The aim of this project was to enhance the awareness of asthma and its understanding through a new informative and engaging educational resource.

Methods We designed an educational booklet aimed at children aged 4–10 called Asthmanauts. The child becomes the hero defending space villains (triggers including pollen and cigarettes) with their inhaler rockets named Captain Blue and Commander Brown. The booklet was trialled at two hospital outpatient departments. A questionnaire given before and after reading the booklet was used to assess its impact on patients’ awareness and perceived understanding of key terms. In addition parents were asked if the booklet could enhance their child’s knowledge and whether they would recommend it.

Results 87.5% of parents (n=16 mean age of child=6 years; 11 males and 5 females) found the booklet enjoyable to read with their children; over 90% found it useful in furthering their child’s understanding and would recommend it to others.

The correct understanding among children of key terms including triggers, reliever and preventer showed a 14% improvement with the greatest impact on trigger understanding. Doctors and nurses also complimented the booklet requesting copies to use.

Conclusion The initial results of this pilot study are very promising and have shown that Asthmanauts has a potential role in asthma education for children. It provided effective information and was recognised and commended by health professionals and patients while being engaging and enjoyable. We now hope to distribute the booklet and determine its role in longer term management.

REFERENCES

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**British Association of Paediatricians in Audiology**

**NATIONAL SURVEY OF THE AETIOLOGICAL ASSESSMENT SERVICE OF PERMANENT CHILDHOOD HEARING IMPAIRMENT IN IRELAND**

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Introduction The Universal Neonatal Hearing Screening programme was implemented in Ireland in 2014. Approximately 100 infants are identified with a permanent childhood hearing impairment (PCHI) each year, an incidence of 1.5/1,000.

Best practice dictates that all children who are identified with PCHI should have access to prompt paediatric assessment to determine the need for aetiological investigations. The implementation of the UNHS programme did not include any increased resource for paediatrics thus raising concern regarding timely access to medical assessment.

This survey aimed to assess the provision of aetiological assessment services nationally with a view to informing future service development.