmes. | AS and partners in govt, third sector and education sector | <ul style="list-style-type: none"> • Specialist fixed term role in youth engagement created to test need for longer term role. • Review & Evaluation of work in schools & Dementia Friends for children including analysis of baseline data thus far. • Creation of five year strategy to bring together strands of youth engagement work (resources for schools, partnership with the Scouts Association & Dementia Friends for children), develop strategic approach to engaging schools & youth groups, and develop evaluation framework. • Development of resources for schools for Key Stage One. • Development of resources for Key Stage Four to complete suite available to schools. • Recruitment of young Dementia Friends. • Government are encouraged to include DF in teacher training. All head teachers to be encouraged to become DF Champions and roll out to other teachers in the school. | Sep 2015 April 2016 April 2016 Aug 2016 Ongoing April 2016 | June 2016 Jul 2016 Jul 2016 Jan 2017 | Baseline data established. Key learnings used in development of strategy. Through evaluation framework that is developed as a result of the strategy. Quantity (e.g. number of young DFs, number of hours Scouts took action, number of schools that used resources) compared with baseline. Number of schools & colleges that request resources. Qualitative evaluation as part of strategy. |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|---|--|---|--|---|
| Greater involvement of people with dementia and carers in the development of dementia friendly communities. | AS (DH/ partners in government, voluntary and private sector) | <ul style="list-style-type: none"> • Develop a comprehensive engagement and participation plan for people affected by dementia covering all major pieces of work to ensure ongoing influence over the development of dementia-friendly communities Major pieces of work to include: <ul style="list-style-type: none"> – Development of the impact measurement framework (AS) and evaluation (DH) – Review of Dementia Friendly Communities programme recognition process – Selection and development of the task and finish group work delivered by the Prime Minister's Challenge Champion Group on Dementia Friendly communities. • Screen all plans for equality, diversity and inclusion. • Develop further the engagement with the network of Alzheimer's Society Service User Review Panels (SURPs), DEEP groups and engagement with people in more advanced stages of dementia. • Make use of Alzheimer's Society's website and digital channels for comment and further research. • Recognise involvement in the annual Dementia Friendly Awards People affected by dementia from across England, Wales and Northern Ireland have been consulted on about delivery of this strategy and input every six months to development of the programmes of work. | <p>Oct 2015</p> <p>Feb 2016</p> <p>Oct 2015 April 2016</p> <p>Oct 2016</p> <p>Sept 2015</p> | <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> | <p>Impact measured through developed Impact Measurement Framework – currently being evaluated. Ready Feb 2016</p> |
| Increasing involvement of voluntary and civil society organisations in local Dementia Action Alliances to support communities at a local level. | AS | <ul style="list-style-type: none"> • Engage with all locally active groups working to create dementia-friendly communities to. • Develop communication strategy to encourage voluntary groups to support dementia-friendly communities more. • Organisations to target: volunteer organisations, trade unions, religious groups. | | | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|----------|--|------------------|----------|---|
| <p>An increased number of NGOs are involved in the Global Alzheimer's and Dementia Action Alliance and it having a strengthened and influential presence on the global stage to enhance the role of civil society in supporting people with dementia.</p> | AS | <ul style="list-style-type: none"> • Maintain Senior International Officer role (subject to resourcing) dedicated to promote and guide organisations from across the world on raising awareness on dementia. • Actively approach all members of the ADI. Countries that are already working with Alzheimer's Society include Denmark, Canada, Scotland and Mauritius. • Greater presence at global conferences. | Started Oct 2015 | ongoing | All members of the ADI have been supported to roll our DF if they so wish |
| <p>More employers having carer friendly policies and practice enabling more carers to continue working and caring.</p> | AS | <ul style="list-style-type: none"> • Provide employers with guidance on how to be a dementia friendly organisation (with targeted variations of guides and checklists). This can include advice on how to make company policies more carer friendly to help them continue with their work. Examples are carer passports for employees and a flagging system for customers affected by dementia. <ul style="list-style-type: none"> – Develop sector or organization-specific materials. • Share best practice case studies so employers can learn from each other. | Jul 2016 | Jan 2017 | |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|---------------------|--|---|---|--|
| <p>A national simple to use and regularly updated online resource to enable people with dementia and carers to access assistive technology.</p> | AS | <ul style="list-style-type: none"> • Fuel demand for an online resource using the Assistive Technology Charter developed in 2014 by the task and finish group on assistive technology in the Prime Minister's Challenge Champion Group on dementia friendly communities. • Target the charter at networks of professionals, ie those people working across health, social care and community who enable people living with dementia including GPs, Community Mental Health Teams, Care Homes, Hospital discharge teams. Social Care Directors, Dementia Advisors and Dementia Support Workers. • Use digital means to promote the charter to people affected by dementia • Develop an online resource as hub for accessing technology, for information and support. • Advertise the hub widely through social media and through professionals. | <p>April 2016</p> <p>April 2016</p> <p>April 2016</p> <p>April 2017</p> | <p>Ongoing</p> <p>Mar 2017</p> <p>Mar 2017</p> <p>Ongoing</p> | <p>Data gathered from the number of orgs signed up and downloaded the charter (1551 to date) but this is only the first stage.</p> <p>By targeting specific groups we plan to create separate KPIs, such as how many local authorities sign up, how hospital discharge teams (starting with the pilot AS Hospital Liaison Service trusts) can use this effectively, as well as measuring the increase in downloads and sign ups directly from our website.</p> |
| <p>A greater understanding and protection of the human rights of those living with dementia around the world through global collaboration and work with the Independent Expert for the Human Rights of Older People.</p> | <p>AS</p> <p>DH</p> | <ul style="list-style-type: none"> • Develop engagement plans to target those active in creating dementia-friendly communities to increase understanding of rights eg target communications to Dementia Friends Champions. • Through the Global Action Against Dementia programme, the DH has worked with Rosa Kornfeld-Matte, the UN Human Rights Council Independent expert on human rights by older persons. • Independent Expert presented a framework for ensuring a human rights based approach for people living with dementia to the first World Health Organization Ministerial Conference on Global Action Against Dementia, in March 2015. The framework is known as PANEL – Participation, Accountability, Non-discrimination, Empowerment and Legality. In September 2016, the Independent Expert will present her comprehensive report to the UN Human Rights Council. This report will include the identification of best/ good practices and gaps on the implementation of existing instruments regarding the promotion and protection of the rights of older persons, including those with dementia. | <p>Apr 2016</p> <p>Ongoing</p> | | |

Research

Better Treatments

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|----------|--|--|--|--|
| <p>Cures or disease-modifying therapies on track to exist by 2025, their development accelerated by an international framework for dementia research, enabling closer collaboration and cooperation between researchers on the use of research resources – including cohorts and databases around the world.</p> | BIS/MRC | <ul style="list-style-type: none"> • Government to invest £49m in Dementia Platforms UK through the MRC to grow our cohort resources and help accelerate drug discovery. DPUK is a partnership with bio-industry, which has attracted £4m in additional funding from the pharmaceutical industry to date. • Government through the Medical Research Council to Invest up to £150m in a new Dementia Research Institute that will focus on improving our basic understanding of dementia to underpin faster drug development. • The DDF will invest approximately £100m globally in drug discovery. • ARUK invest £30m in three Drug Discovery Institutes between 2014 and 2019, with the ambition for this funding to continue. • ARUK to invest £20m in a global clinical trials fund. • Funding bodies to evaluate impact of investments in research infrastructure to inform renewal and further initiatives. | <p>In progress</p> <p>Q1 2016</p> <p>In progress</p> <p>In progress</p> <p>Ongoing</p> | <p>Q3 2018</p> <p>2020</p> <p>Q4 2020</p> <p>Ongoing</p> <p>Q4 2019</p> <p>Q4 2019</p> | <p>Number of DPUK-associated projects, and number of industry partners</p> <p>Launch of Institute, number of of scientific programmes established</p> <p>Number of candidate treatments/number of candidates taken into clinical development/ number of new treatments</p> <p>Number of successful trials/publication of data including negative results to provide learning</p> <p>Evaluations of key funding initiatives</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|-----------------------------------|--|---|---|---|
| <p>Expansion of the global dementia research agenda with increased collaboration, filling research gaps identified in the World Health Organization (WHO) and the Organisation for Economic Co-operation and Development (OECD) research analysis.</p> | <p>DH/ ARUK/ MRC</p> | <ul style="list-style-type: none"> • Government and charities to work with the WHO to support the development of a Dementia Observatory • ARUK to work with international partners to develop a Global Dementia Platform, which will provide world leading scientific and regulatory advice to candidate dementia treatments. • OECD to lead on supporting international regulators to develop shared principles for consistent global clinical development pathway. • A sustainable model for a World Dementia Council, supported by NGOs with key research priorities. • MRC to continue to work with JPND and COEN on next stage of priority setting and portfolio development, and provide funding for UK participation in collaborative research in identified priority areas. • International Alzheimer's Disease Research Funders Consortium and UK Dementia Research Funders Forum to continue to foster collaboration between funders on research priorities. | <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> | <p>2016</p> <p>Q3 2016 for launch. Ongoing activity.</p> <p>Q3 2016 for launch</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> | <p>Launch of WHO Observatory</p> <p>Disease-modifying therapy or cure.</p> <p>Improved collaboration between international regulators, including new guidelines.</p> <p>New guidance endorsed by key global regulators</p> <p>WDC working towards key priorities and secretariat in place.</p> <p>Funding for JPND and COEN initiatives</p> <p>Number of new collaborations</p> |
| <p>More basic research on: 1) biomarkers for the stratification of disease and to monitor its progress; 2) understanding of the interactions of genetic risk with comorbidities and environmental triggers that exacerbate disease progression and which may offer new routes to therapeutic intervention</p> | <p>MRC/ DH/ Charities</p> | <ul style="list-style-type: none"> • Grant funding from UK Research Councils, charities and the private sector are funding research in this area. • The new national Dementia Research Institute will significantly increase capacity and capability in discovery and translational research. • Funding from initiatives like DPUK, JPND, COEN and through the EU Innovative Medicines Initiative (IMI) will incentivise more collaboration between researchers. | <p>In progress</p> <p>April 2016</p> <p>In progress</p> | <p>Ongoing</p> <p>Q3 2019</p> <p>On going</p> | <p>A report on the dementia research landscape. Including numbers of research grants and total funding commitment.</p> <p>Number of new collaborations</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|-----------------------|---|-------------|----------|--|
| Open access to all public funded research publications, with other research funders being encouraged to do the same. | Research Councils/ DH | All research funded by NIHR and Research Councils require open access publications. | In progress | On going | Percentage of output from research funded by public bodies published in open access journals/ reports. |

Research and Care

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|--|----------------|--|--|--|--|
| More research made readily available to inform effective service models and the development of an effective pathway to enable interventions to be implemented across the health and care sectors. | AS/ ESRC/ NIHR | <ul style="list-style-type: none"> AS increasing funding available to support care and services research. AS to commit dedicated funding towards implementation science to ensure more research is translated into service delivery models. Effective dissemination of ESRC and NIHR initiative on Living well with dementia and other research on service models and care. Lancet commission on best dementia care into future health provision for people with dementia (supported by charities and Research Councils – ESRC). | In progress In progress In progress In progress | Ongoing Ongoing Q2 2019 Q1 2017 | <p>A key table of research funded and outcomes: number of research papers, new models of care implemented.</p> <p>Number of services developed through the research to be commissioned for people with dementia</p> <p>Peer reviewed report on future requirements for research on living well with dementia</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|---------------|--|--|---|--|
| <p>More clinical and applied research on: 1) practical issues which confront people living with dementia, their carers, families and communities, including the best ways to provide care and support; 2) assistive technologies and assisted living, including research on how information and communication technologies can best help people with dementia and carers; 3) comorbidities amongst people with dementia, including comorbid depression</p> | ESRC/ NIHR/DH | <ul style="list-style-type: none"> Continued commitment to Public and Patient Involvement in setting the research agenda through input on funding steering committees/review boards and appropriate PPI input into funding applications. NIHR Collaborations for Leadership in Applied Health Research and Care to continue to work across the health and care landscape and encourage knowledge transfer including via ongoing support of cohort of doctoral trainees in dementia care research. NIHR continuing to commission research on practical issues that confront people living with dementia, and co-morbidities, including via the NIHR School for Social Care Research. Nesta Health Lab will continue to be active in research that supports people to live well with dementia. *DH and ESRC to consider follow-up actions to the 'Living Well with Dementia' joint research initiative. | <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> | <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> | <p>Report on impact of PPI in dementia research.</p> <p>Number of doctoral trainees in dementia care research</p> <p>Number of projects funded / total amount of funding committed.</p> <p>Number of Nesta dementia projects and outcomes.</p> <p>Number of research publications from NIHR SSCR, number of service models developed through research and implemented in practice.</p> |
| <p>More research being conducted in, and disseminated through, care homes, and a majority of care homes signed up to the NIHR ENRICH 'Research Ready Care Home Network'</p> | NIHR | <ul style="list-style-type: none"> Continue to grow the ENRICH network. Department of Health to explore mechanisms for supporting research in social care through CLAHRCs and other existing infrastructure, including an annual meeting of clinical researchers. | <p>In progress</p> <p>In progress</p> | <p>Ongoing</p> <p>Ongoing</p> | <p>Number of care homes signed up to ENRICH</p> <p>Number of social care projects supported by CLAHRCs</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|----------------------|---|---------------------------------|---------------------------------|---|
| <p>Increased identification of effective ways in which people can reduce their personal risk of developing dementia, including cardio-vascular and cognitive strategies, and ways of encouraging these approaches to improve public health</p> | <p>PHE/ ARUK</p> | <ul style="list-style-type: none"> • PHE and ARUK to provide leadership in bringing together researchers and funders to identify collaborative solutions for building and promoting the evidence base for dementia risk reduction. • NIHR, Research Councils and charities increasing investment in risk reduction/prevention research. | <p>Q1 2016 Q1 2016</p> | <p>Q4 2017 Ongoing</p> | <p>At least one large-scale study s focusing on risk reduction in individuals in development.</p> <p>Annual reporting on no. proposals for RR research that are committed to by:</p> <ol style="list-style-type: none"> UK Charities NIHR PH funding Research councils Other <p>Annual reporting on no. proposals for RR research that are committed to:</p> <ol style="list-style-type: none"> Within the UK Within the EU Globally <p>Total financial investment for RR research</p> |

Research & Funding

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|------------------------------|--|---|---|--|
| Funding on track to be doubled by 2025 | BIS/ MRC/DH/ Charities | <ul style="list-style-type: none"> • Government will Invest £300m in dementia research by 2020, continuing at the current level of around £60m annually. • Dementia Discovery Fund to invest over £100m in drug discovery and development globally. • Public private partnerships including: DPUK, TRC-D and the new up to £150m Dementia Research Institute fully operational by 2020. • Charities to continue to increase investment and to continue to raise awareness to improve public understanding of the value of research and bring in new funds <ul style="list-style-type: none"> – Alzheimer's Research UK to spend at least £80m between 2014 and 2019 on research into the prevention, cause and cure of dementia – Alzheimer's Society will fund at least £100m in research over the next decade in to cause, care, cure and prevention of all forms of dementia. – Other charitable funders including BHF, Stroke Association, Parkinson's UK to invest in dementia research related to the strategic aims of their organisations. | 2015 January 2016 October 2015 In progress | Q2 2020 Q4 2020 2020 Q1 2020 | <p>Total spend/types of research invested/key breakthroughs/science funded</p> <p>No of new projects and programmes initiated, No. of assets invested/ no. of assets 'exited'/no. of assets taken in to clinical development</p> <p>Launch of new initiatives/ strategic plan to address key gaps in science/ number of public private partnerships</p> <p>Number of funded projects/total amount funded/number of research publications</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
|---|----------|--|---|---|---|
| <p>Increased investment in dementia research from the pharmaceutical, biotech devices and diagnostics sectors, including from small and medium enterprises (SMEs), supported by new partnerships between universities, research charities, NHS and the private sector. This would bring world class facilities, infrastructure, drive capacity building and speed up discovery and implementation.</p> | MRC/DH | <ul style="list-style-type: none"> • The pharmaceutical industry has invested £4m in DPUK, with further commercial partnerships to be developed. • The DDF will invest over £100m in preclinical treatment development globally, some of these investments will be on a co-investment basis and the DDF will therefore leverage funding above the direct commitment from the Fund. • Dementia Consortium will continue to invest in high-quality pre-clinical treatment development and will increase the number of funders and amount of investment, from a baseline of £3m. • DPUK, European Platform on Alzheimer's Disease (EPAD) (and other IMI initiatives) will deliver a trail ready cohort of patients, funded jointly by EU funding and pharmaceutical industry. | <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> | <p>2018</p> <p>Q4 2020</p> <p>Ongoing</p> <p>2018</p> | <p>No of public-private partnership projects funded</p> <p>More candidate treatments in the drug discovery pipeline (combined from clinical trial phases 1 – 3) for dementia treatments by 2020 than the baseline in 2015.</p> <p>Number of clinical development studies using these cohorts.</p> |

| Commitment | Lead Org | Delivery Plan | Start | End | How impact will be measured |
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| <p>Every newly diagnosed person with dementia and their carer receiving information on what research opportunities are available and how they can access these through 'Join Dementia Research'.</p> | <p>DH/ NIHR/ ARUK/ AS/ NHSE</p> | <ul style="list-style-type: none"> • Widespread implementation through NHS memory services and GPs: <ul style="list-style-type: none"> (a) NHS England leading the development and implementation of a diffusion plan (b) Development of the technical and governance platform to enable registration to JDR from the NHS • ARUK and AS continue to send out information on JDR to GPs and Memory Clinics to boost recruitment as well as signpost to JDR through their respective helplines. JDR to be marketed through Dementia Friends. • The launch of Dementia Citizens, a platform for a citizen science approach to recruit participants and facilitate dementia research in to better care. | <p>In progress</p> <p>In progress</p> <p>In progress</p> | <p>Ongoing</p> <p>Ongoing</p> <p>Launch in Q3 2016</p> | <p>Annual reporting on participation rates: sign-ups to JDR and research studies.</p> <p>Annual reporting on participation rates: sign-ups to JDR and research studies.</p> <p>Number of research projects using the platform/number of people with dementia on the platform.</p> |

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