

REFERENCE	EVIDENCE LEVEL	KEY FINDINGS, OUTCOMES OR RECOMMENDATIONS
<p>Boyd, M., Lasserson, T. J., McKean, M. C., Gibson, P. G., Ducharme, F. M., & Haby, M. (2009). Interventions for educating children who are at risk of asthma-related emergency department attendance. <i>Cochrane Database of Systematic Reviews</i> (2).</p>	I	<p>Asthma education aimed at children and their carers who present to the emergency department for acute exacerbations can result in lower risk of future emergency department presentation and hospital admission.</p>
<p>National Asthma Council (2014). <i>Australian Asthma Handbook, Quick Reference Guide</i>, Melbourne</p>	VII	<p>Contains the national clinical practice guideline for asthma management in primary care.</p>
<p>Paasche-Orlow, M., Riekert, K., Bilderback, A., Chanmugam, A., Hill, P., Rand, C., Brancati, F., & Krishnan, J. (2005). Tailored education may reduce health literacy disparities in asthma self-management. <i>American Journal of Respiratory and Critical Care Medicine</i>, 172(8), 980-986.</p>	IV	<p>Outlines the importance of taking into account parents and carers health literacy level. It proved that inadequate health literacy is a barrier to learning and remembering asthma self-management skills.</p>
<p>Yin, H. S., Gupta, R. S., Mendelsohn, A. L., Dreyer, B., van Schaick, L., Brown, C. R., Encalada, K., Sanchez, D.C., Warren, C.M., Tomopoulos, S. (2017). Use of a low-literacy written action plan to improve parent understanding of pediatric asthma management: A randomized controlled study. <i>Journal of Asthma</i>, 54(9), 919-929.</p>	II	<p>Use of a low-literacy written action plan was associated with better parent understanding of asthma management. Further study is needed to assess whether the use of this action plan improves child asthma outcomes.</p>
<p>Tan, N., Chen, Z., Soo, W., Ngoh, A., & Tai, B. (2013). Effects of a written asthma action plan on caregivers' management of children with asthma: a cross sectional questionnaire survey. <i>Primary Care Respiratory Journal</i>, 22(2), 188-194.</p>	VI	<p>Shows effectiveness of written asthma action plans.</p>

Tolomeo, C. (2009). Group Asthma Education in a Pediatric Inpatient Setting. <i>Journal of Pediatric Nursing, 24 (6)</i> , 468-473.	VI	Outlines effectiveness of providing asthma self-management education.
Al-Muhsen, S., Horanieh, N., Dulgom, S., Al Aseri, Z., Vazquez-Tello, A., Halwani, R., & Al-Jahdali, H. (2015). Poor asthma education and medication compliance associated with increased emergency department visits by asthmatic children. <i>Annals of Thoracic Medicine, 10 (2)</i> , 123-131.	VI	Found unnecessary presentations to ED and incorrect medication use were directly associated with receiving poor asthma education.
William, K., Word, C., Streck, M., & Titus, O. (2013). Parental Education on Asthma Severity in the Emergency Department and Primary Care Follow-up rates. <i>Clinical Pediatrics, 52 (7)</i> , 612- 619.	IV	Displayed that on discharge, providing parents with asthma education relating to the child's exacerbation severity improved outpatient and GP follow up rates.
Gerald, L. B., Gerald, J. K., Gibson, L., Patel, K., Zhang, S., & McClure, L. A. (2009). Changes in environmental tobacco smoke exposure and asthma morbidity among urban school children. <i>Chest, 135(4)</i> , 911-916.	II	Demonstrates an association between environmental tobacco smoke exposure reduction and fewer episodes of poor asthma control, respiratory-related ED visits, and hospitalisations. These findings emphasize the importance of ETS exposure reduction as a mechanism to improve asthma control and morbidity.
Keatinge, D., Stevenson, K., Fitzgerald, M. (2009). Parents' perceptions and needs of children's hospital discharge information. <i>International Journal of Nursing Practice, 15 (4)</i> , 341-347.	VI	Showed parent satisfaction of discharge information varied. Conflicting or lack of education caused anxiety to parents. Also highlighted not only the need for verbal and written education but also in 'user-friendly' language to meet parents' specific needs.
Bloch, S. A., & Bloch, A. J. (2013). Using video discharge instructions as an adjunct to standard written instructions improved caregivers' understanding of their child's emergency department visit, plan, and follow-up: a randomized controlled trial. <i>Pediatric Emergency Care, 29(6)</i> , 699-704.	II	Brief video discharge instructions improved caregiver knowledge both in the ED and 2-5 days after discharge, compared with written discharge instructions alone. Caregiver satisfaction with video discharge instructions was also greater than with written discharge instructions.

Gillette, C., Rockich-Winston, N., Kuhn, J. A., Flesher, S., & Shepherd, M. (2016). Inhaler Technique in Children With Asthma: A Systematic Review. <i>Academic Pediatrics, 16(7)</i> , 605-615.	I	Counselling children on correct inhaler technique was associated with improved technique among children in multiple studies. Highlights the importance of members of the health care team instructing children and their caregivers on the proper use of their inhalation devices, and correction of mistakes when made, at every opportunity to ensure effective medication delivery.
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