THE BUZZY BRAIN BEDTIME RESET

Work with his clock, not against it.

If bedtime takes two hours, your child is probably not defying you - and you are probably not doing it wrong. In the research, up to 78% of children with ADHD have a body clock that runs late: the brain's sleep signal starts around 45 minutes later than in other children. A child put to bed before that signal arrives doesn't fall asleep slowly. They lie awake - and a bed that means an hour of lying awake stops meaning sleep. This free reset works on the clock, not on the child: four small moves, a 7-night diary, and five quiet minutes that are yours. It is routine ideas from a storybook family, not medical advice - loud snoring, pauses in breathing, or legs that won't settle at night are conversations for your child's doctor, and medication or supplement questions belong to their prescriber.

What's inside

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From Coryverse - stories for all ages, especially young children.

The Four Moves

1. Same wake time first.

Pick the wake time your school morning needs and keep it on weekends too, before you change anything at night. The clock takes its orders from the morning.

2. Morning light, outside if you can.

Curtains open the moment they wake. Breakfast near the brightest window. A walk - to school, around the block, out with the dog - beats any lamp indoors, even on a cloudy day.

3. Dim-down hour.

In the last hour before bed, lamps instead of ceiling lights, screens off and out of the bedroom, same steps in the same order every night: bath, pyjamas, teeth, story, lights. The routine is the signal.

4. Bedtime where sleep is - then 15 minutes at a time.

For the first week, put bedtime near when your child actually falls asleep now, even if that's later than you want. When falling asleep there gets easy most nights, move bedtime 15 minutes earlier. Hold each step several nights. Small steps are not slow - in the research, about 20 minutes faster to sleep is what the best help delivers, and parents who expect 30 are the ones who give up at 15.

Work on the clock, not on the child. Small, real wins - a calmer 15 minutes, a diary that shows a pattern - are the honest goal.

The 7-Night Diary

One line a night. Best guess is fine - patterns are what helpers (grandparents, teachers, doctors) can actually use.

Night	Into bed	Actually asleep	Wakings	Woke up	Got up	One line about tomorrow
1						
2						
3						
4						
5						
6						
7						

Seven honest nights beat one perfect night. Patterns are what helpers - grandparents, teachers, doctors - can actually use.

Loud snoring, pauses in breathing, or legs that won't settle at night are conversations for your child's doctor, not routine problems.

Five Minutes of Special Time

(before the story)

Borrowed from a therapy parents are taught for young children (therapists call it Special Time; a clinician can teach the real thing - this is the bedtime-story version). For five minutes before the book, your child leads and you follow: Praise one specific thing ("You lined those cars up by colour - I love watching you do that"), Reflect their words back, Imitate their play, Describe what they're doing like a friendly sports announcer, and Enjoy - no phone, no questions, no correcting, no teaching. Then the story. Five minutes of being followed fills the attention tank that bedtime otherwise has to fight.

Cut this card out and keep it with the bedtime book. Five minutes first - then the story does the rest.

PRAISE - REFLECT - IMITATE - DESCRIBE - ENJOY

The story that starts it all

Our picture book Benny and the Buzzing Brain ends where this reset begins: a buzzy kid, a big day, and bees that finally hum a sleepy song. Benny's last line is the one parents tell us they keep: "My brain doesn't need fixing. It needs flying."

Read Benny and the Buzzing Brain:

Physical copy: https://www.amazon.com/dp/B0HNSGLXCR
Digital copy, low cost: https://coryverse647.gumroad.com/l/ooxul

A note, plainly

This reset is routine ideas from a storybook family, not medical advice. It does not diagnose or treat anything. Loud snoring, pauses in breathing, or a child who cannot keep their legs still at night are doctor conversations, not routine problems - and medication or supplement questions belong to your child's prescriber.

Sources, at their own strength: up to 78% of children with ADHD have delayed sleep-wake timing and the sleep signal (DLMO) runs about 45 minutes late in children (Frontiers in Psychiatry, 2025); with the best help, about 20 minutes faster to sleep is a realistic win (Pritchard et al., via Managed Healthcare Executive, Oct 2026); Special Time is the home-practice shape of PCIT Child-Directed Interaction (CDC / Good Therapy summary).