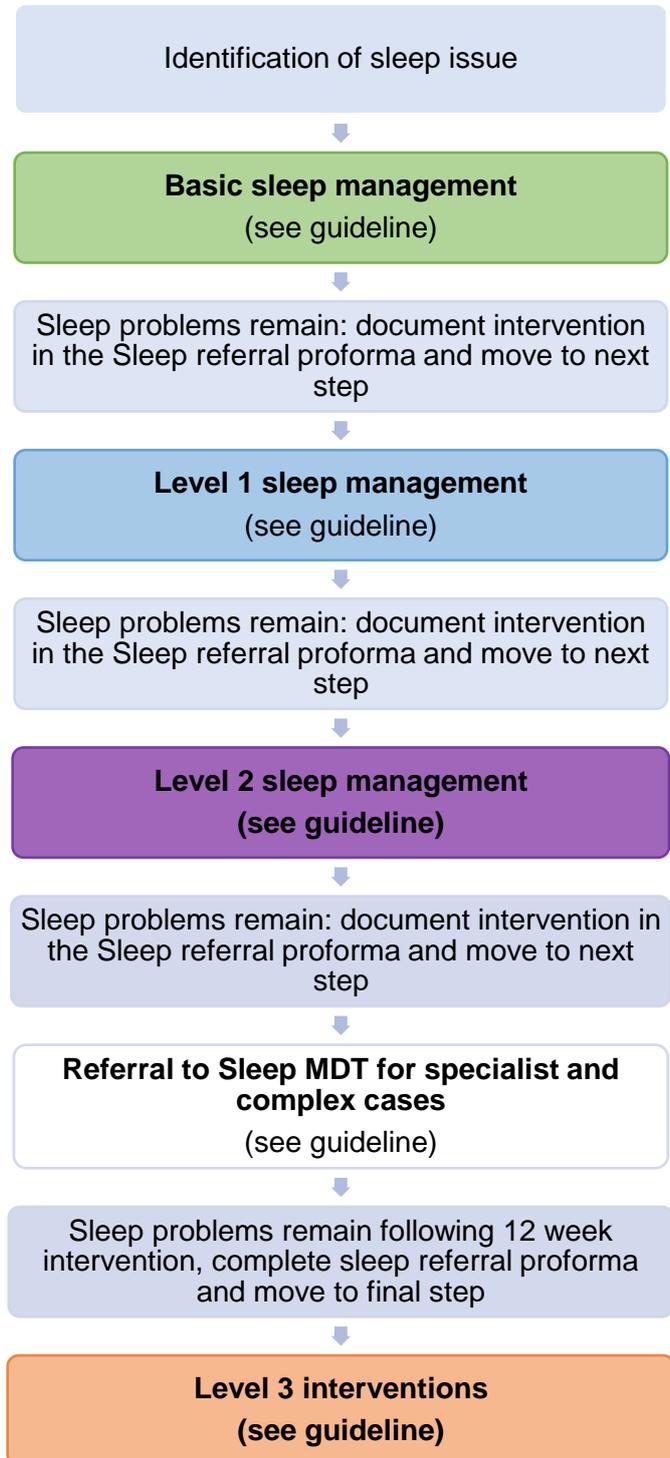
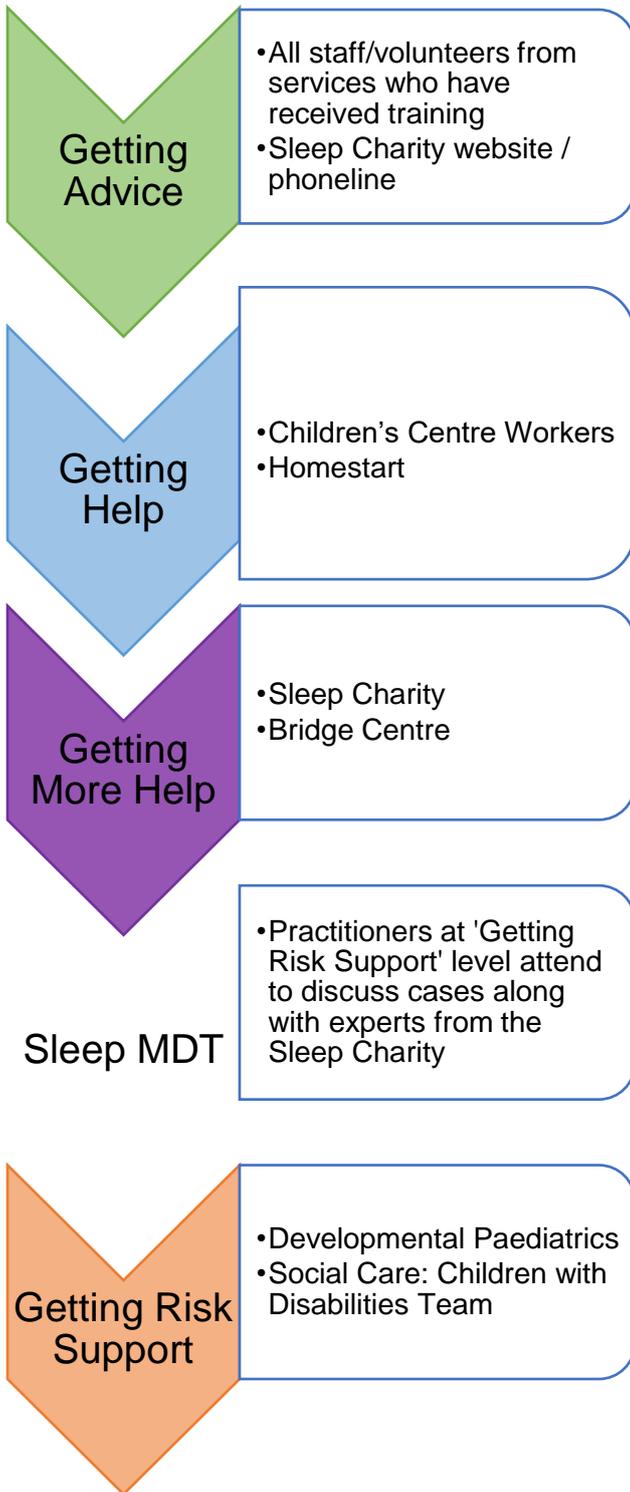


St Helens Sleep Pathway *Pilot*



Guidelines for pathway

Getting Advice: Basic sleep management	
Referral Criteria	Children and young people who report sleeping difficulties
Referral Process	Families can self-refer, or staff can identify appropriate families.
Overview of offer	Staff will deliver brief intervention and signposting for additional support information. <ul style="list-style-type: none"> - A conversation. - Provision of information: leaflet, link for website, sleep diary template - General Sleep Hygiene - Option to offer Parent/Carer Training - Signpost to National Telephone Helpline - Signpost families and young people to 'Teen Sleep Hub' website
Staff training requirements	Staff will have received the 'Sleep Talkers' training from the Sleep Charity and cascade 'Train the Trainer' to other service or family members.
Evidence of intervention	Complete the Sleep Referral Proforma on evidence of intervention for each child/young person.
Service outputs	Complete KPI documents to report to Sleep Management Oversight Group
Getting Help: Level 1 sleep management	
Referral criteria	Children and young people who report sleeping difficulties and who have received universal intervention
Referral process	Families can self-refer. Staff can identify appropriate families. Referring providers of basic sleep management will complete a referral template and include a copy of the completed 'Simply Sleep' proforma on evidence of interventions.
Overview of offer	Staff will deliver a 5-week sleep programme to families. <ul style="list-style-type: none"> - Initial telephone consultation for gathering additional information from families - Initiation of Sleep Plan, offer of sleep diary and additional guidance - Sleep clinics may be offered, including guidance and support - Weekly consultations may be offered, including guidance and support - Onward referral to Getting More Help: Level 2 sleep management may also be considered at this stage dependant on outcome of the assessment
Staff training requirements	Staff will have received 'Sleep Tight' training from The Sleep Charity.
Evidence of intervention	Complete Sleep Referral Proforma on evidence of intervention for each child/young person <ul style="list-style-type: none"> - <i>What's working well? (Who has attended the appointment, successes, engagement, length of involvement, strategies that have worked well, impact)</i> - <i>What are we worried about? (Behaviours, challenges, impact on the child / family, engagement, continued concerns)</i> - <i>What needs to happen? What support will be needed / Which Service will lead on support? Timescales?</i>
Service outputs	Complete KPI documents to report to Sleep Management Oversight Group

Getting More Help: Level 2 sleep management	
Referral criteria	<p>The referral criteria for further interventions beyond Getting Help: Level 1 is outlined below.</p> <p>Sleep Charity:</p> <ul style="list-style-type: none"> • C/YP and their families who report sleeping difficulties, and • who have received universal and targeted Sleep Intervention, and • a Sleep MDT referral for a specialist sleep assessment, and • who are registered with a St Helens GP and who are aged 12 months up to 18th birthday <p>Bridge Centre:</p> <ul style="list-style-type: none"> • Early Years children with SEND who report sleeping difficulties, and • who have received an Early Years MDT assessment, and • who have received Targeted Sleep Intervention, and • a Sleep MDT referral for a specialist/complex sleep assessment and are Pre-school children aged 0-4 years inclusive
Overview of offer	<p>Staff will deliver 1 to 1 evidence-based interventions.</p> <p>Sleep Charity: 12 weeks of sleep intervention and support which will include One to One Clinics or online live training/workshops with a sleep practitioner.</p> <p>Bridge Centre: Children will be offered up to 12 weeks of sleep interventions. Families will be given a 2-week sleep diary to be completed. These will be discussed at the EY OPs Team meeting. Families will then be allocated a key worker who will offer an initial appointment to discuss behaviours, difficulties and strategies. The advice is reviewed during 1:1 appointment, phone contact or through the sleep clinic.</p>
Staff training requirements	Staff will have received Sleep Practitioner training from The Sleep Charity.
Evidence of intervention	<p>Complete Sleep Referral Proforma on evidence of intervention for each child/young person</p> <ul style="list-style-type: none"> - <i>What's working well? (Who has attended the appointment, successes, engagement, length of involvement, strategies that have worked well, impact)</i> - <i>What are we worried about? (Behaviours, challenges, impact on the child / family, engagement, continued concerns)</i> - <i>What needs to happen? What support will be needed / Which Service will lead on support? Timescales?</i> -
Service outputs	Complete KPI documents to report to Sleep Management Oversight Group
Referral to Sleep MDT for specialist and complex cases (group supervision)	
Referral criteria	Children and young people who report sleeping difficulties who have received interventions as described above in Levels 1 and 2 and have ongoing issues related to sleep which are not resolved and are reaching crisis levels.
Referral process	Referral by services working at the targeted level of intervention – bring case for discussion and a copy of the completed Sleep Referral Proforma on evidence of interventions delivered at universal and targeted levels.

Overview of offer	Multidisciplinary team discussion to agree the next steps for individual children, young people and their families.
Services involved	The referrer to the Sleep MDT must attend to present the case, along with any other professionals who have been involved with the child or young person
Getting Risk Support: Level 3 interventions	
Referral criteria	<p>Interventions are agreed on an individual basis and may vary between children and families dependent upon level of need.</p> <p>Developmental Paediatrics:</p> <ul style="list-style-type: none"> • C/YP with specific or global and neurodevelopment conditions and significant developmental disabilities, and • who have received Getting Help: Level 1 sleep management and Getting More Help: Level 2 sleep management, and • a Sleep MDT referral, and • are age 0-18 years (up to 25 years under SEND guidance) <p>Children’s Social Care, Children with Disabilities Team:</p> <ul style="list-style-type: none"> • Children must have severe and profound learning or physical disabilities and/or complex medical problems to access the CWD Team, and • who have received who have received Getting Help: Level 1 sleep management and Getting More Help: Level 2 sleep management, and • a Sleep MDT referral for a specialist sleep assessment <p>The child must meet the criteria for CWD before an assessment for respite can be offered. Criteria for overnight respite usually severe parental sleep deprivation due to CYP not sleeping and/or complex behavioural problems or complex medical needs that impacts on a family’s ability to function and risks crisis or family breakdown.</p>
Overview of offer	<p>Developmental Paediatrics:</p> <p>Medical support is offered dependant on the medical need alongside additional work regarding strategy and management of the sleep issues. The Specialist Nurse triages the referrals, and an initial assessment is undertaken by the nurse or doctor depending on complexity of the case. Getting More Help: Level 2 sleep diaries will be reviewed to reassess sleeping pattern, strategies etc. If all advice/strategies have been followed and reported to be unsuccessful, sleep medication will be considered. Medication is always viewed as a last resort.</p> <p>There are times however, when medication is prescribed without the above. For Early Years children with SEND, Developmental Paeds can refer back to the Sleep MDT with a recommendation for continued specialist sleep intervention via the Bridge Centre whilst the child is receiving medical treatment.</p> <p>Children’s Social Care, Children with Disabilities Team:</p> <ul style="list-style-type: none"> • Overnight respite for parental sleep deprivation in residential care or foster care. • Direct payments and commissioned agency carers for overnight care in the child’s own home.
Service outputs	Complete KPI documents to report to Sleep Management Oversight Group

Step up/Step down Sleep Referral Proforma to collect evidence of intervention for each child/young person as they step up/step down the Sleep Pathway.



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Referral Proforma FI

Important Notes for consideration

- 1. Interventions must follow the graduated approach and engagement with families is critical to the success of interventions.*
- 2. Referral to MDT for Getting Risk Support Level 3 Interventions will not be accepted unless evidence has been provided that intervention/support has been provided at Getting Advice / Getting Help / Getting More Help*
- 3. Most Sleep difficulties are behavioural, but in the rare case of sleep disorders e.g. cataplexy, narcolepsy, parasomnias, etc then C/YP will be referred to a sleep clinic in tertiary centre (Alder Hey for St Helens) – this referral will be completed by GP, Specialist Nurses or Paediatricians.*