



Sleep consultation tool.

This sleep tool is intended to support practitioners. It is not a substitute for clinical assessment.

Created by Dr Ashish Bhatia GP in collaboration with Louise Berger sleep specialist.

1. Screen

How are you sleeping?

Sleep is Humble because it is really important yet so often overlooked.

Consider asking about sleep if you hear someone say...

I feel tired
I'm struggling to sleep
I get anxious at night
I've odd or unexplained symptoms

I'd like to be healthier
I'd like to lose weight
I'd like to get focused & fitter
I'd like to feel energised

I'd like to help my health conditions, e.g. obesity, diabetes, heart disease, dementia, fertility, inflammatory...

I'd like to improve my mental health, mood, anxiety, depression, PTSD...

I'd like to discuss sleeping tablets
I'm travelling or staying in hospital
I'm working shifts

2. Sort

REGARD-ing your sleep What's your challenge?

1. Regular bed & wake up times?

Times varying by more than 1 hour.

2. Enough time to sleep in bed?

This is personal, typically >7 hours.

3. Getting to sleep or back to sleep?

Lying awake in bed for >30 mins.

4. Anxiety or alertness in bed?

Tired & wired or worried at night.

5. UnRefreshed & sleepy in the day?

Struggle to stay awake (unwanted dozing)

6. Doing odd stuff at night?

Unwanted sleep related experiences.

Option to score days per week for each struggle & track the score over time.

3. Suggest

Could this be an issue?



Poor sleep habits

Not setting the body clock with what it needs, during the day & night.



Insomnia

Want to, but feel I can't sleep & trying harder doesn't help.



Obstructive Sleep Apnoea

Stopping breathing & snoring interrupts deep sleep.



Disruptors

These spoil sleep quality. E.g. pain, pets, peeing, menopause, medications, heat, light, noises and recreational drugs



Parasomnias

E.g. Sleep walking, Night terrors, Paralysis, Acting out dreams, Restless legs, Periodic limb movements & Parkinson's dis (early sign).

4. Support

How does this option sound?

Improve sleep habits & lifestyle

Set reminders for regular wake up, wind down and bedtimes- use a diary.

Get LEFTSS right in the day

Light, Exercise, Food, Temperature, Soothing & Sleep-space.

Insomnia

Assess Insomnia Severity Index. Reassure it's common, often curable & "paradoxical" - a misperception. NICE suggests CBT-i or drug options.

Obstructive sleep apnoea

Assess Epworth & STOP BANG score. Help snoring, discuss driving, lifestyle change & refer sleep studies if appropriate.

Disruptors

Manage meds, pain, peeing, menopause Aim for NO SCAMS. Nicotine, Opioids, Sedatives, Caffeine, Alcohol, Marijuana & Screens in bed by supporting habit change.

Parasomnias

These are varied and can be tricky. Some are managed in primary care. Refer if you're unsure, if the person or partner is in distress or at risk of harm.

Restless legs

Consider lifestyle, iron or other meds.

Common Disruptors

Pain, pets, peeing, menopause, heat, lights, sounds, smells, medications, devices, dependants & drugs.

Aim for NO SCAMS:

Nicotine, Opioids, Sedatives, Caffeine, Alcohol, Marijuana & Screens in bed.

Further resources to support sleep

Click here to watch a video guide to using the Sleep Consultation Tool.

Also download a free PDF with sleep tips for the public from: <http://www.humblesleep.com>

Sleep Habits

Set your body clock with **regular** wake up, wind down and bed times and aim to get your **LEFTSS** right. (see below)



Light

Wake up see the light
Screens off >1 hr
before bed.
Aim for dark at night.



Exercise

Walk outside in day-
light & exercise if you
can. Even 1 min out
of puff helps



Food

Cut alcohol & caffeine
esp after noon. Last
meal >3hrs before bed
& only drink water after.



Temperature

At bed time cool down
with a sip or splash
of cold water & set
thermostat to 18°C.



Soothe

Soothe your mind
with time to relax &
unwind. Try a journal,
music or bath.



Sleep-space

Safe, dark & quiet, just for
sleep & sex. If stressed go
to a separate sanctuary,
relax until you feel sleepy.

Insomnia

Insomnia is common and distressing, (impacting mental health & performance), but reassuringly it's usually treatable.

NICE recommends CBT for insomnia (CBT-I) and offers guidance regarding drug options.

Below are links to online resources and a Humble approach to 6 CBT-I skills, also described in [this 10 min video](#).

Set up success	Stimulus control	Sleep scheduling	Soothing strategies	Structure thinking	Set free
Check suitability, respect, reassure & set expectations.	Only sleep & sex in bed. Ideally no stress or screens.	Avoid napping & only go to bed once sleepy.	Body scan, PMR, deep slow breaths, eye roll & relaxing visualisation.	Pause & process, regulate feelings & re-frame ideas.	Plan strategies & support to stay on track.
Set wake up time, start sleep diary & sleep habits.	If awake >20min exit bed and go to a sanctuary.	Record & restrict time in bed by going to bed later.	If you wake have a plan e.g. Pause & Breathe, music, journal.	Filter thoughts, write worries & honour feelings.	Life is about living, not just sleep.

Insomnia links

NHS & NICE: <https://www.nhs.uk/conditions/insomnia/> <https://cks.nice.org.uk/topics/insomnia/management/>

Free Apps: <https://sleepful.org.uk/> <https://www.bighealth.co.uk/sleepio/>

Podcasts: <https://healthandselfcare.castos.com/episodes/improving-insomnia> <https://www.royalsurrey.nhs.uk/saygoodnight/>

Calculator: https://qxmd.com/calculate/calculator_820/insomnia-severity-index-isi

Sleep apnoea

Check Epworth & STOP BANG score, discuss driving, lifestyle changes & consider referral if appropriate.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/obstructive-sleep-apnoea-osa>

Parasomnias

These vary in cause, presentation & management. Consider possible functional, behavioural, neurological & psychiatric approaches.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/parasomnias>.

Restless legs syndrome & Periodic limb movements during sleep

Check blood ferritin, consider treating if <75mcg/l. & optimise lifestyle factors. With care consider pregabalin & dopamine drugs.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/restless-leg-syndrome>

Dodge Disruptors

Click for links: **Medications** aim for **NO SCAMS** if possible, see list on page one. **Pain:** explore pain management **Menopausal:** HRT & CBT-i above. Avoid **alcohol** & **caffeine**. No **bright lights**, **pets** or **phones** in the bedroom. If on call, set notifications to "do not disturb". If you are away from home (e.g. travelling or in hospital) consider taking a **sleep pack**.

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