

# ALLERGIES IN SCHOOLS TEACHER SURVEY 2023

THE EXPERIENCES OF PARENTS, CHILDREN AND TEACHERS WHO ALL HAVE A  
ROLE IN MANAGING ALLERGIES IN SCHOOLS.



BENEDICT BLYTHE  
FOUNDATION

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**A SURVEY TO UNDERSTAND THE  
MANAGEMENT OF ALLERGIES  
IN SCHOOLS, AND TO HEAR THE  
EXPERIENCES OF TEACHERS.**

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# ABOUT THE ALLERGIES IN SCHOOLS, TEACHERS' SURVEY

This national survey provides educators and policymakers, at every level, with a unique insight into the views and experiences of teachers. The Benedict Blythe Foundation carried out the survey in the autumn of 2023, gathering the insights of a group of 244 teachers from across the United Kingdom.

The Allergies in Schools Teacher Survey reveals that teachers lack clear allergy information about the pupils in their care, receive inadequate training, and rely on their own initiative to adopt inclusive practice.

This survey is full of stats that should make us consider how we can support teachers, and all school staff, to be knowledgeable and confident in managing allergies in a school environment.

Our hope is that the Allergies in Schools Teacher Survey will play an important role in ensuring that improvements made to allergy management in schools are based on evidence and the experiences of the teachers on the frontline of managing allergies in school.

**“I HAVE NEVER HAD ANY SUCH EXPERIENCE WITH STUDENT ALLERGIES, HOWEVER, THIS SURVEY HAS GIVEN ME PAUSE FOR THOUGHT AND INSTILLED IN ME A DESIRE TO LEARN MORE ON THIS SUBJECT.” – TEACHER RESPONDENT**

# WHAT THIS TEACHER SURVEY TELLS US

The Allergies in Schools Teacher Survey reveals that teachers lack clear allergy information about the pupils in their care, receive inadequate training, and rely on their own initiative to adopt inclusive practice. It was evident teachers cared hugely about their pupils, and felt supported by their schools, however they didn't consistently have the education or access to information and medication needed to create a safe environment.

**1/4 OF TEACHERS WEREN'T AWARE HOW MANY CHILDREN HAD ALLERGIES IN THEIR SCHOOL**



**1.5 TEACHERS IN EVERY 10 DIDN'T KNOW WHICH CHILDREN IN THEIR CLASS HAD ALLERGIES**



**1/3 OF TEACHERS HAVE NOT HAD ANY ALLERGY OR ANAPHYLAXIS TRAINING AND ONLY 4% HAD RECEIVED TRAINING IN ALLERGY AWARENESS**



**40% OF TEACHERS DON'T FEEL CONFIDENT OR PREPARED TO MANAGE AN ALLERGIC REACTION**





# THE IMPORTANCE OF KNOWLEDGE

25%

OF TEACHERS WEREN'T  
AWARE HOW MANY  
CHILDREN HAD ALLERGIES  
IN THEIR SCHOOL



15%

DID NOT KNOW HOW MANY  
CHILDREN HAD ALLERGIES  
IN THEIR CLASS



ALMOST **1** IN **3** TEACHERS HAD NEVER RECEIVED ALLERGY TRAINING



ONLY **4%** RECEIVED ANY TRAINING COVERING ALLERGY AWARENESS OR PREVENTION BEYOND ANAPHYLAXIS FIRST AID AND AAI ADMINISTRATION



**4** IN **10** TEACHERS REPORTED NOT HAVING ACCESS TO AN INDIVIDUAL HEALTHCARE PLAN (IHP) FOR A CHILD WITH ALLERGIES.



Individual healthcare plans provide a teacher with information on how to manage a specific health condition, including prevention, management and treatment. These should be uniquely developed for each child. Those who did have access to an IHP were able to describe them in detail and found them to be useful tools.



## TEACHERS ARE NOT GIVEN THE TRAINING OR INFORMATION THEY NEED

It was clear that good practice exists, however a significant number of teachers surveyed had gaps in their knowledge, specifically about which children in their school, and in some instances in their class, have allergies.

Where teachers were in receipt of training, this was described positively with some examples including university-led training, FSA modules and AllergyWise. Those receiving training, and specifically those receiving allergy awareness training, were in the minority, which is concerning.

The combination of being unaware of which children have allergies, and how to manage them effectively to prevent reactions, puts teachers and children at risk.





# 64%

OF TEACHERS KNEW THEY HAD A SCHOOL ALLERGY POLICY, **HOWEVER...**



# 36%

EITHER DIDN'T KNOW OR STATED THEIR SCHOOL DID NOT HAVE AN ALLERGY POLICY





# COMMUNICATING ALLERGIES IN SCHOOLS

# TEACHERS' EXPERIENCES IN THEIR OWN WORDS

“Some parents are very clear and others are sometimes vague or do not inform us.”

**“Parents don’t update school on changes in the allergy or update allergy plans yearly.”**

“We do not have a school nurse and do not encounter healthcare professionals in relation to allergies.”

**“We have photos of pupils up and all staff are aware. There’s also a centralised database accessible to all staff to double check pupil information and confirm any health or allergy need.”**

“School provide comprehensive info. Parents not so much.”

**“Parents of non-allergy children do not understand the severity.”**

“Dialogue with children and parents/ carers is key.

**“Unsure how we communicate. Maybe done by senco but it’s not shared effectively and efficiently with teachers.”**

“I go out of my way to have great home / school links.”

**“It’s reliant on parents reading the information sent out or attending meetings, and also on them cooperating / also being vigilant (for example, to understand the school is nut free).”**

“I have been handed information sheets by students, about Crohn’s, Coeliac and new anaphylaxis. That’s all.”

**“The school nurse and school write the health care plan together with input from parents and this is reviewed in a team around the child meeting.”**

“Admin staff create care plans and deliver info of these to staff to keep in class folders for all staff to access. Also displayed in staff room so awareness of children across the school is there.”

## EFFECTIVE COMMUNICATION WAS A THEME AS A KEY BARRIER TO SUCCESSFUL ALLERGY MANAGEMENT

An area of concern consistently raised was about parents communicating their child's allergy information to the school and keeping it updated, and parents of non-allergic children ignoring information to send in prohibited food. Consideration needs to be given on how to address these issues and consider the needs of families where English is an additional language.

As over 1 in 3 teachers aren't provided with clear allergy policies, it's hard for them to know they're doing the right thing in allergy management. Most teachers said the role of communicating with parents and school nurses was the responsibility of the Head or admin staff. They described a desire for more school nurse contact and for information gathered to be shared. The school nurse to school ratio is currently 1:12\*, so it's unsurprising teachers struggle to get time on





**6** OUT OF **10**  
TEACHERS FELT **CONFIDENT**  
OR **VERY CONFIDENT** IN  
IDENTIFYING AND MANAGING  
ALLERGIC REACTIONS.







# CONFIDENCE AND PREPAREDNESS

# 4 IN 10

TEACHERS ARE NOT CONFIDENT IN THEIR ABILITY TO RESPOND TO A SITUATION WHERE A CHILD IS DISPLAYING SIGNS OF ALLERGIC REACTION OR ANAPHYLAXIS



THIS EQUATES TO

# 203,273\*

TEACHERS IN ENGLAND UNPREPARED TO RESPOND TO A SEVERE ALLERGIC REACTION

They describe a need for more information and training to be better prepared for a medical emergency.

**Teachers don't have access to life-saving medication.**

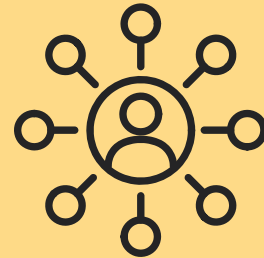
**39%** of teachers said they were either unaware if their school had spare adrenaline pens, or that they did not have them.

SOME OF THE CHALLENGES DESCRIBED BY TEACHERS INCLUDED PARENTS NOT ALWAYS SENDING IN EPI PENS AND HAVING TO BE CHASED FOR THEM. THIS WAS PARTICULARLY WORRYING IN ENVIRONMENTS WITHOUT AAIs ON SITE.

## ACCOMMODATIONS OR MODIFICATIONS MADE BY TEACHERS FOR PUPILS WITH ALLERGIES:



**MONITORING ALL SNACKS AND LUNCHBOXES FOR PROHIBITED ITEMS**



**ADAPTING SCHOOL ACTIVITIES OR BAKING TO BE SAFE AND INCLUSIVE**



**COMMUNICATING TO PARENTS ABOUT SAFE AND UNSAFE FOODS**



**EXPLAINING ALLERGIES IN LESSONS (BIOLOGY, FOOD TECH ETC)**



**ADVOCATING FOR EMOTIONAL SUPPORT FOR CHILDREN FOLLOWING A REACTION**



**INCREASED HAND WASHING AND CLEANING**

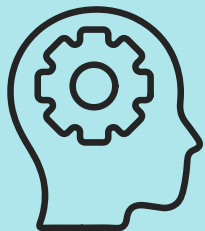
## WHILE MOST SCHOOLS DO SEEM TO BE ACTIVELY TRYING TO CREATE ALLERGY SAFE SPACES, COMMON THINGS THAT REPEATEDLY HAPPEN ARE:



**SCHOOL CATERERS CHANGING MENUS AND NOT ADVISING ON IMPACT ON ALLERGIES**



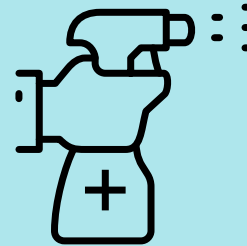
**NO ACCESS TO ALLERGY INFORMATION FOR SUPPLY TEACHERS**



**CHILDREN NEED SUPPORT IN IDENTIFYING ALLERGENS**



**PARENTS NOT REALISING THAT EVEN EATING PRODUCTS ON THE WAY INTO CLASS, WITHOUT HAND-WASHING, COULD BE AN ISSUE**



**ACCESS TO CLEANING PRODUCTS WHEN AD HOC CONTAMINANTS ARE FOUND SO THE SPACE CAN BE DEEP CLEANED**



## TEACHERS ARE RELIED ON TO PROACTIVELY ACCOMMODATE ALLERGIES SAFETY

Around **40%** of teachers don't feel confident or prepared managing allergic reactions. This is unsurprising given the lack of training and information provided to them, with almost the same percentage being unaware if the school holds spare AAIs.

While accommodations and modifications are described by most teachers surveyed, these do appear to be initiatives generated by those individuals. Although this gives a personalised approach, it does mean that teachers are relied upon to have the knowledge and judgement to do the right thing - and to take time to plan and research.

ONE RESPONSE FROM A TEACHER WHO RATED THEMSELVES AS CONFIDENT, INCLUDED, **"I DON'T KNOW WHAT I DON'T KNOW. SO I MIGHT THINK I'M DOING OK BUT I MIGHT NOT BE!"**





# WHEN IT COMES TO HOW SUPPORTED STAFF FEEL:

82%

TEACHERS FELT SUPPORTED



18%

TEACHERS DIDN'T FEEL SUPPORTED





# TEACHER EXPERIENCE

# WHAT IT FEELS LIKE FOR TEACHERS

“IT CAN BE VERY DAUNTING WHEN CARING FOR THIRTY CHILDREN WITH DIFFERENT NEEDS PARTICULARLY DURING THINGS SUCH AS CLASS PARTIES WHEN CHILDREN ARE INVITED TO BRING SNACKS IN.”

“I FIND IT VERY STRESSFUL AND DIFFICULT.”

“RATHER THAN BEING ABLE TO MAKE AN INFORMED CHOICE, WE ARE SOMETIMES FORCED TO COMPLETELY EXCLUDE THAT CHILD WHICH DOESN'T SEEM FAIR.”

“IT IS A GREAT RESPONSIBILITY. SOMETIMES I FEEL WE SHOULD HAVE SOME EXTRA STAFF FOR SUCH SITUATIONS.”

“THE ONLY REASON I FEEL CONFIDENT IN DEALING WITH ALLERGIES IS BECAUSE MY SON HAS A NUT ALLERGY, NOT BECAUSE OF SCHOOL POLICIES. VERY FEW SECONDARY TEACHERS WOULD BE AS AWARE AS I AM.”

# TEACHERS' DESCRIPTIONS OF THE SUPPORT THEY WOULD LIKE, IN THEIR OWN WORDS

“Whole staff training and overt guidance.”

.....

**“Clearer information about pupils with allergies. Training for how to respond to a reaction.”**

.....

“I would really like proper training, but they won't do anything for us.”

.....

**“School nurse support would be useful.”**

“More training and awareness of allergy management is needed particularly with understanding less obvious places allergens can be found.”

.....

**“The LA [Local Authority] could do more in terms of standardisation in all schools.”**

.....

“A full school list of allergies.”

## PRIORITY AREAS IDENTIFIED

### **More training**

Especially in places where there is no training, or it isn't consistent.

### **Better training**

Ideally in person, especially when learning about drug administration.

### **Tailored training**

Specific to the needs of the children within the school and the school environment.

### **Better Standardisation**

And more support from Local Authorities to keep children equally safe across all school settings.



## TEACHERS IDENTIFY AREAS OF SUPPORT THEY NEED TO MANAGE ALLERGIES

Consistently and clearly teachers described the ways they could be better supported in their role to manage allergies. They asked for training and clearly communicated information about processes and lists of children with allergies.

Positively, the majority of teachers felt well supported to manage allergies in the school environment.

Several teachers who themselves had allergies commented that they didn't feel they were afforded sufficient protection.





# GENERAL THEMES

## WEIGHT OF RESPONSIBILITY

TEACHERS ARE HAVING TO MANAGE INCREASINGLY COMPLEX ALLERGY PROFILES AND INCREASING NUMBERS OF CHILDREN WITH ALLERGIES, WITH SEVERE ALLERGIC REACTIONS IN CHILDREN INCREASING BY **72% IN THE LAST SIX YEARS**.

THIS PUTS A LOT OF EXTRA WORRY ON TEACHERS AND THAT WAS FELT THROUGHOUT THE SURVEY. TEACHERS FEEL A LOT OF RESPONSIBILITY FOR MANAGING, AND PREVENTING THESE POTENTIALLY LIFE THREATENING INCIDENTS. EVEN IF WELL TRAINED, IT IS STILL A GREAT RESPONSIBILITY.

## ACCESS TO INFORMATION

A SIGNIFICANT CHALLENGE DESCRIBED WAS LACK OF ACCESS TO INFORMATION. THIS INCLUDED FACTS ABOUT A CHILD AND THEIR SPECIFIC ALLERGIES AND HOW TO MANAGE IT. CONCERNS WERE RAISED ABOUT HOW THE LACK OF AVAILABLE INFORMATION SET SUPPORT STAFF, SPECIALIST TEACHERS AND SUPPLY STAFF UP TO FAIL.

MORE GENERALLY, INFORMATION WASN'T PROVIDED TO TEACHERS ON THE SCHOOL'S APPROACH TO ALLERGY MANAGEMENT AND STANDARD PROTOCOLS, THE IMPACT BEING THAT TEACHERS OFTEN TOOK THEIR OWN INITIATIVE IN IMPLEMENTING PROCEDURES.

# GENERAL THEMES

## A COLLABORATIVE EFFORT

TEACHERS CLEARLY DESCRIBED THE IMPORTANT ROLE OF EVERYONE IN THE SCHOOL COMMUNITY IN KEEPING CHILDREN WITH ALLERGIES SAFE. MANY GAVE EXAMPLES OF WHERE SAFETY GUIDELINES WERE COMMUNICATED TO PARENTS BUT THESE WERE IGNORED. MENTIONS OF PACKED LUNCHES WITH PEANUT BUTTER OR CHOCOLATE SPREAD FEATURED STRONGLY. IT'S CLEAR THAT EDUCATING AND COMMUNICATING WITH PARENTS IS AN AREA FOR IMPROVEMENT.

THERE WERE EXAMPLES OF GOOD COLLABORATION ACROSS TEACHERS AND SUPPORT STAFF, WHO COLLECTIVELY DEvised WAYS TO MAINTAIN INCLUSION FOR CHILDREN WITH ALLERGIES, PARTICULARLY IN ACTIVITIES THAT REQUIRED FOOD PREPARATION.

## EDUCATION AND KNOWLEDGE

MANY TEACHERS INTERVIEWED HIGHLIGHTED THE LACK OF TRAINING. SOME DESCRIBE HAVING TRIED TO ACCESS EDUCATION FOR MANY YEARS BUT WITHOUT SUCCESS, AND OTHERS EXPRESSED FRUSTRATION ABOUT HAVING TO RELY ON FACTSHEETS BEING PROVIDED BY PARENTS. IT WAS CLEAR THAT TEACHERS CARED DEEPLY ABOUT THE PUPILS IN THEIR CARE AND THAT THEY SAW THE NEED FOR EDUCATION ON THE SUBJECT OF ALLERGIES, BUT DIDN'T FEEL THEY HAD THE KNOWLEDGE TO PROVIDE THE BEST CARE.

## OUR FINDINGS IN THE CONTEXT OF PREVIOUS SURVEYS

A survey of over 100 teachers conducted by The Allergy Team in April 2022 found that **39% didn't know how many pupils had food allergies**, and over a third (**38%**) **didn't know how many of their pupils carried adrenaline pens**. Our sample shows a modest improvement in these figures, with **25% of teachers in our report being unaware**.

A survey of schools in the Severn NHS Trust in 2020 found **only 36% children had medication available in school**. In this study, **44% with an allergic child had no staff trained to administer AAI**s and **only 43% schools with a nut allergic child gave information to all teachers about nut allergy**. Surprisingly, **31% couldn't name signs of a mild acute allergic reaction**, and **33% couldn't identify signs of a severe reaction**. Our figures show a small improvement on these figures, however still well short of what could be deemed a safe environment for pupils with allergies.

A 2020 study in West Scotland found that only **27% had personalised allergy plans**, and **less than half stored auto injectors accessibly**. **Only 16% had an allergy management policy**. While schools felt prepared, **only 5% were considered 'equipped & ready,'** with an average preparedness score of 50%. **Almost**

**all schools (93%) supported the need for a national allergy management policy and more training**. In our UK-wide survey, **36% now report having an allergy policy in their school, an increase of 20%**. Interestingly, there is a comparison between teachers feeling supported and prepared, but also some dissonance in acknowledging the need for policy, training and information.

A 2016 survey in Cumbria carried out pre and post training to teachers, **found 39% head teachers felt confident in dealing with an allergy emergency before training, this figure increased to 89% post-training**. In these schools, **12% reported that a personalised allergy action plan was not available and only 44% of head teachers reported that they were prepared to manage a severe allergic reaction in a child with no previous history of allergy**.

A 2016 survey at UCLAN found that only **47% of teacher respondents felt confident in managing anaphylaxis**. **Most schools (81%) expressed the need for more training**. The level of confidence in our survey had increased by 13 percentage points, however there's correlation in the need for additional training. While exact percentages may vary, the trends appear to be consistent across all surveys carried out in the last 9 years.

# METHODOLOGY

The Allergies in Schools Teacher Survey took place between 13th October 2023 and 7th December 2023 amongst 244 qualified teachers in UK, with an even spread across key stages from EYFS to KS4 in a mix of maintained and non-maintained schools.

All data collection and analysis has been carried out by expert staff from The Benedict Blythe Foundation and data was collected using an online surveying tool.

Where population equivalents have been estimated, this is based on the 468,371 published FTE teacher figure (DfE, June 2023). As the survey is not polling the entire population of teachers, any figures should assume a 2.5% margin of error.

This is the first such survey, with an expectation to repeat it annually for comparison.

## \*REFERENCES

Page 12 - [Teacher numbers \(Government Headline facts and figures - 2022/23\)](#) School nurse numbers ([NHS Workforce statistics 2021](#))

Increase in number of severe allergic reactions

- [narf](#)

## Page 27 - Comparisons

- [The Allergy Team](#)
- [Severn Trust](#)
- [West Scotland](#)
- [Cumbria](#)
- [UCLAN survey](#)

THE BENEDICT BLYTHE FOUNDATION WAS ESTABLISHED IN 2022 IN MEMORY OF 5 YEAR OLD BENEDICT. AN ENTHUSIASTIC LEARNER, HE LOVED TO 'PLAY NUMBERS' AND LEARN ABOUT THE NATURAL WORLD.

INSPIRED BY HIS PASSION FOR KNOWLEDGE, EXPLORATION AND PLAY, BENEDICT BLYTHE FOUNDATION SEEKS TO SUPPORT OTHER CHILDREN TO HAVE THE SAME POSITIVE RELATIONSHIP WITH LEARNING AND EDUCATION REGARDLESS OF THEIR ABILITY, AND REMOVE BARRIERS TO EDUCATION BY CREATING SAFE AND INCLUSIVE SPACES FOR CHILDREN WITH ASTHMA AND ALLERGIES.



CREATED BY SARAH BOYD & MEG PEPPIN WITH THE SUPPORT OF



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COMPILED BY

