

Ealing CAMHS Sleep Assessment Checklist

Steps 1-4: Non-Medical Management

Step 1: Assess Sleep Quality & Quantity

- Collect 7 day sleep diary e.g. SCOPE¹
- Complete Child Sleep Habit Questionnaire²
- Discuss recommended hours of sleep per day (GOSH)³

Step 2: Discuss Childhood Insomnia

- Physiological (e.g. delayed sleep phase)
- Behavioural (e.g. bedtime resistance)
- Psychiatric (e.g. mood disorder)

Step 3: Optimise Sleep Hygiene

- Discuss routine and environment
- Support parent-led behavioural interventions
- Provide advice leaflet 'Helping Your Child's Sleep'⁴

Step 4: Reassess Sleep

- Collect 7 day sleep diary e.g. SCOPE¹
- Complete Child Sleep Habit Questionnaire²
- Discuss recommended hours of sleep per day (GOSH)³

Steps 5-6: Medical Management

Step 5: Consider Melatonin for Sleep Onset Insomnia

- Consider Melatonin (MR) 2mg ON (off-licence)^{5,6}
- Educate on risks and benefits using Trust Leaflet^{7,8}
- Medication consent form (parental or Gillick competent)^{9,10}

Step 6: Regularly Review Melatonin

- Increase by 2mg 1-2 weekly to max 6mg if needed
- Discontinue if no benefit after 2 weeks on 6mg
- Discontinue 6-monthly to check if still helpful

Ealing CAMHS Sleep Assessment Resources

¹SCOPE Sleep Diary



SCOPE Sleep
Diary.pdf

²Child Sleep Habit Questionnaire



Child Sleep Habit
Questionnaire CSHQ.

³GOSH Sleep Recommendations



GOSH
Recommendations.pdf

⁴'Helping Your Child's Sleep'



Helping Your Child's
Sleep.pdf

⁵NICE: Melatonin (Professionals)



NICE Melatonin
(Professionals).pdf

⁶NICE: Melatonin (Parents)



NICE Melatonin
(Parents).pdf

⁷Trust Melatonin Leaflet – Standard



Trust Melatonin
Leaflet -Standard PIL

⁸Trust Melatonin Leaflet – Illustrated



Trust Melatonin
Leaflet - Illustrated.p

⁹Medication Parental Consent



Medication Parental
Consent Form.pdf

¹⁰Medication Gillick Competent



Medication Gillick
Competent Consent F