

From Diagnosis to Direction: Navigating Rural Primary Care Memory Clinics

**Heather Alford¹, Allison Cammer¹, Amanda Dupperon², Debra Morgan^{2,3},
Tora Levinton³, Chelsie Cameron³, and Julie Kosteniuk^{2,3}**

¹College of Pharmacy and Nutrition, ²College of Medicine,

³Canadian Centre for Rural and Agricultural Health

BACKGROUND



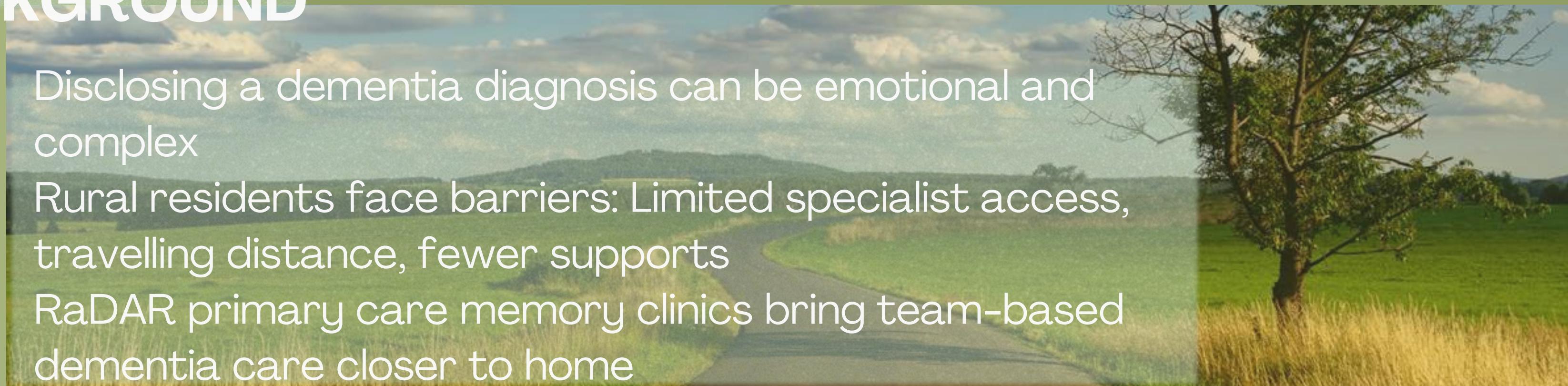
Disclosing a dementia diagnosis can be emotional and complex



Rural residents face barriers: Limited specialist access, travelling distance, fewer supports



RaDAR primary care memory clinics bring team-based dementia care closer to home



METHODS

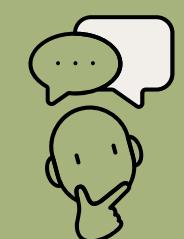
DESIGN



Qualitative descriptive study using semi-structured telephone interviews



Reflexive thematic analysis



Explored patient and care partner experiences of diagnosis communication, recommendations, short-term follow-up, and informal support



PARTICIPANTS

18 participants (2 patients, 16 care partners) across 7 rural Saskatchewan communities

Participants interviewed within one week and again at one month after attending a RaDAR primary care memory clinic (Sept/24–Feb/25)

Ethical approval received from University of Saskatchewan Research Ethics Board (BEH4771) and operational approval from the Saskatchewan Health Authority



RESULTS

Three themes from the clinic journey:

1. Putting the Wheels in Motion

Clarity and relief through compassionate communication.

“We feel like we have help. We don’t have to do this on our own.”

“We finally have an answer.”

2. Building Momentum

Written materials and follow-up boosted confidence.

Informal supports bridged some rural service gaps.

3. Don’t Put the Cart Before the Horse

The one-day clinic was efficient and can be overwhelming.

Time and flexibility are key to meaningful follow-up.

“We needed time to process it; it took a couple of days to really talk it out.”

CONCLUSIONS

Rural primary care memory clinics provide a strong foundation for dementia care.

The clinics are enhanced by:

- Clear, compassionate communication
- Structured yet flexible follow-up
- Collaboration with community-based supports

Strategies for Practice:

- Provide written summaries for both patients and care partners
- Offer follow-up 2-4 weeks post-appointment
- Map and strengthen supports within rural areas can enhance continuity of care
- Clarify team roles and clinic procedures, including follow-up, before the appointment