THE CASE FOR INCLUDING SLEEP CONTENT IN NURSING CURRICULA

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Disclosure

- Dr. Lucille C. Gambardella, Positive Transitions, has no conflict of interest related to this presentation and has not received sponsorship or commercial support for this research.

- Mr. Lyron Deputy, Delaware Sleep Disorder Centers, has no conflict of interest related to this presentation and has not received sponsorship or commercial support for this research.
Objectives

- Discuss the current status of including sleep content in nursing curricula across 12 countries

- Examine outcome of research findings and how they can be translated into evidence based educational practice to include integrated sleep content in all nursing curricula
The case for including sleep content

- Healthy People 2020 includes sleep wellness in its overall health plan and addresses sleep apnea, drowsy driving, and need for minimal hours of sleep for youth and adults.

- Health care providers cannot target sleep problems if they are not knowledgeable about how to assess, diagnose, treat and evaluate these problems.

- Education about sleep must occur in basic curricular design.
The case cont.

- “nurses are in a unique position to contribute to new knowledge about sleep and health promotion...as well as monitoring sleep habits and disseminating information...unfortunately nursing education faces challenges regarding the incorporation of sufficient sleep content in its programs...”

Other considerations for including sleep content

- Sleep deprivation accounts for major vehicular and train accidents across the globe
  - *Amtrak train crashes in the past 3 years in Philadelphia, PA and Hoboken, NJ*

- Nursing education is in a unique position to begin the move to integrate sleep content in health care provider curricula as we are the largest group of health care providers
Research methodology

- Descriptive survey design to determine present inclusion of sleep content and to determine opinion of sleep as a vital sign

- Implementation at the 2016 Sigma Theta Tau International Research Congress in July in South Africa

- Voluntary completion of a brief survey available during the Congress exhibit event

- Participants had the option to complete the survey anonymously
Findings: Participant Countries

- USA
- Nigeria
- Trinidad/Tobago
- Thailand
- Philippines
- Jamaica
- Canada
- Jordan
- Malawi
- Uganda
- Botswana
- Japan
Findings cont. : Nursing Program Representation

- Diploma: less than 1%
- Associate Degree: 48%
- Bachelor of Science in Nursing: 50%
- Master of Science in Nursing: 1%
Findings cont: Is sleep in your home curriculum?

- 57% did NOT include in curriculum plan

- 43% DID include: primary course, Fundamentals or Pediatrics
  - Canada, USA, Philippines, Japan
  - Minimal, basic content

- 98% believe it should be included: primary courses, Fundamentals, Mental Health, Community Health
Findings cont.

- 60% believe sleep could be the 6th vital sign

- 40% were unsure it could be a 6th vital sign
  - Major consideration: How would it be standardized and measured?

  - 2nd consideration: If it becomes a vital sign, it would HAVE to be taught in all health care provider programs, not just nursing
Conclusions

- 57% of nursing programs represented in the survey do not include sleep content in their curricula
- 98% of faculty surveyed believe sleep content should be included in nursing curricula
- Sleep as a vital sign requires further study
Recommendations

- Continue the study of determining sleep as a universal vital sign

- Implement the development of a curriculum design for the integration of sleep in health care provider curricula, beginning with nursing

- Continue to advocate for sleep wellness for inclusion in the Healthy People 2030 document now in development
References

Thank you for your attention!

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