

Sleep Advice Follow-Up Questionnaire

Thank you for completing this short questionnaire. Your feedback helps us understand what steps you've taken after receiving sleep advice and what impact it has had.

By returning this and the 2 week sleep diary it will allow our team to assess the next steps and the most appropriate care for your family.

Please return the completed questionnaire to bht.schoolhealth-referrals@nhs.net within 4 weeks of contacting:



Child's Name:	<i>(Please enter your child's full name.)</i>
What did you learn from the sleep advice provided?	<i>(Share any key points or tips you found helpful.)</i>
What changes or actions have you tried at home based on the advice?	<i>(List any strategies or routines you implemented.)</i>
Have you noticed any improvements or changes in your child's sleep?	<i>(If yes, please describe. If no, please explain.)</i>
Is there anything that was difficult to implement or didn't work?	<i>(Optional)</i>
Do you have any additional comments or questions?	<i>(Optional)</i>

