

Topic:

Sleep associated with Drug use: Fred's case

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Introduction

One of the longstanding issues for people trying to recover from drug use is poor sleep, and a lack of it is associated with compromised physical and psychological health (Fadhel, 2020). The relationship between sleep difficulties and substance use is complex; it is a vicious cycle in which both challenges escalate the risk of each other. For example, many drugs, such as stimulants, opioids, and sedatives, have the potential to disrupt a regular sleep pattern so that symptoms such as insomnia, hypersomnia, or fragmented sleep are witnessed. This reduces the patient's satisfaction with life, and that could further compromise the process of recovery (Navarro-Martínez et al., 2020). For instance, a person struggling with poor sleep is likely to give in to cravings and relapse. This narrative will analyse the case of Fred with sleep problems due to drug use. Fred is a patient pseudonym as per the NMC (2018) anonymity and confidentiality guidelines, moving beyond the individual's predicament and to the shared complexity of needs and the collaborative work that is required to be addressed.

It is for the reasons cited above that this case scenario is chosen to apply the dynamic relationship between drug use and sleep disorder in relation to their influence on well-being, and on recovery in a clinical context. Most of the time, the drug dependency issues and the sleep disorders of the patients are interrelated problems that produce complications not only in treatment but also in recovery (Valentino & Volkow, 2020). The information from the case of Fred opens the dialogue on value with respect to comprehensive assessment, tailored interventions, and the integrated multidisciplinary approach to enhance outcomes for patients.

The narrative will also assess the effectiveness of partnerships in community and hospital practices. The health professionals include a host of professionals trained in different aspects of health and are part of this multi-disciplinary team, along with social workers and community

support systems, which has been a key strategy to the management of Fred's condition. The narrative points out the issues of how teamwork, communication, and shared decision-making are important in the care delivery of patients like Fred. This essay reflects on the process of decision-making and group experiences to contribute to the best practices and lessons learned in Fred's case that can truly depict the experiences of Fred in his life and the developed interrelationships to support recovery.

Discussion on Chosen Complex Issue and Literature

One of the major problems associated with sleep among patients with a history of substance abuse is sleep disturbances (Leger et al., 2022). Stimulants, opioids, and alcohol disturb the normal sleep architecture by a wide margin, leading to sleep deprivation along with drug use in an attempt to self-medicate the sleep disturbances. In Fred's case, his polysubstance abuse, including stimulants and depressants, significantly contributed to his poor sleep and affected his psychiatric symptoms, including anxiety and depression. Clear evidence is available in the literature that shows the bidirectional association between drug use and sleep disturbances (Roehrs, Sibai & Roth, 2021). Not only does substance abuse lead to disturbances in the general architecture of sleep, but poor sleep quality can precipitate a higher chance of relapse among recovering individuals. For instance, research has indicated that stimulants such as cocaine and methamphetamine increase wakefulness but decrease REM sleep, while depressants like alcohol may alter sleep architecture by causing fragmented sleep and awakenings in the early morning hours (Kang et al., 2020). Indeed, this manifested in the profile of drug use that was found in Fred, where both types of drugs were seen, leading to a complex pattern of sleep disturbances.

Adequate sleep management is also needed in the care of patients with addiction since sleep disturbance was determined to predict substance use relapse (Eacret, Veasey & Blendy,

2020). Furthermore, other pharmacological and non-pharmacological interventions like melatonin or other hypnotics and cognitive-behavioural therapy for insomnia (CBT-I) have been put forward as useful means of addressing sleep disturbance among patients with substance use disorder (Climent-Sanz et al., 2020). CBT-I is helpful to improve the quality of sleep and decrease the relapse rate in this group of people.

Decision-Making Process and Collaborative Efforts

Care for Fred's sleep disturbance required a multi-disciplinary approach among the health care providers, mental health providers, and social workers (Eacret, Veasey & Blendy, 2020). Making this important decision was based on the in-depth assessment availed, reflecting Fred's sleep patterns, history of substance use, and general psychological health. This team identified CBT-I as the most effective intervention effective for Fred, with the use of pharmacological options if needed. The most significant role of a collaborative inter-professional work plan was to ensure that Fred was an active team member to attain a holistic care plan to cater for substance use and sleep disturbance (Slavish et al., 2022).

The process was complex, with several considerations regarding Fred's individual needs and circumstances. The healthcare teams had to weigh the potential benefits of a variety of treatments against any potential risks, Fred's polysubstance use, and the risks of interaction between medications (Eacret, Veasey & Blendy, 2020). This needed constant communication with Fred to keep him in the care plan and prioritise his needs, and how to develop a personalised treatment plan meeting his needs.

Narmandakh et al. (2020) show that better patient outcomes result when there is coordinated care with multi-faceted support that can target and attend to a variety of healthcare

needs simultaneously. Integrated care models, therefore, have inter-professional interactions across many healthcare providers, and they focus on the need to address physical and psychological needs simultaneously. This is significant in patients with substance use disorders, as they generally exhibit morbid conditions that, therefore, need multi-pronged care (Kang et al., 2020).

Evaluation of Partnership Working

The consequences of these interventions impact critically on the impact of partnership working in Fred's case (O'Donnell et al., 2022). Collaborative working among different healthcare professionals used a holistic approach to the care of Fred, which not only sought to address his sleep disturbance but also probed into the source of his problem with substance abuse. This collaborative work was fundamental to developing a personalized care plan that would incorporate both medical and psychological therapies (Rawlinson et al., 2021).

Effective collaborative working was possible as it was backed with appropriate communication and commitment towards the well-being of Fred (Berduzco-Torres et al., 2020). A meeting discussing the progress of Fred and adjusting his care plan was scheduled for every three months. This ensures that each member of the team is aware of the needs of Fred and supports him together. The literature cites effective communication and collaboration in order for positive health outcomes to be achieved for people with complex needs (Afriyie, 2020).

Fred's case illustrates the need for a multidisciplinary approach to resolve cases of patients with complex care needs. There is a general consensus about the importance of the integrated care model in realizing positive health outcomes from the critical analysis of the literature and collaborative efforts in the treatment of Fred. Indeed, similar individuals with complex needs

whose healthcare issues are managed will have improved general well-being if both sleep disturbances and substance abuse are addressed. In other words, the process of arriving at an appropriate treatment plan for Fred heavily relied on elements of collaborative decision-making and partnership working. The evidence from the literature also supports this approach.

Reflection of the Experience in Working as a Group on the Digital Story

Fred's case underpins the collaborative nature of managing sleep related to drug problems. Using Rolfe, Freshwater, and Jasper's reflective model (2001), the reflection is structured around these three key questions: What? So what? Now what?

What?

The team in managing Fred's case was made up of diverse multi-professionals. The team started its work on the care plan through brainstorming on the main points in Fred's case, that is, the impacts of drug usage on the sleeping pattern (Boonyoung, Kamonmarttayakul & Phumdoung, 2021). Considering the complexity of Fred's case it was imperative to adopt multiple perspectives to improve outcomes. Our team also adopted a communicative culture among its members. Our means of communication included arranging meetings and using digital means of communication like Google Docs. However, the team also had some challenges. The first challenge was that at times team scheduling saw some members take on more tasks than others. The second challenge was that we had to properly align the different perspectives of each member to come up with the correct representation of Fred's case while remaining confidential (Fox et al., 2021).

So What?

Evaluating the case, it was a good learning experience in realizing the importance of effective communication and time management are for executing projects with multiple collaborators. What really worked well for us were some early successful elements, like the brainstorming session that really helped set a clear direction for the project and some of the digital tools that helped in communication and collaboration (Agussalim et al., 2022). All these strategies would ensure everyone is working in tandem so as to put into play effectively the knowledge that has been acquired. Challenges, on the other hand, pointed to areas that need to be improved: coordination of time schedules with some of the team members revealed poor time management on our part. Misaligning perspectives sometimes indicated poor decision-making structures, with roles and responsibilities unclear. This made me value teamwork in healthcare settings from a professional perspective. Fred was a patient with multi-leveled needs, so it was only critical to provide holistic care that demanded effective collaboration.

What Now?

Going forward, there are a few strategies that will aid improvement in future group work. One being the inclusion of more flexible forms of collaboration, including tools for asynchronous communication, in order to alleviate the number of scheduling conflicts and to make sure that tasks get distributed more evenly (Afriyie, 2020). Clarification of roles and responsibilities right at the beginning will make the process of decision-making smoother and ensure no viewpoints are left out and are delayed. It will be critical also to have simultaneous follow-up meetings and reviews as this will keep everyone abreast of the scene and ensure any issues that arise are tackled in time.

Being proactive in managing these issues will significantly increase the efficiency and effectiveness of the project.

Reflecting on the teamwork elements, proper communication, professionalism, and a well-defined division of workload and responsibility are required for any successful collaboration. Strategies such as this, inform the way forward in building upon the strengths presented in this work, yet work on the identified weak links is necessary to better upcoming projects in the future. Generally, the group experience in working on the digital story of Fred was a good exercise in problem-solving via collaboration and partnership working (O'Donnell et al., 2022). This case brought to light the need for good communication, the appropriate use of time, and the synthesis of different perspectives to come up with a wholesome and sensitive narrative on healthcare. Evidently, the things learned from this experience will definitely prove useful in improving future collaborative works in both scholarly and professional settings.

Critical reflection on our process and outcomes as a group helped us in noting a few areas that needed improvement. Identification of ways to improve future collaborative projects greatly improves our personal and professional development. These insights are not only important for our personal and professional development, but they also underscore the fact that better healthcare can only be achieved through proper teamwork.

Conclusion

This essay analyses the intricate relationship between drug use and sleep disorders by focusing on the Fred's case. Through this narrative assessment, the essay critically reviewed decision-making and collaborative efforts associated with the development process of a digital story to address the issues associated with sleep disturbances caused by drug use. The essay

addressed the needs of people with an integrated approach, having strong problem-solving skills, and evaluated it in various settings, like communities and hospitals. The narrative also emphasised the efficiency of collaborative working in these care environments to advance the importance of multidisciplinary approaches in managing such cases. Fred's case was the epitome of how healthcare professionals collaborated in designing effective and supportive interventions for patients like Fred to work toward holistic care and better health outcomes. In this regard, the evaluation emphasizes the importance of models of integrated care and how continual development of partnership working can enhance the quality of care given to this group of patients.

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