



Careers in Greater Manchester mental health services

Manchester: developing a dementia-friendly community

With its new dementia centre, innovative patient-led research projects, and new treatment and support services, Manchester is at the forefront of combating dementia

by [Sue George](#)

Main image: More than 30,000 people in Greater Manchester live with dementia. Photograph: Tom Merton/Getty Images



Dementia is one of the most significant health issues in Britain today. Around [676,000 people](#) in England and 850,000 people across the UK have the condition. After the age of 65, the chances of a person developing dementia doubles about every five years – so, as the population ages, the number of people living with dementia is likely to increase.

Measures to tackle this, such as the government's [Challenge on Dementia 2020](#) mean that the prospects for interesting work in this area are also increasing. That includes research on dementia and its treatment, and supporting those with dementia and their carers to manage the condition.

The [Greater Manchester Mental Health NHS Foundation Trust](#) (GMMH) is a partner in the [Greater Manchester Dementia Research Centre](#) (GMDRC). The GMDRC was set up in April 2018 as a centre of excellence, with the ultimate aim of curing dementia. As a result, there are many opportunities in the area for psychiatrists to work on different aspects of dementia and its associated diseases.

Manchester is one of the most deprived local authorities in England: [149th out of 150](#), with the highest rates in England for heart disease and stroke. More than [30,000 people](#) in Greater Manchester are living with dementia. There are many possibilities for improving the health of people in this area.

Ross Dunne is a consultant psychiatrist for later life, dealing with mental illness in over-65s. He runs Maple Ward – a 20-bed inpatient unit that accepts admissions from community teams in Manchester, Bolton, Salford and Trafford.

"At any one time," he explains, "about half the people on the ward have complications of dementia – behaviour changes, psychosis or mood illness – and half have 'functional' illnesses, such as severe or life-threatening depression, bipolar disorder or schizophrenia. We claim to provide 'diagnosis to death' care on the ward – there isn't an aspect of dementia care we feel we cannot manage."

Dunne is part of the [Greater Manchester Dementia United](#) working group. Dementia United is a partnership across various agencies in Greater Manchester aiming to improve the lives of people with dementia and reducing pressure on the health and social care system.

He is also principal investigator for several industry trials of disease-modifying dementia drugs and government-funded research through the [National Institute for](#)

[Health Research](#). "I'm keen that as many patients as possible are involved in research," he says. "People involved in research have better outcomes, whether their particular trial proves successful or not."

Other notable research projects in Manchester include the recently completed [Invest](#) study – the largest analysis of non-drug, psychosocial intervention for Parkinson's-related dementia worldwide. GMMH also supports the EU-funded [Sense-Cog](#) programme, led by Prof [Iracema Leroi](#), one of the trust's consultants. This programme is examining the links between age-related hearing and vision impairment and dementia, a significant unmet need.



Alistair Burns is the national clinical director for dementia; the book *Dementia* was co-edited by Burns.

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Mild cognitive impairment (MCI) is another issue addressed by the trust's work. Many more people are now being diagnosed with MCI, meaning they have cognitive problems that are worse than would be expected in a healthy person of a similar age. Around [10-15% of people](#) who had MCI with gradual memory loss go on to develop dementia. One paper in the American Academy's Neurology journal estimated 38% of people diagnosed with MCI may improve, but for 65% of those diagnosed individuals, this [improvement is temporary](#). The trust is working with GPs and charities for older people to offer assessment and services, as well as lifestyle changes, and drug treatment where appropriate.



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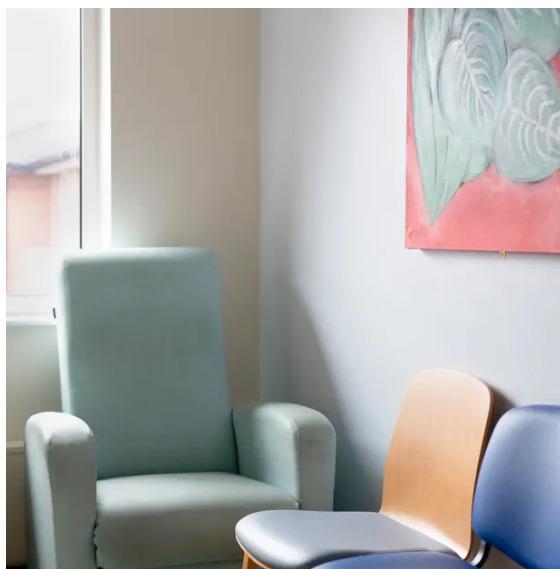
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The management of dementia, developing ways in which people with dementia can be supported, is also significant to the trust's work. For instance, it is involved with the [Neighbourhoods and Dementia](#) programme, in which academic researchers and service providers are collaborating in research projects designed by people with dementia themselves. The [Salford Open Doors](#) group, for people recently diagnosed with dementia, has used film and historical materials to create [videos](#) exploring the changes that have taken place in the area.

Another project is the [early-onset dementia dining club](#), set up by and for people with early-onset dementia, to eat, meet and support each other in various restaurants across Salford.

Alistair Burns is the national clinical director for dementia and older people's mental health at NHS England and NHS Improvement. He is also professor of old age psychiatry at the University of Manchester and an honorary consultant old age psychiatrist in GMMH. "Making communities as dementia-friendly as we can is really important," he says.

This also means ensuring more people are diagnosed and treated outside of hospital. "Rather than having a more traditional memory clinic that is run in hospital, we have initiatives in GPs' own surgeries," he continues. "People with dementia and their carers often prefer that. We know [getting] a diagnosis can be frightening, but people are used to going to the surgery, so it is less threatening."



The Moorside Unit; Jonathan Miles-Stokes

Jonathan Miles-Stokes is a consultant old age psychiatrist, working in the community in the Trafford area. He says the memory team in Trafford have now started to achieve the standard of seeing 80% of patients referred to the memory service and diagnosing them with a dementia in a 12-week period. This was a standard set by the local Clinical Commissioning Group. Miles-Stokes says that while his memory team is small, they are able to be innovative in how they use their time, which is why this standard is being achieved on a regular basis.

He believes Greater Manchester is an exciting place to live and work. "The trust encourages you to do other things outside your day-to-day job," he says. "For instance, I am in charge of ECT [electroconvulsive therapy] in Trafford and am also a clinical tutor, looking after the welfare of the junior doctors, so there are lots of opportunities."

"My colleagues are friendly and flexible," Miles-Stokes adds. "Everyone gets on well; of course, there are frustrations, like with any job, but I can see myself still being here in five or 10 years' time."

Given that GMMH is at the forefront of the latest developments for the management of dementia, and a leading research hub, it will be the first to offer new treatments when they become available.

According to Burns: "Nationally there is excitement over the prospect of new treatment, linking with health and social care, and the satisfying nature of doing clinical work in this area. The trust is a place where those aspirations can be realised very easily."

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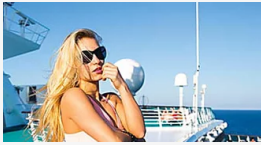


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