A good night's sleep should be prescribed for our patients

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- The deprivation of sleep can have an impact on patient recovery.
- There are many factors that stop our patients from having a good night sleep.
- A noisy environment is also detrimental to staff as it can make communication difficult and amplify work pressures which in turn could lead to an error being made.





Other factors:

- Slamming doors
- Banging bins
- Telephones ringing
- TV or radios on too late
- Monitoring devices
- Admissions arriving through the night
- Staff talking too loudly
- Noisy footwear of the staff
- Bright lights





How can we ensure our patients get a good night sleep?

There are two models to assist:

- Sleep hygiene Tool
- Quiet protocol (pinched with Pride from Walsall healthcare with permission copies distributed)



In essence what both do is:

- Ensure that wards start a wind down at 9pm
- Ensure that we have tailored the wind down to the specific needs of the individual patient. (Fred always has had a tot of whisky before bed)
- Dimming lights
- Soft closing bins
- All beds filled by 8pm at the latest
- Ensure enough pillows ordered (pillow audit 18th March)
- Ear plugs and eye masks



Monitoring arrangements

- Night visits by senior members of staff
- Introduction of the quiet protocol
- Implementation of sleep diary as per sleep hygiene tool (audit effectiveness)



Sleep Hygiene

What is Sleep Hygiene?

'Sleep Hygiene' is the term used to describe good sleep habits. Considerable research has been gone into developing a set of guidelines and tips which are designed to enhance good sleeping and there is much evidence to suggest that these strategies can provide long-term solutions to sleep difficulties

Gathering information Questions to ask Staff

- Typically when did the patient go to bed?
- What time did lights go out at nights?
- What activities were done each night?

Common themes

- That patients were not having enough sleep
- Lights were not going out till late
- Lights appeared to be going on around 06:00
- Television were not turned off until lights were turned off
- Patients were not given time to relax and settle themselves

What can we do?

- Initiate the use of a sleep diary.
 This will establish the patients individual likes and dislikes and will take into account activities they would normally do at home i.e. walking to the toilet before lights out, having a milky drink, doing a particular activity before going to bed.
- Commence drugs rounds earlier
- Switch off lights earlier and turn lights on later in the morning. This will improve the general patient experience.





Thank you for listening

Questions?

