

Paediatric Sleep Training for Professionals & Level Six Online Course, Advanced Paediatric Sleep Practitioner Training - Moving Theory into Practice

The outcomes of the courses were as follows;

- Understand the importance of healthy sleep on growth, development and learning
- Be knowledgeable on how to advise new parents on how to instil healthy sleep habits from the start.
- Be knowledgeable in the identification of common childhood sleep disorders
- Understand how to create an individual sleep action plan and support parents in addressing behavioural sleep issues, and tailor this plan to the individual needs of the family, taking into account parenting style preferences.
- Be able to recognise the possible symptoms of the less common sleep disorders
- Know when to refer a child to a specialist service.
- Be confident in assessing and identifying behavioural insomnia disorders in
- babies, children and adolescents
- Be confident in discussing sleep management options with parents and know the evidence for the efficacy of these options
- Understand the importance of the collaborative process between parent and sleep practitioner
- Be confident in the writing of sleep management programmes to support variety of sleep disorders in babies, children and adolescents
- Understand the different sleep disorders more commonly found in certain populations of children and adolescents.
- Understand the latest research into safe sleep practices and be confident in advising new parents
- Understanding the impact that Post Natal Depression can have on sleep problems
- Understand the impact that trauma can have on sleep problems
- Understand the importance of developing a professional reflective practice
- Understand the importance of reviewing latest sleep research
- Understand your professional responsibilities.
- Understand the importance of caring for yourself as a professional and knowing how to obtain ongoing support

My Learning

I have learned that each family has a history and past experiences which will impact on the culture of sleep in their home and how a sleep programme is negotiated and implemented. I will use my learning and experience of completing a thorough and in-depth assessment by reflecting on what gaps have become apparent on the initial sleep questionnaire that parents complete and ensuring that the subsequent appointments bring clarity and further discussions to inform the sleep programme. I am now aware of how strong the impact of current experiences with sleep, the parent's

own childhood experience of sleep and their beliefs around sleep are in impacting decisions around their child's sleep. Understanding the culture and beliefs of the family around sleep helps me to not only complete a comprehensive assessment but to also deliver healthy sleep messages in

a way that can be accepted by the family. The process of negotiation, psychoeducational messages and relevant research was invaluable in supporting the family. I first had to understand the research, science of sleep and psychoeducational messages, to share this in a way that is understandable for families. I was able to share information in small and manageable chunks, so that I did not overwhelm Baira and Rayne, this allowed me to be a reflective practitioner and critically analyse my practice. I enjoyed this process and I have learned so much about the importance of maintaining my boundaries when working with a family. I did not become an “on call” service for Mum, as described above, I could see that with all the complexities that the family were facing this could have easily happened. Putting in clear dates for appointments, ensuring that I only contacted Mum on a Monday and making sure that appointments remained within the agreed time, offered clear boundaries and expectations for a professional working relationship. In future practice I will continue to use the guidance and processes learnt to offer a high quality and an equitable sleep service.

Feedback

Baira was really positive during her feedback, she said she can't believe that it actually worked. When she asks Rayne to go to bed, he just listens and goes, there are no problems with him answering back or getting out of bed he just goes to sleep. She said the intervention plan, advice and different techniques was helpful and having everything we talked about written down was valuable. She said she still needs help with her family circumstances and thanked me for helping to signpost her to the appropriate agencies. She thinks that the 1:1 sessions that I conducted with Rayne helped him to listen when he was at home and it was bedtime. She now spends quality time with Rayne around her graffiti art and is teaching him new skills which he enjoys. Baira said that she would rate Rayne's sleep at a 9 now and she is really pleased with this outcome. Baira confirmed that she received a lot of support during the sleep training process and that it was sufficient. She purchased that same fidget toys that I used in my sessions so that Rayne can use these at home during their worry time talks. Baira would also recommend this service to a friend.

Concluding Reflections

Working in a therapeutic manner with families allowed the family to feel heard, and the sleep management programme was paced to meet their needs. I was able to be flexible in my approach and offer face to face and remote appointments to fit around Baira's shift work pattern and Rayne's core lessons in school, this allowed them to see that I was invested in the family and build a rapport. The wider impact of the sleep management intervention demonstrated best practice and was invaluable, the sleep intervention was successful, also the systems, in the family's lives were strengthened as well as new support networks created. I made a final referral for the family to Early Help Unit because my time with the family was coming to an end and there were more problems that needed support that were out of my remit, such as parenting support. I struggled at times to meet with Baira as she would cancel due to personal circumstances, however once we had a meeting it was apparent that she wanted the support. I modified the Timed Return Approach (appendix 1) to ensure that it met the needs of the family history and age of Rayne, as I believed that checking on Rayne too often may have distracted him from having the chance to fall asleep, however he may need regular check ins for a longer period of time due to his attachment difficulties. The sleep programme was planned for a total of four weeks, I ensured that I wrote a detailed sleep programme (appendix 1), as Baira requested this due to her mental state, she was very forgetful.

However, I would not write such a detailed programme with other families, with less complex needs as I am aware that a lot of writing and pages can be 'off putting' for parents or carers.