

Practices to do at home (weeks 1-3)

Aim to do at least 10 minutes of home yoga practice on most days

Warm up

- (1) Wrists: point and flex, circle, make a fist then spread out all out your fingers
- (2) Shoulders: shrug your shoulders. Put your fingers on your shoulders and circle.
- (3) Ankles: point and flex
- (4) Knees: flex and extend



Practices

(1) Archer:

Position your hands/arms as if drawing a bow.
Gaze at the fingers for your extended arm.

Hold for 1 – 3 breaths. Repeat on the other side.



(2) Single Leg Extension:

Sit tall in your chair. Holding underneath your leg, extend it out in front of you and hold for 1 - 3 breaths. Repeat on the other side.

Option 1 - tap the toe on the floor

Option 2 - keep the foot off the floor



(3) March in place:

Complete 10 – 30 repetitions

Option 1 – with toes on the floor lift the heel

Option 2 – lift the whole foot off the floor



(4) Sitting quietly, count your out-breaths for 1-2 minutes

Teacher Comments Box

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Practice Log

Date	Notes

Practices to do at home (weeks 4-6)

Aim to do at least 10 minutes of home yoga practice on most days

Warm up

- (1) Fingers: stroke up from the heel of the hand to the fingertip.
- (2) Breathe out - make gentle fists. Breathe in - extend the fingers. Repeat for about a minute.
- (3) Wrists: point and flex, circle, make a fist
- (4) Shoulders: shrug your shoulders. Put your fingers on your shoulders and circle.
- (5) Ankles: point and flex
- (6) Knees: flex and extend



Practices

(1) Fist Circles:

Begin with the hands in fists, little finger sides touching. Bend at the elbows and bring the hands towards the chest as the hands roll around each other. Complete the circle. Repeat 3-6 times.



(2) Seated Half Moon:

Lift through the spine.

Out breath - gently willow to one side, keeping the body facing forward. Hold for one breath. In breath - bring the body back to centre.

Repeat on the other side.

Option 1 – arms across the body

Option 2 – arms overhead and palms together



Now come to standing or remain seated

(3) Shifting weight:

Holding the back of a chair or something stable, shift the weight onto one foot and lift the heel of the other foot. Place that heel down and repeat on the other side. Shift from side to side for about a minute. Add a knee raise.



(4) Lotus Flower Breath:

Start with the hands in prayer.

In-breath - extend the hands, palms up with fingers extended and little fingers touching (opened bloom). Out-breath - bring the hands to chest with the heels of hands and fingertips touching. Make sure there is space between the palms (flower bud). Practice for 1-2 minutes.



Teacher Comments Box

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Practice Log

Date	Notes

Practices to do at home (weeks 7-9)

Aim to do at least 15 minutes of home yoga practice on most days

Warm up

- (1) Fingers: stroke up from the heel of the hand to the fingertip
- (2) Breathe out - make gentle fists. Breathe in - extend the fingers. Repeat for about a minute.
- (3) Wrists: point and flex, circle, make a fist
- (4) Shoulders: shrug your shoulders. Put your fingers on your shoulders and circle.
- (5) Ankles: point and flex
- (6) Knees: flex and extend
- (7) Toes: heels on the floor with the toes lifted. In breath - stretch your toes out. Out-breath - scrunch them up. Repeat for about 30 seconds.



Practices

(1) Seated Sun Salutation:

1. Begin with the hands in prayer.
2. Out-breath: turn the palms to face outwards with the thumb and first finger touching.
3. In-breath: extend the arms and take overhead **OR** to shoulder height.
4. Out-breath: release the fingers and arc the hands round and to your side.
5. Hold on the in-breath with your hands to the side.
6. Out-breath: with your hands at the side hinge the body forward slightly from the hips **OR** with the spine in neutral take the chin towards the chest.
7. In-breath: bring the body and head back up and take the hands into prayer.
8. Repeat 3-5 times.



Now come to standing using 'sit to standing' move OR remain seated

(2) Shifting weight:

Holding the back of a chair or something stable., shift the weight onto one foot and lift the heel of the other foot. Place that heel down and repeat on the other side. Shift from side to side for about a minute. Add side taps and then knee raises.



(3) Toffee hands breath:

Begin with palms facing each other a few inches apart.

In-breath: draw the hands apart allowing the wrists to move freely.

Out-breath: Bring the hands back towards each other.

Practice for 1-2 minutes.

Then, observe your breath for 1-2 minutes, noticing how your chest moves and how comfortable the breath feels.



Teacher Comments Box

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Practice Log

Date	Notes

Practices to do at home (weeks 10-12)

Aim to do at least 15 minutes of home yoga practice on most days

Warm up

- (1) Fingers: stroke up from the heel of the hand to the fingertip
- (2) Breathe out - make gentle fists. Breathe in - extend the fingers. Repeat for about a minute.
- (3) Wrists: point and flex, circle, make a fist
- (4) Shoulders: shrug your shoulders. Put your fingers on your shoulders and circle.
- (5) Ankles: point and flex
- (6) Knees: flex and extend
- (7) Practice a seated sun salutation of your choice 3-5 times



Practices

- (1) Shoulder blade scrunch:

Elbows at the side of the ribs and hands out as if holding a tray. Out-breath - squeeze your shoulder blades together as your hands swing out to the side. In-breath - relax your shoulder blades and allow your hands to come back to the start position. Repeat 3-5 times.



Now come to standing using 'sit to standing' move OR remain seated

- (2) Shifting weight:

Holding the back of a chair or something stable, shift the weight onto one foot and lift the heel of the other foot. Place that heel down and repeat on the other side. Shift from side to side for about a minute. Add side taps, backward taps and knee raises.



(3) Dancer Posture:

Holding the back of the chair, take one foot back and hold.

Lift the chest and look towards the wall.

Option 1 – opposite hand to side of thigh.

Option 2 – opposite hand in the air.

Hold for 2-3 breaths then repeat on the other side.



(4) Perform a favourite asana of your choice

(5) Lotus Flower Breath:

Start with the hands in prayer.

In-breath - extend the hands, palms up with fingers extended and little fingers touching. Out-breath - bring the hands to chest with the heels of hands and fingertips touching. Make

sure there is space between the palms (flower bud). Practice for 1-2 minutes. Then, with hands still, quietly observe the breath for 1-2

minutes, noticing how your chest moves and how comfortable the breath feels.



Teacher Comments Box

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Practice Log

Date	Notes

Please post completed form to your yoga teacher 10 days before your first Gentle Years Yoga session, using the stamped addressed envelope



British Wheel of Yoga – Gentle Years Yoga STUDENT HEALTH QUESTIONNAIRE

Revised 27th August 2020

<i>To be completed by yoga class participants for face to face and remote teaching. All information given will be treated in the strictest confidence and stored in accordance with General Data Protection legislation.</i>			
Name:			
Date of Birth:		Age:	
Address:			
Telephone Number(s):	Home:		
	Mobile:		
Email:			
Emergency contact name:			
Emergency contact telephone number:			
Have you attended a yoga class before? [please answer 'Yes' or 'No']			
If yes, how long have you practised yoga and what style of yoga have you practised?			
<p>Whilst yoga may be practised safely by most people, there are certain conditions that require special attention. Please indicate in the boxes below whether or not you have any of the following medical conditions and then provide further information:</p>			
<i>These conditions require specific modifications to your yoga practice:</i>			
Abdominal disorder or recent surgery		Arthritis (osteo or rheumatoid)	
Unspecified back pain/ problems		Spinal injury	
Joint replacement [specify which joint(s) in space below]		Knee problems	
Hip problems		Shoulder or neck problems	
Heart disorders		High blood pressure	
Low blood pressure		Other (discuss with yoga teacher)	
Further information:			
<i>These conditions may affect your practice and so it will be useful for your yoga teacher to be aware of them:</i>			
Asthma		Diabetes	
Anxiety/depression		Auto-immune disorder (e.g. M.E., M.S., Lupus etc.)	
Epilepsy		Balance affecting disorder	
Respiratory issues		Migraine	
Sensory disorder affecting eyes or ears		Other (discuss with yoga teacher)	
Further information:			

<p>Your GP surgery referred you to the Gentle Years Yoga classes on the basis that you have two or more health conditions to declare. Please tick or X that you have declared all relevant health conditions here →</p> <p><i>If you have not declared any health conditions on the preceding page, your yoga teacher cannot give you the appropriate modifications/adjustments that are related to your participation.</i></p>				<input style="width: 40px; height: 40px; border: 1px solid black;" type="checkbox"/>
<p>Have you had any recent operations (in the last two years)? [please indicate 'Yes' or 'No'. If 'Yes', please provide details.]</p>				
<p>Do you have any old injuries that still trouble you? Or any other medical conditions not covered above that might be adversely affected by yoga practice? [please indicate 'Yes' or 'No'. If 'Yes', please provide details.]</p>				
<p>Do you participate in any other physical activity, e.g. gym, jogging, swimming, aerobics, cycling, walking or other? [please indicate 'Yes' or 'No'. If 'Yes', please provide details.]</p>				
<p>How regularly do you do this/these?</p>				
<p>Disclaimer - Please read carefully; your submission of this form will be taken to indicate your acceptance of the following:</p> <p>Please take care when filling in this questionnaire and check the contents are accurate before you submit it. By submitting the questionnaire, you are confirming that the contents are true and accurate to the best of your knowledge. Please notify your teacher of any changes to your responses in this healthcare questionnaire before participating in classes subsequent to those changes.</p> <p>Your GP surgery has referred to you be a participant in the Gentle Years Yoga classes. Neither your teacher nor the British Wheel of Yoga are qualified to express an opinion that you are fit to safely participate in any British Wheel of Yoga organised sessions or any British Wheel of Yoga trained teacher's yoga classes. If you have any medical concerns, please talk with your GP or specialist.</p> <p>If you have any discomfort while practicing yoga, please talk with your yoga teacher. Where possible, your teacher will offer suitable modifications or adjustments and practices to suit different levels of experience and ability.</p> <p>Before your first class your teacher will be contacting you by email or phone to arrange a one-to-one meeting on Zoom to familiarise you with the procedures and to figure out the best distance between your chair and computer device. Hopefully, your teacher will have received this Health Questionnaire in advance of your one-to-one meeting so that any questions can be answered privately.</p> <p>Once your online classes start, always follow your teacher's safety instructions and listen to your body. Where a movement is beyond your experience or ability, feels too difficult for you, or you experience any discomfort, please do not continue the movement. Discuss the situation with your teacher.</p>				
Name (please print):				
Signature <i>if using a printed out paper copy:</i> <i>Otherwise indicate with a tick or X</i>		<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div> <p>I confirm my understanding and acceptance of this health questionnaire and its disclaimer:</p>		
Date:				
<p>General Data Protection Regulations Statement</p> <p>In order to comply with the General Data Protection Regulations, your teacher only holds information when it is necessary to do so in order to carry out their work, and when you have given your permission. Are you happy for your teacher to retain your contact details and to share information with a substitute teacher if required?</p> <p style="text-align: center;">YES / NO</p> <p>Are you happy for your teacher to send information about relevant updates and events that might be useful to you?</p> <p style="text-align: center;">YES / NO</p>				
<p>Communication: Bearing in mind that your online yoga classes on 'Zoom' may <i>require</i> link updates <u>by Email</u> and your teacher may need to phone you if there is an emergency cancellation, please indicate your communication preferences.</p>				
Means of Communication:	Email YES / NO	Post YES / NO	Telephone YES / NO	

The Gentle Years Yoga Trial

Engaging in Yoga – Advice and Sign-posting Sheet

[INSERT ONE OF THE FOLLOWING PARAGRAPHS DEPENDING ON GROUP ALLOCATION:]

[YOGA GROUP] [Thank you for your on-going participation in The Gentle Years Yoga Trial. As you are approaching the end of your 12-week course, we want to give you some advice about continuing yoga. After finishing the course, you may want to continue to practice yoga. One possible approach is to continue to use your home practice sheets and other practices that you learnt from your course. In addition, below is a list of yoga classes that you could choose to engage in. Before the end of your 12-week course, please ask your teacher if you have any questions about continuing yoga].

[CONTROL GROUP] [Thank you again for participating in The Gentle Years Yoga Trial. Now that you have completed the trial, we would like to provide you with details of yoga classes that you could choose to engage in. If you have any questions about these classes, please contact the class teacher(s) using the details provided.]

British Wheel of Yoga (BWY) Gentle Years Yoga© - yoga classes for people aged 65 or older with long-term health conditions

[Name and details of yoga class]

[Name and details of yoga class] **[ADD FURTHER ROWS IF REQUIRED]**

Other yoga classes suitable for older people

[Name and details of yoga class]

[Name and details of yoga class] **[ADD FURTHER ROWS IF REQUIRED]**

BWY Yoga Class Finder

You can use the following link to search for yoga classes that may be suitable for you, using your postcode or keywords. Once you have entered these details and have selected 'search', you will see a list of classes with BWY teachers' contact details – call/email the teacher(s) to check if their class is suitable for you. Please be aware that for general yoga classes you will need to be able to get down to the floor and back up by yourself.

<https://www.bwy.org.uk/find-a-yoga-class/>