

# A guide to later life

maintaining  
independence  
and living well



**NHS**  
Hartlepool and Stockton-on-Tees  
Clinical Commissioning Group

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# Welcome



Hartlepool and Stockton-on-Tees' older people contribute a huge amount to the region. To help this continue, it is really important that older people are able to live as independently and safely as possible including; staying connected with friends, family and community. Older age should be celebrated.



Independence and well-being can be more difficult to maintain for those who become frail or who have one or more chronic illnesses. If the right support is not available, poor health can restrict older people's ability to continue living life to the full.



Older people who are frail, or who have long-term illnesses, therefore need support to manage their health conditions so that they can maintain the aspects of their lives that they most value. We understand support needs to go beyond clinical and care issues to include the whole range of factors and concerns that older people see as most important.



Even at the oldest ages good choices about a healthy lifestyle can make a big difference. We hope you enjoy reading through the information and it helps you stay as fit and healthy as you can.

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# A guide to services

We have a wide range of healthcare and adult services.  
See which service or professional is best to help you.

## Self-care

Self-care means keeping fit and healthy, as well as knowing how to take medicines, treat minor ailments and seek help when you need it. If you have a long-term condition, self-care is about understanding that condition and how to manage it.



When it's less urgent than 999

## 111

If you think you need help urgently during the day or night you should call **NHS 111** before you go to any other health service.

By calling **NHS 111** you will be directed straight away to the local service that can help you best. It is available 24 hours a day, 365 days a year and is free to call, including from a mobile. You should call **NHS 111**:

- When you need help fast but it's not life threatening.
- When you think you need to go to A&E or another NHS urgent care service.
- When it's outside of your doctor's surgery hours.
- When you do not know who to call for medical help.
- If you do not have a local doctor to call.

## Doctor

You will need to register with a local doctor. Your doctor can advise, give you the medicines you need and point you in the right direction if you need other specialist services. You will usually need to make an appointment. After 6.30pm weekdays, at weekends and public holidays you can call the GP out-of-hours service on **NHS 111**.

## Pharmacist

Your local pharmacist will know about most everyday health issues. They can suggest the best medicine to help. Tell them if you are taking another medicine.

## A&E

**Call 999 for immediate, life-threatening emergencies.** A&E and 999 are emergency services that should only be used when badly injured or have symptoms of critical illness.

## Social Care

Most of the support we give is aimed at supporting people to keep their independence, in their own home and in their local community. We offer support and information on your health, day services and opportunities to socialise in the community as well as advice on things like having a social worker, housing and entitlements.

## Dementia support

The Alzheimer's Society Dementia Friendly Communities Initiative. It is about organisations, communities and individuals enabling people with dementia to continue living a good life by making them feel supported, welcomed and encouraged about accessing their local community.  
**www.alzheimers.org.uk**

## Voluntary sector

We have a great voluntary support network throughout our community. The voluntary sector offers support in the form of health groups, practical support with things like transport, wheelchair loan and coffee shops. They provide thousands of volunteers to help make a difference in our community. You may also wish to be a volunteer and help others too.



### Contacts

For information on money matters, benefits, keeping healthy, travelling and more, contact your local Age UK. Call 0800 169 6565 for advice or information or visit [www.ageuk.org.uk](http://www.ageuk.org.uk)

### What can I do?

- Try to get the help you need to remain as independent as possible.
- Find out as much as you can about your illness.
- Talk to your doctor or practice nurse about the medicines you are taking.
- Review your Care Plan regularly, if you are unsure what this is, ask your doctor.
- Taking care of your own health, known as 'self-care', can help you overcome the day-to-day challenges of your condition.
- It really helps to lead a healthy lifestyle if you have a long-term condition, talk to your doctor and other healthcare workers about this.

# Long-term conditions

## Management and understanding

Many older people have one or more long-term condition, which may include frailty, heart disease, dementia, arthritis, diabetes and respiratory disease. These conditions cannot be cured but can be controlled (and often improved) with medication and other therapies. Having a long-term condition does not mean you cannot keep your independence and quality of life.

Living with a long-term condition or having a partner who is affected can be a challenge. There is support and information to help you be well equipped to manage your condition and in turn to be as independent as possible.

Knowing about and understanding your long-term condition can really help. Visit your doctor to review your condition and medication regularly and make sure you attend check-ups.

Make sure you discuss your medicines with your doctor and pharmacist. Sometimes, taking a mixture of different medicines can result in forgetfulness, dizziness or feeling unwell (all over 60s are eligible for free NHS prescriptions).

### Your Care Plan

Everyone with a long-term condition can have a Care Plan. It is written especially for you and will help you receive the help you need from health professionals and social workers. You decide together what care and support you need and how it will be provided. It's based on what you want, so you're in control. If you think a Care Plan could help talk to your doctor, nurse or social worker.



### Doctor says

There are several forms of effective treatment, including:

- Lifestyle changes, such as losing weight.
- Pelvic floor muscle training (exercising your pelvic floor muscles by squeezing them).
- Bladder training, so you can wait longer.

Your doctor or the Continence Advisory Service can assess what type of bladder or bowel problem you have, give general advice on controlling symptoms, give information on pelvic floor exercises and bladder training and give treatment with prescribed medicines.

### Recommended daily fluid intake

To function effectively and avoid dehydration, the recommended guidelines advise 8 cups should be drunk daily (NPSA 2007).



# Continence

## Surprisingly common

Bladder and bowel problems are surprisingly common but embarrassment stops many people from talking to their doctor. Whilst it is more likely, it is not inevitable, that we may lose some bladder control as we get older. In general, urinary incontinence affects twice as many women as men and becomes more common with increasing age.

It is normal to go to the toilet four to seven times a day and pass up to a pint of urine at a time. People with urinary (wee) incontinence get the urge to go far more often and pass a lot less urine each time. Make sure you do not stop drinking, this can lead to dehydration, bladder infection, dizziness and other complications. Bowel incontinence can be a bowel accident, when you don't reach the toilet in time, or leaking from the bowel that you are unaware of.

Some people are not incontinent but still have a problem with their bladder or bowel. The symptoms can be improved, and often cured, with simple methods. Your doctor can also check the symptoms for other complications.

There are specialist nurse led continence clinics with home visits for those unable to travel.

### What can I do?

- Do not stop drinking, this could lead to dehydration.
- Try not to be embarrassed and get help.
- Ask about the Continence Advisory Service.
- Ask about incontinence products such as pads or appliance for bedding.
- Avoid using sanitary pads for incontinence.
- Avoid constipation. Speak to your doctor or practice nurse and get advice on eating well.



### Recommended daily fluid intake

To function effectively and avoid dehydration, the recommended guidelines advise 8 cups should be drunk daily (NPSA 2007).



# Constipation

## Simple things can help

Constipation is more common in older people. Stools (poo) are often dry and hard and it might be painful or difficult to go to the toilet. How often you have a poo alters from person to person and may be 2-3 times daily to twice per week so think about what is 'normal' for you.

Constipation can be caused by a number of things such as not eating enough fibre or not drinking enough fluid. Some conditions can cause constipation, as can a lack of exercise or movement (such as being in bed or immobile) and some medicines.

Make sure there is enough fibre and fluid in your diet. Drinking enough fluid is important. Introduce apple, pear or prune juice. Try a glass of fruit juice or warm water with lemon each morning to help with regular bowel movements. Leaving the skins on fruits and vegetables, if they are edible, will increase fibre intake. Cut down on foods that may cause constipation, such as cheese and eggs, as well as those that cause gas, such as carbonated drinks, broccoli and cabbage.

### What can I do?

There are simple things you can do to avoid constipation:

- Constipating medication should be adjusted.
- Increase dietary fibre.
- Drink enough.
- Exercise (where possible), some movement is better than none.
- Ask about laxatives.



### Nurse says

It is important to drink 8 cups of fluids a day which can include water, tea, herbal teas, fruit juices and sugar-free squash. Avoid constipation as an overloaded bowel can prevent the catheter from draining.

You should be able to live a relatively normal life with a urinary catheter. The catheter and bag can be concealed under your clothes.

### Recommended daily fluid intake

To function effectively and avoid dehydration, the recommended guidelines advise 8 cups should be drunk daily (NPSA 2007).



# Catheter care

## You can live a relatively normal life

A urinary catheter is usually used in people who have difficulty passing urine naturally. It can also be used to empty the bladder before or after surgery and to help perform certain tests.

Depending on the type of catheter you have and why it's being used, the catheter may be removed after a few minutes, hours or days, or it may be needed for the long term. Catheters should only be inserted by a trained healthcare professional. Catheters should be avoided if at all possible and it is important to discuss alternatives. A catheter should be removed by your doctor or nurse, not by you.

A catheter is inserted via the urethra (a urethral catheter).

### There are different types of catheter:

- An indwelling catheter is one that stays in place all the time.
- An intermittent catheter is inserted at regular intervals during the day to drain the bladder and is then removed.

### What can I do?

- Ask if there is an alternative to using a catheter.
- Make sure you drink enough fluid.
- Take extra care with personal hygiene.
- Women should make sure they wipe front to back after going to the toilet.
- Eat well and avoid constipation.

## I care for a person with dementia

### Help at home:

There are lots of things a carer or family can do to support the person with dementia and help them stay independent:

- Always put things like keys back in the same place.
- Keep important numbers next to the phone.
- Put notes on important cupboards and doors.
- Keep a large calendar with space to write daily reminders.
- Write a daily 'to do' list for last thing before bed, like lock door, check oven is turned off.



# Dementia

## More serious than just forgetting things

Dementia often develops slowly and is not always noticed in the early stages. Sometimes dementia can be confused with mild forgetfulness often seen in normal ageing. Some medicines and drugs, depression, anxiety, unhealthy eating and thyroid problems could also cause forgetfulness and may not be dementia at all. All types of dementia damages brain cells meaning that the brain cannot work as well as it should.

Some medicines and drugs, depression and anxiety can cause forgetfulness.

### See your doctor if you are worried about:

- Your memory.
- You find it difficult to recognise people or objects you know.
- You find it hard to write or talk.
- You find it hard to carry out daily tasks.
- Your personality and mood changes.

Your doctor will be able to either reassure you or refer you to a specialist. Early diagnosis of dementia is important to allow you to get the right help and treatments and to plan for the future.



### What can I do?

A healthy lifestyle may reduce the risk of developing dementia:

- Eat well.
- Keep as active as you can.
- Keep a healthy weight.
- Get regular check ups.
- Get enough sleep.

For more information on dementia call the Alzheimer's Society Helpline **0300 222 11 22** or visit NHS Choices [www.nhs.uk](http://www.nhs.uk)



## Dementia

Dementia is a common concern for many as they grow older. Symptoms, such as forgetfulness, confusion, and emotional outbursts may not be recognised as dementia at first, but may gradually worsen. If you think you or your partner are being affected by dementia (see page 14), talk to your doctor.

## Coping with depression

Recognising symptoms of depression and getting help early is important. Depression can just happen, but more often it is 'triggered' by things that happen like losing a partner or illness. Symptoms may include loss of appetite, being unable to sleep, weight loss and having little energy. Talk to your doctor if you are affected by a combination of symptoms for a period of time.

# Mental health & well-being

## Taking control of your mental health

Mental well-being means the positive ability to enjoy life and cope with its difficulties and challenges.

There are many ways in which you can maintain good mental health, even if physical and health issues are making life more of a challenge. Just as we care for our bodies, we need to look after and exercise our minds.

Being a bit forgetful can often come with age, and does not mean you have dementia.

We all feel a little sad or down from time to time but feeling down is not the same as being depressed or having depression. Take steps to help prevent depression. Depression can affect older people. Many older people experience psychological or emotional distress associated with factors linked to old age, including loss of independence, loneliness and losses of many kinds, including bereavements. Those with serious illnesses can be more likely to feel lonely and isolated. If you feel unable to cope it is important to tell your doctor, do not suffer in silence, get help.

## What can I do?

- Look after your health by eating a healthy diet, taking some regular exercise and taking medication correctly.
- Keep yourself busy and occupied - gardening, crosswords, keeping up with current affairs, cooking, libraries, computers and social networks, outings and events.
- Keep learning - try something new or rediscover an old interest.
- Keep in touch - chat to friends and family on the phone or arrange for visits and outings together.
- Get a pet if you feel it would benefit you and if you are able to look after it.
- Ask for help if you need it.



**SMOKEFREE** Call 0800 022 4332 or visit [www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)

**It's never too late!**  
Giving up smoking at any age has health benefits. Even if you already have a smoking-related disease, stopping smoking can prevent your condition from getting worse.

# Cancer

## A scary word

You can **reduce your risk of cancer** by leading a healthy lifestyle. It is never too late to make healthy lifestyle changes. There are no proven ways to prevent cancer but you can reduce your risk of getting it.

It is important to know your body and recognise any changes, such as lumps or unexplained bleeding and to get advice about whether they might be serious. Check yourself regularly. The most important thing is not to ignore something you notice. **Take advantage of the free screening available.** Screening aims to pick up cancer at an early stage when treatment is likely to be more effective. Many cancers can be controlled and cured if caught early on. Some of the most common forms of cancer are breast cancer, lung cancer, prostate cancer, bowel cancer and skin cancer.

### What can I do to lower my risk?

- A healthy balanced diet and keeping to a healthy weight.
- Drinking less alcohol.
- Stopping smoking.
- Protecting your skin from harmful sun damage.

**Doctor says**

**Screening**  
People aged 70 and over can request screening if they have not been automatically invited. Over 70s can request a bowel cancer screening kit by calling the free helpline on **0800 707 60 60**.

After the age of 70, women can make their own appointments for breast cancer screening every three years.



### Recommended daily fluid intake

To function effectively and avoid dehydration, the recommended guidelines advise 8 cups should be drunk daily (NPSA 2007).



# Skin

## Becomes more fragile and can damage easily

As we age our skin changes, becoming thinner. This results in our skin becoming more fragile and easily damaged with any injuries to the skin being slow to heal. It is very important that older people take care of their skin because they are more prone to skin infection and skin disease due to the changes that take place to skin as we age. Some medicines make the skin itchy.

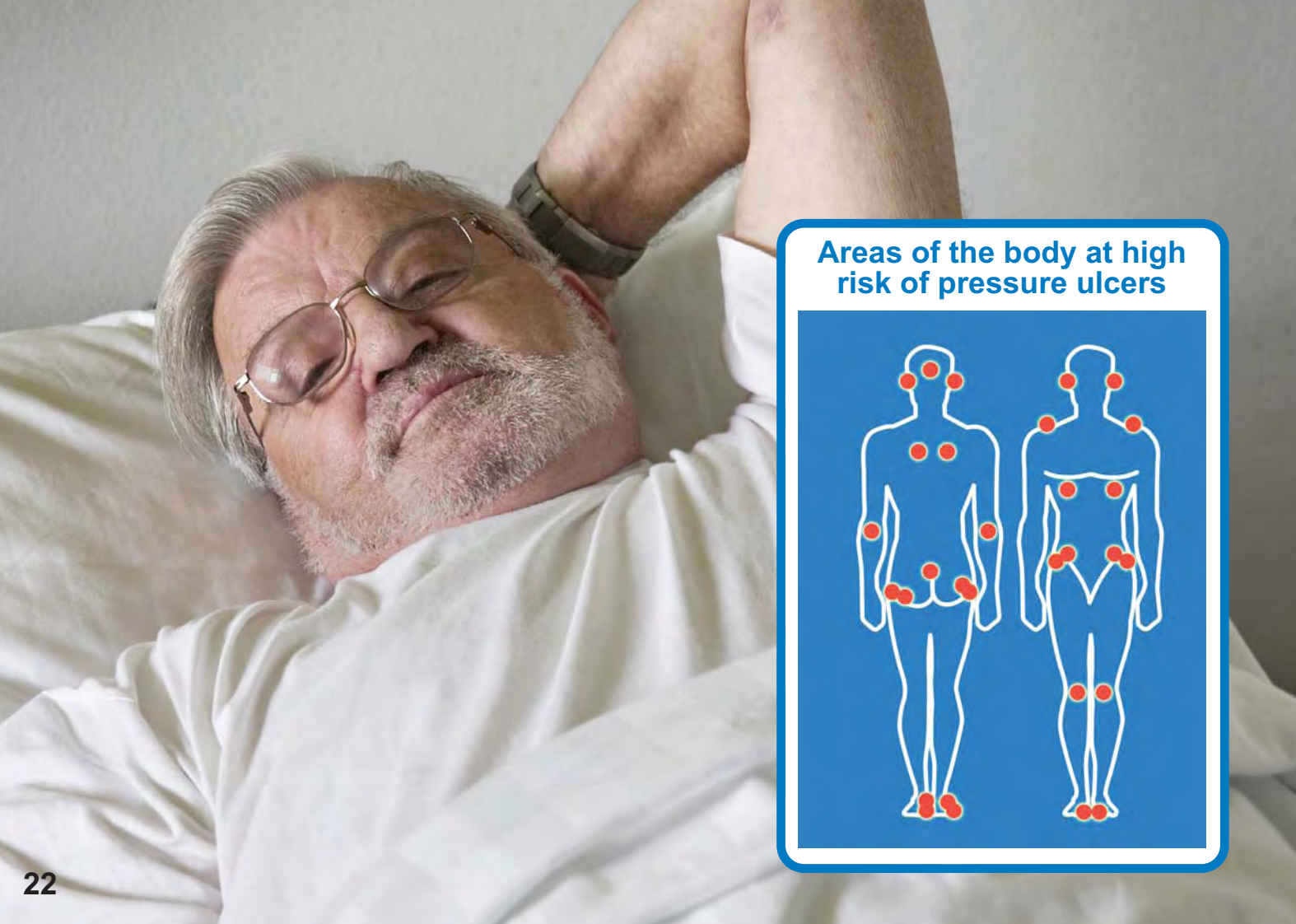
Many older people suffer from dry skin. Dry skin feels rough and scaly and may become cracked and sore. It is important to use moisturisers regularly, especially after washing. Use mild, non perfumed soaps, bath and shower gels. Warm water is less drying than hot water. Don't add bath oil to your water as it will make the bath slippery.

Moisturisers should be applied in a downward motion in the direction of hair growth at least twice a day. Care should be taken to protect your skin from sun exposure and pressure. If you stay in the same position and are unable to move freely, you may experience cracked, dry skin. Try to change position.

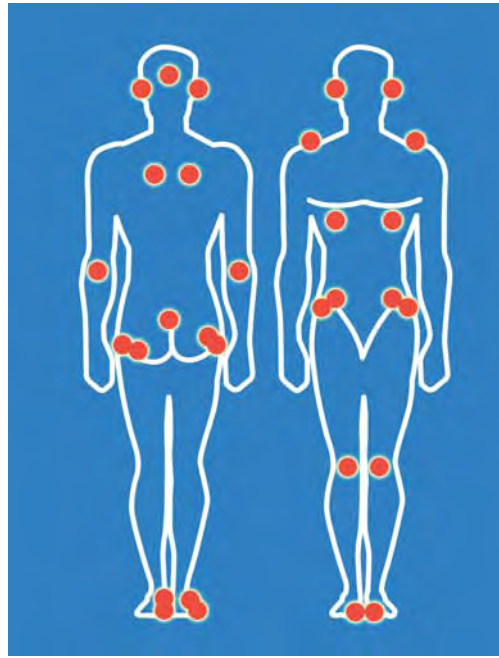
A healthy and balanced diet and drinking enough fluids (8 cups daily) also helps keep the skin healthy.

### What can I do?

- Keep moving as much as you are able.
- Change position at least every 2 hours.
- Moisturise regularly.
- Drink 8 cups daily.
- Ask about how you can self-manage skin care.
- Keep out of hot midday sun as older skin is more prone to sunburn.
- Keep skin clean, but don't over do it.
- Wear cotton or natural fibres.



### Areas of the body at high risk of pressure ulcers



# Pressure ulcers

## Sometimes known as 'bedsores' or 'pressure sores'

People over 70 years old are particularly vulnerable to pressure ulcers, as they are more likely to have mobility problems and ageing skin. Pressure ulcers tend to affect people with health conditions that make it difficult to move, especially those confined to lying in a bed or sitting for long periods of time.

Pressure ulcers are an injury that breaks down the skin and underlying tissue. They are caused when an area of skin is placed under pressure. Pressure ulcers can range in severity from patches of discoloured skin to open wounds that expose bone or muscle.

Pressure ulcers have a negative impact on the quality of life; they are unpleasant to live with and can be very painful. Certain dietary supplements, such as protein, zinc and vitamin C, have been shown to speed up wound healing. If the diet lacks these vitamins and minerals, skin may be more vulnerable to developing pressure ulcers.

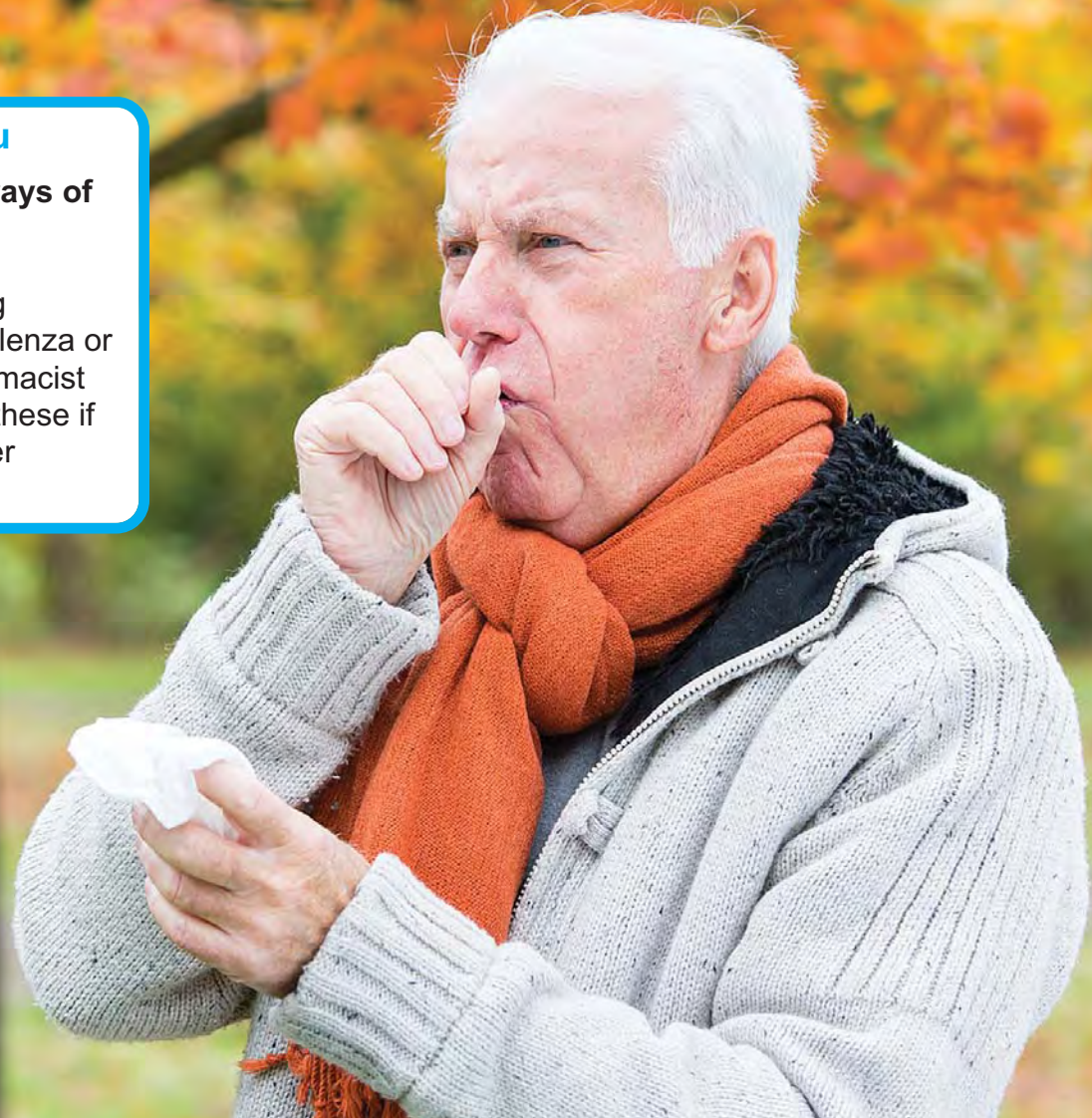
### What can I do?

- It is important that you are eating a balanced diet and drinking plenty of fluids to help prevent pressure ulcers.
- Change your position as much as possible to prevent pressure ulcers.
- Ask about pressure-relieving devices.
- Make regular checks of your skin (use a hand mirror if it is hard to see) and tell your doctor or nurse if you are worried.
- Moisturise regularly.
- Keep clean but don't over do it, as soaps can dry skin.

## Preventing flu

There are three main ways of preventing flu:

- Flu jab
- Hygiene - handwashing
- Antiviral medicines (Relenza or Tamiflu). Tell your pharmacist or doctor before using these if you are taking any other medicines.



# Keeping well in winter

## Look after yourself this winter

In the winter, colds and flu are circulating and older people can be particularly vulnerable to the effects of cold weather.

Certain health conditions are more obvious when a cold spell takes hold - more people experience chest problems, such as infections and breathing problems.

Winter can affect our health in all sorts of ways. Lack of natural daylight can lead to the winter blues, winter health risks like colds, flu and falls on ice, and winter weight gain is common.

### Pneumonia vaccine

People over 65 need only a single vaccination which will protect you for life. Those with long-term conditions may need a five-yearly vaccination depending on their underlying health problems.

### Flu jab

The best time of the year to get a flu vaccination is in the Autumn from September to early November. It is free and it is effective against the latest flu virus strains. Flu can be very serious for older people. Even if you've already had a flu jab in previous years, you need another one this year. Doctor's surgeries offer flu clinics, contact your surgery for details.

## What can I do?

- Minor illnesses such as colds or sore throats can get worse quickly when you are older, so it's important to get help early. Pharmacists are a fantastic source of help so make use of them, or call **NHS 111**.
- Get your yearly flu jab.
- Stay in when it's freezing.
- Avoid walking on slippery, icy streets.
- Keep warm.
- Eat well.
- Move about.

# Lifestyle and well-being

## Make these 4 simple changes now

**1** Giving up smoking has huge health benefits. It is never too late to give up. Just because you've tried to give up before and not succeeded, does not mean you can't do it. Many people make several attempts before they succeed. **Stop Smoking Service 0800 085 2917 or ask at your local surgery.**

**2** Cut down on alcohol. Older people may be more susceptible to the effect of alcohol, so drinking less is recommended. If you are taking medication and drinking alcohol, check with your doctor or pharmacist that it is safe.

**NHS recommends**  
**MEN 3-4 UNITS DAILY**  
**WOMEN 2-3 UNITS DAILY**  
**SHOULD NOT REGULARLY EXCEED**

**3** Your diet should include starchy foods such as rice and pasta, protein such as meat, fish, soya products and dairy products such as milk and cheese and fruit and vegetables. Try to avoid too much fat and sugar. Balance is the key. **Five portions of fruit and vegetables per day.**

**4** Increase physical activity.

### How many units/calories in alcohol?



1 pint lager/beer/cider (ABV 3.6%) <b>2 units</b> has as many calories as a doughnut <b>155 kcal</b>	1 pint lager/beer/cider (ABV 5.2%) <b>3 units</b> has as many calories as a slice of chocolate cake <b>180 kcal</b>	1 large wine (250ml) (ABV 12%) <b>3 units</b> has as many calories as 1 bag crisps (35g) <b>185 kcal</b>	A large gin with orange (ABV 40%) <b>2 units</b> has as many calories as a chocolate doughnut <b>143 kcal</b>
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### What can I do?

1. Stop smoking.
2. Cut down on alcohol.
3. Eat well.
4. Increase physical activity if you are able.

It's simple.

**SMOKEFREE** Call 0800 022 4332 or visit [www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)



### Age UK

If anyone is suffering from loneliness or feeling isolated, help is available from Age UK. A friendly chat over the telephone or meeting each week can really cheer you up if you live alone, and that's the principle behind the Age UK Befriending Service. Maybe you could become one of Age UK's volunteers and not only help yourself but others too. Call Age UK **0800 169 6565** [www.ageuk.org.uk](http://www.ageuk.org.uk)

Source: [www.ageuk.org.uk](http://www.ageuk.org.uk)

# Loneliness and socialising

## Connecting keeps us well and happy

Over a third of people aged 65+ feel lonely according to research from Age UK.

**Loneliness** can have a huge impact on both physical and mental health. As well as depression, loneliness can also cause stress. Loneliness makes it harder to control or notice, habits and behaviour which can lead to health problems. Lonely older adults drink more alcohol, have unhealthier diets and take less exercise.

The Internet is a useful tool in tackling isolation and loneliness but face to face contact is very important too. Taking the first step can be difficult, but the benefits can be enormous. If you are lonely, find out about older people's forums, partnerships, befriending services and groups.

To help combat loneliness try to get out. Even walking to the local shops if you are able, will bring you into contact with people.

The LGBT (lesbian, gay, bisexual and transgender) community are more likely to be single and live alone in older life. They are less likely to have family support and can be more vulnerable to social isolation and loneliness.

### What can I do?

- Get counselling if you have lost a partner or loved one.
- Incontinence can stop older people from going out, see your doctor or practice nurse.
- Money worries can stop us going out and doing things.
- Contact your local Citizens Advice Bureau to ensure you are receiving all the benefits you are entitled to.

### What can I do?

- People over 70 are entitled to a free NHS sight test every year.
- Tell your doctor if you find it hard to hear, or your sight is failing.
- Look after your senses, they help to keep your independence.



# Your senses

## Sight and hearing loss

Having control over our lives is important and adjusting well to change is central to our psychological well-being. Loss of eyesight or hearing, if not dealt with, can have a huge impact on our lives or how we connect with others.

### Hearing

Older people can feel vulnerable, lonely and isolated and can wait many years before seeking help. It can be better to find out about hearing aids sooner rather than later as getting used to amplified sound is harder if you've already got used to a 'quieter world'. If you think you may have some hearing problems you should visit your doctor as soon as possible, who will do some simple tests.

### Sight

Our eyes are one of our most valuable senses yet as we age our eyesight can be one of the first things we notice deteriorating. Glaucoma is one of the most common causes of preventable blindness. **People over 70 are eligible for a free NHS sight test every year.**

### Doctor says

If you visit your doctor about your hearing they may refer you to an ear, nose and throat (ENT) specialist or an audiologist. They will test you further to determine the cause of your hearing loss and work with you to find the best possible treatment.

### Optician says

If you visit your optician about your eyesight they will check for glaucoma. If glaucoma isn't caught and treated early - then it can go on to cause fairly serious 'tunnel vision'. Eventually, without treatment, it will also affect your central vision. This could also cause a trip or fall.





### Recommended daily fluid intake

To function effectively and avoid dehydration, the recommended guidelines advise 8 cups should be drunk daily (NPSA 2007).



### Why do I need to drink 8 cups?

- Helps maintain a healthy urinary tract and kidneys.
- Can reduce the risk of kidney stone formation.
- Reduces the risk of heart disease by 46% in men and 59% in women.
- Reduces constipation.
- Reduces trips and falls (as we can become dizzy or disorientated if we don't drink enough).
- Helps us think and concentrate.
- Keeps skin healthy.

# Am I drinking enough?

## Essential for maintaining health

Water is the healthiest choice for quenching your thirst at any time. It has no calories and contains no sugars that can damage teeth - it's also free!

Aim to drink at least 8 cups daily (which can include some tea or squashes). Water is important to health especially in later life. Many older people do not drink enough water. The kidneys play a vital role in regulating the amount of fluid in the body, but their function slows with age and water balance takes longer to be restored even after drinking.

Patients who have had a stroke or those who are suffering from dementia may not recognise they feel thirsty. Carers have a vital role in supporting older, more dependent individuals to keep drinking.

Good hydration can help our health in many ways from managing diabetes to helping to prevent pressure ulcers, constipation, incontinence, kidney stones, heart disease, low blood pressure, falls and many other illnesses. It also makes us look younger with glowing skin.

### Doctor says

When our bodies don't have enough water, we are said to be dehydrated.

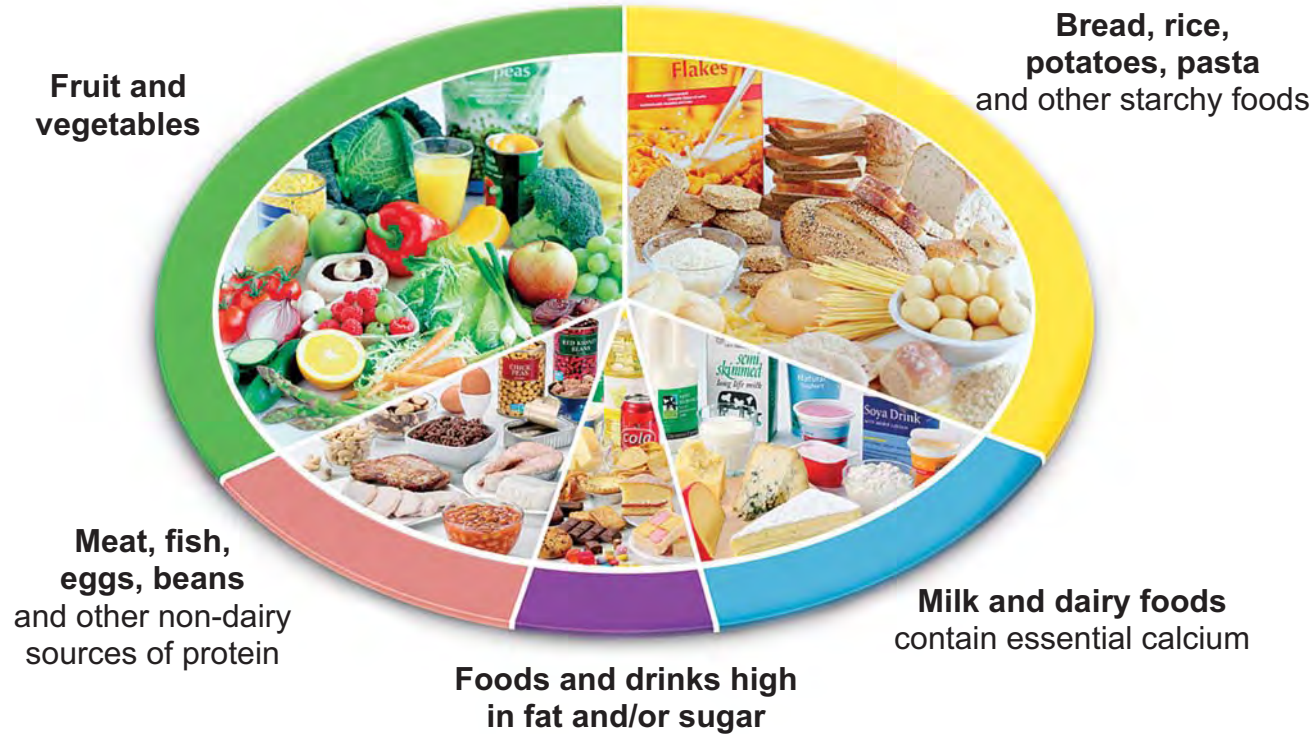
#### These are other common signs of dehydration:

- Dark urine and not passing much urine.
- Headaches.
- Lack of energy.
- Feeling lightheaded.

[www.rcn.org.uk](http://www.rcn.org.uk)

## The eatwell plate

Use the eatwell plate to help you get the balance right. It shows how much of what you eat should come from each food group.



Source: The Food Standards Agency [www.food.gov.uk](http://www.food.gov.uk)

# Eating well

## An important part of daily life

Eating well is vital for older people. Your daily food choices can make an important difference to your health and to how you look and feel. Try to keep to a healthy weight and tell your doctor if you notice you have lost weight, or put some on.

Older people are particularly at risk of malnutrition. This can be due to loss of smell or taste, loss of appetite, teeth may be brittle or dentures may not fit properly, economic hardship, shops may not be in easy reach, or you may have other health problems. Some medicines can cause us to lose our appetite.

People with dementia or depression are particularly at risk, for example when forgetting to eat, and not recognising or being disinterested in food.

Eating well may reduce the risk of heart disease, stroke, type 2 diabetes, bone loss, some kinds of cancer, and anaemia. If you already have one or more of these diseases, eating well and being physically active may help you better manage them. Healthy eating may also help you reduce high blood pressure, lower high cholesterol, and manage diabetes.

### What can I do?

- Enjoy your food. Having a little of what you fancy really does help in keeping to a healthy diet.
- Eat a variety of foods.
- Keep a stock of basic food items so that you can eat well even if you can't get to the shops.
- Try to make mealtimes sociable.
- Do not skip meals.
- Avoid salt.
- Ask your pharmacist about a vitamin D supplement.

### Vitamin D

The body makes vitamin D from sunlight on the skin. As people get older they tend to spend less time outside, so make sure your diet contains at least 10 micrograms of vitamin D or consider a supplement. Ask your pharmacist.

### Dentist says

You do not have to register with a NHS dentist and you can change your dentist whenever you like.

For urgent dental care out of hours or at weekends call the dental helpline on **0300 123 7691** or if unavailable call **NHS 111**.

To find an NHS dentist near you call **NHS 111** or visit **www.nhs.uk**

# Mouth care

## A healthy mouth for life

Looking after your mouth and teeth is really important, especially as you get older. It helps you enjoy your food, smile with confidence and generally feel good about yourself. To make your teeth and gums stay healthy, it is important to brush your teeth properly and see a dentist regularly. If you have false teeth, regular check ups with a dentist are just as important.

Dentures are likely to need replacing every five years as the shape of your mouth changes. If, for health reasons, you have difficulty getting to a dentist, your dentist may be able to visit you or you may be eligible for treatment through the Community Dental Service.

Older age can bring a variety of oral health problems. Medical conditions such as arthritis in the hands and fingers, may make brushing or flossing teeth harder. Some medicines can cause the mouth to be dry, ulcers and thrush. Tell your doctor.

A stroke can have an effect on the oral and facial tissues making it hard to chew and swallow. Depression can lead to reduced motivation in personal hygiene. Dementia can lead to loss of short term memory meaning that it's possible to forget that teeth haven't been cleaned.

### What can I do?

- Brush at least twice a day with a fluoride-containing toothpaste.
- Floss at least once a day.
- Visit your dentist and hygienist regularly for cleaning and an oral examination.
- Avoid sugary snacks.
- If you notice bleeding or sore gums speak to your dentist or practice nurse.
- There are adapters available to help if you find it difficult to grip a toothbrush.



# Keeping mobile

## Put your best foot forward

Keeping active into older age is the key to staying fit, mobile and independent. Foot care is one of the most important aspects of personal healthcare whatever your age. However, painful and uncomfortable feet need not be something to 'put up with' as we grow older.

Foot care problems tend to happen if you are less mobile than you used to be. Poor eyesight and stiff hands, can also make it harder for you to look after your feet.

Keeping feet clean is an essential part of any good healthy feet regime, you may need someone to help you do this. Wash feet daily in warm soapy water, rinse well and dry well. You may need to apply a foot cream, massage the cream from the toes upwards to the knees. Trim toenails regularly, cutting straight across and making sure you do not cut too short. Wear well fitting shoes that provide good support, are wide enough and allow feet to breathe. Exercise feet regularly to tone muscles, strengthen arches and improve blood circulation.

If you have diabetes or circulation problems it is even more important to take care of your feet.

### What can I do?

- Keep feet clean.
- Keep toenails short.
- Wear suitable shoes.
- Exercise regularly if you are able.
- Talk to your doctor if your feet are painful or sore.



### Keep your home safe:

- **In the bathroom** - Test your bath water to prevent scalding. Use a non-slip rubber mat. A handrail is useful for extra support. It is a good idea to leave the door unlocked in case you need help.
- **In the bedroom** - Always switch off your electric blanket before getting into bed and check their cords regularly for scorch marks. Have your electric blanket tested annually. Before getting into bed, make sure that anything you need is within easy reach - a lamp, drink, medicines and perhaps a torch by the bedside. If you feel dizzy when you first sit up, wait a couple of minutes before standing up.
- **In the living area** - If rugs are frayed, it is safer to remove them. Secure trailing wires and have heating equipment checked regularly. Check smoke alarm batteries. The Fire Service offers home safety visits and will fit smoke alarms free of charge for older people. Consider having a personal alarm so you can get help whenever you need it.

# Trips and falls

## Staying steady on your feet

There are many simple things that you can do to help stay steady on your feet. It is very common to feel anxious if you have had a fall or feel unsteady.

Keeping active can help keep you fit and healthy. There are also exercises to strengthen the muscles of your legs and improve your co-ordination and balance. Sight plays an important role in your sense of balance so have your eyes checked regularly. Older people should take a daily vitamin D supplement to help keep bones healthy and strong.

Some medicines or a combination of drugs can make you feel faint or unsteady. Let your doctor know if you ever feel like this.

Foot problems can have a major effect on our balance and stability. Wear shoes that fit you well. Avoid loose slippers or those with no backs, sandals and high heels.

Always take care on the stairs and consider an extra banister or handrails to make everyday activities safer. Keep the floor free from clutter, which you may trip over. If you worried about falling, ask your doctor to refer you to the Falls Service.

### What can I do?

- Keep you home safe (see opposite page).
- Talk to your doctor if you are worried.
- Ask about the Falls Service.
- Wear suitable shoes or slippers.
- Get your eyes checked.

# Assistive technology

## Help with everyday tasks

Even simple equipment can mean the difference between living independently and needing someone to look after you at all times.

You can buy your own equipment, but a social worker or occupational therapist can help make decisions about the equipment that would be most helpful. Decisions about the kind of equipment you may need will often be the result of an assessment of your care and support needs.

Equipment that can help you to live more independently can include things like:

- Two-handled cups, tap turners and kettle tippers for the kitchen.
- Grab rails and raised toilet seats in the bathroom.
- Bed raisers and hoists in the bedroom.

The NHS can provide equipment, such as walking sticks, walking frames and wheelchairs to aid mobility. These are provided on long-term loans and you can arrange this through your GP, hospital consultant or physiotherapist. There is no charge for this equipment, but there may be a returnable deposit.

### Assistive technology

The term 'assistive technology' refers to any device or system that allows a person to do a task that they would otherwise be unable to do, or to make life easier and safer. These technologies can be anything from pendant emergency alarms to blood pressure monitors and electric wheelchairs. This includes equipment and devices to help people who have problems with moving around, help avoid trips and falls, eyesight, memory, daily living such as dressing or even preparing meals.



### Local support

Local support for patients and carers is commissioned by local NHS CCGs and may include Macmillan or Marie Curie nursing support.

# End of life care

## Support for people and their families

If you have a terminal illness, or are approaching the end of your life, it may be a good idea to make plans in advance for the future of your care. Planning ahead in this way is sometimes called advance care planning. It involves thinking and talking about your wishes for how you are cared for in the final months of your life.

End of life care helps you to live as well as possible until you die, and to die with dignity. It also includes support for your family or carers.

Palliative care will help to make you as comfortable as possible. Care provides psychological, social and spiritual support for you and your family or carers to enable you to remain in your own home for as long as you wish.

Many healthcare professionals can be involved in providing end of life care. Most hospitals have special palliative care teams who co-ordinate all these services. When end of life care begins depends on your needs, it may last a few days, or for months or years. End of life care begins when you need it, and will continue for as long as you need it.

### Why not make a plan?

If you are not approaching the end of your life, you may still want to think about your wishes for your own end of life care.

#### **This could include:**

- If you don't want certain kinds of treatment in the future, you can make a legally binding advance decision.
- Where you would prefer to die, your wishes for your funeral, who you would like to make decisions about your care if you are not able to decide for yourself.
- Find out how to legally appoint someone to make decisions about your care in the future if you become unable to make decisions yourself (Lasting Powers of Attorney).
- Make a will to ensure your property and finances are dealt with according to your wishes after your death.

## National contacts

### **Age UK (including Falls Prevention Service)**

0800 169 6565  
www.ageuk.org.uk

### **Alcoholics Anonymous**

0845 769 7555  
www.alcoholics-anonymous.org.uk

### **Alzheimer's Society**

0300 222 1122  
enquiries@alzheimers.org.uk  
www.alzheimers.org.uk

### **British Heart Foundation**

0300 330 3311  
heartmatters@bhf.org.uk  
www.bhf.org.uk

### **Carers UK**

CarersLine 0808 808 7777  
www.carersuk.org

### **Citizens Advice**

www.adviceguide.org.uk

### **Crossroads**

Caring for Carers 0845 450 0350  
www.carers.org

### **Cruse Bereavement Care**

0844 477 9400  
www.cruse.org.uk

### **Diabetes UK**

0345 123 2399 - careline  
0843 353 8600 - peer support line  
info@diabetes.org.uk  
www.diabetes.org.uk

### **Drinkline**

0800 917 8282  
24 hour Confidential Advice

### **Emergency Ambulance**

999

### **FirstStop Advice**

www.firststopcareadvice.org.uk

### **Menopause Matters**

www.menopausematters.co.uk

### **Mind - for better mental health**

0300 123 3393  
info@mind.org.uk  
www.mind.org.uk

### **National Domestic Violence Helpline**

0808 2000 247  
www.nationaldomesticviolencehelpline.org.uk

### **NHS 111**

If you need urgent medical help or advice but it's not life-threatening.

### **NHS Smoking Helpline**

0800 022 4 332  
www.smokefree.nhs.uk

### **Podiatrist (Chiropodist)**

General enquiries regarding NHS Podiatrist (Chiropodist)  
01473 275 204

### **Royal Society for the Prevention of Accidents (RoSPA)**

0121 248 2000  
www.rospace.com

### **www.lgbtconsortium.org.uk**

### **www.macmillan.org.uk**

### **www.mariecurie.org.uk**

### **www.dementiafriends.org.uk**

## Local contacts

### **Sanctuary Supported Living**

0800 917 0204  
www.sanctuary-supported-living.co.uk

### **Middlesbrough and Stockton Mind**

01642 257020  
carers@middlesbroughandstocktonmind.org.uk  
www.middlesbroughandstocktonmind.org.uk

### **Hartlepool Mind**

01429 269303  
information@hartlepoolmind.co.uk  
www.hartlepoolmind.co.uk

### **Adult Social Care, Stockton-on-Tees Borough Council**

01642 527764  
FirstContactAdults@stockton.gov.uk  
www.stockton.gov.uk/adult-services

### **Adult Social Care, Hartlepool Borough Council**

01429 284284  
fcsh@hartlepool.gov.uk  
www.hartlepool.gov.uk