

Summer 8-2-2023

The Importance of Addressing Sleep as an Occupation Within Assisted Living Communities

Brittany Kiattitananan

University of St. Augustine for Health Sciences, b.kiattitananan@usa.edu

Kendra Orcutt

University of Oklahoma Health Sciences Center, Kendra-Orcutt@ouhsc.edu

Lisa Griggs-Stapleton

University of St. Augustine for Health Sciences, lstapleton@usa.edu

Follow this and additional works at: <https://soar.usa.edu/otdcapstonessummer2023>



Part of the [Geriatrics Commons](#), [Neurology Commons](#), and the [Occupational Therapy Commons](#)

Recommended Citation

Kiattitananan, B., Orcutt, K., & Griggs-Stapleton, L. (2023, August 2). The Importance of Addressing Sleep as an Occupation Within Assisted Living Communities. Poster presented at the Virtual OTD Capstone Symposium, University of St Augustine for Health Sciences. Retrieved from <https://soar.usa.edu/otdcapstonessummer2023/7>

This Poster/presentation is brought to you for free and open access by the OTD Capstone Symposia at SOAR @ USA. It has been accepted for inclusion in Summer 2023 Virtual OTD Capstone Symposium by an authorized administrator of SOAR @ USA. For more information, please contact soar@usa.edu.

The Importance of Addressing Sleep as an Occupation Within Assisted Living Communities

Brittany Kiattitananan, OTS; Kendra Orcutt, OTR, SCEM, CAPS; Lisa Griggs-Stapleton, PhD, OTR

BACKGROUND

Around 40-70% of older adults have difficulty sleeping (Sheth & Thomas, 2019). Specifically within assisted living facilities (ALFs), sleep disturbances have been found to be persistent among residents (Fung et al., 2012). Occupational therapists (OTs) are uniquely equipped to address rest and sleep as an occupation by addressing aspects of sleep preparation or participation (AOTA, 2020). However, this domain is still relatively new to the profession, and therefore, may benefit from further understanding of inclusion into current practice.

PROBLEM

Sleep is an often overlooked but necessary domain to address within occupational therapy.

PURPOSE

To develop an occupation-based sleep intervention program to increase sleep health literacy, improve sleep quality outcomes through application of strategies, and guide future OT practice in addressing sleep as an occupation.

Outcome Objectives:

1. Complete a Needs Assessment to understand current well-being in relation to sleep.
2. Develop an Occupation-Based Sleep Intervention Program.
3. Implement and refine program.
4. Disseminate findings to facility administrators and staff.

Acknowledgement: Special thanks to Dr. Lee Ann Hoffman, Dr. Keegan McKay, & the Brookdale Club Hill Community including David Sweet, Rachel Rials, and Lora Shiflet

METHODS

Needs Assessment:

- 15 residents participated in pre-program surveys and interviews
- 9 respondents to survey for other stakeholders
- Informal Interview with Certified Occupational Therapy Assistant (COTA)

Survey content: demographics, components of the occupational profile, Likert scale questions addressing knowledge of sleep concepts and confidence in application of strategies, open-ended questions about experiences

Pittsburgh Sleep Quality Index (PSQI):

- Instrument used to understand resident sleep quality at baseline
- Covers 7 different areas of sleep including subjective sleep quality, sleep latency, duration, habitual sleep efficiency, disturbances, medications, and daytime dysfunction over the last month (Buysse et al., 1989)

To design and develop the program:

1. Areas of sleep quality that residents experienced the most difficulty with
2. Sleep interventions that held the most interest among stakeholders
3. Sleep interventions that were most unknown

Program:

- Promoted by a schedule flyer communicated through a variety of means
- 17 residents total
- Ranged 3-9 attendees each session with an average attendance of 6
- 15 residents participated in post-program surveys
- Data was analyzed via hand-coding open-ended questions into qualitative themes and descriptive statistics (mean, median, mode) for quantitative data

PROGRAM

An Occupation-Based Sleep Intervention Program

General Program Goals:

1. Increase client sleep health literacy
2. Promote client awareness of sleep through an occupational lens such as components of sleep preparation and participation
3. Enable client learning and application of sleep intervention strategies
4. Improve client sleep quality outcomes to facilitate engagement in daily occupations

Theoretical Frameworks:

1. The Person-Environment-Occupation-Performance (PEOP) Model (Baum et al., 2015)

Program Deliverables: presentation of findings to facility administrators and staff, program manual, new resident transition handout

Modules:

1. Introduction – OT's Role in Sleep and Establishing Nighttime Routines
 1. Packet
2. Sleep Hygiene
 1. Interactive Quiz & Trivia
3. Benefits of Physical Activity for Sleep
 1. Evening Chair Yoga (weekly)
4. Improving Sleep Latency & Efficiency
 1. Relaxation Techniques & Breathing Exercises
5. Sleep-Supporting Equipment
 1. DIY Nightlight
6. The Impact of Nutrition on Sleep
 1. Nutrition Bingo & Snack Platter
7. Optimizing the Sleep Environment
 1. Presentation with Assistive Products Demo

Conclusions / Future Directions

Post-program results suggested that a combination of strategies including sleep hygiene education, yoga, nutrition education, relaxation techniques, environmental and contextual modification, and introduction of assistive technology may be beneficial. However, it is also important to remember that sleep is complex and oftentimes specific to an individual and their needs. One thing to note was that there seemed to be a discrepancy between objective and subjective data which demonstrated a disconnect between perceptions of self and measurable items. Future research should include a program utilizing a combination of group and individual guidance to facilitate efficacy of sleep interventions.

References

- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74(Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- Baum, C. M., Christiansen, C. H., & Bass, J. D. (2015). The Person-Environment-Occupation-Performance (PEOP) model. In C. H. Christiansen, C. M. Baum, & J. D. Bass (Eds.), *Occupational therapy: Performance, participation, and well-being* (4th ed., pp. 49-56). Thorofare, NJ: SLACK Incorporated.
- Buyse, D. J., Reynolds, C. F., 3rd, Monk, T. H., Berman, S. R., & Kupfer, D. J. (1989). The Pittsburgh Sleep Quality Index: a new instrument for psychiatric practice and research. *Psychiatry research*, 28(2), 193-213. [https://doi.org/10.1016/01651781\(89\)90047-4](https://doi.org/10.1016/01651781(89)90047-4)
- Fung, C., Wiseman-Hakes, C., Stergiou-Kita, M., Nguyen, M., & Colantonio, A. (2013). Time to wake up: Bridging the gap between theory and practice for sleep in occupational therapy. *British Journal of Occupational Therapy*, 76(8), 384. <https://doi.org/10.4276/030802213X13757040168432>
- Sheth, M., & Thomas, H. (2019, March). *Managing sleep deprivation in older adults: A role for occupational therapy*. American Occupational Therapy Association. <https://www.aota.org/~media/CorporateFiles/Publications/CE-Articles/CE-Article-March-2019-Managing-Sleep-Deprivation-Older-Adults.pdf>