



# Chronic Insomnia

Improvement to Practice

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DATE: March 14, 2023 PRESENTED BY: Darren Ramcharan, RN, BSN, DNP Candidate & Jacqueline Russell, RN, BSN, DNP Candidate

# Introduction

- Darren Ramcharan DNP, Candidate
- Jacki Russell, DNP Candidate
- Courtney Warnecke, DNP, RN, PMHNP-BC
- Molly Goddard, DNP, RN, PMHNP-BC, Project Chair

# Practicum Overview

- Practicum Sites
- Goals
- What we learned

# Clinical Problem

- Chronic Insomnia Overview
  - DSM V Criteria
  - Insomnia Severity Index (ISI)
  - Sleep Diary
  - Contraindicated Populations



TIREDNESS



SORE THROAT

# Clinical Problem



TIREDDNESS

- Significance
- Associated with Comorbidities
- Prevalence
- Evidenced-Based Interventions.
- Clinician Knowledge and Confidence.



SORE THROAT



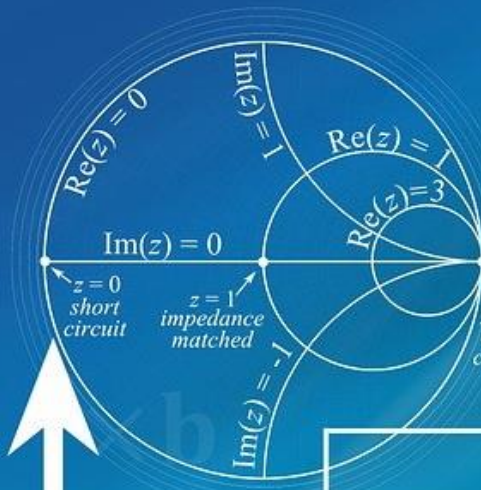
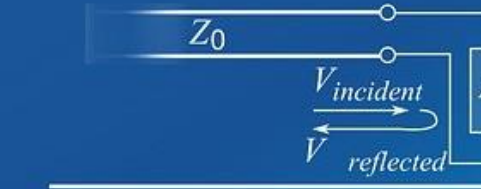
# Review of the Literature

- Common Practice
- Pharmacological Interventions
- Non-pharmacological Interventions

The background of the slide features a repeating pattern of various books and papers, some open and some closed, scattered across the left side of the frame. The books are drawn in a simple, sketchy style with visible pages and spines.

# CBTi

- CBTi Overview
- Three Pronged Approach
- Sleep Regulatory System
  - Circadian Rhythm System – Stimulus Control
  - Sleep Drive – Sleep Restriction Therapy
  - Arousal -- Cognitive Behavioral Therapy for Insomnia (CBTi)



# Specific Aims

The primary focus of this project was to address the problem of inadequate clinician knowledge and confidence regarding evidence-based treatment of chronic insomnia.

- Train 20% of clinicians in both the in-patient and out-patient settings with a CBTi workshop.
- Measure self-rated knowledge and confidence in treatment of chronic insomnia before and after the workshop to assess improvements in knowledge and confidence as a result of the workshop.





# In-Patient

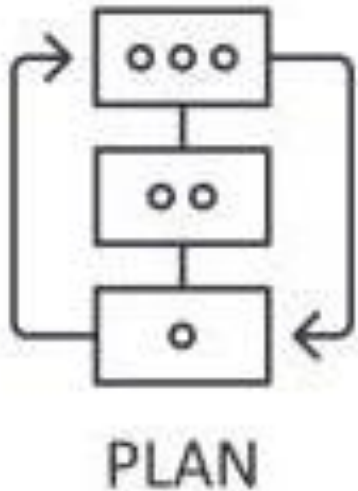
- State-run psychiatric facility for adults
- Population
- Treatment Programs (FPS and PRS)
- Psychiatric Treatment Team

# Out-Patient Setting

- Community-based mental health center, located in a frontier community in Eastern Oregon
- The entire region served by this organization is classified an underserved, rural population
- Frontier communities have been found to have the highest patient to provider ratios for mental health services in the state of Oregon (Oregon Health Authority, 2019)
- Treatment Team

# Methods/Intervention

- Two Phase Intervention
- Workshop on CBTi
- Self-Rated Knowledge and Confidence Measured Pre- and Post-Workshop
- Toolkit Provided to Attendees
- 8-Week Post-Workshop Consultation Period





# Evolution of Project (In-Patient)

- Prior to Implementation
- Pre- and Post- Workshop Surveys
- CBTi Toolkit
- Consultation and Support made available

# Evolution of Project Out-Patient

- Consulted with Medical Director of the Organization
- Obtained Letter of Support from Medical Director
- Obtained IRB Approval for Project Implementation
- Correspondence with Team Leaders
- ACT Team Presentation & Clinician Mtg Presentation
- Pre- and Post-Workshop Surveys
- Toolkit Provided to Attendees Electronically via Team Leaders
- Post-Workshop Follow-Up Period

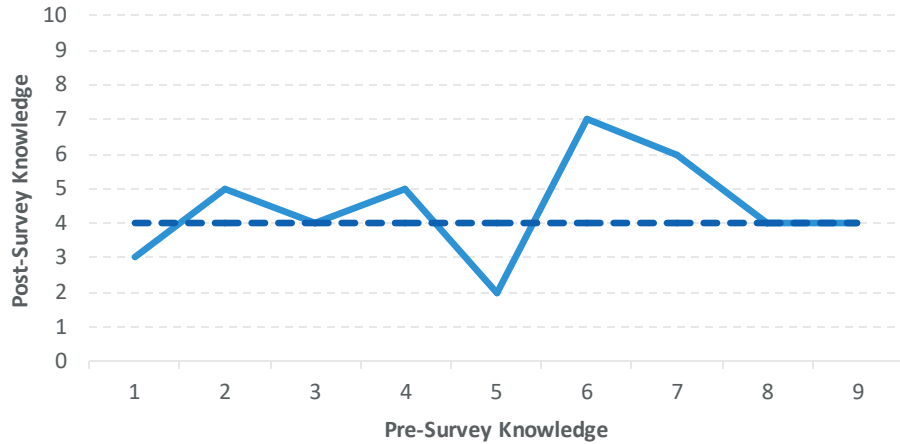


# Key Findings/Results In-Patient

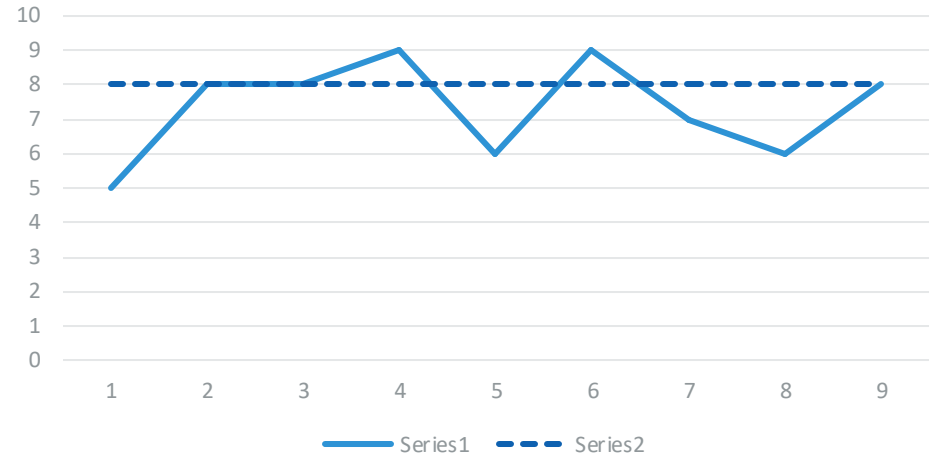
- 100% Attendance
- Pre-Workshop Knowledge: Increased from 40% to 80%.
- Pre-Workshop Confidence: Increased from 40% to 70%
- Group Suggestions for Improvement
- Post-Workshop Follow up

# In-Patient: Key Findings/Results

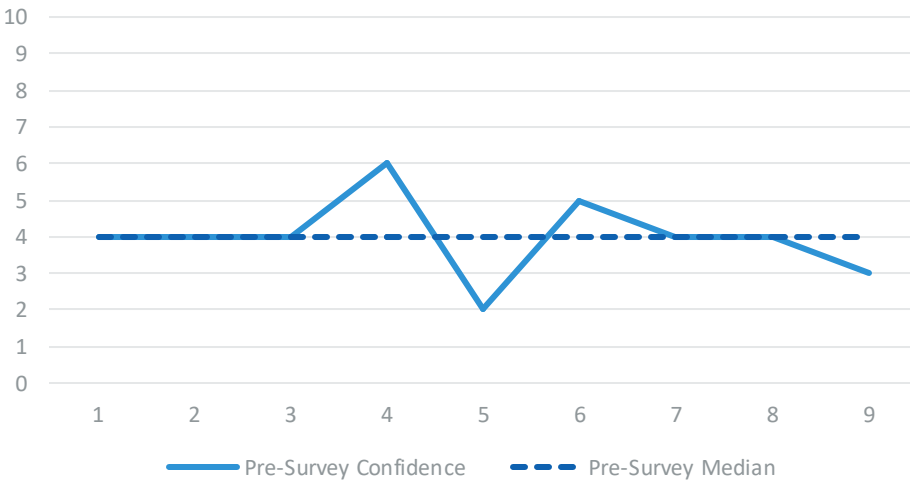
## 'Pre-Survey Knowledge'



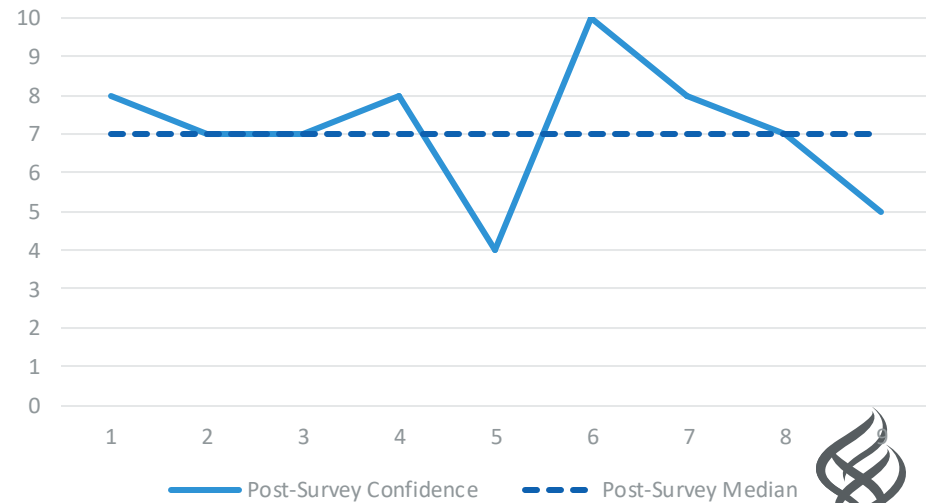
## Post-Survey Knowledge



## Pre-Survey Confidence

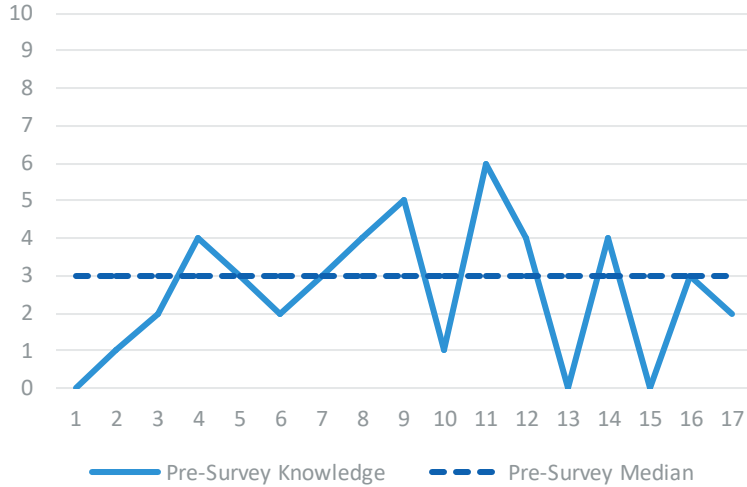


## Post-Survey Confidence

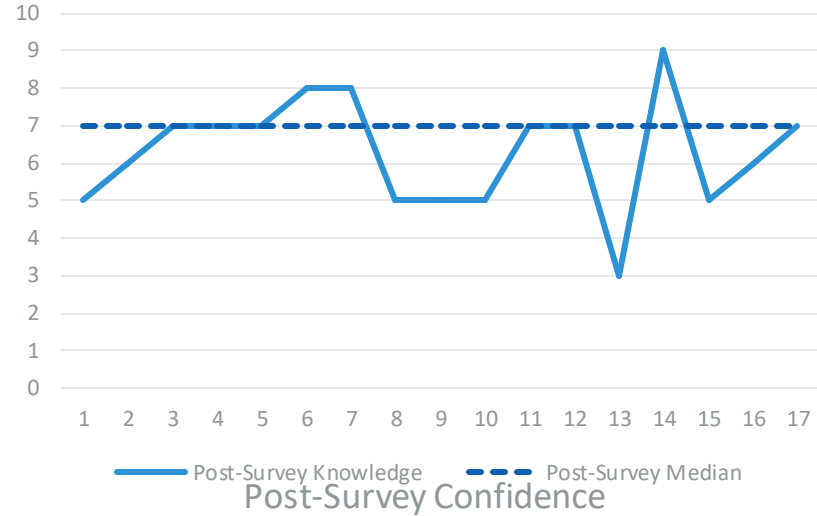


# Out-Patient: Key Findings/Results

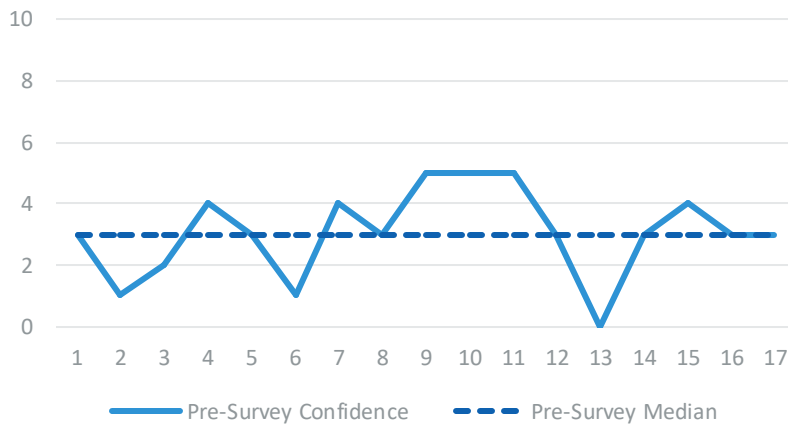
## Out-Patient Pre-Survey Knowledge



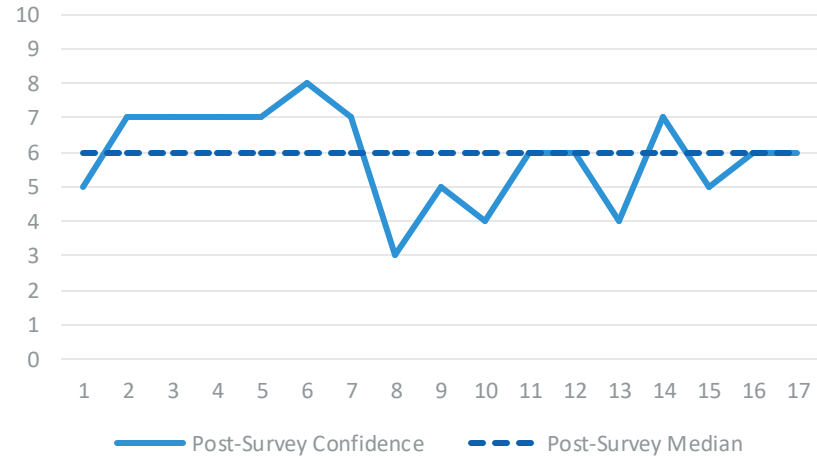
## Out-Patient Post-Survey Knowledge



## Pre-Survey Confidence



## Post-Survey Confidence







# Interpretation

- Exceeded project aims for attendance
- Condensed presentation may have contributed to attendance
- Increased knowledge and confidence among attendees
- Unstructured consultation period offered in an effort to provide flexibility
- This did not yield any engagement from attendees following the workshop

# Next Steps for the Project

- Requests for additional presentations received following completion of this project.
- Consideration for scheduled follow-up consultation to assess use in practice and review questions that have arisen in implementation
- CBTi App

# Next Steps for Team Members

- Forensic Psychiatry
- Utilization of CBTi principles in a highly structured environment.
- Intention to practice outpatient in either a community-based mental health setting or primary care clinic.
- CBTi will be utilized in my future practice and is already very helpful in providing psychoeducation to patients who are struggling with sleep.

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Thank You