

What Do Nurses Need to Know to Enable Their Patients to Sleep Well in Hospital

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This article will discuss sleep and why it is so important for hospitalised patients. It will outline the consequences of sleep deprivation. Sleep is required to recover from illness yet hospitalised patients still complain of not always getting enough sleep. Using sleep promoting strategies and sleep assessment nurses can enable patients to potentially get a better night sleep whilst in hospital.

Being hospitalised can leave patients finding it difficult to sleep with patients not being able to get a good enough night's sleep whilst they are there. This article will discuss the care nurses should provide to help enable patients to sleep better whilst in hospital. Rather than focus on what sleep is. It will discuss why sleep is so important to all patients and what happens if patients are sleep deprived. It will also outline the reasons why patients may find it hard to sleep in hospital.

Zhang et al (2013) argued that patients' sleep is affected when they are hospitalized. Nesbitt and Goode (2014) believed that nurses sometimes lacked a complex understanding of the importance of sleep and the interventions required to promote it. This is serious; as nurses are the main carer for the patient twenty four hours a day and they should appreciate the need patients' have for sleep and the benefits thereof. Nurses' may evaluate that providing nursing and medical care holds a higher priority than preserving sleep quality of patients. Staff however, still writes things like "slept well" in the overnight report when in fact patients may have not slept well because of pain and the waking for medication (Castledine 2010). This reinforces concerns about nurses' focusing too little of their time assessing or inferring to improve patients' sleep.

Sleep can be described as the unconscious state or condition frequently and naturally assumed by man and animals, through which the activity of the nervous system is almost or completely suspended, and recuperation of its powers takes place (Shier, Butler and Lewis 2018). Whereas, sleep deprivation occurs when an individual receives less sleep than they need to feel awake and alert (Bandyopadhyay and Sigua 2019). It is needed for a healthy life, and for survival (Engin et al 2010).

Sleep helps restore the body and is an integral part of the healing process (Peresson Waye 2012). Sleep is essential for well-being and recovery from illness (Tembo, Parker and Higgins 2013, Eliassen and Hopstock 2011, Elliott McKinley and Cistalli 2011). Nurses do not always perceive patients sleep correctly. Zhang et al (2013) supports this. They identified that nurses frequently overestimate patients' sleep. These discrepancies may be caused by the nurses' perceptions that administering treatment is more important than preserving sleep quality of their patients. Nurses equally like to "do" something to the patient and this may be why they prioritise tasks over sleep. This concurred with work by (Benner 1984) who identified that novice nurses tend to be task orientated. Novice nurses are also taught context-free rules to guide action in respect to different attributes. Taking

time to allow patients to sleep is as important as many physiological activities.

Nurses should assess patients' sleep as part of the nursing process and document this so that other staff can more objectively see whether the patient is sleeping. Sleep can be assessed objectively or subjectively by asking the patient for their perspective. Sleep assessments tools can be helpful (Hoey, Fulbrook and Douglas 2014). They reviewed three different tools; The Richard Campbell Sleep Questionnaire, The St. Mary's Hospital Sleep Questionnaire and the Verran Synder-Hapern Sleep Scale. The Richard Campbell was found to be the easiest to use.

There are many causes of sleep deprivation in the healthcare settings. Environmental factors such as noise and light pollution, all can affect sleep (Kawada 2011). National Service for Environmental Protection Agency (2016) recommended levels of noise that are lower than 32 decibels at night and 45 decibels in the day.

Sleep deprivation can lead to an increased risk of several chronic diseases like obesity, diabetes, cardiovascular disease and certain cancers (Eanes 2015). In the critically ill, sleep deprivation can impact on a patient's recovery, putting them at more risk of infections and slower healing and decreased cognitive function (Lawson et al 2010). It may, particularly affect cognitive systems that rely on emotional data (Kerhof and Van Dongen 2010).

Nurses can provide sleep promoting strategies like ear plugs, eye masks or a warm bed bath before a patient tries to get to sleep (Lane and East 2008). As lighting can affect patients' sleep, this may need to be controlled or eliminated. However, nurses may need lighting to complete certain nursing tasks. Constant harsh fluorescent lighting can be changed to more natural-spectrum lighting to aid sleep (Tracey 2011). Alternatively patients can be encouraged to use small bedside lights rather than the main ward lights. Lane and East (2008) suggest using single use ear plugs and encouraging the use of complementary therapies to help patients sleep.

In order to promote sleep as a nursing priority, nursing care needs to be flexible (Lee, Low and Twinn 2005). There will however, still be a requirement for noise emanating from meeting patients' needs and monitoring changes of medical conditions and this should be given priority. The delivery of other existing routine nursing care throughout the day could be re-examined, like the timing of drug rounds. Changing the bay that always finishes the drug round last at night to enable a different group of patients to get an early night if they so wish. Introducing flexible care and ward routines should be the goal of care, with a view to incorporating patients' personal preferences and habits into the daily ward

activities, thus helping patients adapt to environmental changes (Lee, Low and Twinn 2005).

The use of sedating medications is cautioned, as their long-term efficacy in promoting sleep is questionable. There is evidence supporting the use of non-pharmacologic interventions, which are preferable to the use of sedating drugs because of the risk associated with their use (Flaherty 2008). Suggestions of a general nature, to manage sleep deprivation include; not napping in the day, regular exercise, avoiding tea and coffee in the evening, and talking over the psychological factors that could affect sleep. Cognitive Behavioural Therapy, Massage therapy, Taichi Qigong and Lyengar yoga were shown to improve sleep and decrease insomnia (Alexander et al 2013).

Fontanna and Pittiglio (2010) argue with support from ten empirical studies that nursing interventions that focus on the reduction of ambient stress can therefore enhance patients' sleep. Whereas, Stuck, Clark and Connelly (2011) highlighted that the timing of blood draws and soothing music might help promote sleep. Their article discussed using a patient centred approach. Sleep promoting actions can also help (Forean et al 2015).

Nurses play a pivotal role in ensuring that patients get a good night sleep and will need an in-depth understanding of older patients' sleep experiences to effectively manage different sleeping patterns and sleep needs. Becoming older can lead to patients getting insufficient sleep. Sleep difficulties and sleep problems, such as difficulty falling asleep and getting insufficient sleep, which can worsen when elderly people are relocated to different environments for a short time, such as a hospital stay (Lee, Low and Twinn 2005).

Nurse should think carefully before waking patients up to perform nursing tasks like drawing blood, taking vital signs or giving medication (Matukaitis et al 2014) and should aim to give patients six to seven hours of sleep and to bundle care activities. This is supported by the NICE (2010) that recommends that sleep disturbances be minimized by keeping nighttime medical procedures, medication rounds and noise to a minimum.

Key Words: Sleep, Sleep deprivation, promoting sleep strategies, consequences of sleep deprivation

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