Dementia
Community Appointment Day
Summary Report
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Dementia Community Appointment Day Summary

Background

The Dementia Community Appointment Day (CAD) was piloted as a new model of care to support individuals recently diagnosed with dementia and their carer's. The initiative aimed to promote self-management, improve access to post-diagnostic support, and foster connections with clinical, third sector, and peer-led services. The CAD was designed around Alzheimer Scotland's Five Pillars Model and delivered in a person-centred, locally tailored format.

The event was designed to be unhurried and relational, with a focus on enabling meaningful conversations about future care, legal planning, and community engagement. Each attendee received a Personal Health Passport and was supported through "What Matters to You Most" discussions, facilitated by professionals and trained volunteers. This approach allowed for a more holistic understanding of individual needs and priorities, beyond what is typically captured in routine clinical encounters.

Findings

Feedback from carers, gathered through follow-up interviews, highlighted the CAD as a pivotal moment in their dementia journey. Many described the event as the first time they felt equipped to take practical steps such as applying for benefits, initiating Power of Attorney, or engaging with dementia-friendly activities. These actions were often delayed or avoided due to the emotional impact of diagnosis and the lack of clear guidance at that time.

A consistent theme across the data was the inadequacy of support at the point of diagnosis. Carers frequently reported receiving medication but little else, with no clear pathway or signposting to relevant services. In contrast, the CAD provided clarity, direction, and access to organisations such as CFine, Alzheimer Scotland, and local community groups. This shift from passive receipt of care to active engagement with services was a key outcome of the intervention.

The CAD also revealed important distinctions between carers of those newly diagnosed and those further along in their journey. Newly diagnosed carers expressed acute emotional vulnerability and a need for immediate, digestible information. The CAD helped them begin planning and reduced feelings of helplessness. Meanwhile, carers supporting individuals diagnosed one to five years ago were more focused on navigating ongoing care and managing fragmented service provision. They valued the opportunity to speak directly with professionals and appreciated the practical advice offered, but also highlighted systemic gaps and a lack of continuity.

Several carers reported taking concrete steps following the CAD, including contacting Link Practitioners, engaging with organisations such as Quarriers and VSA, and joining dementia-friendly initiatives like AFC Football Memories and the Living Well Café. Some even began planning for future care needs or considering relocation to improve access to services—underscoring the CAD's role in prompting forward planning and proactive engagement.

While the overall response to the CAD was positive, there were areas identified for improvement. The physical environment was challenging for some attendees, particularly those living with dementia. Noise levels, layout, and unclear expectations contributed to feelings of overwhelm. Additionally, carers noted that services were less accessible for those living outside Aberdeen, raising concerns about geographic equity and the need for more inclusive service design.

Despite these challenges, the CAD was widely regarded as a valuable and empowering experience. It filled critical gaps left by clinical services, fostered a sense of community, and enabled carers to take meaningful action. Importantly, it demonstrated the potential for integrated, multi-agency approaches to improve outcomes and reduce service fragmentation.

From a service planning perspective, the CAD offers a replicable model that could be embedded within local dementia care pathways. Future iterations should consider improvements in accessibility, environmental design, and follow-up mechanisms to ensure continuity of care. There is also a clear need for more carer-specific support and better communication around expectations and next steps.

Conclusion

In summary, the Dementia Community Appointment Day represents a promising innovation in post-diagnostic dementia care. It has shown that with the right structure and support, families can be empowered to navigate the dementia journey with greater confidence and clarity. For clinicians and service leads, the CAD provides a compelling case for rethinking how we deliver early-stage support and how we integrate community and statutory services to meet the complex needs of this population.