**Supplementary Figure 1.** Social evaluation in the diagnostic process.

-Resources

Risk situation

Finding out

-No caregiver

Yes

**Identifying**

Main

caregiver (CG)

**Detecting**

-Reduced supervision

-Financial abuse

-Family Burnout

- Wrong interpretation of symptoms

**Assessing**

-Disease Knowledge

-CG’s social and personal coping resources in caregiving

-Demographic data

-Relationship

-Health status

-Family environment

-Ability to play and keep the caregiver’s role

- Degree of strain and burden

- Choosing a caregiver

-Impact on caregiver’s life

depending on his/her previous plans

-Caregiver’s role

assumption

CG previously determined

CG not previously determined

CG has already made plans for the patient

Yes

No previous plans

CG has not made any plans for the patient

caregiver’s role has been gradually taken

care giver’s role has been suddenly taken

-No family

-Lives on his/her own without supervision

-Unwillingness to provide care

-Conflicting family relationships

No

Yes

Own

Family, friends, neighbors

Formal

Materials

Caregiving strategies

**Finding**

**out**

-Resource utilization

-Social and financial status

- Applications

- Available protection measures for people with dementia

Work situation

Caregiving family member

Person with dementia

Nuclear family

Resources: welfare benefits and support

Disability degree, and legal incapacity

-

**Social**

**Evaluation**

CG, Caregiver

**Supplementary**

**Catalan Public Health System GP\*/neurologist, psychiatrist**

**1st. DIAGNOSIS PROCEDURE**

**1. Social Worker**

***Interview with the family (40’*)**

**2. Neurologist/Geriatrician**

***Interview with the family (30’)***

**Figure 2.** Diagnosis

procedure

**\* GP, General practitioner**

**\**NBACE, Neuropsychological battery of Fundació ACE***

**4. Neuropsychologist**

***Patient NBACE\* evaluation (50’)***

**3. Neurologist/Geriatrician**

***Patient clinical assessment (30’)***

**6. Family conference (30’)**

***Diagnosis disclosed to patient and family***

***& follow up (30’)***

**5. Daily consensus conference diagnosis (60’)**