

RICE

The Research Institute for the Care of Older People

Annual Report and Financial Statements for the year ending 31 December 2019

Registered Charity 1042559
Registered Company 2979617

Contents

Trustee Report

Welcome from the Chair	
Report of the Trustees	
Review of the year	
About RICE	
Financial support and fundraising activity	12
Financial review 2019	14
Future plans	
Governance	
General information	
Independent auditor's report to the Members of RIC	24
Financial Statements	
Statement of financial activities	27
Balance sheet	.,
Cash Flow Statement	29
Analysis of changes in Net Debt	30
Accounting Policies	31
Notes to the Financial Statements	

Welcome from the Chair



l am happy to present our Annual Report and Accounts for 2019. This year brought a conclusion to our 2015-2019 strategy and the development of our new 2020-2024 strategy which sets out our ambitions and plans

for the future. 2019 was an exciting but challenging year for RICL with more change and transition.

Many charities are finding it more difficult to raise essential funds and for RICE this year has been particularly challenging. Funds had been committed to convert our attic into a usable space and to redecorate the RICE Centre for the first time since we moved in, in 2008. So it was essential that this building work was completed this year. Whilst the additional space is crucial to enable us to expand our research it has brought with it additional costs. So our need for funds and financial support has never been more vital.

Despite this, the future for RICE is truly exciting. The increased space along with our developing and expanding research programme is gathering momentum. Our new strategy for 2020-2024 states our ambition to be a leading medical research charity for research into health problems. of old age, in particular dementia and other neurodegenerative diseases. There is still no cure for dementia and there are other conditions in older age such as Parkinson's disease, and muscle and bone health, which greatly impact on the physical, mental and emotional wellbeing of older people and their families. The need for research into dementia and these other conditions and the relationship between them, continues to be critical and is particularly vital given a growing, ageing population and the increasingly complex needs that they have.

With this in mind our new strategy focuses on excellence, partnership and growth. We will seek to build on our efforts to grow and expand the breadth of our activities beyond dementia to other conditions in older age and the relationship between them. Our research priorities for 2020-2024 will focus on thinking clearly, moving well and staying strong — dementia, Parkinson's disease, and muscle and bone health.

To enable this expansion in our research, in 2019 we formed the RICE Ageing Research Collaborative which brings together researchers from the Royal United Hospital NHS Trust, Universities of Bath, Bristol and the West of England. The Collaborative will work together to develop and undertake innovative research into conditions which affect older people. Our newly expanded RICE Centre will be the central hub for this activity.

In 2019, we've continued to build on the focus we've had on finding a cure for dementia. Sadly we are not there yet, but we continue to participate in activities that will further the knowledge needed to achieve this. In 2019 we participated in 8 clinical trials of potential treatments and in 12 other research projects. In total 150 patients took part in our research projects. Whilst some of the clinical trials we've participated in this year closed early because the treatments were not effective, our involvement has at least enabled these options to be ruled out promptly, and so contributed to the progress. needed towards finding better treatments and hopefully a cure for dementia. Interestingly, one trial is restarting because more detailed analysis of the results suggest that it may be of benefit to some people with Alzheimer's disease.

We've also continued to play a key role in the multi-centre study PrAISED2. This study seeks to test whether an individually tailored, supported therapy intervention can maintain independence and reduce falls in people with mild dementia. We

successfully recruited 49 individuals to the study and will be seeking further recruits in 2020. RICE has worked closely with the occupational therapy team at the RUH and the University of Nottingham to undertake this study.

As well as developing a new strategy for 2020-2024 and continuing our research, in 2019 we've also focused on the leadership transition at RICE as our Director for more than 30 years, Professor Roy Jones, moves toward retirement. Dr. fom Welsh is now acting as Deputy Director with a particular involvement in developing our ongoing research programme. Roy has reduced his working hours and this will continue in the coming year but his involvement with some of our research projects will continue for a number of years yet.

As a result of the departure of the RICE Professor of Old Age Psychiatry who retired in April and the Chief Operating Officer who departed RICE in June for pastures new, Trustees reviewed the senior management team staff structure in 2019 and will be putting in place a revised approach in 2020. I look forward to updating more on this in 12 months' time.

I'd like to take this opportunity to thank everyone who donated so generously to our DementiaPlus Appeal to help both fund our attic conversion project and towards our senior researcher posts. The Appeal is ongoing and indeed will be relaunched in 2020 with the ambition of attracting further funding for senior research support and an expanded portfolio of research projects. This, along with fundraising to cover the costs of our overheads and support costs, is an essential element to achieving our vision and our ambitions from 2020-2024.

Sadly, events in 2020 have already overtaken our plans. On 11 March, the World Health Organisation declared the coronavirus outbreak a global pandemic. As a result of subsequent government requirements to enforce social

distancing and the needs especially of the mainly older people that visit RICE, we have had to pause almost all our research activities including clinical trials. This work will only resume when it can be done safely. Our future plans have also been paused and, due to the major economic impact of the pandemic on our work and income, RICE will need to review again its strategy and operations for the foreseeable future.

The pandemic has impacted on everyone's lives, both in the UK and across the globe, but it has disproportionately impacted on both older people and on Black, Asian and minority ethnic communities. There is also growing evidence to suggest that the pandemic has particularly impacted on those affected by Alzheimer's disease and other types of dementia. It is vital therefore that our research restarts and expands so that we can continue to improve care and treatment for people affected by dementia.

As Chair of the Board of Trustees I remain proud of the commitment and dedication which everyone brings to RICE and to our activities. I would like to thank our Director, staff, Trustees and all our volunteers for their efforts, hard work and enthusiasm. I'd also like to thank our Patron and Vice Presidents for their ongoing support, and all our funders and donors for their generous donations. And, finally, I'd like to thank our patients and their families - without your willingness to be involved and without the contributions you've made, our vital work just wouldn't be possible.

Dr Chris Dyer, Chair

Report of the Trustees

The Trustees of RICE are pleased to present their Annual Report together with the Financial Statements for the year ended 31 December 2019.

Our impact in 2019

In 2019 there were more than 1600 patient visits to the Memory Clinic, of which 549 were patients being seen and assessed for the first time. During the past year 150 of our patients took part in research projects at RICE, achieving and surpassing the 10% target of people with dementia involved in research by 2020 (part of the Prime Minister's Challenge on Dementia 2020, launched in 2015). Additionally, our Healthy Volunteer Database has been re-established, with 140 people currently willing and available to take part in research – all of whom took part in a Healthy Volunteer study we ran during 2019.

Through the Memory Clinic patients received regular assessments and consultations with our multi disciplinary team. These included specialist tests and investigations where needed to assist with making a precise diagnosis whenever possible. Post-diagnostic support for people with dementia is very important and provided both immediately and throughout the time a patient is with RICE. We offer a variety of courses and group participation sessions to complement both care and treatment and to help people to live as well as possible with dementia.

In 2019, 8 clinical trials of potential drug and nondrug treatments were in progress. Such was the range of research projects available that all interested RICE patients could potentially participate in at least one project. Of particular interest over the last 12 months has been the PrAISED2 study which seeks to test a tailored physical therapy intervention to maintain independence in people with dementia. This has proved a very popular study and continues into 2020. The Graduate 2 study, testing the drug gantenerumab, recruited well and recruitment has now been extended to look at a larger number of patients. Our clinical trial programme continues healthily into 2020 with three new studies opening to recruitment.

We continue to encourage people to take part in research projects not only those from our own patient population but also from other areas, particularly the area around Bath. We have continued our targeted information campaign including organising events at RICE to tell people about the pros and cons of taking part in research and giving them an opportunity to meet others who have participated in research studies. We support the national Join Dementia Research (JDR) programme and recruit suitable people from JDR whenever possible. RICE staff have given a number of talks about research within Bath and the surrounding areas.

2019 has also seen a big increase in the number. of students volunteering at RICE and they have played a huge part in our research output. Alongside our University of Bath placement study (May-August), we accommodated three additional students, all of whom have worked on active research projects including IDEAL 2, DLB Genetics, PrAISED2 and other University of Bath based studies. The students also received specific training so that they could participate in Memory. Clinic work. This not only provided the students with valuable experience but also meant RICE increased its capacity to carry out more courses, and research to benefit our Memory Clinic and research patients, and we are grateful to the students for choosing to volunteer with us.

Patient feedback

Each year we carry out a Service User Audit that again in 2019 received widespread praise with virtually no negative comments or criticisms. It was particularly encouraging that 100% of respondents felt listened to by our staff, and found our staff to be knowledgeable and polite.

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This is a great endorsement of the care and attention provided by our clinical team. There was a little dissatisfaction with the RICE Centre facilities, which may have been a result of the extensive building works which took place during the year and caused some disruption.

Public and scientific output

It is vital that we communicate our research and other activities not only to the scientific and medical community but also to the wider public, and in addition stimulate further debate and understanding of dementia and other conditions affecting older people's health such as Parkinson's disease, frailty and bone health.

As ever, the RICE team led by Professor Jones gave a number of more general talks within Bath and the surrounding areas. Dr Welsh was again invited to tecture to pharmacy students at the University of Bath and to post-graduate pharmacists completing higher level qualifications. He continues to oversee the undergraduate teaching of medicine of older people at the University of Bristol and gave a series of lectures on geriatric medicine and teaching on dementia.

Dr Welsh continues to supervise PhD students and also sits on the examination board at the Royal College of Physicians for the Specialty Certificate Examination for Geriatric Medicine. He was appointed deputy chair of the British Geriatrics Society Dementia specialist interest group.

Professor Jones, Dr Welsh and Dr Ahmed took part in or spoke at a number of national or international meetings or conferences including London, Manchester, Newcastle, Amsterdam, Krakow, Lisbon and New Jersey.

Professor Jones together with Dr Welsh, Dr Ahmed and other members of the RICE team contributed to more than 15 peer-reviewed publications including in journals such as BMJ Open, Age and Ageing, Journal of clinical medicine, Journal of Alzheimer's Disease, Aging and mental health, Alzheimer's disease and associated disorders, International journal of geriatric psychiatry, European journal of health economics, Maturitas, Dementia and Geriatric Cognitive Disorders, Cortex, Journal of Neurology, Neurosurgery and Psychiatry and Case reports in women's health. Some 12 posters and other presentations were also made at a number of conferences including at the international Alzheimer's and Parkinson's disease congress and European Geriatric Medicine Society conference.

RICE was represented at the annual BRACE Conference in November, attended by Vanessa Bishop and Dr Ahmed. Several members of staff also attended the Healthy Ageing Network: Health and Wellbeing in Later Life Conference at the University of Bath, again in November.

Review of the year

Memory Clinic

RICE runs the specialist Memory Clinic service for Bath and North East Somerset (BaNES) NHS Care Commissioning Group (CCG) and BaNES Council under sub-contract to Virgin Care Services, who hold the Prime Provider contract for community health and care services in BaNES.

The RICE Memory Clinic is the focus for assessment, diagnosis, and management of people with problems related to memory and thinking processes, and particularly for people with conditions like Alzheimer's disease and other types of dementia. We see people who are referred by their GPs or other specialists or who have self-referred to our community-based memory screening clinic, as well as patients from outside the area who are referred for our specialised expertise.

We are also pleased to offer additional support to people with dementia and their carers including post-diagnostic support and advice, as well as

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through various courses and participatory groups to complement our core Memory Clinic work. These additional activities are funded through charitable donations.

In 2019:

- There were two Cognitive Stimulation Therapy (CST) courses during 2019. These are a 7 week programme for people with mild to moderate dementia. CST has been well researched with results showing a positive improvement for people with dementia and these courses are designed to stimulate the memory by being challenging, yet enjoyable.
- Three Carers Courses were run for people looking after relatives or friends with dementia, attended by 42 participants. As well as two courses in our traditional four week format we also continued with the one day format and had very positive feedback for both types.
- In November 2018 we piloted a new Music for the Memory course, which continued in 2019 and is funded through supporter donations. This group is an opportunity for those with memory problems and dementia to explore their musical talents through singing, playing an instrument, listening and discussing music while getting a little physical exercise and cognitive activity at the same time.
- The RICE occupational therapist in collaboration with a music therapist carried out music courses in care homes in the Bath and North East Somerset area. These groups were run over 7-8 weeks in 3 Care homes for those residents with memory problems and dementia.
- Our Living Well with Dementia (LivDem) course returned in 2019 and is specifically for people newly diagnosed with dementia and includes a parallel family support session.

We recognise the importance of joined up care for people with memory problems and dementia and their families and help to facilitate access to wider

support and services through our close collaborations with the Alzheimer's Society's Dementia Support Workers, the Carers Centre and Curo's Independent Living Service; there is a regular arrangement for someone from one of these groups to be available within RICE to see and advise people attending the Memory Clinic immediately.

Knowledge and Experience

RICE has a team of more than 15 experts including doctors, nurses, psychologists, an occupational therapist and a clinical research and quality manager, supported by our front of house secretaries. We also have a small team of experienced charity professionals who look after our day to day running of the RICE centre and charity and governance functions such as finance, HR, fundraising and communications. All staff are recruited in line with RICE Recruitment Policy and Guidelines, which follow NHS safe recruitment guidelines, and receive appropriate training as part of their induction at RICE and on a continuing basis throughout their employment and in line with changing legislation and other requirements.

Professor Jones, Consultant Geriatrician and Director of RICE since it began in 1985, is the Chief Investigator for a number of national and international clinical trials and serves on the independent data monitoring committees of a number of academic and pharmaceutical company research studies, including one major international study supported in part by the US National Institute of Health. Professor Jones is one of the most experienced researchers in the world with regard to the clinical evaluation of potential treatments for Alzheimer's disease and this year. has participated in important national discussions about the condition Mild Cognitive Impairment and the potential importance and use of spinal fluid sampling in improving accuracy of diagnosis in people with suspected dementia.

Dr Welsh, Consultant Geriatrician and Research Fellow, a joint post with the RUH, has a special

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interest in the use of, and potential risks and benefits of, antihypertensive and other drugs in older people. Dr Welsh participates in both our memory clinics and research programmes and is leading on potential new areas of research for RICE, linking closely with other geriatrician colleagues in the RUH.

Dr Samrah Ahmed, our Lead Neuropsychologist and a Senior Research Fellow is addressing questions that will try to improve access to better diagnostic and post-diagnostic support for people with dementia, one of the research priorities highlighted in the Government's Dementia 2020 Challenge. Her work includes finding better screening tests to identify people with dementia as welf as studying groups that are otherwise marginalized from mainstream research such as younger people with atypical Alzheimer's disease and patients from ethnic minority communities.

We continue to work closely with a number of other groups including colleagues at Universities and Hospitals in Bath, Newcastle, Bristol, Exeter and elsewhere, the RUH's Dementia Strategy Group, the local Dementia Care Pathway group, the European Alzheimer's Disease Consortium, as a joint Alzheimer's Research UK Centre of Excellence with Bristol, and as one of the selected centres within the International Association of Geriatrics, Gerontology (IAGG) Global Aging Research Network (GARN).

Research

Our research strategy, as outlined in the Future Plans section, seeks to improve the understanding, care and management of medical conditions affecting older people. Over the last 12 months, dementia care, in particular drug and non-drug treatment, has remained the focus of our work. Our patients and staff have been engaged with a number of drug studies and we continue to support our patients' involvement with trials of novel agents in the expectation that

ultimately a more effective treatment for these conditions will be identified.

We have continued to play a key role in the multicentre study PrAISED2 which is trying to test a way to help maintain independence and reduce falls in people with mild dementia. The study proved popular with staff and participants alike and continues to recruit into 2020.

We continue to establish strong working links with the RUH and are looking for further opportunities to collaborate on research studies in 2020

We continue to work ever more closely with universities, in particular Bristol, Bath, the University of the West of England (UWC) and Exeter. In 2019 we formed the RICE Ageing Research Collaborative which brings together researchers from the RUH, Universities of Bath, Bristol and the West of England. The Collaborative will work together to develop and undertake innovative research into conditions which affect older people. The RICE Centre will be the central hub for this activity.

Volunteers

We are particularly grateful again this year to all our dedicated volunteers who support us is so many different ways across RICE. Their contribution is incredibly valuable to us and we thank everyone for the time and the commitment they give us.

In 2019 we welcomed 5 Masters Students as volunteers who wanted to gain experience and progress their academic and clinical interest in research.

Our very committed team of regular and longserving fundraising and community volunteers gave their time to fundraise through our day-today activities and community events and worked with our fundraising team and colleagues across RICE to run with our fundraising activities.

About RICE

RICE is an independent registered charity, founded in 1985. Our commitment is to help people to live as well as possible for as long as possible, and to help reduce disease and disability in older age. More than 12,000 people have been assessed, diagnosed and treated by the RICE clinical team.

Our commitment is to carry out relevant and essential research, to provide support for people with dementia, their families and carers, and to improve the quality of life for everyone involved. Our research includes clinical trials with potential drug and non-drug treatments and other research to understand more about these conditions and their impact. We have made a significant contribution towards global research in these areas and to knowledge of diseases experienced by older people, particularly in relation to Alzheimer's disease and other forms of dementia.

We run the NHS Memory Clinic services in Bath and North East Somerset (BaNES) on behalf of the BaNES NHS Care Commissioning Group (CCG) and BaNES Council, sub-contracted through Virgin Care who hold the overall contract to provide community health and care services in BaNES.

We align our Memory Clinic service with our research work, enabling us to offer patients, their families and friends an opportunity to be involved in a range of research projects and clinical trials that are suitable and appropriate for them, and that take place in the same familiar environment.

The RICE Centre - our purpose built facility in Bath - is one of the few places in the country where patients with dementia who are participating in a clinical trial or other research study can be housed overnight in an entirely appropriate environment when this is necessary for a particular research project.

We are now expanding our research capacity and expertise to include research into other conditions of older age such as Parkinson's disease, bone health, frailty.

Expanding our research capacity means we needed to expand the RICE Centre to increase our capacity. After several years of fundraising, and as a result of generous donations from supporters, the RICE attic conversion project was started and completed in 2019 and has increased our patient consulting, research and office space.

Our key partnerships include collaboration with the NHS; the Royal United Hospitals NHS Trust (RUH), Bath; the Universities of Bristol, Bath and Exeter; Avon and Wiltshire Mental Health Partnership NHS Trust; Virgin Care and Designability (medical equipment charity). We also work with several major pharmaceutical companies. In 2019 we formed the RICE Ageing Research Collaborative which brings together researchers from the RUH, Universities of Bath, Bristol and the West of England. The Collaborative will work together to develop and undertake innovative research into conditions which affect older people. The RICE Centre will be the central hub for this activity.

Why are we needed?

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Our work is as essential today as ever before to support our population to live well into older age.

In recent years there has been a step change in public awareness and education around disease prevention. This has impacted very positively on the health of the UX population. More people are surviving acute illnesses and living for longer. But this also means more people, as they age, are developing progressive chronic conditions such as dementia, Parkinson's disease and worsening bone health and frailty problems. Demands on health budgets continue to increase and resources for treatment and care are stretched to the limit.

Awareness, debate and advocacy for people in older age has increased significantly. Much is written about dementia. It is important to differentiate scientific and evidence led research from myth and popular headline reporting. Sadly the funding available for much needed research into dementia, and other progressive chronic conditions such as Parkinson's disease, bone health and frailty still lags far behind that for research in other areas such as cancer and heart disease.

We advocate positive lifestyle choices and support initiatives across BaNES and nationally to promote the benefits to the individual through independence and enjoyment of life for longer, as well as helping to mitigate the costs of caring for an increasingly ageing population. We advocate 'what is good for your heart is good for your brain'.

Our Purpose

The charitable objective and public benefit of RICE as described in our Articles of Association is:

"To relieve sickness and to promote and advance medical knowledge in particular without limitation by reference to all aspects of the care of older people and to undertake research in relation thereto and to publish the useful results of such research."

RICE's legal and governing framework is the Memorandum and Articles of Association, incorporated on 17 October 1994 and as amended by special resolution of the members passed on 9th November 2017.

Our Principal Activities

In furtherance of our charitable objects and our clinical and research priorities we:

 Undertake academic research including as part of national and other multi-centre projects funded, for example by NHS research money and Research Council money. In general, projects of this sort fund our direct project costs but often do not provide funding for the lead researcher and some other operational and infrastructure costs, which are assumed to be funded by the centre's own money.

- Run our own academic research projects including pilot studies that may highlight areas for future research projects and collaboration.
- Participate in research on potential drug and non-drug treatments for people with dementia, Alzheimer's disease and related conditions funded by research grants including from pharmaceutical companies.
- Provide a memory assessment and diagnosis service for the population of Bath and North East Somerset funded by the NHS.
- Deliver appropriate additional courses and support groups for patients living with dementia, and for people who care for them.
- Publish and present on our research findings and contribute to the growth in knowledge and debate in this vital area.
- Work to influence international, national and local policy and deliver improvements in the way health and care services are provided.
- Support staff to develop and share skills and expertise to enhance both their continued personal development and the organisational development of RICE.
- Enthusiastically engage in fundraising and communication activities to promote and support our work.

Our public benefit

RICE Trustees are committed to Charity Commission guidance on public benefit and are confident that RICE is able to demonstrate that we delivered against our public benefit requirements in 2019 through:

- Our participation in research projects designed to further knowledge in the care of people with dementia and related conditions.
- Our work with other voluntary organisations to support patients and their carers following a

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- diagnosis of dementia and support their mental and emotional well-being.
- 15 articles published in academic journals and many presentations to local, national, and international academic and other conferences in relation to our research activities.
- Our commitment to relieving sickness by the delivery of memory assessment and diagnostic services to new patients and existing patients as part of their continuing care, and through our additional services.

Financial support and fundraising activity

Summary

Our fundraising is a critical part of our income each year. We aim to strike a healthy balance by mixing revenue—from clinical trials, research and charitable activities to ensure a sustainable model. In 2019 we raised 32% of our budget through fundraising. This represents a decrease in fundraising income of 4% from 2018, and is the result of staffing changes in the fundraising team in 2019 as well as a less successful year in some of our fundraising efforts.

DementiaPlus Appeal

Our major Appeal to increase our senior research capacity and expertise and to expand our facilities at the RICE Centre entered its fourth year in 2019. We raised a further £31,506 in funds in 2019 which took the total raised to 59% of our appeal target of £1,230,000. The Appeal will be refocused and relaunched in 2020 and continue to run through to 2024.

The capital budget to expand the building achieved its target in 2018 and we successfully completed the attic conversion in the summer of 2019. The expansion has enabled us to have additional space which is crucial to being able to increase our clinical drug and non-drug treatment trials as well as other research projects. The relaunch of the Appeal will enable funding to enhance our research capacity further as well as allowing us to provide enhanced assessment, treatment and support for patients and families referred to RICE for diagnosis and management of Alzheimer's disease and other types of dementia.

Legacies and gifts in memory

Legacies and gifts in memory have the power to transform our work, and we are always very grateful to receive such gifts and are mindful of everything they represent. In 2019 we received 2 legacy notifications and 95 donations in memory of a loved one. We are working now to improve how we communicate the benefits of leaving a legacy or gift in memory and to encourage our supporters to consider us in their wills, to make a difference to the future of dementia care in Bath and North East Somerset (BaNES), and to dementia research as a whole. We hope to launch our new and improved legacy programme in 2020.

Trusts and foundations

We received over £185,030 in support from charitable trusts and foundations this year, and secured £13,798 for 2020. This income recognises our importance not only to our local community but also more widely and supports our efforts to remain in the forefront of dementia and older people's research nationally and internationally.

Looking ahead to 2020, we aim to increase our income from grant making trusts. Securing funding for core costs is always challenging so we often look to fundraise for specific projects supporting people with dementia and other neurodegenerative diseases and their families. We are increasingly able to share a clear strategy and compelling evidence which supports our applications. This works in parallel with our organisational objective of achieving cost recovery across our activities.

Major donors

We have seen significant support from our major donors in 2019. This has made a substantial difference to our delivery of research and care. Major donors have a significant impact on our work and help us to achieve our ambitious growth plans. We are extremely grateful for their generous support.

Community and events

RICE plays an important role in local health provision and lifestyle advocacy in Bath and North East Somerset (BaNES). We have been delighted in the interest in our work from a number of

community groups and local businesses. Our fundraising volunteers have been as busy as always with a range of community activities such as raffles, bag packing, selling Christmas cards, stalls and more. Their contributions and presence every year help us to raise awareness and important income. Many of our volunteers have worked with us over many years and we thank them all most sincerely for their dedication and for being a very valued part of the team.

Regular giving is a key and vital part of our income and we are immensely grateful for the continuing support we receive from supporters through standing orders and regular gifts.

Corporate donations

We have been grateful for the efforts made by the staff of Sainsbury's and Sparkling Solutions in our charity of the year partnerships in 2019. Relationships like these have great potential to help us increase awareness of dementia, raise the profile of our work and diversify our income. These connections go hand in hand with our communications work; as our profile grows we look forward to successfully engaging with more local businesses and to extending our charity of the year relationships into longer term partnerships.

Communications

Growing our audience is key to generating reliable and sustainable income for RICE. We have focussed this year on increasing awareness of our role within older people's research and care and the breadth of our work locally, nationally and internationally. We have also highlighted RICE's

role when there are stories around dementia in the national media. We have grown our social media reach, and we are creating a new website to host our digital presence from 2020.

We have published 2 editions of our newsletter under our new format. These updates have been well received and help us share news of our work with our supporters and wider audiences.

Ethical and regulated fundraising

As a voluntary member of the Fundraising Regulator we comply with the Code of Fundraising Practice. This ensures that our fundraising activities are both compliant with law and follow the ethics of the Code of Fundraising Practice. We have received no complaints about any of our fundraising in 2019.

As a small charity we are able to monitor the majority of fundraising efforts on our behalf. We provide guidance which offers simple advice for volunteers and fundraisers on GDPR and other key areas. We maintain close contact with our supporters and keep careful records of our interactions. We do not currently engage any professional or commercial fundraisers.

We thank everyone who has so generously supported us financially and with their time during the year.

To everyone - we thank you.

Financial review 2019

In 2019 RICE incurred a deficit of £21,049 across the year. Due to the strong balance sheet and healthy reserves RICE still ended the year with net assets of £1,947,271 (2018 - £1,968,320).

The deficit can be broken down into a figure of £275,159 surplus on unrestricted funds activity (2018 - £205,878 deficit) and £296,208 deficit on restricted funds (2018 - £117,174 surplus). The main reason for the deficit on restricted funds was the expenditure of a large amount of DementiaPlus Appeal funds from previous years to complete the attic conversion work and to expand the RICE Centre.

Total income in 2019 was £1,037,151 (2018 -£957,326). Income from charitable activities rose by £99,556 to £708,520, mainly due to increased activity in clinical trials and research. projects. Legacy income does fluctuate from year to year and increased from £4,937 in 2018. to £33,110. The DementiaPlus Appeal brought in £31,506 in income in 2019 a decrease of £134,955 from 2018. 2018 was a particularly successful year for the Appeal as donations were sought to enable the attic conversion work. to go ahead. There has been less success at gaining donations to the Appeal in 2019, but it is hoped that a refocused and relaunched Appeal in 2020 will bring in more income for our research programme.

In 2019 we benefited from an increase in income on our investment portfolio of £37,831 (2018 - £23,036 deficit). The investments were liquefied in April 2019 to release working capital to cover the cost of the attic conversion work and ongoing operations. The market value of the investments realised were £429,191. The revaluation fund which represented the uplift from cost value of the investments therefore

has a closing balance of £0 in 2019 (2018 - £391,350).

Total expenditure increased by £73,047 to £1,096,041 from £1,022,994 in 2018. The main reason for the increased expenditure was the costs associated with the attic conversion, and increased costs associated with activity in clinical trials and research projects.

At RICE the successful delivery of charitable objectives depends entirely on specialist staff. Staff costs represented 66.3% of total costs in 2019 (2018 - 75.3%). Overhead costs continue to be tightly controlled.

Net assets decreased to £1,947,271 from £1,968,320 due to continued investment in RICE's charitable and research activities.

Tangible fixed assets total £1,337,685 with most of that value being in our purpose built, dementia-friendly RICE Centre. Net current assets increased by £188,292 to £609,586 split between restricted funds of £87,904 and unrestricted funds of £521,682.

Trustees are prudent in setting budgets which are monitored by the Finance and Audit Committee. Work included a review of longer term financial plans and scenario planning, which has been strengthened and integrated into our strategic framework, and is reviewed every six months. These are particularly critical at this time of development and growth for RICE.

Reserves Policy

A key indicator of the financial health of a charity is the level of the free unrestricted reserves. The Reserves Policy adopted by the Trustees requires RICE to have free unrestricted reserves equal to at least 6 months operating costs.

At 31 December 2019 restricted reserves amounted to £1,416,624 and unrestricted reserves amounted to £530,644 of which free unrestricted reserves amounted to £521,682. Based on the budgeted activity levels for 2020, 6 months unrestricted operating expenditure amounts to £515,500.

Investment Policy

RICE's investment portfolio is managed by external advisors who provide Trustees with professional advice as to investment strategy, within parameters set by Trustees. Trustees are satisfied with investment performance in the year. Trustees agreed during the year to liquidate RICE's investment portfolio to release working capital to cover the cost of the attic conversion work and ongoing operations. At the end of 2019 RICE's surplus funds were in the process of being put into bank accounts paying competitive interest rates.

Future plans

Our future plans continue to be ambitious. There is still no cure for dementia and there are other conditions in older age such as Parkinson's disease, and muscle and bone health, which greatly impact on the physical, mental and emotional wellbeing of our patients and their families. The need for research into dementia and into these other conditions and the relationship between them continues to be critical and particularly vital given the increasingly ageing population and the increasingly complex needs that they have.

Strategic priorities

In September 2019 our Trustees and the Senior Management Team (SMT) reviewed the progress of the RICE strategy 2015-2019 and discussed the future direction for both our research and our clinical activities, and the resources we will need to support it. Trustees and SMT celebrated RICE's achievements and talked about the challenges and learning from the strategy. Trustees also agreed a new RICE strategy 2020-2024 which focuses on excellence, partnership and growth, and which will guide our work over the next five years. In our new strategy, our clinical and research activities continue to be at the heart of all our work. The strategy builds on work started in 2019 to grow and expand the breadth of our activities beyond dementia to other conditions in older age and to look at the relationship between them. Our new strategic priorities for 2020-2024 will focus on thinking clearly, moving well and staying strong dementia, Parkinson's disease, and muscle and bone health.

As we expand our research and areas of focus we must ensure we have the right expertise in the right place at the right time. During 2019 we have explored opportunities to work more closely with partner organisations. We formed the RICL Ageing Research Collaborative which brings

together senior researchers from the Royal United Hospital NHS Trust, University of Bath, University of Bristol and the University of the West of England. The Collaborative will work together to develop and undertake innovative research into older people conditions. The RICE Centre will be the research hub for the Collaborative and working with its members we will seek to maximise our expertise and our facilities in a way that enhances our impact, is cost effective and preserves our independent charitable status.

Our priorities for 2020 onwards are:

To deliver high quality memory clinic services for Bath and North East Somerset which puts patients and their carers at the heart of the services. Our memory clinic service provides assessment and diagnosis for patients with memory problems thought to be demential related. We will continue to help patients to live as well and as independently as possible for as long as possible. We will offer additional support through Cognitive Stimulation Therapy courses, Living Well with Dementia courses (LivDem), occupational therapy and music therapy to help ensure post diagnostic support. We will provide space in our clinics to collaborate with a number. of organisations who provide wider support and advice including the Alzheimer's Society Dementia. Support Workers, the Carers' Centre and Curo's Independent Living Service. We will offer education for family members and carers through our Carer's Courses, and continue to offer educational opportunities to GPs and other health. and social care professionals. All those activities enable us to greatly enhance the level of care and support that we provide in comparison to standard NHS memory clinics.

To increase our clinical trials and research activities with a particular focus on thinking clearly, moving well, staying strong - dementia, Parkinson's disease, and muscle and bone health. We will align our memory clinic services with

Administration of the Control of the

clinical trials and research activities. All patients who attend the clinic will be offered the opportunity to take part in research where there is a project which is suitable for them. We will continue to be actively involved in trials of novel treatments for demontia and its symptoms as well explore wider research into care of people living with dementia, medication management and multiple health diagnoses. There will be an increasing emphasis ดก addressing the development of memory and related problems in apparently healthy older people as well as those with milder memory problems that can be a presage to more serious problems such as dementia. We hope that this will potentially lead to the development of treatments that can be used before people develop more serious problems and either delay or prevent people going on to having a dementia. We will also host projects including a trial of a memory drug to help prevent falls in people with Parkinson's disease and a trial of a new integrated model of care for Parkinson's disease. Poor muscle and bone health are much more common in people with dementia and some of our own research has already highlighted that there is significant under-diagnosis and undertreatment of fracture risk in our patients. We will therefore host projects looking at conditions such as osteoporosis and the links between muscle and bone health with falls and dementia. Finally, we will also seek to increase the amount of and attract more funding for PhD activities to support this expansion in our clinical trials and research activities.

To improve our business planning and operational agility. We will ensure robust financial stewardship through strong financial planning in the short, medium and long term. We will seek to achieve sustainable growth across the lifetime of the strategy 2020-2024 which will include as much as possible a focus on full cost recovery and on achieving a more diverse mix of income across our income streams. This will

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include reviewing the costs associated with our memory clinic services and clinical trials, developing a pipeline of clinical trials and research establishing 6 formal legacies projects, programme and achieving our £1.23million DementiaPlus Appeal target. We will generate more income from renting out our conference and meeting rooms and vacant office and research space. We will ensure that we have the right mix of expertise to deliver on our ambitions by being agile in our approach to staff recruitment and partnership working. Where it makes sense to do so we will seek to make joint appointments, make use of more fixed-term contracts and offer more learning and volunteering opportunities. We will also improve our support to our permanent staff. team and implement succession plans for key senior staff. We will invest in new technology and IT where it will offer significant efficiencies and improvements in our operations.

To contribute to clinical and research knowledge and grow owareness of RICE. We will actively attend conferences and seminars, present posters and other presentations and will publish and/or contribute to peer-reviewed publications including in journals. We will use social media and an enhanced online presence to increase public awareness of RICE and our work and to increase our reach.

To be a listening and learning organisation. We will place patients, their families and carers at the centre of our work and seek their feedback on how we are doing. We will listen to our staff, invite their input and opinions, and value them and their wellbeing. We will encourage and support all our staff to pursue opportunities for learning and development and to share their learning and knowledge with the wider team. We will regular assess and review risks to RICE across all our activities. Finally, we will take a systematic approach to measuring and evidencing the impact of our work and the new strategy.

The 2020 coronavirus pandemic

Sadly, our future plans have been, and will continue to be, impacted by the coronavirus pandemic and measures to control its transmission. The need to accommodate social distancing rules and meet our obligations to be a Covid-19 secure environment will require RICE to redesign some of its ways of working before activity can safely resume. Throughout the pandemic Trustees have monitored the impact of coronavirus on RICE's operations and its plans for the foreseeable future. The impact will continue to be monitored and assessed in the coming months and robust action will be taken to ensure RICE's long term viability.

Steps already undertaken to mitigate the impact of the pandemic include making use of government support such as the VAT deferral scheme and the job retention scheme, redeploying RICE staff to the Royal United Hospital to help with efforts there, and stopping all expenditure where it has been possible to do so. RICE is planning to explore alternative forms of fundraising to increase its income, identify opportunities for closer working and collaboration with partner organisations, and to review again its strategy and operations for the foreseeable future. If these mitigating actions are not enough then, if necessary, RICE may have to explore further cost cutting measures.

Governance

Legal Status

Our governance structure is defined in our Articles of Association incorporated on 17 October 1994, as amended by special resolution of the Members dated 9 November 2017. RICE Trustees are our Members.

RICE is:

- A Charity registered with the UK Charity Commission (Charity Number 1042559)
- A Company limited by Guarantee registered at Companies House (Company 02979617)
- A provider of NHS memory clinic service under sub-contract of Virgin Care NHS prime provider NHS contract
- A provider of research activities under specific research contracts with Universities, NHS organisations, UK research bodies and commercial companies

As such we are regulated under company law, charity law and healthcare law, and we must also meet contractual protocols and reporting requirements of individual funders of research projects and trials.

Governance structure

RICE was governed during 2019 by a Board of Trustees (the Board). Trustees were supported by the RICE Director; and the Chief Operating Officer until June 2019.

The Trustees are responsible for our governance and for the strategic direction and oversight of our activities. They ensure the charity operates in line with our objects and public benefit responsibilities, meets our financial and legal obligations and manages and mitigates risk. Dayto-day operational management is delegated to the RICE Director and his team.

The Board meets four times a year. There are also three sub-committees:

- Finance and Audit Committee, established in October 2015. Chaired by α financial Trustee, it meets four times a year.
- Care and Research Governance Committee, which was formally established as a committee in May 2017. Chaired by a clinical practice Trustee, it meets twice a year.
- Remuneration Committee, which meets annually in the spring, chaired by the Chair of the Board.

External auditors are engaged to review the Charity Annual Accounts and Annual Report. They present their findings directly to the Finance and Audit Committee who report it directly to the Board Trustees. In 2019 RICE liquidated the entirety of its investments to free up working capital for the attic conversion project and ongoing operations. Any future investments which RICE will hold and the advice required to manage the investments will be reviewed in 2020.

Review and Learning

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Trustees completed a baseline self-assessment in 2013, and in 2019 to track progress of the revised governance structure introduced in 2016. The self-assessment will be repeated in 2021.

Trustees

Our Articles allow for a minimum of 6 and a maximum of 12 Trustees. In 2019 RICE had 9 appointed Trustees, who are listed under 'General Information'.

Trustees have all been appointed on the basis of their personal and professional expertise. Together the Trustees act independently of any other connections they have, and do not hold their trusteeships as representatives of other organisations or interests. This means that the Trustees are free to act within the best interests of the charity and its beneficiaries. They bring a

breadth and depth of leadership experience directly related to our charitable objects, governance needs and research credentials. Their particular areas of expertise cover medical and clinical practice, clinical and academic research, finance, law, fundraising, media and communications, charity management and strategic and organisational management.

Prospective Trustees are identified through recommendation and/or personal introduction, specifically for their professional personal knowledge in the areas of expertise sought at the time of a vacancy. They are invited to meet with the Chair and Director and to observe a meeting of the Board and meet Trustees as part of their recruitment process. Appointments are made formally at the First Meeting each year (in January), and in the interim new Trustees are coopted onto the Board.

All trustees are required to undergo Disclosure and Barring Service (DBS) clearance and must meet eligibility criteria to serve as a charity trustee. Every Trustee is asked to sign a declaration of eligibility and a declaration of interests on appointment and annually at the First Meeting thereafter. Trustees must also ensure that any conflicts of interest are notified to the Board.

Trustee terms of office

Trustees are normally able to serve, and be eligible for re-election, for consecutive periods not exceeding in aggregate 15 years from the date of their first appointment. Our Articles also allow for a limited consideration of further extension in particular circumstances, to be agreed by written Special Resolution.

Trustee training and development

Once appointed all Trustees receive a copy of the RICE Trustee Handbook, which was developed in

2016 and is updated annually, and a tailored induction to the RICE and its operations.

At an away-day in September 2019 Trustoes and the Senior Management Team (SMT) were briefed on changes and developments in charity regulation and best practice during the year, the implications for RICE and actions taken or needed.

Risk Management

The Board of Trustees is responsible for identifying, managing and reporting risk for the charity. Arrangements in place are:

- · A risk management policy
- A risk register, which reviews risks by their likelihood and severity, identifies controls and actions to manage them appropriately and nominates a risk owner who is best able to manage the risk and who is responsible for ensuring that controls are in place and appropriate actions are taken
- A 6-monthly review of key risks by the Board

During 2019 measures were prioritised to reduce those risks scored as high throughout 2019 these had been reduced to no higher than medium.

Director and Senior Management Team

The Board has delegated authority to the RICE Director for the day-to-day management of the Charity. The Director is assisted by a small Senior Management Team of both clinical and charity professionals. The Chair of Trustees is responsible for the appraisal and performance management of the Director.

The RICE Consultant Geriatrician has taken on additional responsibilities as Deputy Director from January 2019, working closely with the Director. Progressing RICE's research and clinical activities. After the resignation of the Chief Operating Officer in June 2019 it was decided to re-structure the senior management team and not to recruit to this role.

RICE Staff

During 2019, RICE employed 23 people on full or part-time contracts. All our staff are recruited in line with the RICE recruitment policy which follows NHS safe recruitment guidelines. They receive an annual appraisal in line with RICE Induction, probation and performance management policy and guidelines.

We are proud of the reputation of our staff and their caring and compassionate ethos. As an organisation RICE promotes a healthy and balanced lifestyle and we recognise our staff are our greatest asset. We place a high value in creating an inclusive, healthy and safe working environment where people feel valued and in which all individuals have the opportunity to contribute to their full potential. We place health and wellbeing at the centre of the organisation and see the direct value of a healthy workforce in contributing to improved quality of patient care, increased confidence of staff to engage in conversations with patients about healthier lifestyles, good staff morale and motivation, good retention rates and reduced absence-related costs.

All our staff are based within one building in Bath, which facilitates an easy and informal style of communication. More formal communication occurs through staff meetings; a weekly journal club to share research knowledge and experience; weekly clinic meetings to review the operation of the memory clinic; and general communications meetings. An internal staff and trustee bulletin is circulated every fortnight to highlight clinic news and research activities, regulatory and other business updates and staff and fundraising updates of interest across the organisation.

RICE has monthly educational meetings with the Older People's Unit of the Royal United Hospital to share clinical learning, and meets regularly with the radiologist team to discuss brain scans and imaging.

Patron and Vice-President

We take this opportunity to thank our Patron Lady Pratchett and our Vice-Presidents Sir Tony Robinson, Professor Gordon Wilcock, Dr Bruno Bubna Kasteliz and the Rt Hon John Jolliffe for their continued support of our work.

Trustee's responsibilities in relation to the financial statements

Company law requires the Trustees to prepare financial statements that give a true and fair view of the state of affairs of the charity at the end of the financial year and of its surplus or deficit for the financial year. In doing so the Trustees are required to:

- Select suitable accounting policies and then apply them consistently.
- Make sound judgements and estimates that are reasonable and prudent.
- Prepare the financial statements on the goingconcern basis unless it is inappropriate to presume that the charity will continue in business.

The Trustees are responsible for maintaining proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and enables them to ensure that the financial statements comply with the Companies Act 2006. The Trustees are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In accordance with company law, as the company's directors, we certify that:

 So far as we are aware, there is no relevant audit information of which the company's auditors are unaware. As the directors of the company we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

Subsequent events disclosure

On 31 January 2020 the World Health Organisation announced a global health emergency in relation to the coronavirus. The coronavirus pandemic is having a major economic impact around the world and in the UK where RICE's activities are conducted.

As the scale of the outbreak occurred after the year end the Trustees consider this to be a non-adjusting post balance sheet event.

At the time of writing the government have introduced a number of measures to support organisations and lenders are also offering support.

The Board of Trustees have remodelled and reviewed cashflow forecasts and where relevant are taking measures to reduce the potential impact of falling income by reducing and deferring costs.

The full impact of the pandemic is not yet known but the Trustees consider the revised plan to be sufficiently robust to allow RICE to trade through this situation and for the going concern basis to remain an appropriate basis on which to draw up these financial statements.

On hehalf of the board of trustees.

Dr Chris Dyer, Chain

General information

As at 31 December 2019

RICE is a registered charity in England and Wales and a registered company limited by guarantee.

REGISTERED CHARITY

1042559

REGISTERED COMPANY

2979617

PRINCIPAL ADDRESS AND REGISTERED OFFICE

The RICE Centre Royal United Hospital Bath, BA1 3NG

PATRON

Lady Pratchett

VIÇE PRESIDENTS.

Sir Tony Robinson Professor Gordon Wilcock Dr Bruno Bubna-Kasteliz Rt Hon John Jolliffe

YRUSTEES

The following Trustees, who are also Directors of the Company, served on the Board of Trustees throughout 2019, except as noted (App-appointed, Res-resigned):

Dr C Dyer - Chair

Professor K A Edge

Dr Matt Jelley

Mr lan Turner

Mrs Mary Lewis (Res 14.11.2019)

Mr Ben Jones

Mr Ian Bell (Res 19.09.2019)

Mr Chris Head

Dr Robin Fackrell

KEY PERSONNEL

Professor Roy Jones, RICE Director Dr Tomas Welsh, Deputy Director

Helen Horn, Chief Operating Officer (Res 13.06.2019)

SOLICITORS	PRINCIPAL BANKERS	AUDITORS
Stone King LLP	Barclays Bank	Moore
13 Queen Square	4-5 Southgate Street	30 Gay Street
Bath	Bath	Bath
BA1 2HJ	BA1 1AQ	8A1 2PA

INVESTMENT ADVISORS: Tilney Asset Management Services Ltd, 6 Chesterfield Gardens, Mayfair, London, W1J 5BQ (up to May 2019)

independent auditor's report to the Members of RICE

Opinion

We have audited the financial statements of RICE – The Research Institute for the Care of Older People (the 'charitable company') for the year ended 31 December 2019 which comprise the Statement of financial activities, Balance Sheet, Cash flow statement and notes to the financial statements, including a summary of 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 charitable company's affairs as at 31 December 2019 and of its 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; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

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 charitable company 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 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 audit opinion.

Conclusions relating to going concern We have nothing to report in respect of the following matters in which the ISAs (UK) require us to report to you where:

- the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate, or
- the Trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The Trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. 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.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially

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inconsistent with the financial statements or our knowledge obtained in 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 there is a material misstatement in the financial statements or a material misstatement of the other information. 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 for the financial year for
 which the financial statements are
 prepared is consistent with the financial
 statements; and
- Trustees Annual 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 charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees Annual Report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate and sufficient accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the 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 Trustees' responsibilities Statement, the Trustees (who are also the directors of the 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 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 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

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.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Councils website at: www.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. Our audit work has been undertaken so that we might state to the charitable company's members and the charity's Trustees 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, the charitable company's members as a body, and its Trustees as a body, for our audit work, for this report, or for the opinions we have formed.

A R.

Mark Powell (Senior Statutory Auditor)
For and on behalf of Moore
30 Gay Street
Bath
BA1 2PA

Date: 29/9/2020

Statement of financial activities

for the year ended 31 December 2019

		Unrestricted funds	Restricted funds	Total funds 2019	Total funds 2018
	Notes	f	£	€	<u>e</u>
INCOME FROM					
Donations and legacies	1	95,973	-	95,973	41,834
Fundraising activities	2	157,186	/4,199	231,385	305,530
Investments	3	1,273	-	1,273	998
Charitable activities - Research and clinical activity	4	573,494	135,026	708,520	608,964
TOTAL INCOME		827,926	209,225	1,037,151	957,326
EXPENDITURE ON Raising funds Charitable activities - Research and clinical activity	5 5	80,750 509,858	- 505,433	80,750 1,015,291	96,220 926,774
TOTAL EXPENDITURE		590,608	505,433	1,096,041	1,022,994
Net Gains/(Losses) on Investments	10	37,841	·	37,841	(23,036)
NET INCOME/EXPENDITUR	₹E	275,159	(296,208)	(21,049)	(88,704)
Transfers between funds in the year	1	(222,653)	222,653		
NET MOVEMENT IN FUND	s	52,506	(73,555)	(21,049)	(88,704)
Reconciliation of funds: TOTAL FUNDS at 1 January 2019	,	478,1 38	1,430,182	1,968,320	2,057,024
TOTAL FUNDS at 31 December 2019		530,644	1,416,627	1,947,271	1,968,32 0
The notes on pages 33 to 44	form par	t of these account	S.		

Balance sheet

at 31 December 2019

		2019	2018
	Note	£	£
Fixed assets			
Tangible fixed assots - property (restricted)	9a	1,324,955	1,149,035
Tangible fixed assets - equipment	9a	5,666	6,641
Intangible fixed assets - website	9b	7,064	-
Investments	10	<u> </u>	391,350
		1,337,685	1,547,026
Current assets			
Debtors	11	254,062	410,293
Cash at bank and in hand		465,684	209,625
		719,746	619,918
Creditors			
Amounts falling due within one year	12	110,160	198,624
Net current assets	a na sanga Santalah kabupatèn	and a second	
		609,586	421,794
Net assets			
		1,947,271	1,968,320
Funds		and the second s	
Unrestricted funds - designated	14	-	25,000
Unrestricted funds - general	14	530,644	147,678
Unrestricted funds - revaluation fund	14		305,460
		530,644	478,138
Restricted funds	13/14	1,416,627	1,490,182
Total funds		1,947,271	1,968,320

The Financial Statements and notes set out on pages 33 to 44 have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and were approved by Trustees on 24 September 2020 and were signed on behalf of the Trustees by:

Dr Chris Over, Chair

Company registered number: 2979617

Cash Flow Statement

for the year ended 31 December 2019

		Total funds 2019	Total funds 2018
	Notes	£	£
Statement of Cash Flows Cash flows from operating activities: Net cash provided by (used in) operating activities	See below	43,279	(122,345)
Cash flows from investing activities:			
Purchase of equipment and building	9	(216,411)	(7,086)
Investment income received		37,841	-
Investment income relinvested		(37,841)	-
Cash withdrawn from investments		429,191	-
Change in cash and cash equivalents in year		256,059	(129,431)
Cash and cash equivalents at 1 January 2019	•	209,625	339,036
Cash and cash equivalents at 31 December 2019		465,684	209,625
		······································	
Reconcile net income/(expenditure) from operating activities			
Net income/{expenditure} for year Adjustments for:	SOFA	(21,049)	(88,704)
Depreciation charges	9	34,402	33,023
(Gains)/Losses on investments	20	(37,841)	23,036
(Increase)/Decrease in debtors	11	156,231	(178,226)
Increase/(Decrease) in creditors	12	(88,464)	88,526
Net cash provided by (used in) operating activities		43,279	(122,345)

Analysis of changes in Net Debt

for the year ended 31 December 2019

	1		31
	January	Cash	December
	2019	flows	2019
Cash	209,625	256,059	465,684
		256,059	
Total	209,625	256,059	465,684

Accounting Policies

For the year ended 31 December 2019

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) (effective 1 January 2015) – (Charities 50RP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The Charity is a company limited by guarantee. The company registration number is 2979617 and it is registered as a charity in England & Wafes, charity number 1042559. The company's functional and presentation currency is the pound sterling. Amounts include in the financial statements are rounded to the nearest whole pound.

The principal accounting policies adopted by the Charity in drawing up its Financial Statements are as follows:

a) INCOMING RESOURCES

Donations

Voluntary income received by way of donations and gifts is included in full in the SOFA when receivable. The value of services provided by volunteers has not been included.

Grants and fees

Grants and fees for contracts are recognised in full in the SOFA in the year in which they are receivable.

When donors specify that donations or grants are for a particular restricted purpose, this income is included in incoming resources of restricted funds when receivable.

Income is recognised on clinical studies based on the date of the patient visit and has been accrued where appropriate into the SOFA to reflect this. Income which was received in 2019 but related to 2020 has been deferred accordingly.

Logacies

Legacies are included when the charity is advised by the personal representative of an estate that payment will be made or property transferred and the amount involved can be quantified.

investment income

Investment income is accounted for in the period in which the charity is entitled to receipt.

b) RESOURCES EXPENDED

Resources expended are recognised in the period in which they are incurred. Resources expended include attributable VAI which cannot be recovered.

General overheads

Resources expended are allocated to the particular activity where the cost is clearly identifiable as relating to that activity. General overheads and support costs are apportioned to activities in proportion to the number of staff in each area of activity.

Operating leases

Rentals payable under operating leases are charged to the SOFA as incurred over the term of the lease.

c) TANGIBLE FIXED ASSETS AND DEPRECIATION

Depreciation is calculated to write down the cost of fixed assets over their expected useful lives, on the following basis:

- Leasehold land and buildings 2% straight line and 2.5% straight line for attic additions
- Research equipment 25% straight line
- Office equipment 25% straight line

d) INVESTMENTS

The investments held by the Charity are stated at their open market value at the balance sheet date. Gains and losses on disposal and revaluation of investments are credited or charged to the Statement of Financial Activities

e) PENSION COSTS

Pension costs are charged on the basis of amounts due for the year (see note 16).

f) FUNDS ACCOUNTING

Funds held by the charity are:

Unrestricted general funds – these are funds which can be used in accordance with the charitable purposes at the discretion of the Trustees.

Designated funds – these are a portion of the unrestricted funds that have been set aside for a particular purpose by the Trustees.

Restricted funds – these are funds that can only be used for particular restricted purposes within the purposes of the charity. Restrictions arise when specified by the donor or when funds are secured for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the Notes to the Financial Statements (see note 13).

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Notes to the Financial Statements

for the year ended 31 December 2019

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	Unrestricted funds	Restricted funds	Total funds 2019	Total funds 2018
	£	£	£	£
Donations	35,130	-	35,130	27,910
Gifts in Memoriam	26,157		26,157	7,467
Corporate Donations	1,577	-	1,577	1,520
Legacies	33,110	-	33,110	4,937
	95,974		95,974	41,834

2. Fundraising income

	Unrestricted funds	Restricted funds	Total funds 2019	Total funds 2018
	f.	Ε	£	£
Charitable Trusts	142,337	42,693	185,030	90,702
Newsletter	3,527	-	3,527	5,544
Other Fundraising	8.810		8,810	38,329
DementiaPlus Appeal		31,506	31,506	16 6 ,461
Other income	2,512	-	2,512	4,494
	157,186	74,199	231,385	305,530

3. Investment income			residente de la companya de la comp La companya de la companya de	
	Unrestricted funds	Restricted funds	Total funds 2019	Total funds 2018
Bank interest	1,273		1,273	998
	1,273		1,273	998

4. Research and clinical activities			North Color	
	Unrestricted funds	Restricted funds	Total funds 2019	Total funds 2018
Research	307,182	-	307,182	287,292
Academic grant	23,253	135,026	158,279	82,792
Memory clinic	243,059	-	243,059	238,880
	57 3,494	135,02 6	708,520	608,964

5. Total resources exp	ended	naki nazio ya wazi y				
	Direct staff costs	Allocated staff cost	Other direct costs	General support costs	Total 2019	Total 2018
	£	£	£	£	£	f.
Fundraising costs	41,328	15,495	10,028	12,899	80,750	96,220
Charitable activities						
Research and clinical activities	488,152	180,392	205,682	141,065	1,015,291	926,774
	529,480	196,887	215,710	153,964	1,096,041	1,022,994

Direct expenditure has been allocated to the appropriate activity. Restricted depreciation is charged directly to charitable activities. Indirect staff costs and general support costs have been allocated to activities in accordance with accounting policies note bl. General support costs for the year ended 31 December 2019 are made up as follows:

	2019	2018
	£	£
Recruitment and training	5,156	8,766
Rent	14,772	14,772
Heat and Light	6,309	6,191
Repairs and Renewals	5,238	5,608
IT and Website	1,894	1,314
Premises Exponses	23,225	22,171
Equipment Hire and Maintenance	4,965	5,436
Cleaning	10,499	8,025
Printing, Postage and Stationery	2,105	3,398
Telephone	2,823	3,528
Insurance	26,249	25,026
Legal, Professional and Building fees	19,526	623
Subscriptions	1,880	2,576
Other overhead costs	1,870	8,496
Bank Charges	237	164
Irrecoverable VAT	20,834	3,504
Depreciation (unrestricted assets)	1,882	1,620
Governance costs .	4,500	4,280
Total	153,964	125,488

6. Trustees' remuneration and related parties

The Trustees neither received nor waived any remuneration or banefits during the year (2018 - £Nil).

No expenses were reimbursed to the Trustees during the year (2018 - £Nil).

There were no related party transactions in the year (2018 - ENil)

7. Staff costs		
	2019	2018
	£	C
Wages and salaries	657,361	703,195
Employers' national insurance	50,147	53,017
Pension costs	18,859	14,210
	726,367	770,422

One employee earned more than £60,000 in the year. The remuneration was in the £70,001 to £80,000 band. Pension costs in respect of this employee was £Nil (2018 - £Nil).

Key management personnel include the Director and Chief Operating Officer.

Staff costs of key personnel were as follows:

	2019	2018
	£	£
Wages and salaries	90,208	124,428
Employers' national insurance	10,676	14,864
Pension costs	926	1,075
	101,810	140,367

The average number of employees, based on full-time equivalents and analyses by function, was:

	2019	2018
Research and clinical activities	12	13
Management and administration	4	5
Total	16	18

8. Net movement in funds

The net movement in funds is stated after charging.

	2019	2018
	£	€.
Depreciation (unrestricted)	1,882	1,620
Depreciation (restricted fund assets, including RICE Centre)	32,520	31,403
Auditors' remuneration	4,500	4,200
Operating lease rentals - leasehold land and buildings	14,772	14,772
Operating lease rentals - equipment	2;211	3,637

9a. Tangible fixed assets

	Leasehold Premises	Office Equipment	Research Equipment	Total
	£	£	£	£
Cost		_	. –	
At 1 January 2019	1,510,913	167,727	109,244	1,787,884
Additions	207,220	-	2,127	209,347
At 31 December 2019	1,718,133	167,727	111,371	1,997,231
Depreciation At 1 January 2019 Charge for year	361,878 31,300	1 66 ,537 1,190	103,793 1,912	632,208 34,402
At 31 December 2039	393,178	167,727	105,705	666,610
Net book value				
At 31 December 2019	1,324,955	-	5, 666	1,303,621
At 31 December 2018	1,149,035	1,190	5,451	1,155,676

As a result of RICE's investment in relocating to a new site in 2008, there is a significant annual depreciation charge on property restricted assets that is included in the Statement of Financial Activities each year as resources expended on restricted funds. Additionally, in 2019, RICE completed its attic conversion work which resulted in additional depreciation charges on property restricted assets and which is being accounted for in the same way as the existing property restricted asset. The total property depreciation charge amounted to £31,300 in the year ended 31 December 2019 (2018 - £30,488.) The annual depreciation charge reduces the value of the restricted fund asset in the Balance Sheet as in note (c) of the Accounting Policies.

9b. Intangible fixed assets

	Website	Total
	£	£
Cost		
At 1 January 2019	-	
Additions	7,064	7,064
At 31 December 2019	7,064	7,064
Depreciation		
At 1 January 2019	-	
Charge for year	-	-
At 31 December 2019	-	-
Net book value		
At 31 December 2019	7,064	7,064
At 31 December 2018	-	•

10. Fixed assets - Investments 2019 2018 £ £ Market value at 1 January 2019 391,350 414,386 Additions during the year - reinvested income Realised and unrealised investment losses/gains 37,841 {23,036} Withdrawals {429,191} Market value at 31 December 7019 391,350 108,926 Historical cost at 31 December 2019

All the investment funds were held in UK Unit Trusts or Open Ended Investment Companies and were managed by external investment advisors.

11. Debtors – amounts falling due within one year

	2019	2018
	£	E
Research grants and other trade debtors	46,203	72,135
Accrued Legacy income	30,610	4,937
Other debtors and accrued income	177,249	333,221
	254,062	410,293

12. Creditors – amounts falling due within one year

	2019	2018
	£	£
Trade creditors	24,664	43,509
Other creditors and accruals	16,169	65,438
Taxation and national insurance	55 ,529	41,449
Grants received in advance	13,798	48,228
	110,160	198,624

The movement in Grants received in advance during the year ended 31 December 2019 is as follows:

	£	
Balance at 1 January 2019	48,228	
Grants released during year	(40,728)	
Grants received during year	6,298	_
Balance at 31 December 2018	13,798	

13a. Restricted funds 01-Jan Incoming Resources Transfers 31-Dec 2019 2019 Resources Expended É Ē £ £ REVENUE FUNDS IDEAL (Exeter) 2,234 2,234 Dementia PlusAppeal (DP Appeal) 285,760 31,506 232,018 85,248 OP Appeal - St John's Hospital 44,521 -44,521 11,500 11,500 Support Services (Courses) -The Roper Camily Charitable Trust 19,610 19,610 Dementia Volunteer Project 8,000 8,000 Essex Trust - Music Therapy 30,000 30,000 Project 124,792 124,792 PrAISED2 Project CAPITAL FUNDS The RICE Centre - building 1,133,602 31,300 222,653 1,324,955 ECG Machine - Medlock Charitable Trust and James Tudor 6,689 1,293 5,396 Trust 1,028 165 Resus Trolley - Novia Foundation 1,193

1,490,182

The purpose of each fund is as follows:

REWEAL	IE	IMDG.

Total

KEVENUE FUNDS:	
IDEAL (Exeter)	To study patients with domentia and their family carers, aiming to improve the experience of dementia and enhance an active life
Dementia PlusAppeal (DP Appeal)	To fund the expansion of RICE research programme and the RICE Centre
DP Appeal - Medlock Charitable Trust	To contribute towards the expansion of RICE research programme
DP Appeal - St John's Hospital	To fund expansion of the RICE Centre
Support Services (Courses)	To support patients and carers through the provision of Cognitive Stimulation Therapy, Post Diagnostic Support and Carers Courses
The Roper Family Charitable Trust	To fund the strategic development of senior staff at RICE
Dementis Volunteer Project	To evaluate the impact of the Dementia Volunteer Project at the Royal United Hospital
Essex Trust - Music Therapy Project	To fund development of a new music therapy programme for patients with dementia
PrAISED2 Project	To study activity, independence and stability in patients with early dementle and mild cognitive impairment

209,225

505,433

222,653

1,416,627

CAPITAL FUNDS:

The RICE Centre - building To fund the construction of the new RICE Centre (2008) and attic

conversion (2019)

The RICE Centre - equipment To fund the fittings and research equipment at the new RICE Centre

ECG Machine - Mediock Charitable Trust — To fund the purchase of a new ECG machine at the RICE Centre

& James Tudor Trust

Resus Frolley - Novia Foundation To fund the purchase of a new Resus Trolley at the RICE Centre

13b. Comparative restric	ted funds		1985 - 1985 - 1986 1986 - 1986 - 1986 - 1986		
	01 -fan	Incoming	Resources	Transfers	31 Dec
	2018	Resources	Expended		2018
	Ē	£	£	£	£
REVENUE FUNDS					
IDEAL (Exeter)	-	14,805	14,805	-	-
Designability	-	3,356	3,356	-	
Dementja Research Outreach Project	-	27,754	27,754	-	-
Dementia PlusAppeal (DP Appeal)	49,299	236,461	-	-	285,760
OP Appeai - Medlock Charitable Trust	26,393	-	26,393		-
DP Appeal - St John's Hospital	45,061		540	-	44,521
Support Services (Courses)	2,600	2,000	4,600	-	-
The Roper Family Charitable Trust	81,753	· -	62,153	-	19,610
Dementia Volunteer Project	-	22,000	22.000		
Essex Trust - Music Therapy Project	-	7,500	7,500	-	-
PrAISED2 Project		4,700	4,700	-	-
CAPITAL FUNDS					
The RICE Centre - building	1,164,090	-	30,488	-	1,133,602
ECG Machine - Medlock					
Charitable Trust and James Tudor Trust	3,802	3,802	915	•	6,689
Total	1,373,008	322,378	205,204	-	1,490,182

14. Analysis of net assets between funds

	Tangible Fixed Assets	Other Net Assets	Total funds 2019
	£	₹	£
REVENUE FUNDS			
Dementia Plus Appeal (DP Appeal)		85,248	85,248
DP Appeal – St John's Hospital		-	-
The Roper Family Charitable Trust	-	-	
CAPITAL FUNDS			
The RICE Centre - building	1,324,955	-	1,324,9 55
ECG Machine - Medlock Charitable Trust & James Tudor Trust	2,740	2,656	5,396
Resus Trolley - Novia Foundation	1,028	-	1,028
Total Restricted Funds	1,328,723	87,904	1,416,627
Unrestricted Funds - designated	-	-	-
Unrestricted Funds - general	8,962	521,682	530,644
Unrestricted Funds revaluation fund	-	-	-
Total Unrestricted Funds	8,962	521,682	530,644
Total Funds	1,337,685	609,586	1,947,271

A designated fund of £100,000 was set aside from general reserves by Trustees in 2013 to fund future organisational developments at RICE and the implementation of the RICE Strategic Plan for expansion and development of RICE's work. £75,000 of this designated fund was spent in 2018 and the remaining £25,000 was spent in 2019.

The revaluation fund represented the total unrealised gains and losses in the investment portfolio held by RICE at 31 December 2019, as per note 10 of the accounts. This fund was closed during 2019 as the investments were liquidated to release working capital to cover the cost of the attic conversion project and ongoing operations.

15. Commitments under operating leases

The Trust has annual commitments under non-cancellable operating leases as follows.

Other than Land and Buildings	2019	2018
	£	£
Due within 1 year	2,760	2,760
Due within 2-5 years	5,520	8,280
	8,280	11,040
Leasehold Land and Buildings	2019	2018
(99 year lease on land)	E	£
Due within 1 year	14,772	14,772
Due within 2-5 years	59,088	59,088
Due after 5 years	1,225,076	1,240,848
	1,299,936	1,314,708

16. Pension scheme

RICE operates defined contribution pension schemes for its employees and the assets are held and managed independently from the charity. The pension costs disclosed in Note 7 represent contributions payable for the year. At 31 December 2019, there were outstanding pension contributions of £67.62 (2018 – ENII)

Notes to the Financial Statements [continued] 17. Comparative statement of financial activities for year ended 31 December 2018

		Unrestricted funds	Restricted funds	Total funds 2018
	Notes	ľ.	£	£
INCOME FROM				
Donations and legacies	1	41,834		41,834
Fundraising activities	2	55,767	249,763	305,530
Investments	3	998	-	998
Charitable activities - Research and clinical activity	4	535,349	72,615	608,964
TOTAL INCOME		634,948	322,378	957,326
EXPENDITURE ON Raising funds Charitable activities - Research and clinical activity	5	96,220 721,570	- 205,204	96,220 926,774
TOTAL EXPENDITURE		817,790	205,204	1,022,994
Net Gains/(Losses) on Investments	10	(23, 036)	-	(23,036)
NET INCOME/EXPENDITURE Transfers between funds in	:	(205,878)	117,174	(88,704)
NET MOVEMENT IN FUNDS		(205,878)	117,174	(88,704)
Reconciliation of funds: TOTAL FUNDS at 1 January 2018		684,016	1,373,008	2,057,024
TOTAL FUNOS at 31 December 2018		478, 138	1,490,182	1,968,320

18. Subsequent events disclosure

On 31 January 2020 the World Health Organisation announced a global health emergency in relation to the coronavirus. The coronavirus pandemic is having a major economic impact around the world and in the UK where RICE's activities are conducted.

As the scale of the outbreak occurred after the year end the Trustees consider this to be a non-adjusting post balance sheet event.

At the time of writing the government have introduced a number of measures to support organisations and lenders are also offering support.

The Board of Trustees have remodelled and reviewed cashflow forecasts and where relevant are taking measures to reduce the potential impact of falling income by reducing and deferring costs.

The full impact of the pandemic is not yet known but the Trustees consider the revised plan to be sufficiently robust to allow RICE to trade through this situation and for the going concern basis to remain an appropriate basis on which to draw up these financial statements.