Registered number: 102700 Charity number: 7868

THE ALZHEIMER SOCIETY OF IRELAND (A company limited by guarantee and not having a share capital)

FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017

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THE ALZHEIMER SOCIETY OF IRELAND

(A company limited by guarantee and not having a share capital)

REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2017

Directors

Mr. John Clifford (Chairman)

Mr. David Fitzgerald

Ms. Mary Therese Gaughran

Mr. Donal Malone

Ms. Patricia Mc Parland (co-opted 30 January 2017, appointed 26 June 2017)

Mr. James Nevin Mr. Tom Noonan

Mr. Kieran McGowan (co-opted 18 December 2017)
Ms. Taragh O'Connor (co-opted 16 April 2018)
Mr. Ronan Smith (co-opted 18 December 2017)
Ms. Ann Twomey (co-opted 18 December 2017)

Company registered

number

102700

Charity registered

number

7868

Registered office

Temple Road Blackrock Dublin

Samantha Taylor (appointed 18 December 2017) Tommy Carroll (resigned 18 December 2017)

Chief executive officer

Pat McLoughlin

Independent auditor

Company secretary

RBK Business Advisers

Chartered Accountants & Statutory Audit Firm

Boole House

Beech Hill Office Campus

Beech Hill Road Clonskeagh Dublin 4

Bankers

Allied Irish Bank Blackrock

Co. Dublin

Permanent TSB Stillorgan

Co. Dublin

Principal Solicitors

T.P Robinson

24 Fitzwilliam Street Upper

Dublin 2

REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2017

Advisers (continued)

Audit and Risk Committee

Mr David Fitzgerald
Ms Taragh O' Connor

Mr Tom Noonan Mr Donal Malone

Governance Committee

Mr John Clifford Mr David Fitzgerald

Ms Mary Gaughran (Resigned 26 February 2018)

Mr Tom Noonan

Advocacy Committee

Mr John Clifford (Appointed 13 March 2017) Mr David Fitzgerald (Resigned 13 March 2017)

Ms Colette Kelleher

Ms. Cathy Reynolds (Appointed 16 April 2018)

Mr Ronan Smith

Mr. Kieran MGowan (Appointed 6 March 2018)

Ms Judy Williams

Ms Sabina Brennan (Appointed 24 April 2017)

Quality and Safety

Committee

Mr. James Nevin Ms Mary Gaughran Mr Bryan Smyth

Fundraising Advisory

Committee

Mr Tom Noonan Mr Pat Keogh

Ms Joanna Fitzpatrick (Appointed 30 January 2017)

Mr Ken Mahony

DIRECTORS' REPORT FOR THE YEAR ENDED 31 DECEMBER 2017

The Directors present their annual report together with the audited financial statements of the Alzheimer Society of Ireland ("the charity") for the year ended 31 December 2017. The Directors confirm that the Annual Report and financial statements of the company comply with the current statutory requirements, the requirements of the charity's governing document and the provisions of the Statement of Recommended Practice (SORP) and FRS 102 effective from 1 January 2015.

OBJECTIVES AND ACTIVITIES

Our Vision for Ireland

Our vision is an Ireland where people on the journey of dementia are valued and supported.

Our Mission

To advocate, empower and champion the rights of people living with dementia and their communities to quality support and services.

Principal Activities

- To provide information support and care services to those with alzheimer's disease and other types of dementia and to their families and carers.
- To be the voice of people with dementia and carers through advocacy and policy work.
- To promote and increase public awareness of alzheimer's and other dementias.
- To campaign for dementia specific services and supports for persons with dementia, their families and
- To work with the medical profession and all ancillary services in supporting people with dementia and their carers
- To support and collaborate with research in both medical and social aspects of alzheimer's disease and other dementias.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

STRATEGY 2018 - 2020

The World Health Organisation published a Global Action Plan on the Public Health Response to Dementia 2017-2025.

The vision of the plan is a world in which dementia is prevented and people with dementia and their carers can live well and receive the care and support they need to fulfil their potential with dignity, respect, autonomy and equality.

The plan sets out the challenge the world faces as the number of people with dementia is set to treble to 152 million people by 2050, it identifies seven action areas and targets to address this challenge.¹

The challenges identified by the WHO are relevant and applicable to Ireland as the facts below demonstrate. ASI's Strategic Plan 2018-2020 is informed by this global context as we seek to ensure that dementia is a public health priority in Ireland.

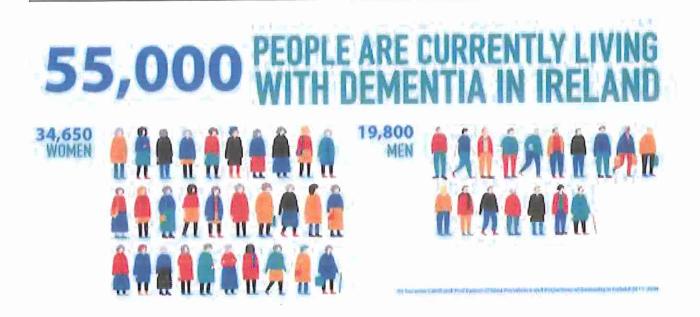
1.http://www.who.int/mental_health/neurology/dementia/action_plan_2017_2025/en/



Dementia in Ireland Today

- There are 55,000 people living with dementia in Ireland today and that number is expected to double over the next 20 years.
- Each year over 4,000 people develop dementia. That's at least 11 people every day and anyone can get dementia – even people in their 30's/40's/50's. 1 in 10 people diagnosed with dementia in Ireland is under 65.
- Dementia is progressive. There is currently no cure. Dementia is not simply a health issue but a social issue that requires a common response.
- · The majority of people with dementia (63%) live at home in the community.
- Over 180,000 people in Ireland are currently or have been carers for a family member or partner with dementia with many more providing support and care in other ways.
- The overall cost of dementia care in Ireland is just over €1.69 billion per annum, 48% of this is attributable
 to informal care provided by family & friends, which has no cost to the state. 43% is accounted for by
 residential care, while formal health and social care services (including home care) contribute for only 9%
 of the total cost.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017



ACHIEVEMENTS & PERFORMANCE - REVIEW OF ACTIVITIES

2017 marked the 35th anniversary of the foundation of the Alzheimer Society of Ireland in 1982. Today ASI provides 68% of all dementia specific services in Ireland and has made significant contributions campaigning and lobbying across a range of vital issues for people with dementia and their families.

2017 was notable for a number of reasons:

- ASI celebrated 35 years since its foundation in 1982 and held a conference which featured people from all
 parts of the organisation as we reflected on our history, our achievements and how we can strive to
 advocate for the rights and resources for people with dementia and their families and to promote and
 deliver quality and sustainable services and supports into the future, see page 20 for more.
- ASI also completed the development of our Strategic Plan 2018-2020. Directors committed to an extensive
 consultation process within and outside the organisation where people had an opportunity to express their
 view on our vision, mission, values, strengths, challenges and opportunities. This process delivered a
 unifying vision for ASI's future, see page 20 for more details.
- The financial results see ASI continue to stabilise our position (pages 30 53). We are very appreciative of the financial support we receive. However, ASI continues to face real challenges as outlined in our strategy review process. Challenges include the fact that ASI is not adequately resourced and is unable to meet its current and growing demand for services. The contribution from the state to fund our services remains at 72%, creating a worrying dependence on fundraising and client contributions which affects cash flow and long term sustainability for ASI.
- In addition, ASI has been unable to restore the public sector cuts to staff pay and benefits applied in 2010, this has resulted in the loss of key staff as ASI is unable to keep pace with the sector. ASI is committed to working with the HSE on this issue in 2018. (for further details see pg 19)
- In 2017, the range of dementia specific services provided by ASI included 52 Day care and 22 Home Care panels and 2 Respite Services, 8 Dementia Advisers, our National Helpline and Information Service, Mobile Information Service, 26 family carer training programmes and over 60 social

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

supports such as support groups, social clubs and Alzheimer Cafés. By the end of 2017 ASI had delivered in the year 827,430 hours through Day Care, Home Care and Respite Services. The Dementia Advisers worked with 1,532 new clients and the National Helpline was contacted by 5,294 people. See page 10-12.

- The Irish Dementia Working Group (IDWG), Dementia Carers Campaign Network (DCCN) and ASI staff and volunteers featured across national and local media and made presentations to the All Party Oireachtas Group on Dementia, the National Dementia Office, the European Parliament and many conferences in Ireland and Europe, all working to increase awareness and understanding of dementia and its impact (see pages 13-15)
- ASI partnered with the HSE to deliver the first ever mapping exercise to identify dementia specific
 community based services in Ireland. The exercise confirmed the significant gaps and inconsistency of
 the types of services available and ASI will move to mobilise support to deliver relevant and essential
 services nationally (pg 16)
- While ASI is very disappointed that our pre-budget submission did not result in specific funding in Budget 2018, we saw positive results in our lobbying efforts when government announced the provision of funding for a National Dementia Registry, the further development of Dementia Friendly Community Groups, the expansion of assistive technology libraries and the allocation of grants for post diagnostic supports for 800 people across 19 sites (see pg 13).
- ASI is committed to operating to high standards of governance and transparency, and in 2017 completed
 our journey to be compliant with the Governance Code. This is in addition to our compliance with The
 Statement of Guiding Principles for Fundraising and Statement of Recommended Practice or SORP, full
 details available on alzheimer.ie.

Key Achievements in 2017

Information, Awarness Raising and Advisory Services

National Helpline - 1800 341 341

Our National Helpline continued to provide a free, confidential, information and support service 6 days a week (Monday to Saturday). Staffed by advisers and volunteers the service had its busiest year since its establishment. 2017 is the first time the helpline exceeded 5,000 calls per annum, with 5,294 people contacting the service, a 6% increase on 2016. 3,097 (59%) contacted us because they are supporting a person living with dementia; including 84 people who have themselves received a diagnosis of dementia or mild cognitive impairment. 2017 also saw 713 people contacting us who were concerned about their own or a loved one's cognitive health, an increase of 17%. The increase is likely to be largely attributed to the 'Understand Together' media campaign across radio and T.V. see page 16.

Mobile Information Service

2017 marked the first full years roll out of the ASI Mobile Information Service. ASI greatly appreciates the funds provided by the Peggy Mangan Foundation towards developing the service. The foundation was set up by the family of Peggy Mangan who had Alzheimer's and died tragically when she went missing from her home while walking with her dog Casper.

The mobile service had 55 outings in 2017 across 19 counties. The service met people at community shows and events, shopping centres, hospitals and local health offices and supported awareness raising at local and national fund raising events.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

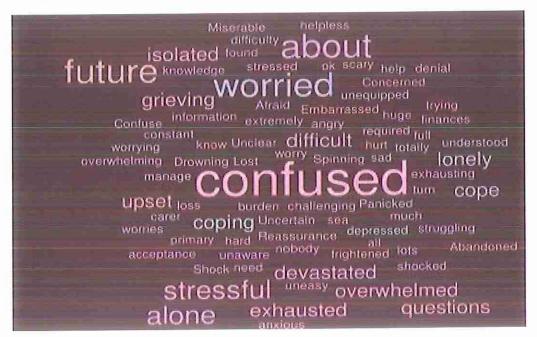


Dementia Advisers

The HSE agreed to fund our Dementia Advisor Service until such time as an external evaluation of the service has been carried out. This is due to be completed in 2018.

Despite a temporary reduction of advisers from 8 to 6 in 2017 because of resignation and leave, the team engaged with 1,531 new clients and held 2,156 meetings. The team gave 56 talks/presentations to local community groups and meetings and played a key role in delivering information on the mobile information service. ASI is committed to measuring the impact, where possible, of all its services. During 2017 we carried out an evaluation of the dementia adviser service and surveyed persons with dementia and their carers. While details of the evaluation are available on www.alzheimer.ie the following responses indicate the benefits of the service.

ASI asked "what was life like before you met your dementia adviser?"



DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

ASI also asked "what has the support from your dementia adviser meant to you?"



ASI sought an additional 25 advisers costing €2.31 million as part of its pre-budget submission to enable this valuable service to be extended nationwide.

Information Materials

The ASI has developed an extensive range of booklets, factsheets and leaflets for people with dementia, their families and carers that are available free of charge by contacting our helpline or logging onto www.alzheimer.ie

In 2017 ASI distributed over 57,000 information items to people with dementia, their families and to health and social care professionals working in the area, such as public health nurses, social workers and H.S.E. local health offices. In addition, nearly 10,000 information items were ordered directly by G.P's and pharmacists for use by their patients.

In 2017 ASI, with financial support from Nutricia Advanced Medical Nutrition, published a booklet "Eating Well with Dementia" which provides practical tips for family carers.

ASI also launched a guide on how assistive technology can help people with dementia and their families. The project, which was supported by a grant from Atlantic Philanthropies, with content expertise provided by Emma O'Brien, Occupational Therapist, Memory Technology Library, South Tipperary General Hospital, shows how technology can help with memory and recall, support a person with dementia to continue carrying out the normal lifestyle choices and remaining independent.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

Awareness Raising

Raising awareness is a constant challenge for ASI and in particular we strive to achieve a focused approach during World Alzheimer Month in September each year. ASI held our second successful ALZ Talks event, Sean Toomey (from Cork), Helen Rochford Brennan (Sligo) and Michael Higgins (Cork) spoke about living well with dementia post-diagnosis and Sean Donal O'Shea (Kerry) and Catherine Kennedy (Tipperary) spoke about their experiences of caring for loved ones who had dementia.

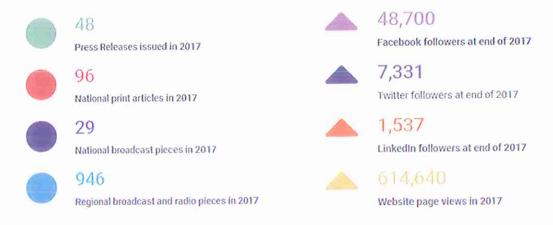


Musical acts for the AlzTalks event included the legendary John Spillane, The Lee Valley String Band, opera singer Amanda Neri and singer-songwriter Laura Elizabeth Hughes.

The MC for the evening was Cork native and RTE presenter Sinead Kennedy and the Lord Mayor of Cork, Cllr Tony Fitzgerald, also delivered the opening remarks.

Alz Talks are available to watch on ASI's YouTube channel

2017 also saw encouraging coverage of dementia and its impact and ASI appreciates the support of national, local and online media throughout the year as they work with us to build understanding and awareness of the complexities of dementia and the importance of risk reduction measures we can all take. We are also deeply appreciative of all our supporters across social media who help us highlight our campaigns, events, services and research throughout the year:



Other opportunities for raising awareness during 2017 included:

- · Making a submission to the Citizens Assembly.
- Tea Day hosted in Leinster House, attended by 37 T.D's and Senators.
- Working collaboratively on campaign to ratify the U.N. Convention on the Rights of Person with Disabilites.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

Providing Dementia Specific Services

In addition to our information awareness and advisory services, ASI provides a mix of day care, homecare and respite services.

Community Services

ASI provides 52 day care centres across the country which represents 81% of all dementia specific day centers in Ireland. In 2017 we delivered 570,917 hours of services in our centres which represent an increase of 3% on our 2016 performance.

ASI continues to provide a home care service which is highly regarded by clients and carers. The ability of ASI to provide this service has reduced over the past number of years since the HSE home care packages tendering process, which does not distinguish between specific needs of people with dementia (generally more demanding and time consuming because of the reduced mental capacity and/or behavioral difficulties experienced by persons with dementia) and general homecare for people with full cognitive capacity. ASI only provides dementia specific care and therefore no longer participates in tendering for home care. We continue to provide homecare services in some areas, largely to existing clients in agreement with the HSE. Because of our reducing involvement in homecare, the numbers of hours delivered in homecare was 174,116 a reduction of 7% compared to 2016.

People with dementia and their families also access other local community based initiatives which include social clubs, support groups, Alzheimer's cafes, cognitive clubs and cognitive stimulation therapy programs. These programs are of particular benefit for people in the early stages of dementia. ASI provides 70% of all such programs at present in Ireland.



ASI continues to deliver family carer education programmes in both face-to-face venues throughout Ireland (Insights into Dementia-Informing and Empowering Family Carers) and online (Home Based Care - Home Based Education). 380 family carers attended these courses in 2017.

We are particularly pleased that Our Erasmus+ project Home Based Care - Home Based Education project was highly commended in a final monitoring report. Furthermore, the project won Bronze Prize in the prestigious Learning Technologies Awards 2017 in London in November 2017.

ASI has two respite centres, Waterman's Lodge in Ballinal Killaloe and the Orchard respite centre in Blackrock Co Dublin. Waterman's had a very successful year delivering 82,397 hours of care.

ASI is particularly satisfied that on a Health Information Quality Authority, H.I.Q.A, inspection, reported on in June 2017, it showed that of the 12 areas inspected by them at the centre, 10 areas were compliant with 2 areas substantially compliant.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

H.I.Q.A stated:

"The layout and design of the centre which had been purposely redesigned as a dementia specific care facility to create an environment where residents with dementia could flourish. The design and layout promoted the dignity, well-being and independence of its users. The overall atmosphere was homely, comfortable and in keeping with the overall assessed needs of the service users. Signs and colours had been used in the centre to support service users to be orientated and find their way around the centre. The quality of services user's lives was enhanced by the provision of a choice of interesting things for them to do during the day and an ethos of respect and dignity was evident. All staff fulfilled a role in meeting the social needs of service users and inspectors observed that staff connected with service users as individuals. The environment was interesting with plenty of objects to engage and interest service users. All service users were observed to be relaxed and comfortable in the company of staff. The collective feedback from service users and relatives was one of satisfaction with the service and care provided"

It was of great regret to ASI that, because of the staff retention and recruitment difficulties faced by healthcare providers including ASI, we had to cease admissions to the Orchard Respite Centre in Blackrock in 2017. With the support of the HSE, ASI sought proposals from large healthcare providers to manage the facility and while it was regrettable that there were no admissions to the centre in 2017, ASI signed a contract with Mowlam Healthcare to re-open the centre in 2018.

Quality, Safety and Service User Satisfaction

Quality, safety and service user satisfaction were the issues addressed by our Board's Quality and Safety Committee which was established in 2016. In 2017, our National Service User Satisfaction Questionnaire was the third annual successive engagement with the service users of day care, home care and respite care provided by ASI. The questionnaire aims to engage with service users and/or their families and provide them with an opportunity to communicate their views, perceptions and experience for the ASI services they use. It also forms part of the continuous quality improvement strategy of The ASI.

A random selection of 250 service users were selected and a response rate of 46% was achieved. Key results from the questionnaire were as follows:

- 88% of service users were satisfied with their involvement in decision making about the service they
 received with just 1% dissatisfied
- 95% were satisfied that they were treated with courtesy and respect and that their privacy was protected.
- 95% were satisfied that the staff listened and responded appropriately to their requests
- · 94% were satisfied that they knew who to contact with a comment, compliment, complaints or concern
- 91% felt they were well cared for.

The returned questionnaires provide invaluable feedback on how people feel and suggestions for improving the services and support provided.

Comments of people who were satisfied with the service they received include:

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

"Excellent in all aspects, especially the manager" "1st class service, very good. Very happy with service and nurse. They are very supportive"

"Satisfied with everything, Very happy"

"Excellent service, carers are wonderful, don't know how I managed before they

came"

"Excellent service provided to both my husband and myself"

"I am extremely grateful for the care my mother and late father received and also the support given to me and my brother"

Quite a number of respondents expressed the need for more support, more homecare hours, more day care, day respite and assistance and support when crises arise.

"Badly in need of more homecare hours as parent doesn't settle at day centre and carer needs a break" "It would be great if the service in Maynooth was available more than once a month. He enjoys his day there and it's the only place he gets to go"

"WE need a day centre in Laois"

"If longer hours were available at crisis times"

"He wishes to go one more day if he can get a place" "Re-open the respite unit"

The Directors note the positive impact of our work and services we provide. We also note the gaps in service provision which was confirmed in 2017 by the joint mapping of services carried out by ASI in conjunction with the HSE (see page 16). ASI will lobby to provide comprehensive, easily accessible services across Ireland.

Providing a service in a location is not sufficient, transport is a problem and it can prevent people from accessing and attending services. Some comments on transport include:

"I find the journey very long as I am 94 years old and have to travel 34 miles each way. If there was a location nearer it would be less tiresome for me"

"I would like my wife to be included in the bus service as I am currently bringing her and it's a two hour trip each day"

"Would like a third day but I understand the situation regarding transport" "More Frequent buses from Ballina to Limerick"

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

In addition to the National Questionnaire, Day care audits and feedback sessions were completed with all day care managers. Policy development and training for staff in the areas of dementia awareness, manual handling and safeguarding was a priority during 2017.

Advocating for the Rights of Persons with Dementia and their Carers

2017 was another busy, but often frustrating, year in lobbying for the voice of persons with dementia and their carers to be heard. A key aspect of our work has been the Pre-Budget Submission. ASI has always approached this part of its advocacy work based on proposing evidenced-based policy solutions.



In 2017, we sought support for the following initiatives:

- €35m to develop and expand homecare services.
- €2.31m to services roll out for a Dementia Advisor service across Ireland.
- €1.92m to provide Dementia care coordinators in every H.S.E local health office
- €852,000 for a Dementia Friendly Communities project across Ireland

ASI is extremely disappointed that there was no specific funding in Budget 2018. We will intensify our efforts at a local and national level to draw attention to the rights and needs of persons with dementia and their carers.

Some positive impact of our lobbying was in evidence when government announced allocations from the Dormant Accounts Action Plan.

- The provision of €640,000 for dementia post-diagnostic supports for 800 people with a dementia diagnosis in 19 sites across Ireland.
- The provision of €200,000 to further the development of a National Dementia Registry. ASI had published research on this issue which recommended the establishment of a registry.
- . The provision of €90,000 to further develop Dementia Friendly Community Groups.
- The provision of €300,000 to further expand the assistive technology libraries.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017



Advocating for persons with dementia and their carers has been given a great boost by the development of the All Party Oirechtas group on Dementia. The group has worked effectively in raising awareness across the political parties and independents in the Oireachtas. Round table discussions, awareness events and publications on particular issues have raised the profile of dementia in the Oireachtas.

ASI provides administrative support to the group and looks forward to working with it to achieve dementia specific budgets to address the significant gaps in services and supports.

The lobbying of politicians was also carried out at local levels and ASI's local branches played an important role in working with our national advocacy service in organizing these events and all local lobbying as part of our prebudget submission in 2017.

The voice of persons with dementia is the authentic expression of the lived experiences of persons with dementia. Established by ASI in 2013; the Irish Dementia Working Group (IDWG) is a unique advocacy group of people who have been diagnosed with dementia. The group has had an input into policy documents, campaigns, awareness raising and in research projects. Representatives are involved in the National Monitoring Group on the implementation of the National Dementia strategy and in working groups established by the National Dementia Office of the HSE. While the group has been represented on the Board's Advocacy Committee for some time, the board is delighted to report that Ronan Smith, chair of the IDWG joined the board of ASI as a director in December 2017.



Family carers have been to the fore within ASI since its foundation, including providing several members of the board. The Dementia Carers Campaign Network (DCCN) has amplified the voice of carers in all our activities since its establishment in 2014. The DCCN has representation on similar national policy groups and working groups as the IDWG to ensure that future policy and operational plans are based on the lived experiences of carers.

The DCCN had also been represented on the Board Advocacy Committee and similar to the Irish Dementia Working Group, the Board is pleased to announce that Ann Twomey, a member of the network also joined the Board of ASI as a Director in December 2017.

ASI was established 35 years ago by carers who lacked support. The contribution which family carers make is valued at 48% of the total cost of dementia care. Whilst this percentage has been externally evaluated,

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

anecdotal evidence suggests that the non-financial burden of care is significant and that carers themselves receive only limited home support and they often had considerable health issues to deal with.

ASI is committed to campaigning and lobbying for support to alleviate the real pressures and stresses that many families and carers experience.

To assist us in this endeavour ASI cofunded De-Stress: A study to assess the health and well-being of spousal carers of people with dementia in Ireland' together with the Health Research Board and the Medical Charities Group Grant.

The study was the largest of its kind in Ireland and was carried out by researchers at Trinity College Dublin, the final report was launched in June 2017.



Key findings include:

- · 42% of carers had not received any assistance.
- 50% of carers had received home help of some kind in the past 30 days (the average number of total home help hours was 34 hours in that 30 day period).
- 60% of carers had visited a health care professional at least once in the past 30 days on account of their own health.
- 71% of carers had two or more health conditions or diseases at once, including arthritis, hypertension and diabetes.
- 37% of carers reported clinically depressive symptoms and a further 40% reported levels of depressive symptoms that were not clinically significant.
- Self confidence in managing symptoms decreased significantly over time among those who were still
 providing care at home.
- A third of carers reported having difficulty completing at least one core activity such as managing finances, preparing food, shopping for food and/or managing appointments.

The findings from this study improve our understanding of the lived experience of spousal carers and provides clear evidence to support ASI campaigns and lobbying to get more support for families by way of homecare packages and a statutory homecare support scheme.

ASI had been successful in its lobbying for a National Dementia Strategy which was published in 2014. The publication of the Strategy was a significant and positive development and ASI is represented on the many working groups which are examining how dementia is diagnosed, establishing care pathways and determining the role of key personnel and how persons can be supported throughout the dementia journey. The strategy was published on a 'budget neutral' basis and limited funding has been provided for its implementation.

ASI's call during the 2016 election to "Renew, reform and resource" the National Dementia Strategy was not heeded. ASI has funded the research required to prove the case for a dementia registry. We have also provided

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

government with the evidence of the burden that carers are carrying with limited support from the state.

ASI has also partnered with the HSE and National Dementia Office (NDO), on a project to map dementia specific community based services nationally. The report 'Dementia Specific Services in the Community: Mapping Public and Voluntary Services' shows the range of dementia-specific community based services. The report concludes that "There are significant gaps in service provision and inconsistency of availability of types of services by both county and community health organisations area".

ASI will fully utilise the work of the IDWG and the evidence that the De-Stress Carer study, the Mapping exercise and our own internal service quality and impact measuring tools provide to mobilise support for adjustments to be made to the National Dementia Strategy to deliver essential services consistently across the country and make it more effective and relevant to persons with dementia and their carers.

During 2017 ASI made a detailed submission during the initial consultation phase on a statutory homecare scheme. ASI had campaigned with other partner organisations for this development. The delivery of such a scheme which recognises the need for dementia specific homecare will be a priority for our advocacy agenda in 2018.

ASI welcomes the statement made in the Dáil by Minister Jim Daly that dementia was a "top priority". We look forward to working with the All Party Oireachtas group and the government to ensure meaningful budgetary allocations, for dementia care.

ASI has traditionally played an important role in commissioning new research and collaborating with partners in developing research. During our consultations on our new strategy, it was clear that our role in research was valued both internally and externally.

During 2017 we developed a new research strategy, established a new research review committee and in 2018 we will seek to obtain dedicated resources for research.



Throughout 2017, The ASI continued to work as a partner on the *HSE Dementia: Understand Together* campaign, alongside Genio. TV and radio ads launched in 2017, starring both members of the IDWG and the DCCN, continue to create positive impact on awareness raising and on the volume of calls to the ASI National Helpline. Work began on planning the community activation part of the campaign, and an ASI employee was seconded to the HSE to co-ordinate this work.

ASI was involved in 10 research projects in 2017, centring on topics such as carer resilience, dementia and risk reduction factors, cognitive testing, and person-public involvement (PPI). These projects involve ASI collaborating and partnering with the top Universities in Ireland including; University College Dublin, National University of Ireland Galway, Trinity College Dublin, University College Cork and the Dementia and Neurodegeneration Network Ireland, DNNI.

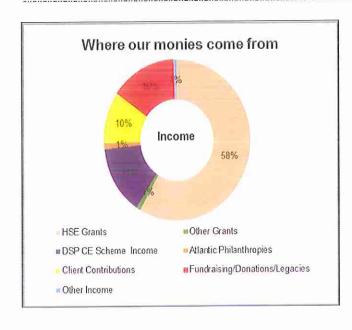
DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

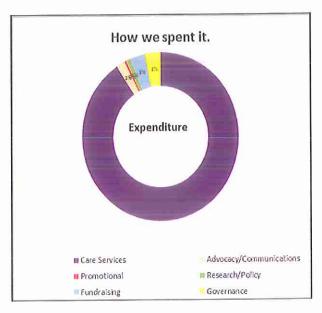
FINANCING ASI

The financial results for the year are set out in the income and expenditure account on page 30. They show a surplus of €407k in 2017 compared to a restated deficit of €267k in the prior year. The latter is changed from the previous year published results due to a prior year adjustment, as set out in Note 19 of the financial statements.

The improvement was achieved by a combination of H.S.E funding for a number of key projects and the generous donations of corporate donors and the public through fundraising and legacies and by tight cost control. The ASI is very appreciative of this financial support from all our sponsors, supporters and our funders.

Where our monies come from	€000's	Where are monies are spent	€000's
HSE Grants	11,284	Care Services	17,152
Other Grants	178	Advocacy/Communications	345
DSP CE Scheme Income	2,700	Promotional	62
Atlantic Philanthropies	231	Research/Policy	185
Client Contributions	1,986	Fundraising	568
Fundraising/Donations/Legacies	2,811	Governance	591
Other Income	120		
Total	19,310		18,903





Reserves Cover Policy

ASI recognises the need for adequate liquid reserves (net current assets plus deferred income) to enable ASI to withstand any unforeseen events which could impact on services to our clients due to disruption of our income from the state and from fundraising or due to any major unforeseen expenditure. The Board considers it appropriate that the ASI should aim to maintain a liquid reserve equivalent to 90 days operating expenditure. This represents 76 days cover at the end of December 2017 and 59 days (2016).

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

While the reserves have improved, they still are relatively low. The board aims to increase reserve cover year on year over the next three years in line with our strategic plan. Given that ASI provides 68% of all dementia specific services across the country, we will negotiate with the HSE on the certainty it could provide to our clients through a commitment to a multi annual budget.

Fundraising

During 2017, the ASI remained fully compliant with the statement of guiding principles for fundraising. ASI is heavily dependent on fundraising. In 2017, the total income derived through fundraising initiatives was €2,811,091. The breakdown of the key elements of the fundraising are as follows:

Branch Fundraising	€996,267
Corporate Fundraising	€335,950
National Events:	
Tea Day	€468,638
Memory Ribbon	€65,195
Challenge Events	€174,834
Legacies	€373,738

STAFF

The ASI is fortunate that our dedicated staff are highly regarded by our clients and their carers. This empathy and dedication is constantly referred to in our client feedback questionnaire. We strive to recruit and train staff who have the empathy and skills to care for clients who are on the dementia journey. We are committed to providing a positive employee relations environment. We recognise that they have not received any additional pay and benefits for a number of years. We lobbied and will continue to lobby the H.S.E and government for the necessary resources to improve the pay and conditions of our staff and bring them back into line with comparable state employees as we provide service for and on behalf of the state.

SUPPORTERS

The Directors wish to acknowledge formally the vital contributions made by many parties to the work of the ASI in supporting our clients, carers and their families:

- * Our volunteers and our branches throughout the country, who are critical to our fundraising efforts, and provide direct care support or expert services. The ASI has prioritised its commitment to become the first choice organisation for people of any age wishing to volunteer time, energy or expertise.
- * Our financial supporters, corporate sponsors and generous donors, those who support Tea Day, Mini Marathon, and Memory Ribbon campaigns, without whose contributions the ASI would not be able to continue to function effectively.
- * The many and various networks, organisations, public representatives and professionals who collaborate with us in driving the dementia agenda in the fields of research, academia, public policy, standards of care, ethics, the media and the public sphere.
- * The HSE, our main source of client referrals and our primary funder, who despite the significant funding challenges recognise the quality-of-life, as well as the value-for-money benefits of our services.
- * Our dedicated and committed staff, who provide such caring and valued support to our clients and their families and who silently go the extra mile on their behalf.

CHALLENGES FACED IN 2017

Despite important progress in 2017, the ASI is facing a number of challenges. Following workshops conducted during our consultations on the strategy review, there was a unanimous agreement that we faced the following challenges:

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

ASI is not adequately resourced and is unable to meet its current and growing demand for services.

Despite the ASI being the main provider of dementia specific services (68%), the contribution from the HSE remains at 58% of our total income. The mapping exercise carried out in partnership with the HSE shows serious service gaps with many large towns and counties having very limited services. Day centres, which represented the largest category of services, opened only 3 days a week on average. In the absence of an allocation of meaningful additional resources, these gaps will widen as the number of newly diagnosed cases of dementia is 4,000 a year.

The dependence on fundraising and client contribution affects cash flow and long term sustainability for

ASI relies on fundraising and legacy income as well as income from clients who use our services to help pay for the core costs of providing care. Fundraising of €2.8ml and Client income of €1.98m are budgeted to maintain our services. This amounts to 25% of our income which is not guaranteed or predictable for future service provision. ASI will lobby for a greater contribution from the HSE which at present contributes 58% of our costs.

Staff Pay and Benefits have not kept pace within the sector which has led to a loss of key staff.

In 2010 the ASI regrettably had to cut pay and benefits of all staff in line with the Public Sector. Since 2010 it has not been possible to restore these benefits. As a result, pay in the public service together with increments and superior benefits in terms of pension benefits, sick pay, promotion opportunities and continuous professional development has continued to widen the gap between staff doing the same work in both organisations. The ASI has lobbied the HSE on this issue and will continue to do so in the interests of equity. The ASI is determined to make progress on this issue in 2018, given that the services are provided on behalf of the State.

A lack of investment in IT infrastructure has led to labour intensive data production and the lack of data to facilitate good planning and evaluation of services.

Managing an organisation of the scale and complexity of ASI requires the use of information technology to assist in the assessment of needs, delivering and recording the care provided and monitoring outcomes of the services delivered. In addition the core functions of communication, Human Resources, financial management and control and monitoring the efficiency and effectiveness and impact of our work requires investment in information technology. The lack of development funding for IT means that processes are manual and staff time is not used to best advantage. ASI welcomes the funding provided in 2017 to further develop the planning for a National Dementia Registry and funding for assistive technology for clients. A greater investment in I.T. would allow ASI to focus on meeting the needs of clients and having management information available in a more timely manner. ASI has submitted a funding proposal to the HSE to develop our capacity.

The organisation culture needs to adapt and change to allow for full implementation of the new strategic

There was a consensus during our workshops on the Strategy review that we needed to work differently in order to change attitudes, awareness, political attention and funding of the organisation. It was agreed that all parts of the organisation needed to maximise all opportunities at lobbying at local and at national level. It was agreed that funders needed to see the reality of life for a person with dementia and their carers. The need for all parts of ASI to work cohesively was acknowledged in order to enable us fund and provide new innovative services and the capacity to invest in research.

An advocacy plan will be put in place to harness the involvement of branches, our staff, our management and our Board in maximising our ability to influence decision makers who can ensure that people on the dementia journey are valued and supported.

Challenges in recruiting, developing volunteers and branch networks.

The ASI is fortunate to have 19 active branches and large numbers of volunteers who assist our services in many different ways. Our national Tea Day and Memory Ribbon events have attracted a large number of

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

volunteers. Our lobbying campaigns have been helped by our active e-campaigners and our corporate partners have allowed their staff to work with us in many new and innovative ways. Many people involved in fundraising events, such as walks and marathons, have selected ASI as the beneficiary of their very welcomed endeavours. There is little doubt that over the years an active branch, with volunteers in many capacities working closely with our services on the ground and at national level, leverages our potential to provide more information, organise awareness events, providing local services to meet local needs, helping to reduce stigma, lobbying at local level and fundraising locally and assisting national events is the best model for the future of The ASI. The Board has adopted a Branch and Volunteer development strategy which will be actioned in 2018.

CELEBRATING 35 YEARS OF ASI

2017 marked 35 years since the establishment of the ASI in 1982. The Board decided to mark the year by holding a conference embracing participants from all parts of the organisation. The purpose of the conference was to celebrate the work of so many people over 35 years who had developed the organisation, reflect on what had been achieved, discuss how services were meeting the needs of people with dementia and their carers and to look forward to the future role of ASI.

The conference provided an ideal opportunity to launch and discuss our revised strategy and the changes required to execute it effectively.

The event was organised by a dedicated team of staff who consulted widely on the best way to give expression to the historical aspect of the event. Through a combination of videos, interviews, presentations, question and answer sessions and a quiz, the 200 attendees which included persons with dementia, carers, branch members, volunteers, staff and Board members were extremely pleased with how the event unified everyone in the organisation to re-double our efforts in lobbying for the rights of people with dementia and their families and carers to have access to proper supports and services.

The Forget-Me-Nots choir, who provide an inclusive, fun choir for older people and those affected by dementia and their family and friends provided a very appropriate ending to the conference, demonstrating that you can live well in an inclusive way in your own community with dementia. See appendix III for history of ASI.

ASI STRATEGIC PLAN 2018 - 2020

Following the successful completion of ASI's previous strategy 'people with Dementia first', the Directors decided that the new strategy should be developed following a major consultation within the organisation. In total 10 workshops were attended by 200 people, including people with dementia, carers, branch members, volunteers and staff gave their view on our vision, mission, values, strengths, challenges, opportunities, future risks and strategic objectives.

Key Messages from Strategy Process 2017:

- The ASI must work in a determined and unified way to get public and government support to address the needs of persons with dementia and their carers.
- The lived experiences of persons with dementia and their carers will be the basis for what ASI campaigns for.
- The ASI must develop its existing branch network and expand it and develop volunteering to help it achieve
 its vision.
- The level of HSE funding for current services is unacceptable and continued subsidisation for services from fundraising is not a safe and sustainable basis for future service provision.
- All the ASI's services should be of a standard that would represent the appropriate benchmark against
 which service from all providers can be measured.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

· The challenges of recruiting, training and adequately paying our staff need to be addressed.

Following extensive discussions the new strategic objectives of the ASI 2018-2020 are to:



The yearly actions required to deliver on each of the objectives will be included in the Annual Business Plan of ASI.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Constitution

The Alzheimer Society is a registered charitable company limited by guarentee. ASI is fully compliant with the Governance code for Community, Voluntary and Charitable Organisations in Ireland, the 'Governance Code'. Following the establishment of the Governance Committee of the Board in 2016, ASI implemented new Governance structures and new constitution changes including the introduction of new rules for director rotation in line with the code of practice for state bodies. In 2017 the committee concentrated on reviewing our branch rules and, following consultation with the Chairpersons of our 19 branches, the Board developed a new 'Memorandum of Understanding' which clarifies the manner in which the Board, its management and its branches should work together.

During 2017, following the adoption of our new strategy, the Governance Committee reviewed the membership of the Board and recommended that new directors should be recruited to assist the Board in delivering on its new strategy. The Board is delighted that three new Directors were appointed in December 2017, Ronan Smith, Ann Twomey and Kieran McGowan Biographical summaries of all members of the Board are available on our website www.alzheimer.ie.

None of the Directors held any beneficial interest in the ASI. No Director was paid any salary or other remuneration or had any related party transactions with the ASI during 2017. Expenses paid to Directors

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

amounted to €2,592 in 2017.

Attendance at Board and Committee Meetings 2017

Name	Board	Finance & Audit	Advocacy	Governance	Fundraising	Quality & Safety
Number of meetings	11	7	7	4	4	4
John Clifford *	11		5	4		
David FitzGerald **	10	7	3	4		
Mary Gaughran	8			3		4
Tom Noonan	11	5		4	4	
James Nevin	11					4
Donal Malone	7	7				
Patricia McParland***	8					

^{*} John Clifford joined the Advocacy Committee as Chair on 13th March 2017

Risk Management and Internal Controls

The ASI maintains a register of the significant organisational risks which it faces and how these risks are monitored and managed. The Finance and Audit committee regularly reviews the risk register and reports its assessments and recommendations to the Board. The major risks have been ranked by their likelihood of occurrence and their potential impact on the ASI. Appropriate systems and procedures are in place to mitigate these risks

Sustainability

Like many similar organisations, the ASI has been affected by the reductions in state funding over a long period of time. During these years of significant cuts the ASI used much of its reserves to maintain as many services as possible. This reflected the commitment the ASI has to all people living with dementia, together with their carers and families. We are dependent on continued HSE funding to provide circa 58% of our current level of services and we also depend significantly on the goodwill of our public donors. We are open and transparent about our services and how they are funded while aiming to maintain an appropriate level of reserves. We also continue to develop new fundraising activities and campaigns to maximise our income.

Major Fraud and Error

Fraud or error would significantly damage the organisation's reputation as well as resulting in the loss of resources. The organisation has developed appropriate financial management and reporting systems to mitigate this risk; these systems are reviewed on a regular basis.

^{**} David Fitzgerald resigned from Advocacy Committee on 13th March 2017

^{***}Patricia McParland was co-opted to the board on 30th January 2017 and elected at AGM26/06/2017

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

IT Security and Continuity

In common with many organisations, the ASI is dependent on several IT and communication systems. The loss of these systems could severely disrupt operations. The organisation has developed IT policies and procedures to counter this risk. The ASI is currently in need of investment in its IT systems to develop a more integrated system across the organisation's network.

Human Resources

The ASI provides services through its trained staff and volunteers. Being able to attract and retain appropriate people is a key ongoing challenge for the organisation. Our human resource policies and procedures are frequently developed and reviewed to address this risk.

Quality and Safety

The safety and care of clients, at all times remains our priority. The Quality, Safety and Practice development team, along with staff, continue to improve and enhance internal service standards through the introduction, and updating of key policies and through staff training.

The well-being of the ASI's clients and its employees is safeguarded through the strict adherence to health and safety standards. The legislation imposes certain requirements on employers and the ASI has taken the necessary action to ensure compliance with the Act, including the adoption of a safety policy.

The Directors are satisfied that appropriate systems are in place to monitor and manage the principle risks to which the ASI is exposed.

EVENTS SINCE YEAR END

There have been no important events since the year end that have had a material effect on the operations and finances of the ASI.

FUTURE DEVELOPMENTS

Notwithstanding the issues referred to above, and in partnership with the Health Service Executive and other key stakeholders, the ASI will continue to seek opportunities to review, reconfigure and develop further services throughout the country and to explore new methods of caring for and advocating for those diagnosed with dementia as well as their families and carers. The development of national and regional self-advocacy groups is an excellent example in this regard.

DIRECTORS' REPORT (continued) FOR THE YEAR ENDED 31 DECEMBER 2017

BOOKS OF ACCOUNT

The Directors acknowledge their responsibility under Sections 281 to 285 of the Companies Act 2014 to keep accounting records for the ASI. Suitably qualified staff are employed and operate within clearly defined policies and controls. Books and records are kept at our registered office and at our various branches around the country.

TAXATION STATUS

ASI has been granted charitable status under the Taxes Consolidation Act 1997.

POLITICAL CONTRIBUTIONS

The Directors, on enquiry, have satisfied themselves that no political donations have been made by the ASI.

Disclosure of information to auditors

Each of the persons who are Directors at the time when this Directors' report is approved has confirmed that:

- so far as that Director is aware, there is no relevant audit information of which the charitable company's auditors are unaware, and
- that Director has taken all the steps that ought to have been taken as a Director in order to be aware of any relevant audit information and to establish that the charitable company's auditors are aware of that information.

Auditors

In line with good practice, ASI's audit was put out to tender and ASI appointed RBK Business Advisers as auditors at the 2017 AGM.

The Board thank its previous auditor, Curran, Nalty & Co. for its service over the previous ten years.

This report was approved by the Directors, on 25 May 2018 and signed on their behalf by:

John Clifford

Director

David Fitzgerald

Director

DIRECTORS' RESPONSIBILITIES STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2017

The Directors (who are also directors of The Alzheimer Society of Ireland for the purposes of company law) are responsible for preparing the Directors' report and the financial statements in accordance with applicable law and Republic of Ireland Accounting Standards (Republic of Ireland Generally Accepted Accounting Practice).

Irish Company law requires the Directors to prepare financial statements for each financial year. Under the law the Directors have elected to prepare the financial statements in accordance with Companies Act 2014 and accounting standards issued by the Financial Reporting Council (and promulgated by Chartered Accountants Ireland) including FRS 102 The Financial Reporting Standard applicable in the UK and Ireland (Generally Accepted Accounting Practice in Ireland) as modified by the Statement of Recommended Practice "Accounting and Reporting by Charties" effective 1 January 2015.

Under company law the Directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the company as to the financial year end and of the surplus or deficit of the Charity for the financial year and otherwise comply with the Companies Act 2014. In preparing these financial statements, the Directors are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of SORP;
- make judgments and accounting estimates that are reasonable and prudent;
- state whether applicable Republic of Ireland Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets liabilities, financial position and surplus or deficit of the company to be determined with reasonable accuracy, enable them to ensure that the financial statements and directors' report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The directors are responsible for the maintenance and integrity of the corporate and financial information included on the charity's website. Legislation in Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

John Clifford

Director

David Fitzgerald

Director

Date: 25 May 2018



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE ALZHEIMER SOCIETY OF IRELAND

Opinion

We have audited the financial statements of The Alzheimer Society of Ireland (the 'Charity') for the year ended 31 December 2017 set out on pages 30 to 58. The financial reporting framework that has been applied in their preparation is applicable Irish law and Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' as modified by the Statement of Recommended Practice "Accounting and Reporting by Charities" effective 1 January 2015.

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 2017 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 Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland; and
- have been prepared in accordance with the requirements of the Companies Act 2014.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the Auditors' 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 Ireland, including the Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (Ireland) require us to report to you where:

- the Directors' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the Directors 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 Directors are responsible for the other information. The other information comprises the information included in the Annual report, other than the financial statements and our Auditors' 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 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



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE ALZHEIMER SOCIETY OF IRELAND

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.

Opinion on other matters prescribed by the Companies Act 2014

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

- the information given in the Directors' report for which the financial statements are prepared is consistent with the financial statements.
- the Directors' report has been prepared in accordance with applicable legal requirements.
- we have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- the accounting records of the Company were sufficient to permit the financial statements to be readily and properly audited;
- the financial statements are in agreement with the accounting records;

Matters on which we are required to report by exception

In the light of our 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 Directors' report.

We have nothing to report in respect of the following matters in relation to which Companies Act 2014 requires us to report to you if, in our opinion:

- adequate 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 Directors' remunerations specified by law not are made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the Directors' responsibilities statement, the Directors (who are also the directors of the Charity 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 Directors 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 Directors 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 Directors either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE ALZHEIMER SOCIETY OF IRELAND

Auditors' 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 Auditors' 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 (Ireland) 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.

As part of an audit in accordance with ISAs (Ireland), we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that
 are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness
 of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Directors.
- Conclude on the appropriateness of the Directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditors' report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our Auditors' report. However, future events or conditions may cause the charitable company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the
 disclosures, and whether the financial statements represent the underlying transactions and events in a
 manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE ALZHEIMER SOCIETY OF IRELAND

The purpose of our audit work and to whom we owe our responsibilities

This report is made solely to the company's members as a body in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the company's members those matters that we are required to state to them in the audit 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 company or the company's members as a body for our audit work, for this report, or for the opinions we have formed.

Ronan Kilbane (Statutory auditor)

for and on behalf of

RBK Business Advisers

Chartered Accountants & Statutory Audit Firm

Boole House

Beech Hill Office Campus

Beech Hill Road

Clonskeagh

Dublin 4

28 May 2018

STATEMENT OF FINANCIAL ACTIVITIES INCORPORATING INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2017

		Unrestricted funds 2017	Restricted funds 2017	Total funds 2017	Total funds 2016
	Note	€	€	€	€
Income from:					
Donations and legacies	2	928,960	472,538	1,401,498	1,724,285
Charitable activities	3	-	13,984,005	13,984,005	14,022,305
Other trading activities	4	3,868,019	-	3,868,019	3,978,614
Investments	5	439	-	439	2,338
Other income	6	55,974	-	55,974	45,778
Total income		4,853,392	14,456,543	19,309,935	19,773,320
Expenditure on:					
Cost of generating funds	7	568,178	-	568,178	534,153
Charitable activities:	12	416,662	174,430	591,092	613,180
Governance costs	12 8	272,341	174,430	17,744,016	18,893,145
Other charitable activities	0	272,341		17,744,010	
Total expenditure		1,257,181	17,646,105	18,903,286	20,040,478
Net income / (expenditure) before transfers					
		3,596,211	(3,189,562)	406,649	(267,158)
Transfers between Funds	20	(3,262,433)	3,262,433	-	
Net income / (expenditure) before other recognised gains and losses		333,778	72,871	406,649	(267,158)
Reconciliation of funds:					
Total funds brought forward	20	16,127,817	216,017	16,343,834	17,787,111
Prior year adjustment (Note 19)	19		,	-	(1,176,119)
•		16,461,595	288,888	16,750,483	16,343,834
Total funds carried forward				ko///-	

The notes on pages 33 to 53 form part of these financial statements.

THE ALZHEIMER SOCIETY OF IRELAND

(A company limited by guarantee and not having a share capital) REGISTERED NUMBER: 102700

BALANCE SHEET AS AT 31 DECEMBER 2017

	Note	€	2017 €	€	2016 €
Fixed assets					
Tangible assets	15		15,051,414		15,313,961
Current assets					
Debtors	16	504,327		517,946	
Cash at bank and in hand	24	4,543,559		4,450,239	
		5,047,886		4,968,185	
Creditors: amounts falling due within one year	17	(1,897,401)		(2,376,846)	
Net current assets			3,150,485		2,591,339
Total assets less current liabilities			18,201,899		17,905,300
Creditors: amounts falling due after more than one year	18		(1,451,416)		(1,561,466)
Net assets			16,750,483		16,343,834
Charity Funds					
Restricted funds	20		288,888		216,017
Unrestricted funds	20		16,461,595		16,127,817
Total funds	20		16,750,483		16,343,834

The financial statements were approved and authorised for issue by the Directors on 25 May 2018 and signed on their behalf, by:

John Clifford

David Fitzgerald

The notes on 33 to 53 form part of these financial statements.

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2017

	Note	2017 €	2016 €
Cash flows from operating activities	00	257.046	1,151,389
Net cash provided by operating activities	23	357,046	1,101,009
Cash flows from investing activities: Receipts from sale of tangible assets Purchase of tangible fixed assets Deposit interest received	15 3	(264,165) 439	14,000 (403,895) 2,339
Net cash used in investing activities		(263,726)	(387,556)
Change in cash and cash equivalents in the year		93,320	763,833
Cash and cash equivalents brought forward	24	4,450,239	3,686,406
Cash and cash equivalents carried forward	24	4,543,559	4,450,239

The notes on 33 to 53 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

1. Accounting policies

1.1 General Information

These financial statements comprising the Statement of Financial Activities, the Balance Sheet, the Statement of Cashflows and the related notes constitute the individual financial statements of The Alzheimer Society of Ireland for the financial year ended 31 December 2017.

The Alzheimer Society of Ireland is a company limited by guarantee and not having a share capital (registered under Part 18 of Companies Act 2014), incorporated in the Republic of Ireland.

The registered office is Temple Road, Blackrock, Co. Dublin, which is also the principal place of business of the organisation. The nature of the organisation's operations and its principal activities are set out in the Directors report.

The activities relating to the Department of Social Protection schemes, where the Society is effectively liable for the shortfall arising on the running of these schemes, are included in the accounts of the Society. The board has determined that as the Society is the guarantor of these schemes and ultimately responsible for their management through National Office and its branches, that the results should be reflected in the accounts of the Society. These schemes are independently audited by independently registered auditors and accountants.

Currency

The financial statements have been presented in Euro which is also the functional currency of the company.

1.2 Basis of preparation of financial statements

The financial statements have been prepared on the going concern basis, under the historical cost convention and 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 SORP (FRS 102)) and the Companies Act 2014.

The Alzheimer Society of Ireland meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

Going Concern

The Directors have prepared budgets and cash flows for a period of at least twelve months from the date of the approval of the financial statements which demonstrate that there is no material uncertainty regarding the Company's ability to meet its liabilities as they fall due, and to continue as a going concern.

On this basis, the Directors consider it appropriate to prepare the financial statements on a going concern basis. Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if the Company was unable to continue as a going concern.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

1. Accounting policies (continued)

1.3 Income

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Income from government and other grants (primarily from the Health Services Executive and other governmental organisations), whether 'capital' or 'revenue grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably. Grants, where entitlement is not conditional on the delivery of a specific performance by the charity is recognised within income from donations and legacies. Grants, where related to performance and specific deliverables, are accounted for as the charity earns the right to consideration by its performance and included within income from charitable activities.

Voluntary income is received by way of grants, donations and gifts and is included in full in the Statement of Financial Activities when receivable.

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Investment income is included when receivable.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

Accounting policies (continued)

1.4 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Costs of raising funds comprise the costs associated with attracting voluntary income and the costs of trading for fundraising purposes.

Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees, costs of legal advice for trustees and costs linked to the strategic management of the charity including the cost of trustee meetings.

All expenditure is inclusive of irrecoverable VAT.

1.5 Turnover

Turnover comprises revenue recognised by the Charity in respect of goods and services supplied during the year, exclusive of Value Added Tax and trade discounts.

1.6 Tangible fixed assets and depreciation

Cost

Tangible fixed assets are recorded at historical cost or deemed cost, less accumulated depreciation (and impairment losses if applicable). Cost includes prime cost, overheads and interest incurred in financing the construction of tangible fixed assets. Capitalisation of interest ceases when the asset is brought into use.

Freehold premises are stated at cost less accumulated depreciation and accumulated impairment losses.

Depreciation

Depreciation is provided on property, plant and equipment, on a straight-line basis, so as to write off their cost less residual amounts over their estimated useful economic lives.

The estimated useful economic lives assigned to property, plant and equipment are as follows:

Freehold property Leasehold property Motor vehicles Office equipment 2% Straight line

Straight line over the deemed life of the lease

20% Straight line20% Straight line

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

1. Accounting policies (continued)

The company's policy is to review the remaining useful economic lives and residual values of property, plant and equipment on an on-going basis and to adjust the depreciation charge to reflect the remaining useful economic life and residual value.

Fully depreciated property, plant and equipment are retained in the cost of property, plant and equipment and related accumulated depreciation until they are removed from service. In the case of disposals, assets and related depreciation are removed from the financial statements and the net amount, less proceeds from disposal, is charged or credited to the SOFA.

1,7 Impairment

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

When it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash - generating unit to which the asset belongs. The cash - generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that are largely independent of the cash inflows from other assets or group of assets.

1.8 Interest receivable

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

1.9 Operating leases

Leases in which substantially all the risks and rewards of ownership are retained by the lessor are classified as operating leases. Payments made under operating leases (net of any incentives received from the lessor) are charged to statement of financial activity on a straight-line basis over the period of the lease.

1.10 Trade and other debtors

Trade and other debtors are recognised initially at transaction price (including transaction costs) unless a financing arrangement exists in which case they are measured at the present value of future receipts discounted at a market rate.

Subsequently these are measured at amortised cost less any provision for impairment. A provision for impairment of trade receivables is established when there is objective evidence that the company will not be able to collect all amounts due according to the original terms of receivables. The amount of the provision is the difference between the asset's carrying amount and the present value of estimated future cash flows, discounted at the effective interest rate. All movements in the level of provision required are recognised in the statement of financial activity.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

Accounting policies (continued)

1.11 Cash at Bank and in hand

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

1.12 Trade and other creditors

Trade and other creditors are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade payables are recognised initially at the transaction price and subsequently measured at amortised cost using the effective interest method.

1.13 Liabilities and provisions

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

1.14 Contingencies

Contingent liabilities, arising as a result of past events, are not recognised when (i) it is not probable that there will be an outflow of resources or that the amount cannot be reliably measured at the reporting date or (ii) when the existence will be confirmed by the occurrence or non-occurrence of uncertain future events not wholly within the company's control. Contingent liabilities are disclosed in the financial statements unless the probability of an outflow of resources is remote.

Contingent assets are not recognised. Contingent assets are disclosed in the financial statements when an inflow of economic benefits is probable.

1.15 Financial instruments

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

1.16 Taxation

No charge to current or deferred taxation arises as the charity has been granted charitable status under Sections 207 and 208 of the Taxes Consolidation Act 1997.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

1. Accounting policies (continued)

1,17 Government grants

Government grants relating to tangible fixed assets are treated as deferred income and released to the Statement of financial activities incorporating income and expenditure account over the expected useful lives of the assets concerned. Other grants are credited to the Statement of financial activities incorporating income and expenditure account as the related expenditure is incurred.

1.18 Employee Benefits

The company provides a range of benefits to employees, including paid holiday arrangements and defined contribution pension plans.

Short term benefits

Short term benefits, including holiday pay and other similar non-monetary benefits, are recognised as an expense in the period in which the service is received.

Defined contribution pension plans

The Company operates a defined contribution plan. A defined contribution plan is a pension plan under which the company pays fixed contributions into a separate fund. Under defined contribution plans, the company has no legal or constructive obligations to pay further contributions if the fund does not hold sufficient assets to pay all employees the benefits relating to employee service in the current and prior periods.

For defined contribution plans, the company pays contributions to privately administered pension plans on a contractual or voluntary basis. The company has no further payment obligations once the contributions have been paid. The contributions are recognised as employee benefit expense when they are due. Accrued contributions are recognised as a liability to the extent that a cash payment is due in future periods.

1.19 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Directors in furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the Directors for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Investment income, gains and losses are allocated to the appropriate fund.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

Accounting policies (continued) 1.

1.20 Critical accounting estimates and areas of judgement

In the application of the charity's accounting policies, which are described above, the directors are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The directors consider the accounting estimates and assumptions below to be its critical accounting estimates and judgements:

Fixed assets

Long-lived assets, consisting primarily of property, represent a significant portion of the total assets. The annual depreciation and amortisation charge depends primarily on the estimated lives of each type of asset and estimates of residual values. The directors regularly review these asset lives and change them as necessary to reflect current thinking on remaining lives in light of prospective economic utilisation and physical condition of the assets concerned. Changes in asset lives can have a significant impact on depreciation charges in the period. The net book value of Tangible Fixed Assets subject to depreciation at the financial year end date was €15,051,414 (2016: €15,313,961).

Income from donations and legacies 2.

	Unrestricted	Restricted	Total	Total
	funds	funds	funds	funds
	2017	2017	2017	2016
	€	€	€	€
Donations	555,222	472,538	555,222	523,812
Legacies	373,738		373,738	595,369
Grants (Note 2.1)	-		472,538	605,104
Total donations and legacies	928,960	472,538	1,401,498	1,724,285
Total 2016	1,119,181	605,104	1,724,285	

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

2.1	Other grants	1 4 . 1 . 4 1	Dartwinted	Total	Total
	U	Inrestricted funds	Restricted funds	Total funds	funds
		2017	2017	2017	2016
		€	€	€	€
	Lottery grants	-	63,259	63,259	51,823
	Other grants	-	177,816	177,816	361,744
	Atlantic Philanthropies	-	231,463	231,463	191,537
	Total	Ma .	472,538	472,538	605,104
	=		10000000000000000000000000000000000000		
	2016 Total		605,104	605,104	
	Company de la la constante de				
3.	Income from charitable activities	Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
		2017	2017	2017	2016
		€	€	€	€
	HSE grant income	-	11,284,390	11,284,390	11,619,345
	DSP CE Scheme income		2,699,615	2,699,615	2,402,960
		u	13,984,005	13,984,005	14,022,305
	=	- ACCOUNTS AND	44,000,005	14,022,305	
	Total 2016	**************************************	14,022,305 ————	14,022,303	
4.	Trading and other activities				
•••	Trading and only defined	Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
		2017	2017	2017	2016
		€	€	€	€
	Fundraising	1,882,131	_	1,882,131	2,059,137
	Client contributions	1,985,888	1	1,985,888	1,919,477
		3,868,019	PR.	3,868,019	3,978,614
	Net income from trading and other activities	3,868,019	44	3,868,019	3,978,614
				en e	90000000000000000000000000000000000000

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

5.	Investment income				
		Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
		2017	2017	2017	2016
		€	€	€	€
	Bank deposit interest received	439		439	2,338
	Total 2016	2,338	-	2,338	
6.	Other incoming resources				
٠,	culor incoming roccureos	Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
		2017	2017	2017	2016
		€	€	€	€
	Sundry Income	55,974	_	55,974	31,778
	Profit on sale of fixed assets	-	-	-	14,000
	Total	55,974	-	55,974	45,778
	Total 2016	45,778		45,778	
7.	Costs of generating voluntary income				
		Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
		2017	2017	2017	2016
		€	€	€	€
	Fundraising expenses				
	Staff costs	266,537	=	266,537	212,378
	Campaign costs	284,122	-	284,122	310,073
	Establishment costs	17,519	-	17,519	11,702
	Total	568,178		568,178	534,153
	Total 2016	534,153		534,153	OCCUPATION OF THE PROPERTY OF
	Total 2016	557,100		COTT, TOO	

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

8.	Analysis of expenditure on charitabl	e activities			•
		Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 <i>€</i>	Total funds 2016 €
	Care services (note 9) Advocacy & Awareness (note 10) Research (note 11)	272,341 - -	16,879,583 407,273 184,819	17,151,924 407,273 184,819	18,070,481 543,160 279,504
	Sub-total	272,341	17,471,675	17,744,016	18,893,145
9.	Care services				
		Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 <i>€</i>	Total funds 2016 €
	Staff costs Service activity costs Establishment costs Transport costs Office costs	- - - - 272,341	13,295,109 1,659,390 849,201 923,308 152,575	13,295,109 1,659,390 849,201 923,308 424,916	14,268,375 1,736,974 750,607 905,684 408,841
	Total	272,341	16,879,583	17,151,924	18,070,481
10.	Advocacy & Awareness	,			
		Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 <i>€</i>	Total funds 2016 €
	Staff costs Promotional activity costs Other advocacy costs		298,696 62,288 46,289	298,696 62,288 46,289	301,383 217,515 24,262
	Total	-	407,273	407,273	543,160

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

11.	Research				
•••		Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 <i>€</i>	Total funds 2016 €
	Staff costs Service activity costs Establishment costs	: :	99,446 47,304 38,069	99,446 47,304 38,069	67,970 179,737 31,797
	Total	Et al. (1997)	184,819	184,819	279,504
12.	Governance costs				
		Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 €	Total funds 2016 €
	Staff costs Service activity costs Establishment costs Depreciation Amortisation of capital grants	526,712 (110,050)	147,034 26,119 1,277	147,034 26,119 1,277 526,712 (110,050)	172,692 33,863 4,279 512,396 (110,050)
	Total	416,662	174,430	591,092	613,180
13.	Net surplus/(deficit) This is stated after charging:				
				2017 €	2016 €
	Depreciation of tangible fixed assets: - owned by the charity Auditors' remuneration - audit Operating lease rentals - Land & Buildings Capital grants amortised Profit on disposal of tangible fixed assets	·		526,712 26,117 174,446 (110,050)	512,396 33,863 167,520 (110,050) (14,000)

THE ALZHEIMER SOCIETY OF IRELAND

(A company limited by guarantee and not having a share capital)

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

14. Employees

	2017 €	2016 €
Wages and salaries	10,379,602	11,086,411
Social welfare costs	1,067,432	1,116,354
Pension costs	93,534	92,995
DSP Scheme wages	2,329,830	2,155,953
DSP Scheme wages social welfare costs	52,986	51,322
Other costs	183,438	519,763
Total	14,106,822	15,022,798

The number of employees who earned more than €50,000 during the year was as follows:

	2017 €	2016 €
€50,001 to €60,000	7	8
€60,001 to €70,000	4	3
€70,001 to €80,000	4	2
€80,001 to €90,000	-	1
€90,001 to €100,000	•	-
€100,001 to €110,000	1	-
	16	14

The salary bracket €100,000 to €110,000 relates to the appointment of the Chief Executive Officer. This position was not filled for the entire year of 2016 hence the annual salary fell into the €80,001 to €90,000 bracket

During the year, no Director received any remuneration (2016 - €Nil)

During the year, no Director received any benefits in kind (2016 - €Nil)

Expenses directly incurred by the Directors in the discharge of their duties as Directors of The Society are reimbursed, if claimed, and amounted to €2,592 (2016: €720).

Key Management Personnel

The total amount paid to key management personnel (senior management team) including Employer PRSI and pension contributions was €565,935 (2016 €564,915).

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

The average monthly number of employees during the year, calculated on the basis of full time equivalents, was as follows:

Care staff Administration staff	34	36
	424	455

The staff numbers based on a full headcount of all employees including relief staff are as follows:

	2017 Number	2016 Number
Staff	935	956

15. Tangible fixed assets

rangibje intea accord					
	Freehold property €	Leasehold property €	Motor vehicles €	Office equipment €	Total €
Cost					
At 1 January 2017 Additions Disposals	17,138,619 82,418 -	1,581,238 - -	1,394,045 157,358 (30,441)	1,495,675 24,389 -	21,609,577 264,165 (30,441)
At 31 December 2017	17,221,037	1,581,238	1,520,962	1,520,064	21,843,301
Depreciation	***************************************				
At 1 January 2017 Charge for the year On disposals	2,966,400 344,421 -	652,621 69,912 -	1,212,710 87,633 (30,441)	1,463,885 24,746 -	6,295,616 526,712 (30,441)
At 31 December 2017	3,310,821	722,533	1,269,902	1,488,631	6,791,887
Net book value			A		COLORS - INTERESTINATION
At 31 December 2017	13,910,216	858,705	251,060	31,433	15,051,414
At 31 December 2016	14,172,219	928,617	181,335	31,790	15,313,961
					ETHORNOUS AND ADMINISTRATION OF THE PARTY OF

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

In respect of the prior year					
	Freehold property €	Leasehold property €	Motor vehicles €	Office equipment €	Total €
Cost or valuation					
At 1 January 2016 Additions Disposals	16,913,746 224,873	1,581,238 - - -	1,292,756 172,520 (71,231)	1,494,013 6,502 (4,840)	21,281,753 403,895 (76,071)
At 31 December 2016	17,138,619	1,581,238	1,394,045	1,495,675	21,609,577
Depreciation					
At 1 December 2016 Charge for the year On disposals	2,633,223 333,177	582,709 69,912 -	1,199,794 84,147 (71,231)	1,443,565 25,160 (4,840)	5,859,291 512,396 (76,071)
AT 31 December 2016	2,966,400	652,621	1,212,710	1,463,885	6,295,616
Net book value			-		
At 31 December 2016	14,172,219	928,617	181,335	31,790	15,313,961
At 31 December 2015	14,280,523	998,529	92,962	50,448	15,422,462

In the opinion of the Directors, the service potential of the tangible fixed assets are considered to be not less than the net book values stated above.

The Society through its Meath Branch, holds an option to complete the title over lands at Navan, Co. Meath by way of purchase at an ascertained price of €50,790 plus Consumer Price Index. No amount has been included above in respect of this option.

16. Debtors

	2017 €	2016 €
Trade debtors Other debtors	325,303 159,559	225,564 267,875
Prepayments and accrued income	19,465	24,507
	504,327	517,946
	Experience and the second of t	Entered the second of the seco

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

17.	Creditors: Amounts falling due within one year		
		2017 €	2016 €
	Trade creditors	306,567	672,713
	PAYE/PRSI	223,414	260,643
	Deferred Income	680,079	560,005
	Accruals	687,341	883,485
		1,897,401	2,376,846
18.	Creditors: Amounts falling due after more than one year		
		2017 €	2016 €
	Capital grants received	1,451,416	1,561,466

The charity has received capital funding from the HSE to assist in the purchase of certain properties held by the Society. These grants have conditions attaching and in line with the requirements of SORP and FRS 102, the charity amortises the carrying value of the grants in line with its performance of the conditions attaching.

19. Prior year adjustment

In previous years, ASI received grants from the HSE for the purposes of both capital and revenue expenditure.

As set out in the notes to previous years' accounts, these grants were included in capital reserves rather than as liabilities on the balance sheet. All grants received had historically been amortised at the same rate as the related assets were being depreciated rather than being amortised in line with the timescale attaching to the grant.

In the current year, it has been necessary to correct the historical treatment of grants by way of a prior year adjustment. This has resulted in the unamortised portion of grants being reclassified within the Balance Sheet. The balance on these grants at 31 December 2017 is €1,451,416 (2016: €1,561,466) as disclosed in Note 18.

This prior year adjustment has also resulted in a reversal of a portion of the amortisation charge recorded in the Statement of Financial Activities. As a result the surplus recorded for 2016 has been reduced by €402,346 and the reserves at 31 December 2016 were also reduced by the same amount.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

20. Statement of funds

Statement of funds - current year

	Balance at 1 January 2017 €	Income €	Expenditure €	Transfers in/(out) €	Balance at 31 December 2017 €
Designated funds					
Designated reserve	12,976,473		10	(345,442)	12,631,031
General funds					
Revenue reserve	3,151,344	4,853,392	(1,257,181)	(2,916,991)	3,830,564
Total Unrestricted funds	16,127,817	4,853,392	(1,257,181)	(3,262,433)	16,461,595
Restricted funds					
Research funds	216,017	138,575	(65,704)	-	288,888
Other restricted funds	-	14,317,968	(17,580,401)	3,262,433	*
	216,017	14,456,543	(17,646,105)	3,262,433	288,888
Total overall funds	16,343,834	19,309,935	(18,903,286)	-	16,750,483

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

20. Statement of funds (continued)

Statement of funds - prior year

	Balance at 1 January 2016 as restated €	Income €	Expenditure €	Transfers in/(out) €	Balance at 31 December 2016 €
Designated funds					
Designated reserve	12,976,473	-	-	-	12,976,473
Total designated funds	12,976,473	·	-	-	12,976,473
General funds					
Revenue reserve	3,300,322	5,145,911	(1,221,107)	(4,073,782)	3,151,344
Total general funds	3,300,322	5,145,911	(1,221,107)	(4,073,782)	3,151,344
Total Unrestricted funds	16,276,795	5,145,911	(1,221,107)	(4,073,782)	16,127,817
Restricted funds					
Research funds Other restricted funds	334,197 -	100,000 14,527,409	(218,180) (18,601,191)	- 4,073,782	216,017 -
	334,197	14,627,409	(18,819,371)	4,073,782	216,017
Total overall funds	16,610,992	19,773,320	(20,040,478)	<u> </u>	16,343,834

Restricted funds

Restricted funds represent income received that can only be used for particular purposes specified by donors. Such purposes are within the overall aims of The Alzheimer Society. It is the policy of The Alzheimer Society to fully apply such funds for the purposes for which they were donated as quickly as possible.

Unrestricted funds

General unrestricted funds are for use at the discretion of the Charity in furtherance of its objectives.

Designated funds

These represent funds that The Alzheimer Society has generated via grants and fundraising since inception and spent on net assets, primarily Tangible Fixed Assets (note 15).

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

20. Summary of funds

Summary of funds - current year

	Balance at 1 January 2017 €	Income €	Expenditure €	Transfers in/(out) €	Balance at 31 December 2017 €
Designated funds General funds	12,976,473 3,151,344	4,853,392	- (1,257,181)	(345,442) (2,916,991)	12,631,031 3,830,564
Restricted funds	16,127,817 216,017	4,853,392 14,456,543	(1,257,181) (17,646,105)	(3,262,433) 3,262,433	16,461,595 288,888
	16,343,834	19,309,935	(18,903,286)	-	16,750,483
Summary of funds - prior year					
	Balance at 1 January 2016 (as restated) €	<i>Income</i> €	Expenditure €	Transfers in/(out) €	Balance at 31 December 2016 €
Designated funds General funds	12,976,473 3,300,322	5,145,911	- (1,221,107)	- (4,073,782)	12,976,473 3,151,344
	16,276,795	5,145,911	(1,221,107)	(4,073,782)	16,127,817
Restricted funds	334,197	14,627,409	(18,819,371)	4,073,782	216,017
	16,610,992	19,773,320	(20,040,478)		16,343,834

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

21. Analysis of net assets between funds

Analysis	٥f	net assets	hetween	funds -	current v	/ear
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Allalysis of het assets between failed Carrons you			
	Unrestricted funds 2017 €	Restricted funds 2017 €	Total funds 2017 €
Tangible fixed assets Current assets Creditors due within one year Creditors due in more than one year	15,051,414 4,758,998 (1,897,401) (1,451,416)	288,888 - -	15,051,414 5,047,886 (1,897,401) (1,451,416)
	16,461,595	288,888	16,750,483
Analysis of net assets between funds - prior year			
	Unrestricted funds 2016 €	Restricted funds 2016 €	Total funds 2016 €
Tangible fixed assets Current assets Creditors due within one year Creditors due in more than one year	15,313,955 4,752,168 (2,376,840) (1,561,466)	216,017 - -	15,313,955 4,968,185 (2,376,840) (1,561,466)
	16,127,817	216,017	16,343,834

22. Financial committments

At 31 December 2017 the company had annual commitments under non-cancellable operating leases in relation to land and buildings as follows:

	201 <i>7</i> €	2016
Within one year Between one and five years Over five years	72,462 103,936 -	84,928 133,798 -
	176,398	218,726

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

23.	Reconciliation of net movement in funds to net cash flow from operating activities				
		2017 €	2016 €		
	Net income/(expenditure) for the year (as per Statement of Financial				
	Activities)	406,649	(267,158)		
	Adjustment for:				
	Depreciation charges	526,712	512,396		
	Capital grants released	(110,050)	(110,050)		
	Interest received	(439)	(2,339)		
	Profit on the sale of fixed assets	-	(14,000)		
	Decrease in stocks	-	6,500		
	Decrease in debtors	13,619	223,129		
	(Decrease)/increase in creditors	(479,445)	802,911		
	Net cash provided by operating activities	357,046	1,151,389		
24.	Analysis of cash and cash equivalents				
		2017	2016		
		€	€		
	General balances held by National Office/Branches	4,254,671	4,234,222		
	Amounts held for research (Restricted funds)	288,888	216,017		
	Total	4,543,559	4,450,239		
		<u> </u>			

25. Contingent liabilities

The Charity has received capital funding from the HSE for the purchase of certain properties. The HSE has registered charges against these properties with an initial value of €2,936,000. These amounts will only be repayable in the event that certain conditions are not met. The purchase, by The Society, of the site at Blackrock, Co. Dublin was subject to a covenant stating that if The Society wishes to transfer, assign or sub-let the premises within 21 years from 2008, it requires consent of the Minister of Finance.

The Society has deferred the amounts received and is releasing the funds to income in line with the performance of the conditions attaching to the grant funding. These amounts are disclosed in Note 18.

26. Capital commitments

At 31 December 2017 the Charity had capital commitments as follows:		
,	2017	2016
	€	€
Committed for but not executed in the financial statements	13	110,928
		A

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

27. Related party transactions

The Society provides annual administration services at nil cost for one dormant company. The company is Alzheimer Society of Ireland Home Support Limited. There were no other related party transactions.

28. Company limited by guarantee

The Alzheimer Society of Ireland is a company limited by guarantee and accordingly does not have a share capital.

Every member of the company undertakes to contribute such amount as may be required not exceeding €1.27 to the assets of the charitable company in the event of its being would up while he or she is a member.

29. Post balance sheet events

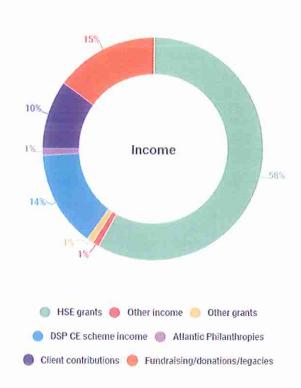
There have been no significant events affecting the charity since the year end which, in the opinion of the Directors, require disclosure in the financial statements.

30. Approval of the financial statements

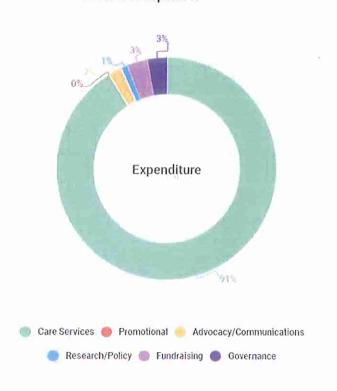
The Financial Statements were approved by the board on 25 May 2018.

APPENDIX 1: ASI IN NUMBERS 2017

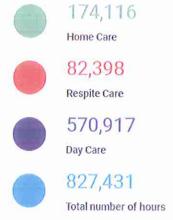
1. Where our monies come from



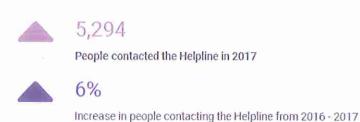
2. How we spend it



3. Service hours delivered



4. Alzheimer National Helpline 1800 341 341





Increase in people contacting about their own or their loved one's cognitive health

5. Mobile Information Service



6. Dementia Adviser Service



2017 Fundraising at a Glance

























A big thank you to all our volunteers & supporters

APPENDIX 3: A History of Alzheimer Society of Ireland (ASI)

A brief overview of the founding and 35 year history of the Alzheimer Society of Ireland (ASI)

Winifred Bligh and Imelda Gillespie met in January 1982, as they had a sister and husband respectively diagnosed with dementia. As carers, they found that not only were they unable to access the most basic information about Alzheimer's disease or dementia but that information, support and facilities for families were non-existent. From this first meeting they founded The Alzheimer Society of Ireland (ASI) and set about changing the landscape of dementia care in Ireland forever.

The early aim of The ASI was to inform, educate and assist those living with Alzheimer's disease and other dementias. In August 1984, ASI was incorporated as a limited company and committee members appointed as directors on the executive committee. Public meetings and support groups continued and by 1987, 2 day centres were opened, a new bus was obtained through donations and a part time office secretary, Nuala Dunphy was appointed. Nuala subsequently became full time secretary and when she retired, became active in her local branch as a member and a volunteer in the Orchard Day Centre until 2017. The ASI continued to promote awareness of dementia through the national media, local newspapers and conferences.

Over the next decade, The ASI developed its branch network. The branches worked unstintingly to raise funds, lobby local politicians, the Health Boards and subsequently the Health Service Executive and provided support to persons with dementia and their carers. ASI Branches have made an enormous impact on the development and enhancement of services and supports since ASI's foundation.

The ASI recognised the need for a national helpline and in 2000 a national free phone helpline service was launched. The helpline has continued to be the only free, confidential information and support helpline service for people with dementia and their families, to people who are concerned about their own or a loved ones' cognitive health and to health and social care professionals working in the field. This service relies heavily on a team of Helpline advises and volunteers commitment and professionalism.

From 2000-2010, The ASI, in addition to providing information, support and services, began to use research and evidence to underpin its advocacy and lobbying. A national advocacy manager was appointed in 2005, a National Dementia Summit was held which brought people with dementia and family carers together to agree priority issues. In 2007 The ASI launched the "Dementia Manifesto: The Time for Action is Now". Funding relationships were established with Atlantic Philanthropies and policy and research evaluations were launched.

The ASI has ensured that the voice of people with dementia and other carers is heard and in 2013 established the Irish Dementia Working Group, representing people with dementia, and the Dementia Carers Campaign Network were established. Convincing government to invest in services and supports has been a key feature of our lobbying and in 2016 an All Party Oireachtas Group on Dementia was launched with the ASI as secretariat.

The Impact of our work over 35 years

The ASI has led the way to raise awareness of dementia, challenge stigma, lobby for political change, including recognition of dementia and the service needs of those living with the condition and their carers.

Since 1982 the ASI developed and expanded and now includes the Voluntary Board of Directors and 19 Voluntary Branches all around Ireland. There are over 400 volunteers at any one time rising to over 1,000 when national fundraising events are held. The number of staff employed is 634 and the number of Community Employment Scheme workers is 139.

Since 1982 The ASI endeavored to provide much needed dementia specific services. By the end of 2017 the range of Dementia Specific services provided by ASI included 52 Day care and 22 Home Care Service and Respite Service, 8 Dementia Advisors, the National Helpline and Information Service and the Mobile Information Service Information Bus, 26 family carer training programmes and over 60 social supports such as support groups, social clubs and Alzheimer Cafés. By the end of 2017 ASI had delivered in the year 824,430 hours through Day Care, Home Care and Respite Services. The Dementia Advisors had taken on 1,532 new clients and the National Helpline was contacted by 5,294 people.

From its establishment in 1982 the ASI provides 68% of all Dementia Specific Services in Ireland

The impact of our work has not been confined to direct service delivery. The ASI lobbied and campaigned on a range of issues both on its own and in collaboration with other organisations. Notable achievements include:

- Succeeded in securing state support from €1million in 1999 to €14ml provided by the Dept. of Social Protection and the H.S.E to provide services
- Lobbied successfully for the development of a National Dementia Strategy in 2014
- Lobbied with partners for the development of a statutory basis for home care support which is now Government Policy.
- Established the first Irish Dementia Working Group, comprising persons living with dementia, who have raised awareness at national and international conferences, spoken on radio and T.V and lobbied government and officials.
- Established the Dementia Carers Campaign Network (DCCN) as a national campaigning group, raising awareness of issues facing families affected by dementia and lobbying for policy change. DCCN are now represented on all key government groups, working party and research activity where the needs of carers are being considered.
- Collaborated with the H.S.E, Genio and supported by more than 30 partners from across Ireland in developing the Understand Together Campaign which is a public support, awareness and information campaign, which aims to inspire people from all sections of society to stand together with the 500,000 Irish people whose families have been affected by dementia.