

SUPPORTING SLEEP

Barnet Children's Integrated Therapy Team

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SECTION 1 – SLEEP SCIENCE

SLEEP AND DAILY FUNCTIONING

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Physical growth

Body releases hormones promoting growth and repair during sleep enabling active engagement in daily activities.



Executive Functioning

The brain consolidates memories, processes information and recharges, supporting engagement at home and in the community.



Emotional Regulation

Reduces irritability, mood swings and helps manage stress, helping with social participation.



Immune Function

Sleep repairs cells and supports the immune system, helping children to fight off illness, so they can engage in school and play.

SLEEP DISTURBANCES

If you are struggling with sleep, you are not alone.

Insomnia affects approximately 30% of children in their first two years, and15% of children after the third year (NHS England, 2022).

Prevalence of sleep issues for autistic children is significantly higher (Cheng et al., 2021).



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SECTION 2 – GOOD SLEEP HABITS

CHECKLIST

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- ✓Establish a set bedtime routine
- ✓Keep bedtimes and waking times the same.
- ✓Avoid napping.
- ✓Eat a balanced diet, limiting fat.
- ✓6 hours before bedtime, eliminate all foods and drinks that contain caffeine
- ✓Try drinking milk before bedtime*
- ✓Include a weekly programme of exercise during the day, but not too close to bedtime.
- ✓Reduce noise and light in the bedroom.
- ✓Keep temperatures at 16-18°C. Think about lighting – black out blinds
- ✓Bed is only for bedtime – think about making a cosy corner

Durand, 2014

ADDITIONAL SENSORY STRATEGIES/VISUAL CUES



Sleeping bag: Offers calming deep pressure, a sense of security and consistent temperature even when tossing/turning.





Sensory compression sheet: Provides deep pressure input, enhances body awareness and promotes relaxation.

The Nesti: Nesti is a wearable sleep pod that uses gentle compression to promote calm and better sleep.



Gro Clock – offers clear, predictable cues. Useful for visual learners and children who cannot tell the time. Can also use night light on a timer.

PILLOWS AND SHEETS



https://viceroybedding.co.uk/product/104/original-chillow-pillow/the-original-chillow

- The ‘Chillow’ provides a cool surface to reduce overheating and bedtime discomfort
- Offers calming sensory input for children with temperature sensitivities
- Maintains steady temperature to reduce night-time wakings
- Silent and non-stimulatory, supporting uninterrupted sleep. Make sure to complete own risk assessment with all products/follow manufacturers guidelines.



SECTION 3 – BEDTIME ROUTINE

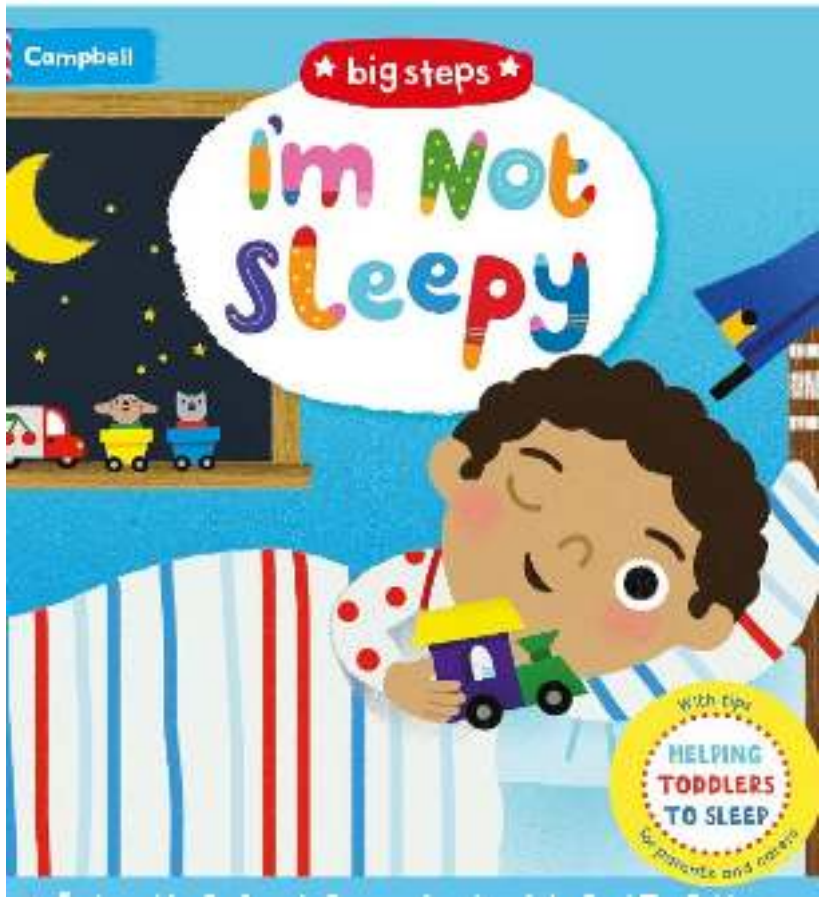
BEDTIME ROUTINE

The most important good sleep habit is to set a consistent, predictable bedtime routine.

This should last 20-30 minutes.

This is a relaxing sequence of activities that the person does at about the same time and in the same order every night.

This helps children relax before bedtime and associate this time with sleep.



(Christodulu and Duran, 2004).

EXAMPLE

- -Take a bath
- -Change into pyjamas
- -Brush hair and teeth
- -Read book
- -Turn out light
- -Go to sleep
- Keep it simple!!

Remember: Avoid activities that can cause conflict like cutting nails. Don't extend the time for a bedtime routine! i.e. 'just one more story…please!' A timer might be useful.



Durand, 2014

BEDTIME ROUTINES AND AUTISM

- Routine is especially important for autistic children. Reduces bedtime anxiety.
- These can become rigid rituals, so you might want to build in variation.
- A 2018 study (Delemere and Dounavi) found that just by including a bedtime routine, this enabled 2 out of 3 autistic children to:

1) Fall asleep quicker.
2) Stay asleep longer.



MELATONIN

- Natural hormone made by the brain to help control sleep and wake cycles.
- Signals to our body when it is time to go to sleep/wake up.
- Sunlight and blue light **stop melatonin production,** which stops us feeling sleepy.
- Being in the dark tells our body to produce melatonin, helping us to feel ready for bed.
- Red light is gentle on your eyes and doesn't stop your body from making melatonin, so it helps you sleep.



TIPS TO BOOST MELATONIN NATURALLY



Increase exposure to sunlight during the day to regulate the circadian rhythm.



Use a blue light filter on screens in the evening. Eliminate all screens in the hour before bedtime.





Choose alternative methods to support your child with relaxing, including storybooks and audio.



Did you know? A bath before bed can boost melatonin production. When a child steps out of the bath, their core temperature drops. This signals to the pineal gland in the brain that it is time to sleep and stimulates melatonin production. A bath also reduces cortisol levels (stress), allowing melatonin to increase.





SECTION 4 –SLEEP TRAINING METHODS OVERVIEW

The goal for all these methods is for a child to learn to fall asleep independently in their own bed, which also reduces night awakenings. Falling asleep is like riding a bike – a skill that needs to be learned. All methods must be safe and developmentally appropriate for the child.



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METHOD 1: GRADED EXTINCTION

STEP 1: Parents begin by ignoring protests for a short set time (for example: 3 minutes) before briefly checking in.

STEP 2: During check-ins, remain calm and neutral. Avoid cuddling, chatting, or offering food/drink.

STEP 3. Increase the time between check-ins by 2– 3 minutes each night (e.g. 3 mins → 5 mins → 8 mins).

Consistency is key.



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METHOD 2: STIMULUS FADING

1. Sit quietly beside the bed or cot until the child falls asleep.

2. Each night, move slightly further away — across the room, near the door, then just outside.

3. Wait 10 minutes after the child falls asleep before leaving, to allow them to enter deep sleep.

5. Move the chair further away each night, eventually sitting outside the room.

6. Take as long as needed but never go backwards or give in, or this reinforces unwanted sleep behaviours.



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METHOD 3: BEDTIME FADING

1. Start with a very late bedtime when the child is likely to fall asleep within 15 minutes (e.g. 11:30pm).

2. Add 30 minutes to that time (e.g. bedtime becomes 12:00am) and stick to it for two nights.

3. If the child falls asleep quickly and calmly for two consecutive nights, shift bedtime earlier by 15 minutes.

4. Keep fading the bedtime earlier in 15-minute steps until the desired bedtime is reached.

SCHEDULE



SIGNPOSTING – MEDICAL SUPPORT

- Restless movement at night or complaints of leg pain may suggest iron deficiency or restless leg syndrome
- Loud snoring, gasping, or breathing pauses could indicate sleep apnoea
- Unusual night behaviours like sleepwalking or night terrors may need medical review
- Persistent sleep difficulties despite good routines could signal an underlying issue
- Your GP can assess symptoms, order blood tests, and refer to specialists if needed

SLEEP DIARY

Sleep App/Sleep diary: Use for 2 weeks + shared with GP

A sleep diary is recommended, using a phone app called SNappD. which can be found here, www.slenyto.com

- And is available to download for free from the App store or Google Play store.



EARLY HELP/0-25 CHILDREN'S DISABILITY TEAM (0-25 CDT)

This would be through Barnet children's social care, via the MASH form, which can be a self-referral that you fill in or any other professional working with your child and family can fill in with you, on your behalf. If needed, they may also advise you about housing applications.

https://www.barnetlocaloffer.org.uk/organisations/27218-0-25-disability-service

https://www.barnet.gov.uk/directories/directme/multi-agency-safeguarding-hub-mash-team-childrens

0-25 Disability Duty CHILDRENS (Age up to 17) 020 8359 5608

0-25 Disability Duty 18+ (Age 18-25) 020 8359 5302

- 0-25 Disability Duty SAT (Specialist Autism Team) 020 8359 5309

SCOPE

- Scope is a free support service, that helps parents and carers of disabled children. Support for children aged 2 years and above.
- Visit their website at: https://www.scope.org.uk/
- Call their helpline: 0808 800 3333
- They can help with individual enquires and have a trained sleep practitioner who can give some sleep support and signpost further if required. They can also look and support with other challenging circumstances including behavioural challenges at home, violence, school refusal and sensory overload. They also provide emotional support for parents and carers, especially when coming to terms with a diagnosis.
- You do not need a referral – you can simply phone up and speak to the team. You can also access their **live chat** on their website. They also have an **online forum on their home page** you can join where you can link up with other parents and caregivers.

THE SLEEP CHARITY

The Sleep Charity

https://thesleepcharity.org.uk/

National Sleep Helpline: 03303 530 541

If you'd like to talk about your child's sleep, you can call 03303 530 541 between 7pm and 9pm, Monday / Tuesday / Thursday and mornings between 9-11am Monday / Wednesday.

The charity provides useful advice and guidance to patients who are not sleeping well and for parents who have trouble with their children sleeping, in particular children with SEND.

https://thesleepcharity.org.uk/information-support/

https://thesleepcharity.org.uk/information-support/useful-resources/

FURTHER HELPFUL RESOURCES

Whittington Health NHS Trust

Further helpful resources to use:

Newlife Charity – Advice on safe/specialist beds. Newlife the Charity - Changing the lives of disabled children

Strategies to Improve Sleep in Children with Autism
https://www.autismspeaks.org/tool-kit/atnair-p-strategies-improve-sleep-children-autism

Icons to make your own visual timetables about bedtime:
https://www.dropbox.com/sh/d9nu6c958iktrj0/AAA9_T8o64Jdq_RLLHauaiuGa?dl=0

Examples of visual timetables about sleep and bedtime:
https://www.dropbox.com/sh/6wfufqs5tlyi1ig/AACYg7KHfnUV4RRG37tK3VHVa?dl=0

Video on how to use the bedtime visual schedule:
https://www.youtube.com/watch?v=09mk082SQ0g

Sleep advice sheet for children with SEND
https://thesleepcharity.org.uk/information-support/useful-resources/

FEEDBACK/REFERENCES

- Studies and sleep strategies derived from Chapter 6: Edelson, S. M. and Johnson, J. B. (eds.) (2022) *Understanding and treating sleep disturbances in autism: a multi-disciplinary approach*. Philadelphia, PA: Jessica Kingsley Publishers.

- Please scan the QR code to give us feedback on how you found this training. We value your opinions, comments and feedback!

THANK YOU!

Signposting to our service in next presentation

FREQUENTLY ASKED QUESTIONS

MY CHILD CAN'T SETTLE FOR BED?

- My child finds it really hard to settle for bed. They seem to have so much energy. How can I help them?

Consider incorporating calming sensory strategies into the bedtime routine, including:

-Dim lighting

-Warm bath or shower

-Deep pressure massage with lotion

-Calm music

-Visual bedtime routine chart

HOW MUCH SLEEP DOES MY CHILD NEED?

- 1-2 years: 12 hours
- 3-5 years: 11hours
- 6-13 years: 10 hours
- 14-17 years: 9 hours

There will be large, **normal** variations on either side of this.

PARASOMNIAS

- Usually occur within first 3 hours of sleep
- Child does not often remember
- Not likely to persist beyond adolescence
- Usually one episode per night, usually looks different each time
- Sometimes mistaken for seizures, so if you are unsure, consult with medical professional

THANK YOU

- If you would like a copy of the slides and handouts, please add your email address to the chat.