

Parliamentary Briefing: Dementia care

June 2025

Summary

Dementia is a progressive and terminal condition. There are an estimated 982,000 people living with dementia in the UK, with that number expected to rise to 1.4 million by 2040. The economic impact of dementia in 2024 has been estimated at a staggering £42.5bn.

This briefing outlines challenges and recommendations across four areas of dementia care – post-diagnosis care, delays in diagnosis, social care and acute care. **We urge Members to attend tomorrow's (3 June 2025) general debate on dementia care and raise the points outlined below.**

Post-diagnosis care

People with dementia often depend upon a combination of unpaid care and formal social care – with increasing need for the latter as their disease progresses. **Those needs are often under met or wholly unmet, placing an unacceptable burden on unpaid carers.**

- Two thirds of these unpaid carers are women.
- A third of unpaid carers supporting a person with dementia report spending more than 100 hours a week delivering unpaid care.

A recent Care Quality Commission (CQC) report on dementia care found that **people did not always feel there was ongoing care for people living with dementia** and that they had to seek out community charity support groups themselves.

The CQC also found that **health and social care staff do not always understand the specific, personal care needs of people with dementia**, and that care environments, like hospital wards and care homes, do not always support people's wellbeing.

The older people and carers who responded to Age UK's annual health and care survey reported a number of issues with ongoing care post diagnosis, including a lack of clinical support:

"No help/contact from dementia services for 2 years at least."

"After being diagnosed with mixed dementia he has been cast adrift with no medical support at all."

"It's like my mum has been forgotten about. I have asked for people to go to my mums to vaccinate her, doctors' appointments, etc. but told she will have to get a taxi to the surgery. She is 92 in the latter stages of Alzheimer's!"

What Age UK would like to see:

- **A minimum standard of good-quality post-diagnosis support** for people with dementia and their carers should be established as part of the process of NHS reform.
- Integrated Care Boards (ICBs) to ensure **system-wide commissioning of a range of accessible support for people with a dementia diagnosis**, and their carers, working in partnership with the voluntary sector.

Delays in diagnosis

As of April 2025, **just 65.5% of people aged 65 or over who are estimated to have dementia had a recorded diagnosis**, with significant variation in diagnosis rates across ICBs. We know that delayed diagnosis leads to poorer outcomes for people living with the disease.

Almost a fifth (19% - equivalent to 4.9m) of those Age UK polled in 2023 were concerned about their ability to access dementia services, such as a memory clinic. Many of the older unpaid carers who responded to our latest Health and Care Survey told us of frustratingly long waits for memory assessments and diagnosis:

"It's taken over a year to get a dementia diagnosis and we can't get face to face with GP"

"He has been waiting 10 months for a memory assessment to formally diagnose Alzheimer's or dementia. It is likely to be another three months at least yet"

"It has taken over 12 months to get a diagnosis of Alzheimer's"

What Age UK would like to see:

- More work should be undertaken by Government to further **reduce disparities in dementia diagnosis rates** and ensure early diagnosis and treatment to improve patient outcomes and quality of life for all those affected by dementia.

Social care

There is considerable variation in care home capacity by ICB in England – ranging from approximately 4 beds per 10 individuals with dementia (43.3%) to 10 beds per 10 individuals with dementia (100%) in 2023. **In some parts of England**, and where people have particularly complex needs, **it can be almost impossible to secure an appropriate placement when the time comes**.

Home care recruitment and retention issues can lead to a 'revolving door' of unfamiliar faces arriving to deliver care, which can present challenges for people with a dementia diagnosis. Workforce challenges in care homes can lead to similar situations in those settings.

Age UK is concerned that **ongoing shortages of registered managers and nursing staff in care homes are leaving vulnerable dementia patients in some settings receiving care by staff who are not trained to meet their needs**, without clinical, regulatory or managerial oversight. There is no requirement for care workers to receive dementia training - indeed, only 29% of care workers have received dementia training according to Skills for Care.

What Age UK would like to see:

- Age UK supports the Alzheimer's Society call for **high quality dementia training to be made mandatory for the adult social care workforce**.

Acute care

Dementia patients are likely to have more unplanned admissions to hospital and are likely to stay in hospital five to seven times longer than older people without a cognitive impairment.

The British Geriatric Society estimates that about half of people aged over 70 who are admitted as an emergency have a cognitive disorder. Yet, hospitals are often under resourced, and staff are not trained to meet the needs of patients who may be confused by unfamiliar, noisy surroundings.

We hear many reports of older patients with dementia left without support to eat and drink, and not being assisted with personal care. Undoubtedly **many of these people decondition or deteriorate as a direct result of these deficiencies in care, developing more complex needs than they had on admission.**

In stretched A&E departments we know that **older patients, many with dementia, may also be subjected to distressing, disorientating, and wholly unacceptable corridor care** and/or long waits in ambulances where they are not sufficiently hydrated or fed.

What Age UK would like to see:

- Urgent improvements to staff training in hospitals to **ensure people with dementia who have acute hospital admissions have their needs fully met.**

Parliamentarians: What can you do now?

We are asking Members to attend tomorrow's (3 June 2025) [general debate on dementia care](#) and raise the points outlined in this briefing.

Beyond that, we suggest that the following things would have a large impact:

- **Meeting with us** to discuss dementia care in more detail and learn how our policy recommendations would support your constituents.
- **Using the Chamber** to raise the issues and recommendations outlined in this briefing.
- **Writing to the Secretary of State** for Health and Social Care outlining the issues and recommendations raised in this briefing.
- **Signing up as one of our Age Champions** and pledge to champion older people in Parliament.
- **Joining the APPG for Ageing & Older People** to work on cross-party issues affecting older people.

Get in touch

If you have any questions or would like to meet to discuss the issues outlined in this briefing further, please contact publicaffairs@ageuk.org.uk.