## Illuminating community services and assets towards better dementia care

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In dementia care, there is a diversity of services available in the community but these are not integrated and access can often seem chaotic or *ad hoc*. Innovation is required not only to improve services, but importantly to integrate individual services to enable individuals to better navigate services to meet their individual needs. Dementia-friendly communities could play a strong role in this aspect of support.

We conducted informal interviews and attended meetings with multiple stakeholders to explore interactions between the diversity of people involved in services, including: people with dementia and informal caregivers; researchers; Alzheimer society; healthcare professionals; and third sector representatives. We gained insights about current and recent innovative practice, commissioning developments and research projects. Additionally, our own tacit knowledge was used from healthcare, projects to improve organisation and delivery, and research activities. These diverse perspectives were interpreted using a bricolage approach, identifying actors involved and underlying essentials to improve integration and collaboration.

Nine diverse categories of actors were characterised ranging from volunteers, practitioners to healthcare organisations and policymakers. An overview was made on issues addressed and summarized into 21 major themes. These themes were interpreted as essentials. For example, leadership and trust were proposed to enable proactive care because they require a balance between leadership by the individual and practitioner leadership; and involve trust and coordination between all involved. Another example was overcoming denial of dementia and fear of professionals. We connected these issues to actors who may play an enabling role.

Within the discourse about dementia-friendly cities there is an ambition to develop greater depth to the campaign, beyond the initial activity of public engagement and raising awareness. Our overview indicated that diverse assets could contribute towards dementia-inclusive communities, involving multiple actors. Communication within the network should enable individuals to access support tailored to their needs.

Our approach has taken a perspective on wellbeing within a context of local environment, rather than a solely medical model of disease. This overview might well be used to enable dementia-friendly communities to reflect upon the essential issues for continual improvement of seamless care and support, provided by multiple sectors and actors within the community. These findings are consistent with recent World Health Organisation work on assessing Age Friendly Cities; and a new evaluation programme in UK of Dementia Friendly Communities (DemCom study).

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