![SPG - The Speech Pathology Group logo]

SLEEP ROUTINES
tip sheet

1

ELIMINATE BARRIERS

- Reduce or eliminate caffeine
- No screen time 30 min to 1 hr before bed
- Reduce or eliminate afternoon naps
- Create consistent sleep & wake times
- Ensure your child gets plenty of physical activity during the day

2

SET UP THE ENVIRONMENT

- Keep temperature cool
- Have lights off or use a dimmer or nightlight
- Room should be silent or use a sound machine
- All toys/preferred objects should be put away
- Have comfort items available (pillow, blanket, stuffed animals)

3

ESTABLISH ROUTINES

- Choose 5-7 nighttime related activities to be completed 30-45 min before bed each night
- Order the activities from active to passive
- Offer choices throughout the routine
- Provide praise for following each step of the routine
- Use The Sleep Plan to adjust sleep & wake times
- Use rewards as needed
- Do not extend the routine

4

USE TOOLS

- **Bedtime pass**: allows your child a limited amount of times to either leave their room or call you in
- **Time-based visits**: you enter your child's room to do a brief check-in visit based on set times; these times will increase over days
- **Sound machine**: allows for your child to have background noise on throughout the night
- **Moon & sun clock**: signals when it is time to be in bed & when it is time to get out of bed
- **Visual schedule**: provides visual predictability of the bedtime routine
- **Timer**: provides visual & auditory cues on when each activity is done

(I)Delemere, E., & Dounavi, K. (2018). Parent-implemented bedtime fading and positive routines for children with autism spectrum disorders. Journal of Autism Developmental Disorders, 48(4) :100-21019; Hanely, G.P. (2015). Understanding and Treating Sleep Problems of Children. [Powerpoint presentation]

SPG COMMUNITY

SPG · AUTISM CENTER · Bright Path Therapists

SLEEP PLAN

COMPONENTS	RECOMMENDED	YOUR CHOICES
Temperature	Cool	
Lighting	Dim lights/indirect lighting/ Nightlight	
Sound	Silent or sound machine	
Toys/Activities	Cleaned up/put away	
Comfort items	Blanket, stuffed animal, pacifier, etc.	

SUPPORTS (check all that you'll use)	YOUR CHILD'S ROUTINE	
	TIME	ACTIVITY
Picture schedule		
Timer		
Reward		
_____		
ROUTINE ACTIVITY IDEAS		
Bath, Brush teeth, Bathroom, Pajamas, Story/Reading, Yoga/Massage, Clean		

	up toys, Get in bed		

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GOAL WAKE/SLEEP TIMES
Goal wake time: _____AM
Number of hours of sleep your child need based on developmental norms: _____
hrs Subtract the amount of needed sleep hours
Goal bedtime: _____PM
CURRENT WAKE/SLEEP TIMES
My child typically falls asleep at _____PM
STAGE 1. WAKE/SLEEP TIMES
Add one hour to your child's current bedtime (one hour later)
STAGE 1 BEDTIME: _____PM
Add needed sleep hours to STAGE 1 bedtime listed above.
STAGE 1 WAKETIME: _____AM
STAGE 1. CHECK
Did your child fall asleep within 15 minutes of the STAGE 1 bedtime? Yes ☐ Go to STAGE 2 No ☐ Stay at STAGE 1
STAGE 2. WAKE/SLEEP TIMES
Subtract 15 minutes from your child's STAGE 1 bedtime:
STAGE 2 BEDTIME: _____PM
Add needed sleep hours to STAGE 2 bedtime listed above.
STAGE 2 WAKETIME: _____AM

STAGE 2. CHECK
Did your child fall asleep within 15 minutes of the STAGE 2 bedtime? Yes ☐ Go to STAGE 3 No ☐ Stay at STAGE 2

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STAGE 3. WAKE/SLEEP TIMES
Subtract 15 minutes from your child's STAGE 2 bedtime: STAGE 3 BEDTIME: _____PM Add needed sleep hours to STAGE 3 bedtime listed above. STAGE 3 WAKETIME: _____AM
STAGE 3. CHECK
Did your child fall asleep within 15 minutes of the STAGE 3 bedtime? Yes ☐ Go to STAGE 4 No ☐ Stay at STAGE 3
STAGE 4. WAKE/SLEEP TIMES
Subtract 15 minutes from your child's STAGE 3 bedtime: STAGE 4 BEDTIME: _____PM Add needed sleep hours to STAGE 4 bedtime listed above. STAGE 4 WAKETIME: _____AM
STAGE 4. CHECK
Did your child fall asleep within 15 minutes of the STAGE 4 bedtime? Yes ☐ Go to STAGE 5 No ☐ Stay at STAGE 4
STAGE 5. WAKE/SLEEP TIMES

Subtract 15 minutes from your child's STAGE 4 bedtime: STAGE 5 BEDTIME: _____PM Add needed sleep hours to STAGE 5 bedtime listed above. STAGE 5 WAKETIME: _____AM	
STAGE 5. CHECK	
Did your child fall asleep within 15 minutes of the STAGE 5 bedtime? Yes ☐ Go to STAGE 6 No ☐ Stay at STAGE 5	
CONTINUE UNTIL GOAL WAKE & SLEEP TIMES ACHIEVED	

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WHAT YOUR CHILD CURRENTLY DOES (check all that apply)	CHOOSE HOW YOU'D LIKE TO OVERCOME THESE (check all that apply)
Gets out of bed to play	Put away all preferred items
Gets out of bed to see you	Use a reward
Calls for you to come in the room	Bedtime pass
	Time-based visits
Cries	Resolve fear/other issues
_____	
	_____

CURRENT DIFFICULT SLEEP DEPENDENCIES (check all that apply)	BETTER SLEEP DEPENDENCIES (check all that apply)

	Parent/caregiver	Special Pillow/Blanket
	TV/radio on	Stuffed animal/special item
	Feeling full	Sound machine
	_____	_____
	_____	_____
	_____	_____

Adapted from Jin, S.C., Hanley, G.P., & Beaulieu, L. (2013). An individualized and comprehensive approach to treating sleep problems in young children. Journal of Applied Behavior Analysis. 46, 161-180.