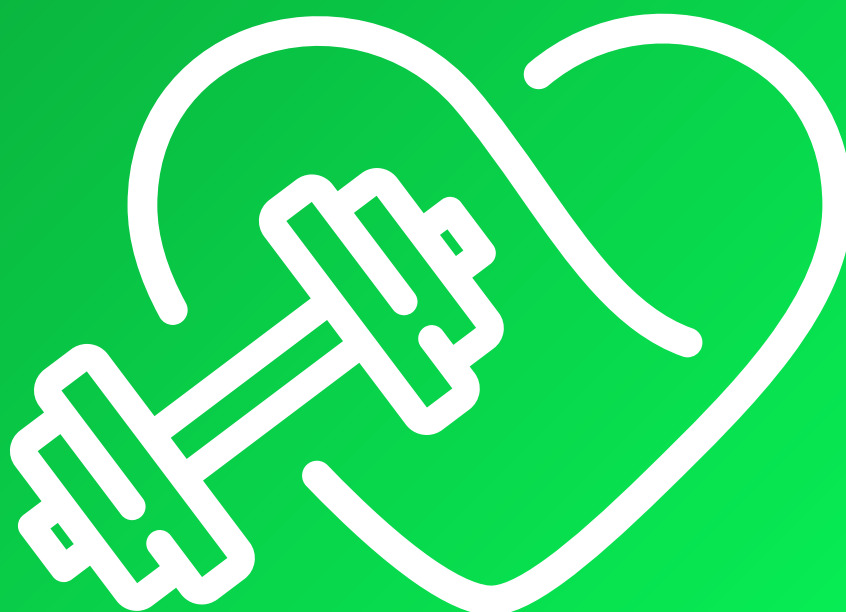


From Inactivity to Independence

A Fitness Approach for Older People in Adult Social Care



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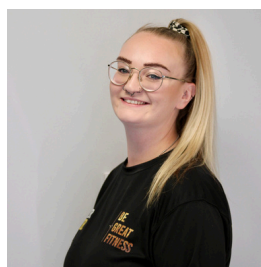
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About Care England:

Care England is the largest and most diverse representative body for independent providers of adult social care in England. It is a registered charity that works collaboratively with its members, stakeholders, and the government to implement the foundations of a sustainable future for adult social care. Care England represents small, medium, and large providers, including single care homes, small local groups, national providers, and not-for-profit voluntary organisations and aims to improve the quality of care and ensure the health and safety of both staff and residents in care settings and advocates for sustainable policies and practices that address the sector's workforce challenges.

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CARE ENGLAND
The voice of care

Foreword

As our population ages, the challenges faced by older people in care settings become ever more complex, and so must our responses. In an era where person-centred care is rightly at the heart of best practice, it is vital that physical and emotional wellbeing are treated as core components of quality care, not optional extras.

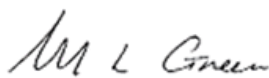
The work of fitness tailored for older people, demonstrates the profound impact that inclusive, adaptive exercise can have in care homes. What makes programmes like these stand out is not only its physical benefits, but its ability to nurture confidence, foster connection, and improve quality of life for some of our most vulnerable individuals.

This report powerfully captures the value of integrating meaningful movement into everyday care. From reducing the risk of falls to rebuilding emotional resilience, Be Great Fitness is a shining example of innovation grounded in compassion, professionalism, and impact.

As we look to the future of social care, we must champion and scale programmes like this, where the smallest of movements lead to the most significant of outcomes.

Professor Martin Green OBE

Chief Executive, Care England



Professor Martin Green OBE
Chief Executive, Care England



Foreword

BeGreat Fitness

When starting Be Great Fitness, my aim was simple: to make fitness accessible, enjoyable, and meaningful for everyone, especially older adults living in care homes. What I've witnessed over the past year in Tanglewood Care Homes has exceeded even my highest hopes. From a smile shared during a seated session to a resident rediscovering their strength after a stroke, each interaction reminds me why this work matters so deeply.

Our sessions are not about perfect reps or personal bests; they're about trust, encouragement, and movement. They're about helping someone feel seen, capable, and connected, even if only for an hour. The phrase we come back to time and time again is "out is better than nowt"– because even the smallest effort can spark real change.

Bailey Greetham-Clark

Founder, Be Great Fitness

Tanglewood

At Tanglewood Care Homes, our commitment has always been to place our residents at the heart of everything we do. With over 30 years of experience in care across the Midlands and the North of England, we understand that wellbeing extends beyond physical health; it encompasses emotional connection, confidence, purpose, and community.

When we partnered with Be Great Fitness in August 2024, we saw an opportunity to bring something more than exercise into our homes. What unfolded was a programme that not only supported our residents' mobility and strength but also reignited joy, reduced isolation, and created a culture where every small movement became a shared achievement.

Daniel Rowark

CEO, Tanglewood Care Homes

Executive Summary

Inactivity among older adults is a growing concern, particularly in care home settings where mobility and independence often decline due to age, illness, or prolonged sedentary behaviour. This inactivity can lead to deconditioning, a serious condition where muscle strength, coordination, and physical function rapidly deteriorate. Deconditioning is especially common after hospital stays involving bed-based care and is a major threat to the wellbeing and autonomy of older people [1].

To address this, Be Great Fitness has designed an exercise programme focusing on inclusion and person-centered physical activity programmes tailored to residents' varying abilities. Weekly seated exercise sessions are designed to prioritise accessibility, emotional connection, and overall wellbeing. These sessions are structured not only to improve mobility, strength, and coordination but also to enhance cognitive stimulation, emotional resilience, and social inclusion.

Be Great Fitness instructors play a key role in adapting exercises for individual needs, building rapport, and supporting residents living with complex conditions such as dementia or those recovering from strokes. Techniques like colour-coded memory games and signal-sending exercises help participants re-engage both mentally and physically, making movement meaningful and manageable.

Residents who were previously withdrawn or disengaged have found confidence, purpose, and connection through consistent, gentle encouragement. These improvements extend beyond physical health, supporting mental wellbeing and reducing feelings of isolation.

Regular movement combats deconditioning and helps prevent falls, which are the leading cause of death in those over 75. Falls cost the NHS approximately £2.3 billion annually, with 75% attributed to social care [2], but the human cost is far greater: loss of independence, long hospital stays, and diminished emotional wellbeing.

Importantly, these activity sessions also help develop a more proactive care environment. Through collaborative delivery and informal on-the-job training, care staff gain the confidence to support and facilitate physical activity independently, fostering a whole-home culture of movement and health. Promoting accessible, regular exercise in care homes is a vital step toward reversing the harmful effects of inactivity and ensuring older adults can maintain dignity, strength, and connection later in life.

Background

The UK's ageing population is expanding rapidly. Between mid-2022 and mid-2032, the population is projected to increase by 4.9 million (7.3%), rising from an estimated 67.6 million to 72.5 million [3]. This shift places growing pressure on health and social care services. As people live longer, it becomes increasingly important to ensure these added years are lived in good health, with a strong focus on maintaining independence and quality of life.

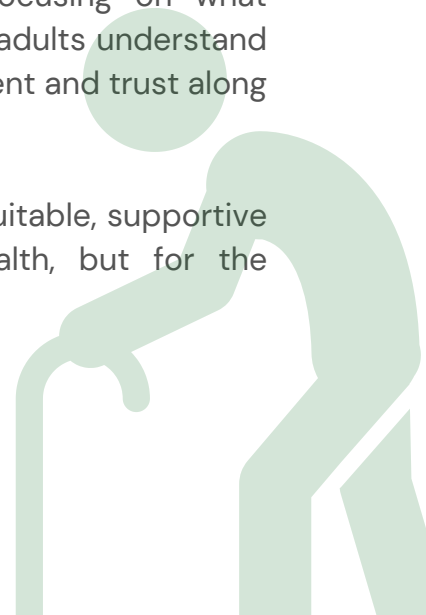
One of the most effective ways to support healthy ageing is through regular physical activity. For older adults, exercise helps to maintain mobility, reduce the risk of falls, and support both physical and mental wellbeing. Yet despite these proven benefits, many older individuals, particularly those in care settings, face significant barriers to staying active. These include reduced mobility, fear of injury, a lack of tailored support, and perhaps most critically, low confidence.

To address these issues, there is a growing need for adaptive exercise programmes specifically designed for older adults in care environments. These programmes must be inclusive, person-centred, and focus on safe, low-impact movement that is both accessible and engaging. When delivered effectively, such sessions do more than improve physical health; they also support cognitive stimulation, emotional resilience, and social connection.

Crucially, these sessions must also be fun, as enjoyment increases participation and helps build confidence, turning exercise from a task into a social and rewarding experience. This makes it more likely for residents to engage consistently, supporting long-term improvements in health and wellbeing.

When qualified instructors and personal trainers are involved, particularly those trained to work with older adults and people with cognitive impairments, these programmes can be delivered with skill and sensitivity. By focusing on what individuals can do, rather than their limitations, trainers help older adults understand and carry out movements effectively, building a sense of achievement and trust along the way.

Ultimately, ensuring that older individuals have regular access to suitable, supportive physical activity is essential, not just for their individual health, but for the sustainability of the wider health and social care system.



Deconditioning

As older adults experience reduced mobility and confidence, especially within care settings, prolonged periods of inactivity can have far-reaching consequences. While the physical and emotional benefits of exercise are well established, the risks of not moving are often overlooked. A sedentary lifestyle, even over short periods, can quickly lead to a decline in health, independence, and quality of life. One of the most serious yet under-recognised outcomes of inactivity in older people is deconditioning, a process that accelerates physical decline and increases vulnerability to illness, falls, and hospitalisation. [4]

Deconditioning occurs when a person is immobile for an extended period, leading to a decline in physical function. When the body is not regularly engaged in movement, it begins to redirect energy and resources away from unused areas, typically the muscles and bones, which causes them to weaken [5]. When older adults become less physically active and spend more time sitting, it can have serious consequences for their health. Deconditioning may result in:

- weakened muscles
- reduced balance and coordination
- loss of bone density
- feeling out of breath more quickly with physical activity
- fatigue or low energy
- dizziness
- loss of appetite
- changes in bladder or bowel function, such as constipation or incontinence
- changes in mood or motivation, which can, in turn, make it harder to exercise
- a loss of independence or confidence [6]

Research shows that walking fewer than 1,413 steps a day can, in just two weeks, cause a rapid loss of muscle, hinder muscle development, and make it harder for the body to manage insulin. This issue is even more pronounced among people living in more disadvantaged areas. [7].

The COVID-19 pandemic has had a significant impact, especially on older adults with long-term health conditions. Many of them stopped their usual physical activities during lockdowns and have been slow to resume them. These extended periods of inactivity have increased the risk of muscle loss and reduced fitness, which can lead to more falls or worse. An increase in falls due to this pandemic-related deconditioning could drive those costs even higher, not to mention the personal toll: pain, injuries, reduced confidence, and social isolation.

Data from Public Health England shows that, during just the first three months of national lockdown, an estimated 110,000 additional older adults experienced at least one fall. That spike alone could have cost health and social care services an extra £211 million over two and a half years. However, there is hope: modelling suggests that if all older adults increased their strength and balance exercises by just 10% from pandemic levels, they could prevent over 18,000 falls – more than 9,000 each in both men and women [8].

An emphasis on gentle, consistent movement helps counteract the effect of deconditioning, helping to keep residents more resilient to illness, injury or hospitalisation: residents are never pushed beyond their limits; instead, encouraged to “do what they can”, contributing to a positive experience and sustained engagement.

Exercise is vital to help prevent deconditioning by keeping older individuals physically active and mentally engaged through regular, structured movement sessions. These exercises should help maintain strength, promote circulation and support overall mobility. The importance of this approach becomes even more urgent when considering that up to 65% of older adults experience functional decline during hospitalisation, often due to prolonged bed rest [9]. Alarming, for every 10 days spent in hospital, people aged over 80 can expect to lose 10% of their muscle mass, which is the equivalent of 10 years of ageing [10]. This muscle loss can lead to reduced independence and, in some cases, early admission into residential care.

A Tanglewood resident who regularly attends the Be Great Fitness exercise sessions and who previously suffered a serious injury, explained, **“I broke my back last year – I just do what I can”**. The flexible and inclusive approach allows residents to engage at their own pace, supporting participation regardless of physical limitations; this reinforces the idea that any level of participation is beneficial, and that regular movement, such as those below, even in small doses, can support overall wellbeing and prevent deconditioning.



Benefits of Exercise in Older People

As the UK continues to experience an ageing population, promoting physical activity among older adults is crucial. Regular exercise plays a vital role in helping older people remain active, independent, and socially connected for as long as physically possible. Regular exercise not only supports physical health, to improve mobility, flexibility, and confidence building, but is also important for cardiovascular health [11].

These guidelines are recommended by the NHS [12] says that adults engage in at least 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity aerobic activity per week, complemented by muscle-strengthening activities on two or more days, and, for older adults, balance-enhancing exercises.

Data from an NHS survey [13] sheds light on the nation's physical activity levels, highlighting significant gaps in both aerobic and muscle-strengthening exercise. The NHS Survey reveals that 70% of men and 59% of women aged 16 and over met the aerobic activity guidelines. Regional disparities were evident, with the lowest compliance in the Northwest (58%) and the highest in the East Midlands (71%). Socioeconomic factors also played a role; only 53% of adults in the most deprived areas met the aerobic guidelines, compared to 68% in the least deprived areas. Regarding muscle-strengthening activities, 36% of men and 29% of women met the recommended levels. Among adults aged 65 and over, 17% of men and 14% of women adhered to both muscle-strengthening and balance exercise guidelines [14].

This underscores the critical importance of physical activity for cardiovascular health, mental wellbeing, and reducing the risk of chronic diseases and falls, particularly among older populations. It highlights the need for targeted interventions to address the observed disparities and promote healthier lifestyles across all demographics.



Any physical activity is better than none, even light activity brings some health benefits compared to being sedentary, while more daily physical activity provides greater health and social benefits [15].

The National Institute for Health and Care Research (NIHR) has provided evidence that long-term exercise programmes significantly reduce the incidence of falls and related injuries among older adults, where the mean age was 73.1 years. These studies compared the effects of various exercise interventions against control groups over a minimum duration of one year. The exercise programmes typically included combinations of aerobic, strength, and balance training, conducted at moderate intensity for approximately 50 minutes per session, two to three times weekly. Most participants were community-dwelling (individuals living in their own home) older adults, some with mild cognitive impairment or cardiovascular conditions. Within this, 43.1% of the exercise group had a fall over the 12-month period, compared to 48.2% of the control group [16].

Furthermore, exercise also decreased the risk of having a fall that resulted in injury; 16.9% of the exercise group had injurious falls, compared to 20.6% of the control group [17]. This research is particularly pertinent given the high prevalence and substantial healthcare costs associated with falls in the ageing population. These findings reveal that participants who engaged in these long-term exercise programmes experienced a notable reduction in the frequency of falls and the severity of injuries resulting from falls. Importantly, the review found no significant increase or decrease in hospitalisation rates among those who exercised, alleviating concerns that physical activity might pose additional risks to this demographic.



Falls are a common and serious concern for older individuals, with approximately 30% of those aged 65 and over experiencing at least one fall annually – a figure that rises to 50% among those aged 80 and above National Institute for Health and Care Research, [18]. These incidents not only lead to physical injuries but also contribute to cognitive distress, loss of independence, and increased mortality.

Guidelines from the National Institute for Health and Care Excellence (NICE) advocate for strength and balance training to prevent falls in older people but do not specify the optimal type, intensity, or frequency of such exercises. The review from NICE, contributes valuable insights by identifying effective exercise regimens that can be sustained over the long term, thereby informing future recommendations and interventions, which underscores the efficacy and safety of long-term, moderate-intensity exercise programmes in mitigating fall risks among older adults [19].

The implications of NICE's research are significant for public health policy and clinical practice. Encouraging older adults, including those with chronic health conditions like heart disease or mild dementia, to participate in structured, long-term exercise programmes can lead to substantial reductions in fall risk and associated injuries. Such initiatives not only enhance individual quality of life but also have the potential to alleviate the financial burden on healthcare systems.

Be Great Fitness instructors are committed to making exercise accessible and meaningful for all. Their mission is to break down barriers to exercise by making fitness flexible, fun and tailored to individual needs; common barriers may include fear of injury, lack of motivation, or low confidence, combated by fostering an inclusive environment for all abilities.

One participant remarked that the sessions **“should be part and parcel of living in Tanglewood,”** highlighting how deeply integrated they felt exercise had become in their daily life. Others spoke of the sessions' uplifting effects, sharing that they would **“certainly recommend, how you feel after is enough to recommend to anyone”.**



Beyond the physical gains, the sessions have created a valuable social outlet, as for many residents, the exercise sessions are not just about movement; they are an opportunity to connect with others, build friendships, and feel a sense of belonging. One resident shared that the sessions help you **“get to know people”**, these social connections play a key role in reducing isolation, supporting emotional health, and contributing to overall happiness.

Falls Prevention

Falls are one of the most serious risks facing older people, particularly those living in care settings. Falls can lead to long hospital stays, lasting physical injury, and a significant loss of confidence and independence. However, many falls are preventable, and physical activity plays a crucial role in reducing this risk [20].

Falls prevention across older individuals is a core priority; through tailored, low-impact exercises designed to build strength, coordination, and cognitive responsiveness, exercise helps residents develop the physical and emotional resilience needed to remain independent.

The Cost of Falls in the UK

Exercise is a vital component to help reinforce fall prevention, especially encouraging participation amongst stroke survivors. **The UK Government found that unaddressed fall hazards are estimated to cost the NHS £2.3bn each year.** The total annual cost of fragility fractures to the UK has been estimated at £4.4 billion, which includes £1.1 billion for social care; hip fractures account for around £2 billion of this sum [21]. These figures are a stark reminder that falls are not just personal setbacks – they are also a major public health challenge. With the ageing population continuing to grow, these costs are projected to rise further unless preventative action is prioritised. Structured exercise programmes offer one of the most effective, low-cost interventions to mitigate these risks. For stroke survivors, in particular, exercise is not only a tool for fall prevention but a pathway to reclaiming mobility, independence, and quality of life [22]. Integrating inclusive, evidence-based exercise into care services is essential; the government needs to commit to investing in prevention, which will mean a reduction in avoidable harm, lower long-term costs, and healthier, more resilient older populations tomorrow.

Signal-Sending Exercises

One key method used by Be Great Fitness is known as signal-sending exercises. These are especially valuable for residents who have experienced a stroke, as they help rebuild the brain's ability to send messages to specific parts of the body.

How it works:

1. The instructor places two balls on top of cones in front of the resident.
2. The instructor then taps either the left or right knee of the resident.
3. The resident must process that physical signal and respond by lifting and kicking the leg that was tapped, aiming to knock the ball off the cone.

This simple activity is a powerful tool for reinforcing reflexive responses, enhancing coordination and muscle control and rebuilding confidence in movement.

For residents who have experienced a stroke and have limited mobility or control on one side of the body, instructors modify the activity:

- 1.The ball is positioned close to the toes on the affected side.
- 2.Rather than lifting and kicking, the resident is asked to use their toes to gently push the ball off the cone.
- 3.As strength, coordination, and confidence improve, the instructor gradually increases the challenge, adding distance, speed or repetitions.

This progression-based approach not only supports physical rehabilitation but also gives residents a clear sense of achievement, which is key to sustained motivation and emotional wellbeing.





Confidence

Rebuilding confidence following a fall or period of inactivity is a crucial part of maintaining both physical and emotional wellbeing for residents. Within the exercise sessions, instructors prioritise inclusivity by adapting movements to suit all ability levels.

Residents frequently report feeling more motivated and socially engaged after attending the sessions. One resident shared that they felt **“exhilarated for a while”** post-session, particularly enjoying the opportunity to connect with others. Another reflected that the sessions have made them feel **“more engaged”**, and one individual, recovering from a stroke, also commented that **“the exercise has helped”** underlining the value of movement in the recovery journey.

Confidence Through Connection: Janet & Derek

Janet and Derek, a married couple, have been residents at Tanglewood Care Home for over a year. They usually spend most of their time together in their room and rarely take part in group activities or interact with other residents. Since August 2024, however, they have been attending exercise sessions without fail. Janet explained that these sessions are one of the few activities she feels comfortable joining, as she is partially blind and finds other offerings are not always clearly understood or accessible. Both Janet and Derek now look forward to the sessions, often contributing their signature humour and warm, playful banter. Their consistent participation demonstrates how inclusive and well-delivered physical activity sessions can foster a sense of belonging, improve accessibility, and rebuild confidence.

Quality of Life

Older individuals are at higher risk of inactivity, where mobility challenges and chronic conditions can lead to a sedentary lifestyle. Prolonged inactivity contributes to a range of negative outcomes, including deteriorating mental health. For many individuals, this inactivity also feeds a cycle of isolation and low mood, diminishing overall quality of life.

Be Great Fitness sessions focus not only on movement but also on connection, fun, and personal achievement. By creating a positive environment where participants feel encouraged and supported, Be Great Fitness helps transform residents' perceptions of exercise from something intimidating into something joyful and rewarding.

Although instructors may not routinely access detailed mental health information from care teams, the mental and emotional benefits of physical activity are widely recognised. Exercise stimulates the release of endorphins, improves circulation, and reduces symptoms of anxiety and depression. Within Be Great Fitness sessions, many residents express how much they value both the physical benefits and the emotional uplift they experience. The programme moves beyond generic activity to focus on targeted movement designed to maintain joint function, muscle strength, and balance, all critical to preserving independence and reducing fall risk. Importantly, these sessions are embedded within a social framework, which enhances motivation and adherence. The impact on mood and emotional wellbeing is evident. The release of endorphins, coupled with a sense of inclusion and routine, makes physical activity a powerful informal intervention for low mood and social disengagement.

Residents frequently highlight the social aspect of the programme as one of its most meaningful features. One participant shared how he **"likes how he feels he belongs to the care home,"** while another described how much they enjoy "everybody being together." These sessions help residents reconnect with their peers, their bodies and provide a sense of purpose.

This type of engagement illustrates the vital role that exercise plays not just in physical rehabilitation but in promoting dignity, inclusion, and identity in later life. Regular exercise facilitates meaningful connection and improved health outcomes, suggesting that social prescribing of physical activity should become a central component of holistic care strategies. Embedding such approaches in care home practice could significantly enhance older individuals' quality of life, combat loneliness, and reduce the burden of inactivity-related health issues.

Use it or lose it: Combating Deconditioning Through Engagement and Movement

For older people, the 'use it or lose it' philosophy is a simple but critical truth: when individuals stop using certain muscles or movements, their strength and function can quickly deteriorate. Physical inactivity accelerates deconditioning, leading to a greater risk of falls, hospitalisation and a loss of independence. When older individuals lose their independence, this can lead to a decline in mental health, as they will lack confidence and motivation, contributing to a rapid decline.

Prioritising movement and engagement in every session is vital, with regular communication with residents, especially those who are reluctant to join in, outlining the long-term importance of staying mobile. Sessions should be tailored to be enjoyable and inclusive, helping residents feel like part of a community, rather than being pressured into exercise.

While regular exercise supports regaining lost mobility, it also plays a crucial role in preventing future injuries and supporting everyday function. Movements selected should not just be for strength and flexibility, but for their practical application in daily life.

Koby's Journey Towards Confidence and Strength

A Tanglewood resident, Koby, moved into the care home a few months ago after suffering two strokes within a year. These events left her with limited mobility, particularly on the left side of her body, including her hands and fingers. For Koby, adjusting to care home life was also a social challenge, as originally from Denmark, Koby expressed that a slight language barrier had affected her confidence in connecting with other residents.

During one session, Koby confided in her instructor about her hand weakness. In response, the instructor introduced her to a set of finger exercise equipment specifically designed to improve grip strength and dexterity. While the rest of the group participated in seated exercise, Koby used the equipment, and her instructor encouraged her to continue practising on her own and left her with the equipment to use between sessions.

Over the following month, Koby continued using the equipment independently, and her daughter even had to purchase the next resistance level, as her hand strength had noticeably improved. This small but powerful success story shows how simple, targeted exercises, paired with trust, encouragement, and a personal connection, can lead to meaningful physical and emotional improvements, which could have so easily led to a slow, unhappy, degenerative decline.

To actively prevent deconditioning in older adults, they should incorporate a range of low-impact, functional exercises that promote strength, flexibility, and endurance, which include:

- Seated marching (for hip flexors and circulation)
- Seated leg extensions (to strengthen quadriceps)
- Seated toe and heel lifts (for ankle mobility and lower leg strength)
- Seated torso twists (to improve core and spinal mobility)
- Seated shoulder rolls and arm circles (for shoulder joint health)
- Neck stretches (to maintain neck mobility)
- Overhead arm reaches and side bends (for flexibility and posture)

Joan's Journey into Belonging

Joan moved into the care home recently and has struggled with confidence to enter the lounge or engage with other residents. The activities coordinator offered to introduce herself and gently support Joan's involvement in future sessions. After spending a few minutes chatting with Joan about her life and hobbies, where Joan shared that she used to be a dancer, she was encouraged to join the group for an exercise session. Since then, Joan has attended nearly every activity offered, discovering a love for crafting, particularly colouring, and has formed friendships with other residents. Joan regularly has cups of coffee with other residents over the radio and has really found her feet within the home.

This showcases the impact of merging exercise sessions with socialising can have a huge boost in their confidence and their ability to form relationships with other residents.

John's Pathway to Emotional Resilience

John lived at Tanglewood's Meadows Park care home for just under a year, and throughout most of his stay, John preferred solitude, spending time in his room reading newspapers, completing crosswords, and even eating meals alone. However, since the introduction of weekly exercise sessions in August 2024, John became a regular participant, where the instructor made a special effort to include him in conversation and seat him near residents he could relate to. Toward the end of his time at Meadows Park, John shared how fundamental the sessions had been in maintaining his mental health. His experience reflects the deeper impact of movement programmes in care, supporting not only physical fitness but emotional resilience and connection as well.

The Benefits of Colourful Equipment

In care settings, especially among residents living with dementia, the use of colour-enhanced equipment during exercise sessions offers more than just visual appeal; it can be an effective tool for stimulating cognition, supporting motor function, and improving overall engagement. Strategic use of colour helps to enhance attention and recall, reduce anxiety, and prompt more consistent participation in physical activity [23].

Within Be Great Fitness sessions, colourful equipment such as beanbags, cones, hoops, and bands is deliberately selected to create visual contrast and encourage interaction. These tools are not used arbitrarily; colour is incorporated in ways that promote targeted outcomes. For example, an activity involving multi-coloured beanbags placed around a seated participant prompts both physical reaching and cognitive sequencing. Responding to colour-coded instructions demands not only mobility but also the use of working memory, attention, and pattern recognition, functions that can deteriorate with age and are particularly vulnerable in individuals with Alzheimer's and other dementias.



These seemingly simple activities deliver layered benefits. The motor element helps maintain joint flexibility and coordination, while the cognitive layer reinforces executive functions. Importantly, the visual stimulation provided by vivid colours like red or green can also enhance focus and mood, offering a subtle way to combat apathy or withdrawal, common symptoms of dementia [24]. Even the choice of colours can be meaningful; high-contrast colours are easier to distinguish for older adults who may also be experiencing visual decline.

Observations during these sessions often provide unspoken insights into residents' cognitive health. Hesitations, colour misidentifications, or sequence errors can serve as early indicators of perceptual or cognitive changes. Instructors trained to notice these patterns play a valuable role, not as clinicians but as frontline observers, often initiating conversations with care teams when changes become apparent. This creates a low-pressure, activity-based method of identifying potential concerns without resorting immediately to formal assessment.



While Be Great Fitness exemplifies a structured and responsive approach to using colour in physical activity, the broader implication is that care homes can leverage visual stimulation as part of everyday practice to enhance engagement, particularly for residents with dementia.

Ultimately, the fusion of physical activity, colour psychology, and cognitive stimulation not only enriches the daily experience of residents but also acts as an informal screening tool and source of support for the broader care team, illustrating a holistic approach to wellbeing in dementia care.



Benefits to the Workforce

Embedding structured physical activity into care home routines not only benefits residents, but it also has meaningful, long-lasting effects on the care workforce. When care staff are actively involved in facilitating exercise sessions, they gain practical skills, renewed confidence, and a stronger sense of purpose. This is particularly evident in sessions delivered by organisations like Be Great Fitness, where instructors make a deliberate effort to include Activities Coordinators, care staff, and other team members in the process.

Rather than operating in isolation, instructors encourage staff to join in, support residents, and even co-lead elements of the session. This hands-on involvement acts as informal, experiential training, giving staff exposure to effective movement techniques, inclusive adaptations, and real-time problem-solving for residents with varying needs. For many, this bridges a crucial gap between theory-based training and everyday delivery, empowering them to confidently replicate similar activities in their own time.

Participation in these sessions fosters a positive team dynamic, reduces role-based silos, and reinforces a collaborative approach to care, contributing to a more active and vibrant care environment, where physical wellbeing is embedded in daily practice rather than outsourced to external providers.

This type of workforce development is subtle but powerful. Instead of relying solely on formal opportunities, care staff gain from the continuity and informal mentoring that comes through consistent exposure through participating in activities. Over time, it cultivates a workforce that not only sees the value in physical activity but is also capable and motivated to deliver it.

Moreover, this collaborative approach promotes a shared sense of purpose and teamwork, reinforcing a positive, health-focused culture within the care home. It cultivates an atmosphere where physical activity and resident engagement are seen as collective responsibilities rather than the sole domain of external specialists. In doing so, Be Great Fitness becomes a catalyst for long-term workforce development, equipping care home staff with the confidence, tools, and motivation to champion physical wellbeing as an integral part of daily life for residents.

Exercise Session Structure

Exercise sessions should consider each resident's physical, cognitive, emotional and social wellbeing, not just their medical or mobility needs. Rather than using a one-size-fits-all model, sessions are safe, inclusive, and engaging by working closely with care home staff ahead of interacting with residents to understand the resident profiles and needs. This direct focus on collaboration with care staff includes regularly reviewing care plans, discussing any recent changes in resident needs or conditions, and identifying potential risks or triggers. This level of detail and preparation not only helps to prevent injuries but also allows for sessions to be more meaningful and enjoyable for the residents. A key aim of all sessions is to foster a sense of dignity and enjoyment in movement, helping residents to be seen, heard and valued through warm, interactive group settings. Instructors build rapport with residents alongside a continuous focus on risk assessment; the instructors not only promote physical wellbeing but also help to support cognitive health and emotional resilience.

It is important that sessions are delivered in a warm and friendly, interactive group setting, which helps foster a sense of community and connection among residents. Instructors prioritise eye contact, maintaining eye-level, friendly conversation, laughter and gentle encouragement, making sure each resident feels included and supported. The sessions are designed to be social as well as physical, incorporating music to stimulate the body and mind. The group setting also provides opportunities for peer and social interactions, which have helped reduce loneliness to increase overall wellbeing. Instructors take time to foster relationships with residents and apply appropriate gentle humour, hobbies or interests to build trust and engagement. These individual connections, learning and remembering names, help create a sense of safety and openness, which encourages participation.

Instructors are in a state of constant risk assessment throughout every session. As qualified personal trainers, instructors must monitor posture, breathing, facial expressions and alertness to catch early signs of fatigue, discomfort or strain; if a resident appears to need extra support, instructors modify movements to encourage full participation. Exercise sessions are conducted with residents seated, ensuring those with limited mobility can participate fully and safely. These exercises are tailored to be met just under the residents' exertion point, to prevent strain or injury, where movements are demonstrated slowly, explained clearly, and paired with music or visual cues to aid comprehension. For each session, the aim is not perfection, but participation; every small movement is celebrated as progress.

As sessions are tailored to just below a resident's exertion point, residents are encouraged to challenge themselves without crossing into discomfort or fatigue. This level of challenge helps improve strength and mobility safely over time, and instructors check in with residents to adjust the pace or intensity as needed. The sessions are typically between 45 minutes to 1 hour, which includes fun and engaging, repetitive exercises, helping residents become familiar with movements, reducing anxiety and boosting confidence. These consistent, enjoyable routines also contribute to improvements in flexibility, circulation, coordination and muscle strength, which can contribute to falls reduction and residents' ability to complete more daily tasks independently with confidence.

Instructors do not set specific goals with individual residents, as maintaining a non-competitive, welcoming environment is central to Be Great Fitness's ethos and engagement. This inclusive mindset reduces pressure and supports residents of all abilities to engage positively, as instructors encourage residents to 'do what we can'. One of the North Midlands-based organisation's motto is '**out is better than nowt**', capturing the belief that any movement, no matter how small, remains worthwhile.

Where specific progress tracking or rehabilitation is necessary, this is handled by the care home's rehabilitation and physiotherapy team, with instructors liaising to reinforce safe exercise within their sessions. A clear boundary ensures the right level of oversight, allowing instructors to focus on motivation, engagement, and more holistic wellbeing.



Conclusion

Inactivity among older residents remains one of the most pressing yet under-addressed issues in care settings. The consequences: reduced mobility, increased fall risk, and cognitive decline, are well documented, yet physical activity continues to be treated as optional rather than essential. Reframing exercise as a core component of care, not just an add-on, is critical for improving outcomes in an ageing population.

Programmes like Be Great Fitness offer a compelling model for what this shift can look like in practice. By delivering consistent, inclusive sessions that adapt to a wide range of physical and cognitive abilities, the initiative shows how structured movement can be woven into everyday care. The impact extends beyond mobility gains; residents experience greater social connection, improved confidence, and renewed purpose. Importantly, such programmes actively combat the isolation and deconditioning that so often accompany sedentary routines in later life.

What makes this approach effective is not just the delivery of exercise, but how it's done, collaboratively, compassionately, and with an emphasis on engagement rather than performance. From supporting stroke recovery to stimulating cognition in dementia care, the benefits are multifaceted and measurable. The presence of skilled instructors also enhances staff capability, subtly contributing to workforce development and a more health-focused care culture.

As demand on the care sector continues to grow, and with fall-related hospitalisations and long-term dependency on the rise, integrating accessible physical activity into routine care is no longer a luxury; it is a necessity. The evidence is clear: regular movement, when done inclusively and meaningfully, improves quality of life, reduces health risks, and creates more resilient care environments. Inactivity in older adults must be treated as a systemic risk, and the solution begins with every day, purposeful movement embedded at the heart of care.

Recommendations

1. Recognise Physical Activity as Essential, Not Optional, in Adult Social Care

Government policy must reframe physical activity in care homes as core health guidance, not a leisure option, with sufficient funding and support for providers. Movement should be integrated into care planning and delivery, especially given its proven role in preventing falls, reducing hospitalisations, and supporting mental wellbeing.

2. Support Workforce Development Through Physical Activity Training

Care staff benefit directly from being involved in structured movement sessions, developing confidence and practical skills. However, this requires support and formal recognition.

The government needs to fund and mandate basic physical activity and movement training as part of the Care Certificate and CPD pathways for care workers.

40% of NHS costs for falls and fractures result from social care equate to a cost of 1.2bn to the NHS a year [25]. Evidence shows exercise can reduce falls and fall-related injuries by approximately 8%. A modest investment in training, estimated at £6.4m to train just 2% of care staff, could lead to potential NHS savings of up to £96m. These savings make the case for seeing movement as essential healthcare, not an optional activity.

3. Empower GPs and social prescribers to refer care home residents to in-house exercise programmes and commission delivery partners as part of the local health strategy.

Social prescribing has gained traction in community settings; now it must be extended into care homes. Exercise programmes that also tackle loneliness, isolation, and mood disorders mirror the goals of social prescribing and should be supported as such.



Credits

Care England

Care England is the largest and most diverse representative body for independent providers of adult social care in England. It is a registered charity that works collaboratively with its members, stakeholders, and the Government to implement the foundations of a sustainable future for adult social care. Care England represents small, medium, and large providers, including single care homes, small local groups, national providers, and not-for-profit voluntary organisations and aims to improve the quality of care and ensure the health and safety of both staff and residents in care settings and advocates for sustainable policies and practices that address the sector's workforce challenges.

Be Great Fitness

Be Great Fitness, led by personal trainer Bailey Greetham-Clark, offers a unique and inclusive approach to exercise for care home residents by focusing on personalised, low-impact physical activity. Be Great Fitness has been working closely with Tanglewood Care Homes since August 2024, stretching nearly a year at the time of this report release. Their person-centred and holistic method prioritises building trust and rapport with residents before beginning tailored fitness sessions, which are designed to be safe, engaging, and accessible to all. By working closely with care staff and creating a warm group environment, Be Great Fitness supports not only physical wellbeing but also emotional and cognitive health, while promoting the idea that any movement is valuable.

Tanglewood Care Homes

Tanglewood Care Homes has over 30 years of experience across the Midlands and the North of England, where the individualised care of residents remains the top priority. They ensure that all residents can participate in and benefit from regular exercise sessions by facilitating these sessions once a week, thereby maintaining consistency and effectiveness.

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