Wellbeing

The quest for meaningful sleep

Dr Mike Farquhar explores the need for sleep, both for patients and staff, and highlights the conditions that have led to excess pressures

Dr Mike Farquhar
- *Consultant, Paediatric Sleep Medicine*
- *Evelina London Children's Hospital*

@DrMikeFarquhar

IN OUR EVELINA London Sleep Clinic, we support many families whose children have significant sleep disruption in the context of complex physical and neurodevelopmental difficulties and differences.

When children don't get the quality sleep they need, this can impact their health but can also cause far-reaching problems within the family. When parents and carers are chronically sleep deprived, it affects their physical and mental health, their ability to maintain jobs and, fundamentally, their ability to be the best parent to their children.

Quality sleep depends on a foundation of good routines and habits, often supported by behavioural interventions to effect change. This can often be misunderstood by those who think that if children have poor sleep, it's always because these principles are "not being done properly".

A harsh truth is that the 'rules' can be followed perfectly but for some, particularly those with complex needs, these simply aren't sufficient. Families become despondent, convinced they've failed, not always recognising how chronic sleep deprivation is affecting them. For many families when I first meet them they are, like Wile E. Coyote in the *Roadrunner* cartoons, often already over the cliff edge, suspended in mid-air unaware they're already at the point of no return, about to plummet to the ground.

"The resource gap has been filled by NHS staff drawing on their own reserves. Many are now running on fumes..."

These children may need consideration of sedatives, to give parents time to recharge their own batteries. They may need social care support, providing respite or carer input. Above all, these families need to know they haven't failed, that they can give their all, for that not to be enough and for that not to be their (or anyone's!) fault – that some problems are too big to be solved by them alone.

Those same principles must apply when we think about our own teams. RCPCH has, for many years, long before COVID, emphasised the importance of looking after our members, providing support both individually and by changing the way departments and deaneries consider these issues. As a sleep physician, I've focused on helping members improve their own sleep, especially for those who work shifts, to try to give them the best individual foundation to face the challenges of our daily work.

The greatest problems we face in the NHS though are systemic, endemic, and weren't caused by the pandemic.

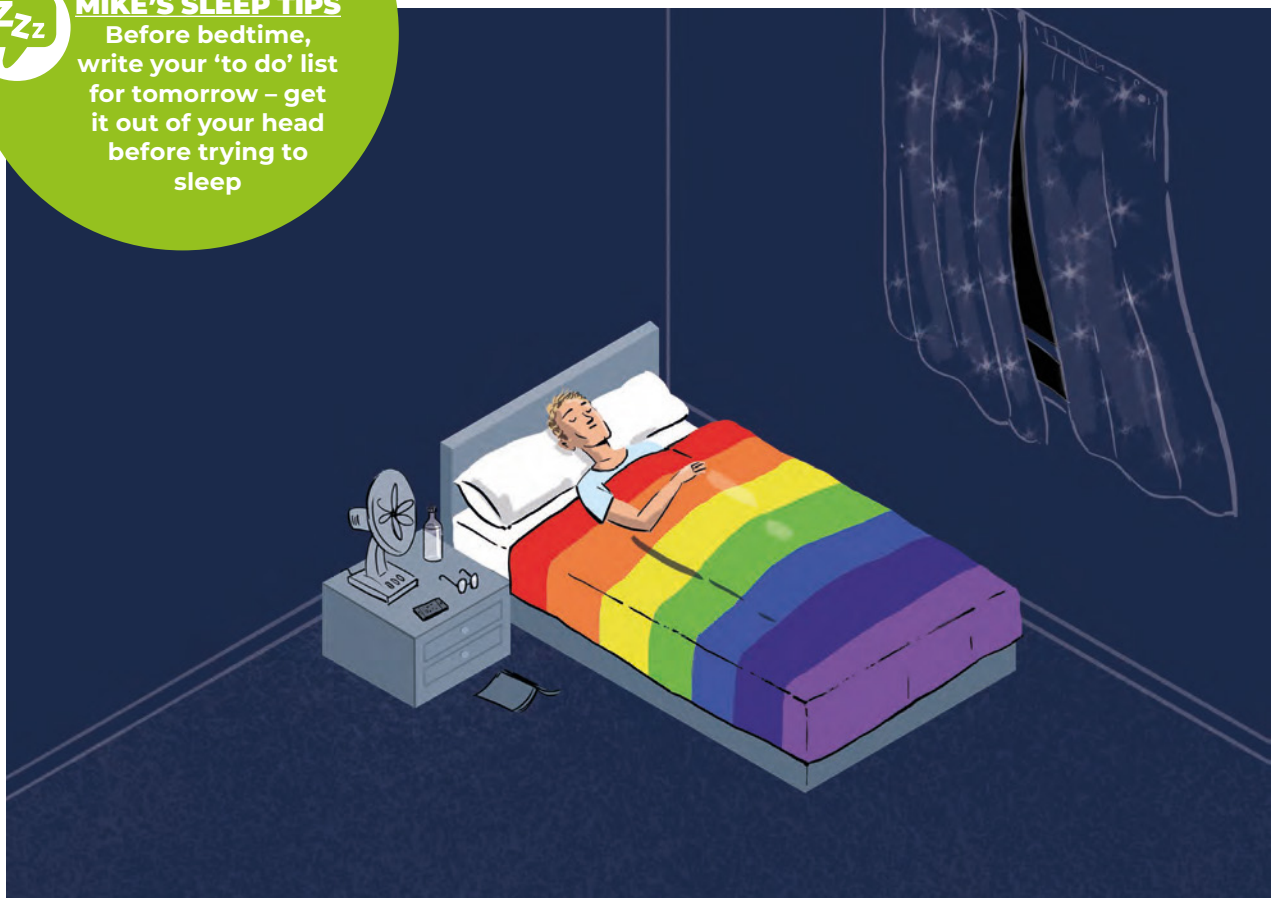
The Health and Social Care Committee, chaired by Jeremy Hunt, recently published a report that told us what we all know – our NHS has been chronically under-staffed for years, and the resource gap that created has been filled by NHS staff drawing on their own reserves. Many are running on fumes but, like Wile E. Coyote in mid-air, haven't realised it yet.

Self-care

Hunt's report echoes earlier reports like the Health Education England Mental Wellbeing Commission, published February 2019, which asked "Who cares for those who care for the nation's health?", and the GMC-commissioned *Caring for doctors, caring for patients* report, published December 2019, whose co-author Professor Michael West said, "We can't simply go on the way we are, loading more responsibility onto doctors already struggling to cope. Where workloads are excessive, patient care suffers."

'Wellbeing' has been a cornerstone of the NHS response to the pandemic, with lots of fantastic work done to support staff. The brutal truth though is that, as brilliant and needed as that work is, by itself it isn't sufficient to deal with the problem. Solutions focused on individuals alone, no matter how fabulous, will never be enough to compensate for the massive systemic issues that have put us under immense pressure for many years now, a situation that has often been very much normalised across the whole NHS. We must be honest about

MIKE'S SLEEP TIPS
Before bedtime, write your 'to do' list for tomorrow – get it out of your head before trying to sleep



this, otherwise individuals end up blaming themselves, thinking they've failed, for not being able to deliver for our patients and their families to the standards we know they deserve, for reasons which are not really within their control.

Back to basics

As stated by Hunt, we need major reform of, and investment in, the NHS workforce – and that is going to take time. Until then we will have to work with what we have.

Where we now face long waiting lists and children and families who need our input and support, we must take the longer view, and emphasise that if we don't get looking after our staff right now, then many more will become ill, burn out and leave the profession... and children and families will end up waiting even longer for the care they need.

We must emphasise the importance of the basics, such as getting regular rest and breaks within shifts, and meaningful regular time away from work to recharge. There is absolutely value in all the brilliant work to help individuals think about their own wellbeing. These need to be supported by departments and hospitals, but just like in my clinic, while these form part of an essential foundation, we must acknowledge they aren't a complete solution in themselves. We must allow ourselves to admit that in the modern NHS we can individually give our all, that that may not be enough, and that isn't necessarily the 'fault' of individuals and departments... and we must better communicate that message to our patients, their families and the public.

The World Medical Association Declaration of Geneva reminds us that healthcare practitioners must "attend to their own health, wellbeing and abilities in order to provide care of the highest standard".

In the context of a system that is currently incapable of meeting our population's health needs, we must remember that looking after healthcare staff is a key professional responsibility, borne primarily by employers, NHS organisations and Government, and that individuals must not be made to feel guilty for needing time and space to look after themselves, in the best interests of them and our patients.

... but yes, working to get good sleep most nights is always going to be a small but important building block of our own individual responsibilities around this!

Useful Links

Evelina London Sleep Clinic
www.evelinalondon.nhs.uk/sleep

Sleep, breaks and wellbeing for health professionals
www.rcpch.ac.uk/sleep-breaks

Advice from Dr Mike Farquhar on managing the effects of shift work
ep.bmj.com/content/102/3/127

Paediatrics 2040 – Working lives: Supporting report on wellbeing
paediatrics2040.rcpch.ac.uk

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