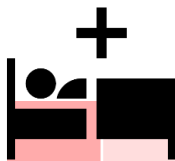
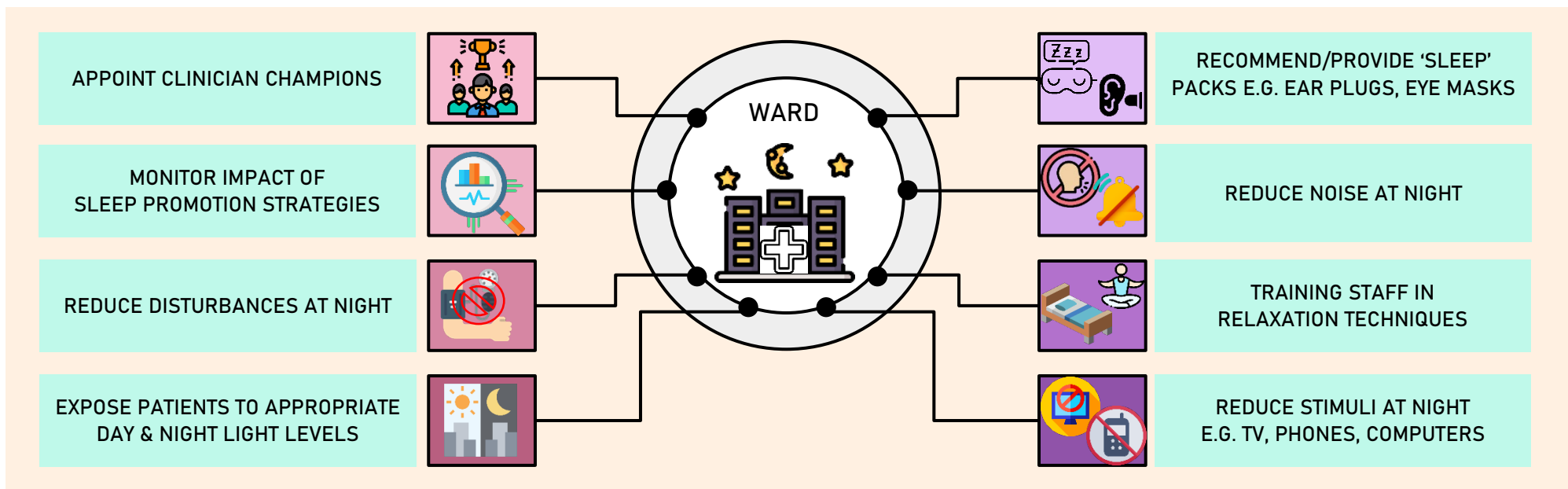
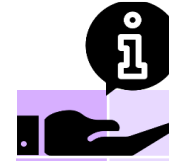


System-Wide Non-Pharmacological Interventions to Promote Sleep in Hospital



Patient care strategies

- Identify patient chronotype: Is the patient a lark or a night owl?
- Ensure appropriate napping/reduce inappropriate napping
- Recognise & manage anxiety & stress & promote relaxation
- Review medication & make adjustments as appropriate
- Avoid caffeinated drinks in the afternoon & evening
- Manage acute illness & expectations
- Coordinate exercise or physiotherapy earlier in the day
- Screen for Obstructive Sleep Apnoea (OSA) in high risk groups.



Sleep hygiene education for all

- Counsel & manage sleep expectations in hospital
- Emphasise:
 - environmental factors (e.g. a comfortable clean bed, exposure to day & night light, device free period before bed)
 - behaviour & habits that promote sound sleep (e.g. relaxation before bed).
- Provide supplemental written and/or electronic information resources

Checklist for Implementation of Ward Strategies Promoting Good Patient Sleep

	1. Yes/ Fully implemented	2. Partially implemented	3. No/ Not implemented	Comments
Hospital/Ward Policies				
Hospital/ward policy for sleep promotion in patients finalised and distributed to patient care areas				
Policy contains information/ direction regarding non-pharmacological and pharmacological management of sleep disturbance				
Other relevant policies/ procedures/ guidelines consider impact on patient sleep and outline mitigation strategies				
Compliance with policy/policies routinely reported to relevant ward/hospital governance committees				
Implementation of night noise reduction strategies				
Ear muffs/plugs routinely offered to all relevant patients				
Sound-reducing rubber on wheels of hospital beds, trolleys and other equipment				
Hardware optimised e.g. soft door close, not squeaky.				
Designated area for staff discussions at night away from patients.				
Scheduled use of noise meters to measure noise levels.				
Minimisation of care interventions at night				
Patient care interactions occur during awake times whenever possible.				
Patients are not administered prescribed night sedation medications, if asleep.				
Patient exposure to appropriate day & night light levels				
Window curtains/ blinds opened and closed appropriately.				
Eye masks routinely offered for patient use.				
Wakefulness stimuli discouraged at night				
Caffeine-containing beverages not routinely offered to patients within 4-6 hours of bedtime.				
Patient use of TV, phones and computers during sleeping hours discouraged by nurses				

	1. Yes/ Fully implemented	2. Partially implemented	3. No/ Not implemented	Comments
Staff training				
All staff are aware of hospital/ward policies to manage sleep disturbance				
Nursing staff routinely enquire about patient's sleep during hospitalisation				
Written and/or electronic information resources are routinely offered by nurses to newly admitted patients and questions answered				
All clinical staff are aware of common triggers for sleep disturbance/insomnia				
Nursing staff monitor individual patient's daytime napping on daily basis				
Night clinical staff have received patient-centred training to promote sleep including non-pharmacological strategies such as relaxation/mindfulness techniques				
Clinical staff consider and make referrals as necessary e.g. formal medication review, screening for Obstructive Sleep Apnoea (OSA) in high risk patient groups				
Patient education and counselling				
Patients are counselled pre-admission or at admission about expectations regarding sleep and its management during hospital stay				
Patients receive counselling about sleep when requested				
Patients encouraged to report sleep quality and causes of disturbance				
Establishment of Quality Improvement (QI) Project				
Clinician champion(s) appointed to lead/facilitate interventions and project				
Multidisciplinary project team for QI established				
Clinical indicators chosen to measure baseline management and success of interventions				
Baseline audit completed				
For more details refer to: Table of non-Pharmacological Interventions To Promote Sleep In Non-Critically Ill Hospital Patients				