

Evaluation Report

2024/2025



Hunrosa

Sleep Wise Children & Young People



Referrals were received from Professionals including Community Paediatricians and Children and Young Persons Mental Health Services (CYPMH) and Wellbeing Practitioners, for children and young people on their caseload.



The service was commissioned for 96 assessments/interventions and received 447 referrals. Those who contacted us were sign posted to free resources like to Sleep Takeaway Cards. 88% of cases seen achieved a successful outcome. 12% were lost to follow up. Families and Referrers reported that they struggled with the delayed wait time.



Involvement lasted on average 4.6 months.
51% of those referred were male and 49% were female.



Main diagnosis:

- ASD 51%
- ADHD 9%
- Anxiety / Depression / Eating Disorder 8%
- Sleep Disorder 2%
- Trauma 7%
- Developmental Delay / Foetal Alcohol Syndrome 8%
- Learning Disability 1%
- Neuro Diversity 1%
- Not Yet Known 5%
- Angelmans, Cerebral Palsy, Chromosome Disorder, Down Syndrome, Prada Willi Syndrome, Williams Syndrome 8%

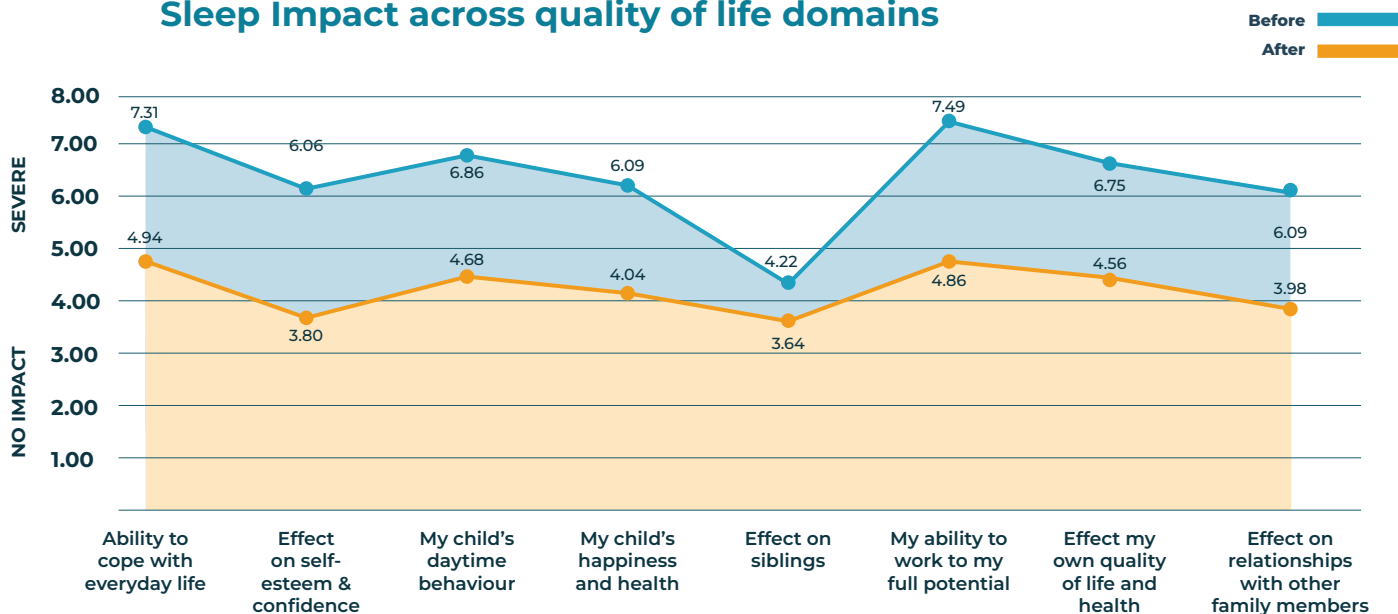


Severity of sleep disturbance: The severity of the sleep disturbance index improved greatly. Parents stated that Sleep Disturbance scored 8.26 out of a possible 12 (68.83%) before the intervention and dropped to 4.83 out of 12 (40.25%) after. Young People stated that Sleep Disturbance scored 3.78 out of a possible 10 (37.78%) before the intervention and dropped to 1.8 out of 10 (18%) after.

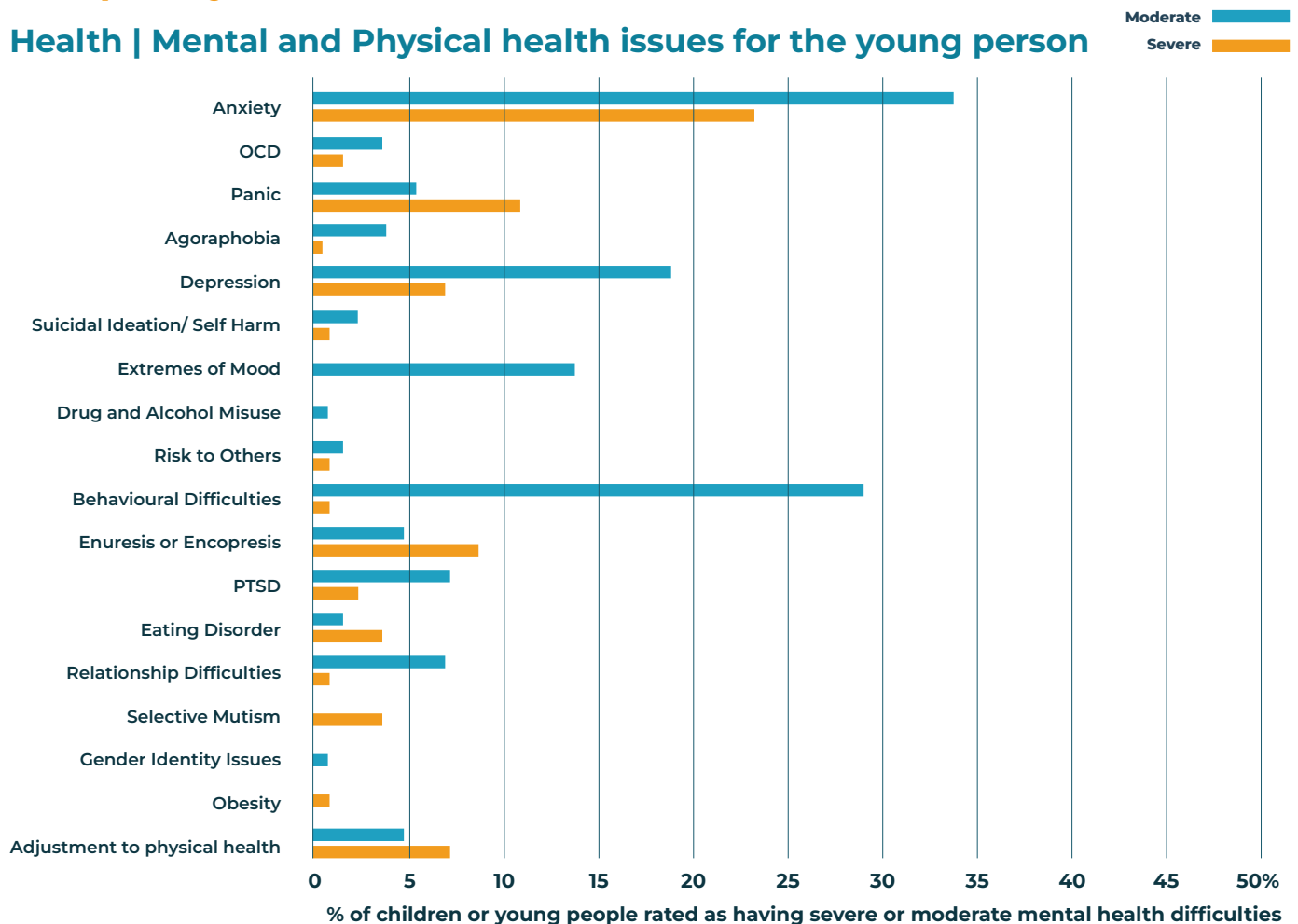


Melatonin:
66 % of CYPs in receipt of a service did not require melatonin.
27% continued with their melatonin.
4.5% were appropriately prescribed melatonin to support their sleep.
1.5% were able to stop taking melatonin.

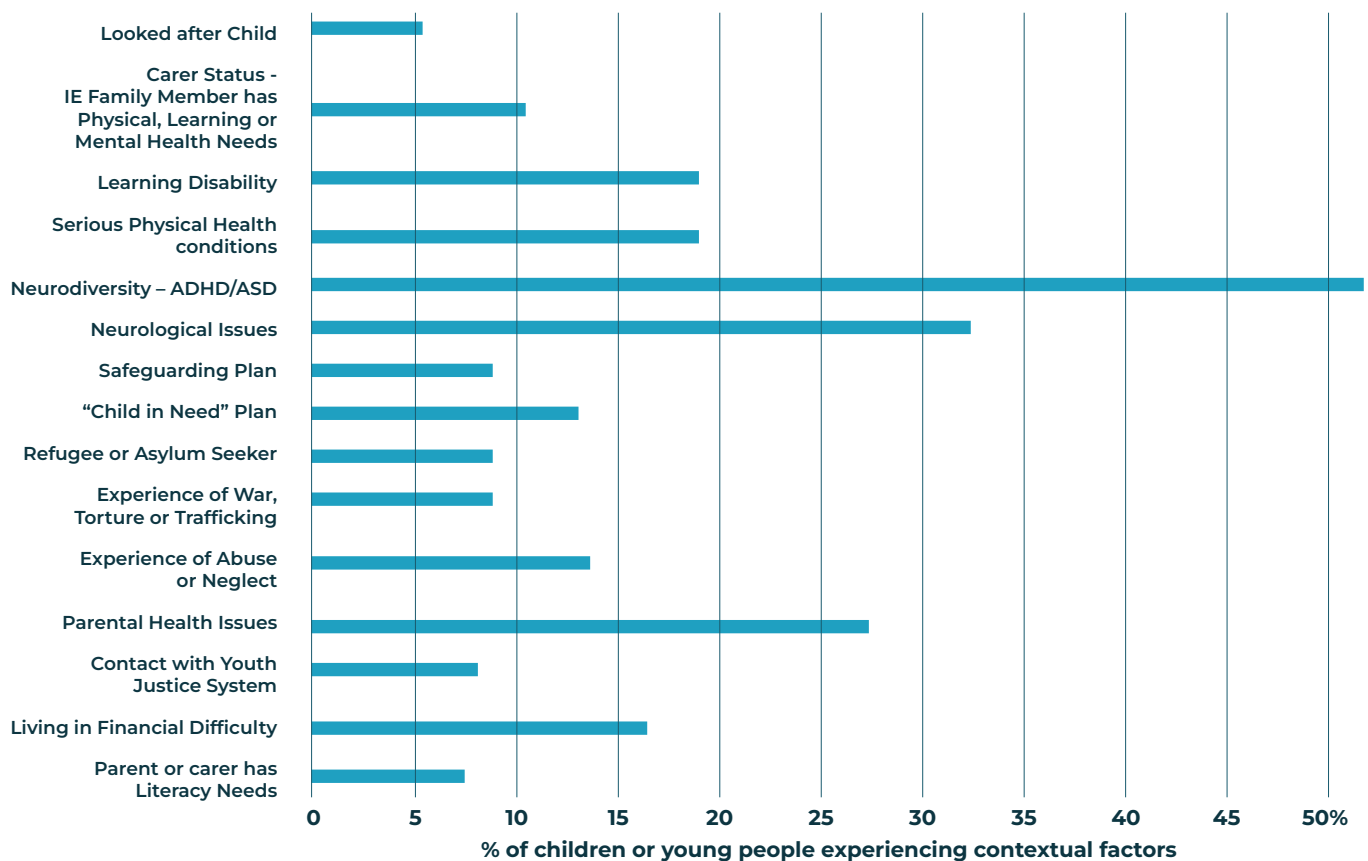
Sleep Impact across quality of life domains



Health | Mental and Physical health issues for the young person



Contextual Factors



11% experienced homelessness / overcrowding
 21% experienced poor relationships between home and school
 34% had attendance difficulties with Education Employment Training
 45% had attainment difficulties with Education Employment Training

Feedback from families

Almost 50% of families gave qualitative feedback on the service. They shared how the support led to clear improvements in their child's sleep and how well supported they felt...

Improved sleep and practical outcomes

- "Some really good tips like the Lycra sheet and prepping for bed. He now settles much more easily and is starting to sleep more independently."
- "The suggestion to reset sleep time and have firm but fair boundaries made such a difference."

We now have calmer evenings and better sleep."

- "The sleep advice and strategies gave me a better insight into my daughter's sleep difficulties — and how to help her."
- ***"The support and suggestions had such a positive effect on our lives. It has helped us enormously."***
- "It was refreshing to hear new explanations for sleep routines after years of trying different things."

Feeling heard, understood and empowered

- "It's rare to work with a service that really listens to who we are, respects how we function, and supports us without judgement."
- "The Sleep Consultant was lovely and easy to talk to. I felt understood and never judged."
- "Having a professional who truly understands and listens made all the difference."
- "The flexibility, personalised ideas, and the written plan made us feel heard and supported."

Praise for the Consultants & Support provided

- "The Sleep Consultant was amazing — so helpful, patient, and really went above and beyond."
- "We were supported every step of the way, even through the ups and downs. I felt completely supported on the journey to help my son."
- "The Consultant explained everything clearly and was incredibly patient with my daughter, who struggles to express herself."
- "Follow-ups were really helpful. I always felt listened to and nothing was ever minimised."
- "The Consultant was brilliant at offering a fresh perspective and helpful advice when we faced challenges."

What families told us could be better

We are committed to continuous improvement and value all feedback from families. While the majority of experiences were overwhelmingly positive, some shared suggestions and reflections on how our support could be enhanced:

- "Nothing – amazing programme and I'm so happy we've completed it and come so far."
(Shared in response to a question about what could have been improved — included here to reflect overall satisfaction.)
- "The suggestion to start bedtime at 9.30pm and bring it forward gradually didn't suit our family, so we adapted it to begin at 8.45pm, which worked much better for us."
- "After the six months, even though our situation hadn't changed, the support just ended. It felt a bit like being left in the dark."
(We are reaching out to this individual. Typically, Consultants inform parents of the time frames of support and will agree when the support ends with them to avoid this situation.)

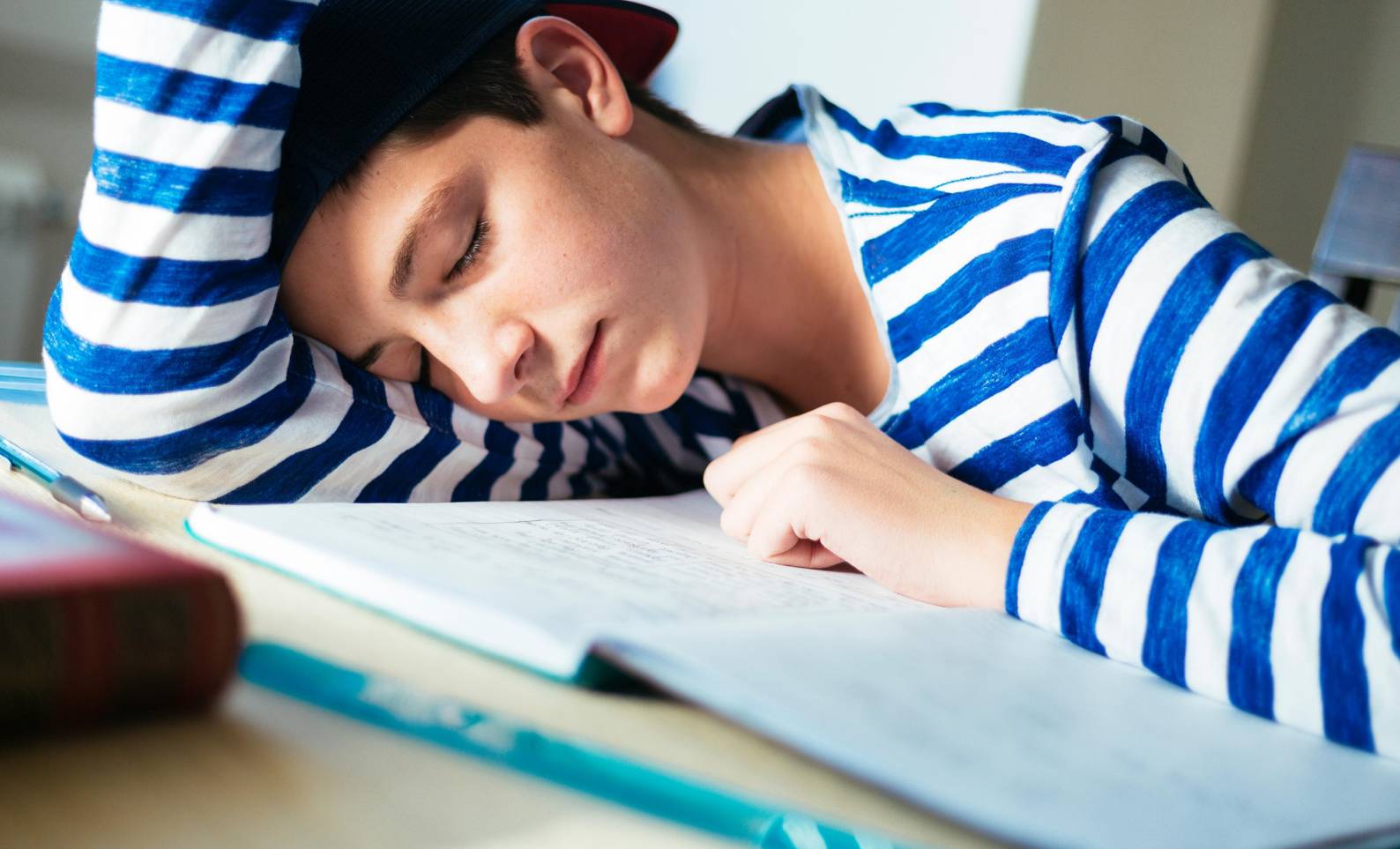
Despite the comment above, all families said that the frequency of the Sleep Practitioner contact was just right.



50% of families noticed changes in their / young person's daytime behaviour.

For example:

- "My son is sleeping so much better which is helping his behaviour in the daytime."
- "He appears happier at times."
- "She isn't as angry and emotional anymore."
- "Calmer, not talking about being awake in the night."
- "Not as grumpy."
- "Better routine, and more energy. Better mental state."
- "A better awareness of positive Sleep behaviours."
- "Happier in self not so anxious and depressed."



57% of families noticed changes in their family's quality of life.

Examples of this include:

- "Him sleeping better is obviously better for us all!"
- "Bedtime is now a breeze!"
- **"Working with a service who clearly know their stuff and appreciate how hard it is to make changes, the whole process was validating which just reduced the anxiety for us. We now feel empowered to make changes when we are ready."**
- "Not being hit as much, less violence from child to myself."
- "We all get better sleep."
- "Less arguments and more energy."
- "He is more productive at school."
- "During the holidays better sleep routines mean better quality time together."
- "We are able to do more things together whilst providing X his sensory needs."
- **"All getting more sleep and able to function so much better which has really helped with emotions and quality of life."**

Parent / caregivers final comment

- "I'm sure many families are looking for the golden bullet in terms of a solution to help their child sleep. The thing is, in many cases it's just not that simple. Our experience of working with Hunrosa did not immediately solve the issues we experience but we now have a tool kit we can use to manage better and in a way that suits our family."
- "You've been amazing. It's really helped transform our home and G now has more introspection, and I am less tired so better able to tackle other therapies"

96% of Families would recommend the programme to others.

Professionals share

- **"That's great news, thanks and thanks for being so alert to this and advocating for her."**
- "You all do such wonderful work, thank you for supporting." X
- "Please find attached a referral form for a YP who would like some support from your wonderful service."



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Hunrosa Sleep Service

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A Case Study The referral came in May 2024 and was allocated in Dec 2024

(Referral to social services before allocation)

Background

A 6-year-old boy (B) in foster care day 1 of life, now adopted with sister. Possible ADHD, Autism with PDA profile, challenging behaviours. Developmental coordination disorder. Bladder and bowel issues, xl generalized seizure. At the time of referral was waking at 4am and at time of allocation bedtime was the biggest challenge.

B lives in bungalow; busy church car park and freight trains pass every 14 mins which is very distracting. Dad has evening meetings mum often doing bedtime alone. B's behaviour escalates when dad leaves.

Mum - "I feel life is incredibly difficult. B bites, punches, pinches, slaps. He urinates on me by choice. He hurts his 7-year-old sister. B has crawled out of his safety belt in the car and tried to strangle me. He threatens to spray fly spray down my throat so I will die. He wants me to be blind. He kicks his bedroom wall so hard for so long each night we have had to pad his bedroom wall. The school are very worried about how his behaviour is affecting his sister and aggression towards others."

Sleep Diary

B's behaviour appears manic before bedtime, kicking, shouting, urinating on mum, refusal, laughing. The family have tried story, cuddles, phone call to dad, TV, Alexa radio, Moshi. Bedtime is around 7pm when he gets out of bed, slams doors, kicking wall, screaming and throws He will go to sleep anytime between 7.40pm and 9.30pm. He wakes up to 3 times in the night, usually between 11pm and 3am. B runs around laughing, tries to open front door, wakes his sister, climbs into bed with parents. He can wake for the day anytime between 4.30 to 7am. Sleep duration is 6hrs 40mins – 11hrs 30 mins

Other info

B uses a rocker, swing, trampoline, timers, weighted blanket but has never seen an OT. He has hypermobility and has high pain threshold. Including whole body tics, which exhaust him. Anxiety is displayed in hair pulling, scratches at his neck, bites and pinches himself tries to pull out teeth. He hears voices in bedroom, so parents sometimes sit with him in his room, but they get climbed on. B's sister must wait for X to settle to sleep if Mum is doing bedtime alone. Mum's priority is to help him fall asleep more easily at bedtime, staying asleep is secondary.

Goals

1. Every night indicate bedtime is coming without saying it AND delay starting bedtime routine until 8.30pm
2. Every night before bed meet X sensory and connection needs through playing games
3. Every night after saying goodnight evidence your checks using X's teddies or ticks on a wipe clean board (dad to evidence when he returns home from meetings)

Action

- Advised an OT assessment
- Agree latest wake time 6.45am
- Buy toys / sponges for early sensory bath
- Spread bedtime 'demands' over whole evening
- Meet sensory needs pre bed, use pressure
- Meet connection needs before bed, play games
- Sit in rocking chair pre bed cuddling under weighted blanket – plan to phased out
- Dad to say goodbye 10 mins before leaving
- Create safe space to throw and kick things to prevent damage and hurting his sister. Indicate bedtime, don't say it (lights, games, music mum in PJS, yawning)
- Delay bedtime (advance it when falling asleep within 30 mins)
- Create bedtime box with fidget toys
- Evidencing and checking with Teddies or ticks
- Canopy – Purchased at end of support

Results

- Early bath and more time to play games together.
- Kicking and biting and screaming stopped
- Now reading in bed for 10 –15 mins on his own
- Does NOT like to be checked before he is asleep – wait till room goes quiet then evidence checks
- Indicating bedtime is coming – yawning, dim lights, snuggle on sofa, whole body pressure games
- Saying goodnight at 8.15pm, asleep by 9pm
- If still awake later he tends to be waiting up for dad to come back home - Recommendation: evidence check
- Parent rated sleep disturbance dropped to almost zero.

7 weeks after final sleep plan sent

Social services were due to sign them off and sleep goals had been met. Bedtime was easier and he started to sleep through. B is now falling asleep independently every night after reading in his room Lights are out at 7.45am, sleep onset is within 30 mins and No night wakings. B is no longer leaking through pull up every night B is waking ready for the day and happy at 6.15 – 6.45am.

Mum "You are like an angel who has sprinkled glitter around our home"

