

# Resident Wellness Curriculum

## Sleep Hygiene

### Facilitation Guide

#### Learning objectives

*By the end of this activity learners will be able to:*

1. Define insomnia and delineate the impact on work performance.
2. Identify common misconceptions and pitfalls in managing insomnia and poor sleep quality.
3. Devise an individualized strategy for improving sleep quality including evidenced-based interventions, strategic napping, and improving workplace efficiency.

#### Agenda & questions to guide discussion

1. Summarize major points of PowerPoint presentation (some residents will not have reviewed it beforehand).
  - a. Ask residents in the audience to name their take-away points.
  - b. Key points to emphasize (through facilitation or summarization)
    - i. Residents are significantly impacted by poor sleep quality.
    - ii. Alcohol is not an effective way of promoting sleep quality.
    - iii. The effects of caffeine can last for hours after ingestion and has a therapeutic window.
    - iv. Strive for a fixed sleep schedule. "Catching up" on sleep is not possible.
    - v. Consider the impact of activities in bed—watching TV, checking Facebook on your smartphone, etc.
    - vi. Devise and/or maintain a bedtime ritual.
    - vii. Avoid entering into a period of sleep deprivation (overnight call) sleep-deprived.
    - viii. Take advantage of circadian rhythms and strategic napping.
2. Are the narrators (Iris & Andrew) accurate about the rotations that are particularly problematic in maintaining healthy sleep quantity and quality? What are common challenges that audience members face in getting high quality sleep?
  - a. Write on the dry erase board problematic rotations that residents mention.
  - b. Write on the dry erase board barriers to healthy sleep independent of rotations that residents name.
  - c. Invariably, residents will highlight the challenge of getting high quality or quantity of sleep with the rigors of residency training. They are inextricably linked. System-based challenges will come up (e.g. busy rotations, lack of

SW/NCM support). Allow some processing of this, but avoid letting the session devolve into a venting session.

3. Ensure each resident has a copy of the action plan handout.
4. Focus the audience on the common barriers to healthy sleep identified and the more problematic rotations.
5. Solicit best practices from residents used to mitigate and overcome barriers. The senior residents in the audience will be most helpful.
  - a. Night float or a series of night shifts—How do you adjust your sleep schedule? What are good/bad habits after a shift? Do you have a bedtime ritual? How do you maintain it?
  - b. Post-call days (e.g. ICU call, overnight admitting call)--How do you dial down after a busy night?
  - c. Busy rotations—How do you maintain healthy habits despite the rigors of the rotation? What are high yield ways to maintain workplace efficiency so that you can focus on exercise, social wellness, and good sleep habits?
6. End the session having attendees complete their individual action plans. Remind them to identify an accountability buddy to follow-up on implementation and progress.