Your Address

Dear xxxxxxx

**Protect pupils with allergies**

In a report published on 19th March 2024 by Benedict Blythe Foundation, it was found 70% of English schools do not have the combined recommended allergy safeguards in place.

The concerning data also showed a ‘postcode lottery’ where it is a matter of chance whether a child attends a school with lifesaving medication (50/50 chance), training on managing allergies in school (61% schools do not provide this) and policies to communicate how allergies are managed (1 in 3 schools do not have allergy policies). This variance puts children needlessly at risk of suffering allergic reactions.

In April 2024, Benedict Blythe Foundation presented Secretary of State for Education with an open letter, outlining the recommendations for immediate change. This was a united call, backed by 40 organisation from across the allergy, health and education sectors.

In August 2023, a [petition](https://petition.parliament.uk/petitions/633614) received in excess of 13,000 signatures and called for these voluntary measures to be made mandatory. In a [Westminster Hall debate](https://hansard.parliament.uk/commons/2023-11-30/debates/A9F298AA-3310-40A6-99E6-AC26867AC1F0/SchoolPupilsWithAllergies) in November 2023, MPs from across parties made the same call to Ministers to instate legal protections for pupils with allergies. The response was that statutory guidance was proportionate.

In 2016 and 2017, three food-allergy related deaths occurred in schools: a 9-year-old boy died from anaphylaxis due to an undetermined allergen, a 14-year-old and 13-year-old boy, both with dairy allergies, died after suffering allergic reactions to school dinner and physical contact with a piece of cheese, respectively. Inquests identified key contributions included a lack of adequate staff training resulting in delayed and incorrect administration of adrenaline, along with policy implementation issues relating to AAIs being out of date and not readily available. **In 2021, Benedict Blythe collapsed at school and died from anaphylaxis aged 5-years old.**

Food allergy affects around 7.0–8.0% of children worldwide or about two children in an average-sized classroom of 25 children (Santos et al., 2022), equating to 680,000 English school-aged children. Children spend at least 20% of their waking hours in school. Thus, not surprisingly, data show that 18% of food allergy reactions and 25% of first-time anaphylactic reactions occur at school (Higgs et al., 2021). Moreover, anaphylaxis due to food allergy occurs in schools more than in any other setting (Muraro et al., 2014). Food-related anaphylaxis has increased considerably over the past 20 years, particularly in younger children (0 to 4 years).

Currently schools and teachers are expected to follow up to ten guidance and policy drivers, coming from Department for Education, Department for Health and Social Care, and Food Standards Agency (FSA). Not only are the expectations unclear, but few complaints are followed up and Ofsted have no requirement to check schools are even delivering on their statutory obligations. Often the statutory guidance remains open to interpretation. Parents are often faced with the heartbreaking choice of whether to send their child to the school that can keep them safe, or the school that is right for the child’s overall education.

England lags behind, with legislation having been in place for almost two years in USA and Canada. We ask you to support our ask for a bundle of measures including legislation, funding and checks that would make it mandatory for all schools:

* All schools should report all known instances of allergic reactions and near-misses
* All schools should have a specific allergy policy which includes an anaphylaxis plan
* All schools should have an individual healthcare plan in place for every child with an allergy
* All schools should be funded to hold in-date spare auto injector pens (AAIs) with all staff trained in their use
* All school staff should be trained in allergy awareness, allergy management, and emergency response including administration of medication

You may know of children in your life or your constituency who have allergies and are at risk of anaphylaxis. Legislation will ensure all schools adopt the pillars of good practice, meaning children have greater protection and reduced risk while they’re at school.

If you have any questions, please contact [helen@benedictblythe.com](mailto:helen@benedictblythe.com) or visit [www.benedictblythe.com/safe-schools](http://www.benedictblythe.com/safe-schools) where you can follow the campaign.

**We would like your help to support our campaign in the following ways:**

* To make a request to Department for Education that consultation begins with interested parties
* To table parliamentary questions on the subject (Benedict Blythe Foundation is happy to provide you with questions if you would like)
* To request the issue is looked into by either the Education Select Committee or Health Select Committee in a one-off hearing or an inquiry
* To promote the research and recommendations across your network
* To make a public commitment to this cause as part of your campaigning in the next General Election

Yours sincerely

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