

# STEADY ON YOUR FEET



Information and Advice



# Falls

The more details you can remember about a fall, the easier it is to pinpoint a cause so think carefully about:

- When it happened – was it related to time of day? Were you doing something specific at the time?
- How it happened – was it a loss of balance? Did you trip on something? Did you feel dizzy? Did you blackout?
- Where it happened – is there a trip hazard you could remove? Have you fallen in this place before? If so, why could this be?

If you are falling it can be helpful to keep a falls diary so you can track your falls over time. This allows for any trends to be identified and find strategies to prevent or reduce your falls.

Often, rather than one specific reason, there may be a number of underlying risk factors which have played a part, many of which can be reduced by following some simple advice.

These issues may include: -

- Memory loss or confusion
- Dizziness
- Vision and hearing problems
- Poor nutrition and hydration
- Medications or poor pain control
- Alcohol consumption
- Bladder and bowel conditions (including incontinence)
- Muscle weakness
- Poor balance
- Foot pain, deformity or numbness
- Badly fitting or unsupportive footwear
- Environmental hazards

Falling can have an impact on your confidence which may then lead to a vicious cycle of reduced activity and a further increase in falls risk.

Taking a pro-active approach, even if you haven't had a fall, will help you take control of the situation and allow you to remain active and independent for longer with an increased quality of life in the long term.

## Other medical conditions and Falls

It is well known that some medical conditions, such as Parkinson's Disease, Multiple Sclerosis and a history of a Stroke can increase your risk of falls. If you are concerned about how your past medical history may be affecting your falls risk, please discuss this with your GP or an appropriate healthcare professional, such as a specialist nurse who can help you manage your falls risk with your individual

needs.

**Useful links on falls and how to prevent them:**

**[Saga - Get Up and Go Guide](#)**

**[NHS Supporting Older People](#)**

**[NHS Falls Prevention](#)**

**[Age uk- staying steady links](#)**

**[RoSPA Home Safety Videos](#)**



## Blackouts

Blackouts can be difficult to identify, particularly if they are brief, but they should be suspected if you cannot recall the fall and / or have injuries to your face, as this suggests you did not put your hands out to save yourself.

Blackouts are very common and happen more often as we age. Common causes include:

- A drop in blood pressure when changing position (e.g. standing up from a chair)
- Heart disorders
- Anxiety / panic attacks / stress

If you think you may have had a blackout, it is important that you inform your GP so the cause can be investigated.

[More information can be found here](#)



# Dizziness

It can occur for many reasons, e.g:

- A drop in blood pressure when changing position (e.g. standing up from a chair)
- If you feel dizzy when you first stand up:
  - Keep yourself hydrated, you could drink a glass of water whilst sat on the edge of the bed.
  - change position slowly and exercise your arms and legs before rising
  - Sit back down again if you feel dizzy and wait until it passes
  - Stand still or walk on the spot when you first get up and don't rush

## Dehydration

- Make sure you drink plenty of fluids during the day (6-8 cups per day)
  - please note this is good general advice unless you have been prescribed diuretics 'water tablets'. These tablets are designed to make you pass more urine, drinking more will negate the effect of the tablets. So if this applies to you, you should only drink normal amounts or, if you have been given a 'fluid restriction' ( an upper limit to the amount you can drink per day) please continue to observe that.
- Drink regularly throughout the day
- Reduce caffeine and alcohol intake

## Inner ear disorders / vertigo

- If you feel like the world is moving or spinning, or your dizziness is associated with nausea, vomiting, visual changes or hearing disturbances contact your GP surgery for further advice
- Ensure you have had a hearing assessment recently

## Medications

- Discuss your symptoms with a community pharmacist if you are taking medication, particularly medication related to blood pressure

## Medical conditions (e.g. diabetes, COPD)

- Consider whether your condition is well managed and discuss with a health professional if you need further advice

## Anxiety

- Try some relaxation techniques such as mindfulness or deep breathing
- Talkworks is a Devonwide (excluding Plymouth) initiative, if the way you are feeling is affecting your daily life. It can help you to feel better and giving you the tools and techniques to improve your mental and physical wellbeing.

- Discuss with your GP if severe

## Further information

[TALKWORKS | Mental Health Support for Devon](#)

[NHS information on dizziness](#)



## Medication

It is important to have your medications reviewed regularly by your GP or pharmacist so they can ensure each medicine is still needed and appropriate, keep an eye on any side effects and alter dosages if necessary. This is particularly important as we age as our sensitivity to medicines increase and dosages may need to be adjusted accordingly.

Do not stop taking medications, or take self-purchased medications or herbal remedies without first consulting your GP or pharmacist.

Make sure you take your medications as prescribed by your GP. There may be specific instructions such as taking them at a certain time of day or on an empty stomach etc., that are important to their effectiveness.

Consider filling a dosette box to help organise your medications and/ or using an alarm to prompt you to take them.

Drinking alcohol may increase the risk of drowsiness whilst taking some medication so always check with a pharmacist or GP if this is safe to do

Your pharmacist may also be able to advise you of alternatives if struggling to swallow tablets.

### Pain relief and falls

Pain can affect the way you mobilise, and poor gait pattern increases the risk of falls.

#### **What I can do:**

- Take pain relief as prescribed. Regular pain relief helps you remain active in a safe way. If you do not like taking pain relief regularly, make sure you take some before you are active, for example going out shopping or to an appointment
- Speak to your GP about your pain relief if you are concerned about taking it, or you do not feel it is effective
- Consider alternative forms of non-pharmaceutical pain relief such as heat, ice or TENS machines. They may not cure the pain but may make it more manageable

#### [Help from a Pharmacist](#)



## Environment

Often this is because of hazards within the home or difficulty with daily activities such as getting in / out of bed, on / off a chair or toilet, or in / out of the bath may also cause falls.

Falls prevention in and around the home is often described as 'common sense', however, it isn't always easy to recognise the things that can cause trips, slips and falls.

Use our home safety section to help you identify and remove hazards within your home

[View Home Safety Section](#)





## Movement and Exercise

Between the ages of 50 and 70 we lose about 30% of our muscle strength and, as we age, our balance reaction times get slower which makes it harder to stay steady, especially if we are doing something quickly. Without physical activity, it is also difficult to maintain strong bones.

There is strong evidence that strength and balance exercise programmes are effective in preventing falls, regardless of age. Exercise classes designed for older people are particularly beneficial as they aim to improve balance and strength, making it easier to get in and out of chairs, on and off buses and up from and down to the floor.

### **[Click here for some strength and balance exercises to get you started](#)**

Generally speaking, physical activity is any movement that results in a small increase in your heart rate and breathing. Exercising is safe and beneficial for the majority of people, but, if you experience chest pain or feel faint while exercising you should stop exercising immediately and contact your doctor. To minimise the risk of adverse effects, if you are new to exercise, begin slowly and gradually build up to the recommended amount:

- Physical activity on most days adding up to 150mins moderate intensity exercise each week (e.g. walking, swimming, cycling)
- Strengthening exercises 2-3 times per week (e.g. gym, carrying heavy bags, yoga)
- Challenging balance activities 2-3 times per week (e.g. tai chi, bowls, dancing)

Something is better than nothing, even if it is just breaking up long periods of sitting with regular walks around the house or doing some exercises in your chair. Please note that chair based exercises, while beneficial for many other things, **DO NOT** prevent falls – exercises must challenge your balance if they are to be effective. If you are already reasonably active, you still need to ensure your strength, balance and bone health is at its best. Tai Chi and any form of dancing are great activities to help your bones, muscles and balance.

If you need help or advice about the best activities for you, speak to a physiotherapist or appropriately qualified exercise professional.

"Remember – Keeping active is vital. If you feel unsteady and a walking aid helps you feel steady and keep active this it is your ticket to freedom.

Using a walking aid is not 'giving up', it is a way of enabling you to maintain fitness including strength, balance and stamina. All of which support independence.

## Further Information

For further information regarding community exercise opportunities for older people:

[Active Devon: Active Ageing - Active Devon](#)

[Pinpoint Devon: Support services for older adults in Devon](#)

Evidence Based Strength and Balance Classes



## Vision

You may not notice that your vision is changing but, as we age we become less able to adapt to changes in light and darkness, to tell colours apart and to accurately see depth and distance. This can cause problems with bifocals / varifocals, even if they have been worn for years so if you do wear this kind of lens, take care on steps, stairs and patterned or uneven surfaces.

The older we get, the more common eye conditions such as cataracts, glaucoma and macular degeneration become but, with 70% of visual problems being correctable, it is extremely important to ensure that you have regular eye tests. Remember that eye tests are free if you are 60 or over and many opticians can visit you at home if you are unable to go out and about.

It is important to tell your optician if you are worried about falling or if you have fallen over. They may can take this into consideration when reviewing your treatment plan.

## Further Information

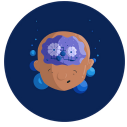
Further information can be found here:

[NHS eye health advice](#)

[Age UK eye health advice](#)

[Find an optician](#)

[Royal National Institute of Blind People](#)



## Memory

This may just be a gradual deterioration associated with ageing but can also be associated with stress, poor sleep, infection, certain medications, dementia and excessive consumption or withdrawal from drugs or alcohol.

If your memory issues are minor, you may find that keeping your brain active with puzzles and games or using visual prompts and lists as reminders can help.

Keep yourself oriented by reading or listening to the news and making a note of the date each day.

If memory problems are severe they can impair judgement, reasoning and insight which can then result in risk taking behaviour which may then lead to falls. The ability to recognise and interpret sight, sound and touch may also be affected which can lead to communication and movement difficulties. If you or your friends and family have noticed a change in your memory or behaviour, it is important that you discuss this with your GP or other health professional.

### Further Information

For further information follow the links below:

[NHS information on memory loss](#)

[AgeUK Advice on Dementia](#)



# Nutrition and Hydration

It is important to speak to your GP if you are losing weight for an unknown reason as it could be a sign of an underlying medical condition.

Poor nutrition can result in a weakened immune system, difficulties absorbing medication, impaired wound healing and a reduction in muscle and bone strength which may then lead to an increase in falls. Even if your weight is normal, if you are eating a limited range of foods, you could still be malnourished.

Good hydration is equally as important as water makes up two thirds of our body and is vital to help digestion and flush out toxins. Being dehydrated can cause headaches, confusion, dizziness, constipation, urine infections, etc. which may all increase the risk of falls. Signs that you are not drinking enough can include feeling thirsty, headaches, tiredness, dry mouth / lips, confusion, dark / smelly urine, constipation.

If you are unsure if you are eating a balanced diet or drinking enough fluid, try keeping a food / drink diary and comparing it to the guidelines below. There are many reasons that your diet may be poor such as small appetite, swallowing difficulties, difficulty sourcing or preparing food, illness and problems with dental health. If you have difficulty shopping or preparing food, speak to family / friends who may be able to help or consider a meal or shopping delivery service. Contact social services if you are having particular difficulties preparing meals and other daily activities as they may be able to help.

Try to eat a varied, balanced diet and maintain good hydration by eating / drinking:

- 2-3 portions of high protein foods every day such as meat, fish, eggs, nuts, beans, pulses, soya, tofu and other meat-free protein foods
- 2-3 portions of dairy foods every day such as cheese, milk and yoghurt or non-dairy alternatives like soya, almond or coconut milk
- 1 serving of starchy food at each meal (e.g. bread, cereals, potatoes, pasta or rice)
- Some fruit and vegetables every day (fresh, frozen, tinned, dried or juiced)
- If you enjoy fish, go for oily fish such as mackerel, salmon, herring, trout, pilchards or sardines as these are rich in omega-3 fatty acids. Aim for 2 portions a week
- At least 6-8 glasses/mugs of fluid every day - keep caffeine intake low as this can worsen dehydration
- If you have diabetes please consult your GP, nurse or dietician before making any changes

## Further information

[NHS Eat Well](#)

[AgeUK Health Eating](#)

[British Dietetics Association - Older Adult food facts | British Dietetic Association \(BDA\)](#)

[Care Direct - Support and advice for older adults living in Devon | Devon County Council](#)

[Find a Dentist: Find a dentist - NHS \(www.nhs.uk\)](https://www.nhs.uk)



## Bone Health

Osteoporosis is a condition which causes reduced bone density and increases susceptibility to fracture (breaking a bone). It is more common in women due to bone loss occurring more rapidly after menopause. The likelihood of having osteoporosis increases if you:

- Have ever broken a bone following a minor bump or fall (over the age of 50)
- Have a low BMI
- Have a family history of osteoporosis or hip fracture
- Are a current smoker or drink more than 3 units of alcohol per day
- Have taken oral corticosteroids (e.g. Prednisolone) for more than 3 months
- Have a diagnosis of Rheumatoid Arthritis
- Have Type I diabetes, untreated hyperthyroidism, chronic malnutrition/ malabsorption, chronic liver disease
- Have gone through a premature menopause (<45 years) without taking HRT

If you have broken a bone after a minor bump or fall and haven't discussed your bone health with another professional, it is important to see your GP so your bone health can be assessed. Diet and lifestyle changes can help to keep your bones as strong as possible, regardless of whether you have osteoporosis or not:

- Stop smoking as this can damage the bone building cells in your body
- Keep your alcohol intake low — excessive alcohol can destroy bones and make you unsteady
- Try to take some sort of weight bearing exercise
  - If you have not broken a bone before, exercise which encourages moderate impact as jogging, jumping, stamping would be beneficial.
  - If you have had a previous fracture or are diagnosed with osteoporosis, The Royal Osteoporosis Society can guide you as to which exercises may be suitable for you. Alternatively speak to your physiotherapist
- Ensure your Vitamin D intake is sufficient. We get most of our vitamin D from sunlight and most people in the UK get enough vitamin D by spending 15 minutes in the sun three times a week. It is recommended to take Vit D supplements, particularly over the winter months or if you do not go outdoors. These are available in supermarkets or pharmacies
- Ensure you include plenty of calcium in your diet (1000mg a day)
- if you eat all of the below you will achieve 1000mg calcium:
  - 2 whole grain bread,
  - 2 slices of gouda, edam or emmental cheese,
  - 1 serving of broccoli,
  - 2 glasses of mineral water, and.
  - 1 pot of yoghurt (200 g).

[The Royal Osteoporosis Society](#)



## Feet

Trimming your toenails using a long handled file after bathing, when they are softer, can make them easier to manage independently. If you struggle or you have foot problems that you cannot manage yourself, a podiatrist or chiropodist can help. This is especially important if you have diabetes.

Try to wear footwear that protects and supports your feet with non-slip soles that are not too thick. Avoid high heels or backless footwear as they are more likely to cause you to trip.

## Further information

[Find a Podiatrist](#)





## Bladder / Bowel

Some bladder and bowel problems can increase the risk of falls:

- Strong urge to urinate
- Urine infections
- Passing urine more than 10 times in 24hrs
- Having to go to the toilet more than twice nightly
- Constipation - having hard bowel movements less than 3 times a week
- Diarrhoea - loose watery faeces that need to be passed urgently
- Difficulty accessing toilet

These issues can be exacerbated by poor hydration and high caffeine and / or alcohol intake. You can help to keep your bladder and bowel healthy by drinking 6 to 8 cups of fluid per day (unless advised otherwise) and minimising any drinks containing caffeine or alcohol.

Eating a balanced diet with plenty of fibre e.g. wholegrain bread, cereals, peas and beans and fruit and veg, can help to ease constipation. If you find it difficult getting to the toilet at night, a commode or urinal may be helpful. Speak to your GP about a continence assessment if you are having on-going issues and require further support.

[Pelvic floor exercises](#)



## Fear of Falling

The more worried you become about falling over, the less likely you are to keep active which, in turn, makes you more likely to fall again. You may find that you are more careful with your walking, start to slow down your pace or you begin to leave the house less often. These are very common behaviours and it may mean you've lost some of your confidence when getting around. It is important to remember that there are lots of things that you can do to reduce your risk of falling and improve your confidence. It is really important to keep moving as this maintains muscle strength, see the movement and exercise section for more information. Working through the self-assessment tool on this website is a great start.

Having a falls plan in place can help to reduce anxiety and will reduce the likelihood of being on the floor for a long time. You may want to consider the following as part of your falls plan:

- Have a pendant alarm or mobile phone with you at all times. It may also be helpful to keep a phone at a lower level.
- There are also telecare sensors available such as falls detectors for people who would not be able to press a pendant alarm.
- Keep a dining chair in any room that doesn't have furniture that might help you stand up.
- Make sure there are blankets in each room so that you can keep warm

If you are hurt or unable to get up:

- Summon help by using your pendant alarm, calling out, crawling to a telephone or banging on a wall
- Use a blanket to keep warm.
- Move to a softer surface if you are able
- Change position regularly if you are able

If you are unhurt and feel you can get up:

- Roll over onto your hands and knees
- Crawl to a stable piece of furniture such as an armchair and use this to assist you with getting up
- Turn and sit on a chair or bed and rest for a while

If you are worried about falling when you are alone at home, you might want to get a pendant alarm to enable you to call for help even if you can't reach the telephone.

There are also telecare sensors available such as falls detectors for people who would not be able to press a pendant alarm.

### **Remember**

- If you have had a fall, try not to worry about it too much. There are plenty of things you can do to minimise your risk of it happening again
- If you do fall, even if you're not injured it is really important to let someone know. It may also be

helpful to keep a falls diary to track and falls you have. This may allow patterns and trends be identified and reduced.

- If your worries are not going away, try talking to someone about it
- Set yourself small goals to build back up to your usual activities – e.g. walk for a short distance first
- Think about all the times you haven't fallen and try to maintain your usual levels of activity

### **Complete a self-assessment and develop an action plan**

## Further Resources/Pendant Alarms

[East Devon: About Home Safeguard](#)

[Exeter: Home Call alarm service](#)

[Middevon: Lifeline alarms](#)

[North Devon, Care Direct](#)

Talking Therapy, Devon (excluding Plymouth) [TALKWORKS | Mental Health Support for Devon \(dpt.nhs.uk\)](#)

Talking Therapy, Plymouth [Plymouth Options | Livewell Southwest](#)

# Sleep and Falls

## What I can do:

- Limit your daytime sleep
- Be as active as you can during the day
- Have a set bedtime routine
- Milky drinks before bedtime may help
- Tea and coffee later in the day are likely to keep you awake. Try switching to decaffeinated versions of your favourite drinks
- Play music you enjoy or that is especially good for relaxation before going to bed
- Try not to worry about the things you cannot change

It is important to sleep in bed whenever possible as it helps to improve circulation, to reduce swelling in limbs, and ensures all muscles in the body are in a relaxed state when lying in bed.

Sleeping pills are a common risk factor for falls, especially if you find yourself falling in the night or in the morning. If you are on regular sleeping pills, you may wish to speak to your GP about this.

Fatigue and boredom can also affect how alert we feel, which can increase falls risk. Keep to a good routine and try to keep your mind active by doing crosswords, reading the paper etc. Avoid sleeping for too long during the day, and pace yourself to manage fatigue.

## Rolling out of bed

If you are rolling out of bed as you are asleep consider;

- Try to sleep more centrally in the bed.
- Ask your GP to review night time sedatives (sleeping tablets) as this could contribute to this.
- Elevate the edge of the mattress

If you are falling or slipping from the bed when you are trying to get in or out, consider:

- Adapting the height of the bed- if it is too low it is easy to get in but hard to get out off.
  - If the bed is too high- it will be hard to get in, and you may 'slide' out. You could remove casters, or invest in a shallower mattress
  - If the bed is too low- it will be hard to stand from. You could raise the bed, a mobility shop or the independent living centre can help advise on this
- If you are struggling to stand from the bed and the height is correct for you, try building in some strengthening exercises into your daily routine (see exercise tab)
- If you are struggling to get in and out of the bed a bed leaver could help. Speak to a mobility shop or the independent living centre. If you have an electronic bed you could try to flatten the knee break on an electronic bed.
- Other factors which may increase your risk of falling are; the sheets are too slippery or the edge of the mattress is too soft.

Bed handles to assist with bed transfer, for this speak to Occupational therapy or other health professionals for advice.

## Further Information

Independent Living Centre: <https://www.independentlivingcentre.org.uk/>

Mobility Shops

Community Rehabilitation Team:

Axminster: [01297 630435](tel:01297630435)

Crediton: [01363 777561](tel:01363777561)

Exeter Central and East: [01392 465666](tel:01392465666)

Exeter South and West: [01392 908616](tel:01392908616)

Exmouth, Budleigh & Woodbury: [01395 282021](tel:01395282021)

Okehampton: [01837 658029](tel:01837658029)

Seaton Rehab: [01297 626740](tel:01297626740)

Sidmouth: [01395 519909](tel:01395519909)

Tiverton: [01884 235492](tel:01884235492)

North Devon & Torridge: please contact your GP for referral to the rehabilitation team.

## Further Help and Contacts

### For General Advice

#### AGE UK

Contact number: 0800 678 1602

Tackling the issues of loneliness and isolation to improve wellbeing. We know that growing older doesn't come with a manual. That's why we provide free information and advice to help you on topics as diverse as claiming benefits to care homes

#### Care Direct

Contact Number: 0345 155 1007

They can provide advice and support working with adults in Devon for whom activities of daily living (because of illness, older age, or a disability) can be difficult. They can also support people who have sensory difficulties such as hearing or sight loss. The aim is to help people to live as independently as possible, for as long as possible. They are able to support with getting a personal pendant alarm.

#### Devon and Somerset Fire and Rescue Service

Contact number: 01392 872200

Website: <https://www.dsfire.gov.uk/>

They can carry out Fire Home Safety Check. Advice on fire safety, making an escape plan, fire safety equipment and what to do in the event of a fire. They also provide fire safety advice for people with sight, vision or hearing difficulties. Advice for disabled people and carers.

#### Independent Living Centre

Contact 01392 380181 or [ilc-exeter@devon.gov.uk](mailto:ilc-exeter@devon.gov.uk)

Website: <https://www.independentlivingcentre.org.uk/> Twitter: @ILCDevon Facebook: @DevonILC

A Devon NHS and Devon County Council funded Equipment and technology centre based in Newton Abbot, offering free, impartial equipment and technology advice, information and assessments. Contact for advice and information or to book an appointment to visit the centre where one of their specialist NHS therapists can assess your needs and demonstrate equipment and technology for daily living and mobility.

## Local Mobility Shops

<https://www.independentlivingcentre.org.uk/local-suppliers/>

## Pinpoint Devon

Website: <https://www.pinpointdevon.co.uk/>

Providing health and support information for living well and staying safe. They have a directory of community services across Devon.

## Torbay and South Devon NHS Public Website

Website: [Healthy ageing and frailty - Torbay and South Devon NHS Foundation Trust](#)

Healthy ageing and frailty information for a range of support to help you stay healthy and independent throughout life.

## Plymouth Online Directory

Contact Number: [01752 668000](tel:01752 668000)

Website: [Plymouth Online Directory - Plymouth Online Directory](#)

A community-based directory with a focus on health, social and wellbeing services in Plymouth.

## For personal alarm pendant:

**Across Devon: The Independent Living Centre** (details above) can provide advice and information around personal pendant alarms.

Website: <https://www.independentlivingcentre.org.uk/local-suppliers/>

### **East Devon: Home Safeguard Alarm Services.**

Telephone: [0330 678 2381](tel:0330 678 2381) Website: [About Home Safeguard - East Devon](#)

### **Exeter: Home Call Alarms.**

Telephone: [01392 682349](tel:01392 682349) Website: [Home Call alarm service - Exeter City Council](#)

### **Middevon: Lifeline Alarms.**

Telephone: [01884 255255](tel:01884 255255) Website: [Lifeline alarms - MIDDEVN.GOV.UK](#)

### **South Devon (Dartmoor National Park, Newton Abbot, Teignmouth and Dawlish): Teign**

## **Housing**

Telephone: [01626 355135](tel:01626355135) Website: [Lifeline Alarms - Teign Housing](#)

### **Plymouth: Plymouth City Council.**

Telephone: [01752 668000](tel:01752668000) Website: [Personal alarms, security systems and key safes - Plymouth Online Directory](#)

Or for further assessment if you are struggling to manage around your home

### **Contact your Local Community Rehabilitation Team**

Axminster: [01297 630435](tel:01297630435)

Crediton: [01363 777561](tel:01363777561)

Exeter Central and East: [01392 465666](tel:01392465666)

Exeter South and West: [01392 908616](tel:01392908616)

Exmouth, Budleigh & Woodbury: [01395 282021](tel:01395282021)

Honiton, Ottery St Mary and Cranbrook: [01404 540549](tel:01404540549)

Okehampton: [01837 658029](tel:01837658029)

Seaton Rehab: [01297 626740](tel:01297626740)

Sidmouth: [01395 519909](tel:01395519909)

Tiverton: [01884 235492](tel:01884235492)

Torbay and South Devon: Customer Service Centre for Falls, Mobility and Home Assessments [01803 219700](tel:01803219700)

North Devon and Torridge: Please contact your GP for referral

Plymouth: Please contact your GP for referral

If you are unsure which team to contact, please contact the one closest to your GP.

Alternatively, you can contact your GP surgery and ask to be referred for an assessment.

## Keeping Active

Active Devon

Website: <https://www.activedevon.org/>



They work together with communities and partners, to connect, advocate and enable people to move more

Chartered Society of Physiotherapists

Six exercises for staying steady.

Website: <https://www.csp.org.uk/publications/get-go-guide-supplement-six-exercises-staying-steady>

Royal Osteoporosis Society

Contact number: [0808 800 0035](tel:08088000035)

Website: [Royal Osteoporosis Society | Exercise and physical activity for osteoporosis \(theros.org.uk\)](https://www.theros.org.uk)

For information on osteoporosis and suitable exercises

## Other Useful Links

### **RNIB**

Contact number: [0303 123 9999](tel:03031239999)

One of the UK's leading sight loss charities and the largest community of blind and partially sighted people. We recognise everyone's unique experience of sight loss and offer help and support for blind and partially sighted people – this can be anything from practical and emotional support, campaigning for more accessible transport, reading services and the products we offer in our online shop.

### **OneSmallStep**

Contact number: [0800 2982654](tel:08002982654) or [01392 908139](tel:01392908139)

A Devon County Council funded initiative that helps people lose weight, stop smoking, reduce alcohol intake and become more active.

### **One You Plymouth**

Contact Number: [01752 437177](tel:01752437177)

Website: [One You Plymouth | Become a healthier you](https://www.oneyouplymouth.org.uk)

Providing lifestyle advice for people who live in Plymouth

**STEADY ON  
YOUR FEET**

[www.steadyonyourfeet.org](http://www.steadyonyourfeet.org)