



Amending

# ANNUAL REPORT

## MARCH 2019

**The British Allergy Foundation Trustees' Annual Report  
(including Directors' Report) year ended 31st March 2019**

The amended accounts replace the original financial statements and are now the statutory statements. The amended accounts have been prepared as at the date of the original accounts, and not as at the date of revision and accordingly do not deal with events between those dates. The accounts have been amended to include an audited full version of the financial statements.



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## MESSAGE FROM THE CHAIR AND CHIEF EXECUTIVE

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For many years our calls to raise awareness of the severity of allergy and to make real changes to the quality of life for everyone living with allergy, has often appeared to have fallen on deaf ears. Allergy is finally beginning to be considered with the seriousness and gravity that it should, but it is incredibly saddening that it has taken a number of high profile deaths to drive this change.

We should not have to wait for people to die from their severe allergies to change laws to make people safer. We should not need to see more grieving families in news articles for people to finally take allergy seriously and for them to understand that it is, for far too many, a life-threatening condition. But sadly, it has taken all of this to bring the seriousness and severity of allergy into the spotlight and get people to take notice and listen.

These high profile cases are devastating to those close to them and profoundly sad to those of us at a further distance. However, it has spurred us to redouble our efforts to further raise the profile of allergies at all levels, to ensure that people affected by allergy receive the best possible care and support and are taken seriously. We extend our thanks to all of those who continue to work with us in this mission for their generous support and donations, which ensure that those whose lives are affected by allergy have access to advice and information and are supported by advocacy through our charity.

We would like to see a world where people with allergies are not losing their lives to reactions, where they are not made to feel humiliated for wanting to eat in a restaurant safely, where they are able to go on holiday without fear they will be refused a flight home because of misunderstanding about their allergy, where they can confidently, and safely, eat a meal without worrying it was labelled wrongly, where the air they breathe is not impacting upon their allergies and where young children with allergies are not teased or bullied or made to feel different.

We have seen great strides this year with our involvement in government round table discussions considering the needs of people with allergies on flights, changes to labelling announced to make eating out safer and we have been approached by restaurants, airlines and other businesses that want us to help them make things safer for people with allergy. We are also involved in discussions on the impact of air quality to make sure people with allergy are considered and we have seen a huge response from schools engaging with our Schools Allergy Action Group project, which we launched this year to help schools towards a better understanding of their allergic pupils' needs.

We still have a long way to go before our mission and vision are achieved and as we develop our next five year strategy over the next 12 months, we will continue to focus on ways to empower people with all allergies and help give them a voice, being here to give them the support and advice they need to manage their condition in the best possible way.

We hope that you and others will continue to support us in this, as, with your generous donations and contributions, together we can improve the lives of all living with allergic disease.



Lynne Pritchard  
Chair



Carla Jones  
CEO

The Trustees present this report and the audited financial statements of the charity for the year ended 31 March 2019. The Trustees have adopted the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" (FRS 102) in preparing the annual report and financial statements of the charity. The financial statements have been prepared in accordance with the accounting policies set out in notes to the accounts and comply with the charity's governing document, the Charities Act 2011, Charities and Trustee Investment (Scotland) act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland published on 16 July 2014 (as amended by Update Bulletin 1 published on 2 February 2016).

## Constitution

The British Allergy Foundation is a company limited by guarantee and a registered charity governed by its Memorandum and Articles of Association. The group uses the operating name Allergy UK and is known to many contacts by that name.

**Charity numbers:** 1094231 (England and Wales) and SC039257 (Scotland)

**Company number:** 4509293

**President:** Professor P. Howarth

**Vice President:** Mrs. M. Brydon

## Trustees of the charity

The directors of the charitable company are its trustees for the purposes of charity law. The Trustees who have served during the year and since the year end were as follows:

Ms. L. Pritchard (Chair)

Mrs. S. Stoneham (Vice-Chair)

Professor S. H. Arshad

Mr. R. Daby (appointed Sept 2018)

Mr. R. Dudley-Southern MBE

Mr. M. Elliott

Professor A. Fox (resigned Sept 2019)

Dr. B. Hewitt

Mr. J. Redding

Dr. G. Stiefel (appointed May 2019)

**Chief Executive Officer:** C. Jones

**Company Secretary:** C. Jones

**Registered Office:** Planwell House, LEFA Business Park, Edgington Way, Sidcup, Kent DA14 5BH

**Auditors:** MHA MacIntyre Hudson Chartered Accountants Statutory Auditors, 71 New Dover Road, Canterbury, Kent CT1 3DZ

**Principal Bankers:** Lloyds Bank plc.

## WHO WE ARE

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The British Allergy Foundation was formed in 1991 by a group of leading UK allergists who believed that those living with allergic disease have the right to good quality support, education, and advice about their condition throughout their lives. The UK health system only provides limited allergy services and the British Allergy Foundation, operating as Allergy UK since 2001, is the charitable organisation established to fill the gap and provide this support. It also lobbies and advocates for improved recognition of the seriousness of allergy and its impact on the quality of life of those living with allergic disease.

Allergy UK's mission is to 'raise the profile of allergy at all levels and to ensure that everyone affected by allergy receives the best possible care and support by increasing awareness, knowledge, and understanding of allergic disease'. Working closely with healthcare professionals and other partners in the field of allergy and immunology in the UK, Europe, and across the globe, as well as patients and their families, it aims to drive forward advances in diagnosis, prevention, treatment and management of the full range of allergic disease (e.g. food, respiratory, skin, venom, drug and occupational allergies) and encompasses all degrees of severity from mild and moderate to acute reactions, including anaphylaxis.

.....

“ those living with allergic disease have the right to good quality support, education, and advice about their condition throughout their lives ”

.....



# ***Our mission and vision***

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*Our mission is to raise the profile of allergy at all levels across the UK and our vision is that everyone affected by allergy receives the best possible care and support.*



# AIMS AND OBJECTIVES

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Allergy UK's mission is to raise the profile of allergy at all levels across the UK and our vision is that everyone affected by allergy receives the best possible care and support. Our objectives are set out in the Articles and Memorandum of Association and are summarised here:



1

To support and relieve people who are living with allergic disease

2

To increase awareness, knowledge and understanding of allergic disease

3

To promote research into the causes and treatment of allergic diseases and widely sharing and publishing the results

4

To generate sustainable income for our work, awareness and research into allergic diseases

## Public Benefit Statement

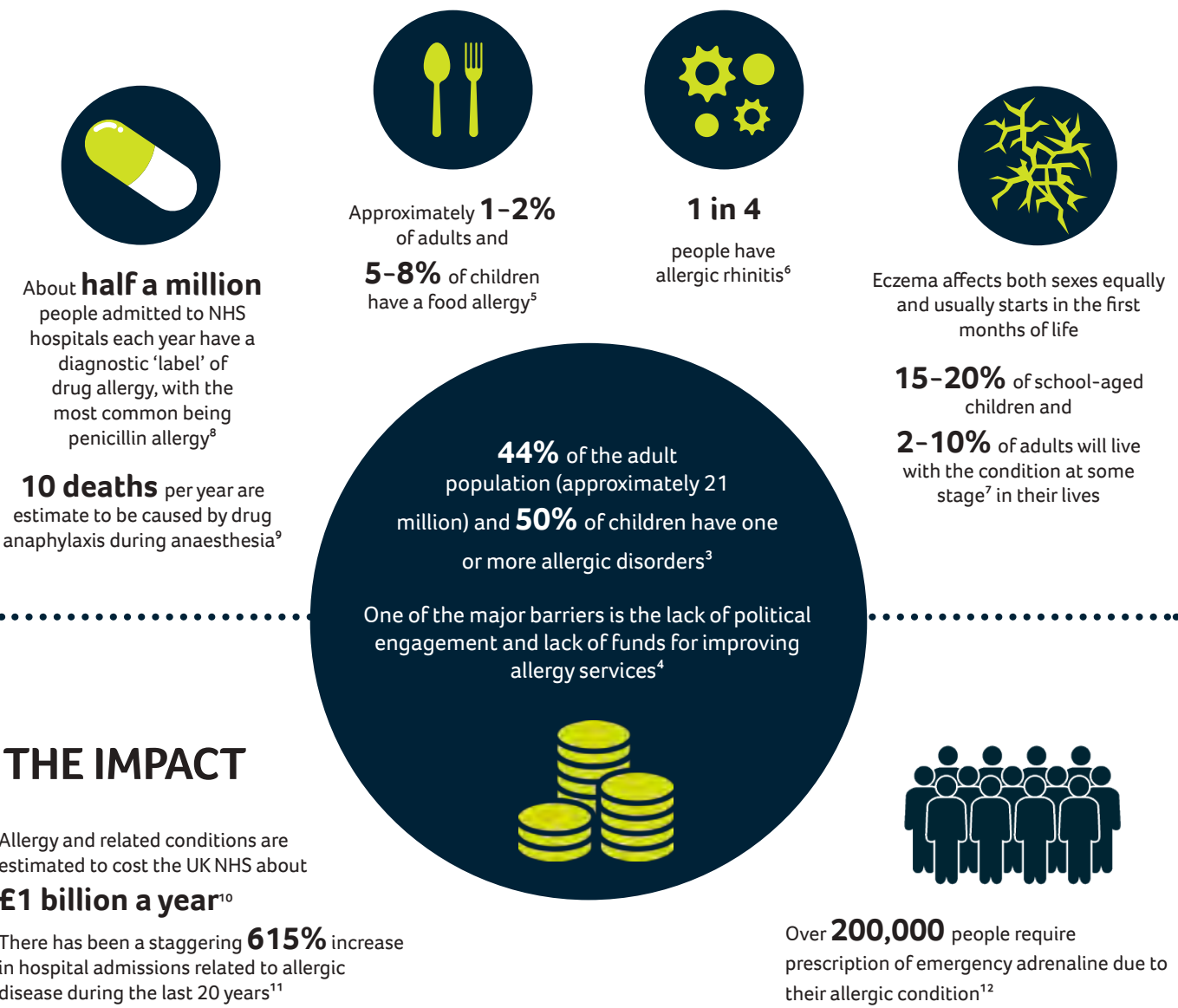
The Trustees confirm that they have referred to the advice contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aim and objectives and in planning future activities. The Trustees believe that the activities undertaken in the year for achieving the objectives of the charity have met the public benefit requirement.



# IN THE UK

Allergic disease is a modern epidemic<sup>1</sup> influenced by a number of complex issues such as globalisation, climate change, how foods we eat have changed and are manufactured, the pollution in the air we breathe, the products we are using in our homes and on our skins, how we live today and many other impacts from our external environment. During the last 60 years ‘allergic diseases

have increased globally in prevalence, complexity, and severity’, becoming a public health concern.<sup>2</sup> The cause of this increase is not fully understood, nor are the profound physical, mental, social, and economic implications for those living with allergic disease and their wider social network, or for the health systems that bear the impact of this ‘allergic explosion’.



# WHY OUR WORK IS MORE IMPORTANT THAN EVER

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Over the past year, allergic disease has gained more attention in the mainstream media than ever before. Unfortunately, this has been prompted by the tragic deaths of several young people who have experienced severe allergic reactions. Coroners' verdicts have aligned with what have always been our core messages - that there needs to be greater knowledge, recognition and response to the issues faced by those living with allergic disease. Encouragingly, we have begun to see more interest from government departments and the general public in the challenges faced by people living with allergy, but there is still much to do.

## Knowledge of allergy

Despite one in three of the UK population living with the disease, knowledge of allergy within our health service remains poor. Increased training in primary care and additional specialty posts to support correct diagnosis and treatments are urgently needed to provide appropriate levels of care services.

## Access to prescriptions

However, what we have seen is reduced access to prescriptions for some allergic conditions through the 'NHSE Guidance on the conditions for which over the counter items should not be routinely prescribed in primary care'. This has an additional potential socio-economic impact on people living with allergic disease. Our lobbying of over 200 Clinical Commissioning Groups (CCGs) on this issue highlighted that generally CCGs agreed that patient communication was crucial in clarifying the guidance in order to avoid inequitable treatment for those with allergic disease. In our communication with CCGs, we outlined our concerns about the removal from prescription of over the counter medication that effectively treats long term allergic conditions.



## Access to specialist care

There is undoubtedly a "postcode lottery" when it comes to accessing specialist care for allergic conditions. The fact is that without effective diagnosis and expert assessment, many who live with allergy find themselves struggling with symptoms and anxiety as their condition can have a significant and negative impact on their lives. This includes loss of school days and educational attainment, economic impact through loss of working days, health and social disadvantage, financial burdens on both individuals (and the health services) and, at the most extreme, loss of life. It can be frightening and restrictive to live with a condition which could cause a life threatening reaction at any time. Many people turn to Allergy UK for help and support, as our Helpline and website statistics attest.

## A need for greater recognition

It is time for a better understanding of the realities of living with an allergic condition – the risks and the isolation for those living with allergy has the potential to severely impact on their quality of life. It is to these people that Allergy UK is committed in its continuing advocacy for greater recognition and understanding of this disease and change within our society. We will continue to provide support and advice, stepping up our activities over the following year in our ongoing mission to bring about the changes that are so badly needed.

## KEY DRIVERS 2016-2020

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In 2018-2019 Allergy UK continued to focus on delivering the drivers within our four year Strategic Plan (2016-2020). This involved supporting those living with allergic disease, influencing government and other agencies, educating the public and health and other professionals, as well as investing in and supporting areas of research to provide evidence of the impact of allergy on quality of life for those living with this disease.

1

Empower people with allergic disease to reduce the risks of allergy and its impact on individual and family life

2

Allergy UK is seen as the leading UK patient organisation for allergy and immunology by healthcare organisations

3

Promote awareness and understanding of allergic disease amongst the population in general and healthcare professionals in particular

4

Promote, support and, where possible, fund research into any aspect of allergic disease

5

Campaign for improvements in clinical services, education, workplace settings and other changes in society, which would lessen the risk and impact of allergic disease for those affected by it

6

Successful income generation to secure the sustainability of the charity

7

To be a highly effective, dynamic and modern charity that attracts high quality personnel and has a credible reputation for high standards and excellent delivery

8

The strategic plan is underpinned by a proactive, modern communication and marketing strategy

## ALLERGY HERO AWARDS

Allergy Heroes from across the UK were celebrated and congratulated at a special ceremony in April as we hosted our second Allergy UK Allergy Hero Awards.

The glittering event took place at Haberdasher's Hall in London. It recognised and celebrated unsung heroes who have either shown great support for someone living with allergy; done amazing things despite suffering from allergy themselves; or who have helped the 21 million allergy sufferers in the UK by doing their best to raise awareness and understanding of this often debilitating condition or have provided innovative research and treatments to improve symptoms of the disease.

The event showcased a number of inspiring stories, including that of Arlo Gillard-Moss. Arlo was the winner of the Child Allergy Hero Award and was nominated for the positive and enthusiastic approach he takes to his multiple food allergies. He won a public vote from three

shortlisted nominees, to be named winner. The six year old was presented his award by Dr Bill Frankland, winner of the Lifetime Achievement Award who, at 106, has dedicated his life to improving the understanding and treatment of allergic disease.

The event was also the launch of Allergy UK's new video to help raise awareness and generate more understanding of the seriousness and impact allergy has on people with allergy. The video features a number of case studies with different allergic conditions speaking of their experiences and can be viewed on our website, [www.allergyuk.org](http://www.allergyuk.org). Thank you to Eurofins, for their donation, which was used to create the video.

Thank you to Nutricia Advanced Medical Nutrition, Thermo Fisher, IDS, Aimmune, Allergy Therapeutics and Molyneux Press who sponsored the event.





## THE WINNERS WERE:

### Allergy UK's Lifetime Achievement Award

Dr Bill Frankland

### Child Allergy Hero Award

Arlo Gillard-Moss

### Allergy Hero Innovation Award

Milk Allergy in Primary Care Team

### Community Allergy Hero Award

Over the Wall UK Charity

### Friend, Family or Colleague Allergy Hero Award

Natalie Pullen

### Hospital Clinical Team Allergy Heroes Award

Imperial College London Paediatric Research Unit Team

### Healthcare Professional Allergy Hero Award

Patricia Herbert

The Child Allergy Hero Award, Friend, Family or Colleague Allergy Hero Award and Community Allergy Hero Award winners were chosen by an online public vote earlier in the year.

Allergy UK has continued to be in touch with winners and has partnered with the charity Over the Wall for an allergy camp for children and young people in winter 2019.





## FUNDRAISING HEROES

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This year, we have received continued support from our dedicated fundraisers. They have taken part in sport challenges and other activities to raise vital funds and awareness to help the work that we do. We thank them for their ongoing support without which, our work would not be possible.

### HOW OUR FUNDRAISING INCOME WAS GENERATED:

CORPORATE

**33%**

MASS PARTICIPATION EVENTS

**28%**

GRANTS

**23%**

GENERAL DONATIONS

**11%**

IN MEMORIAM

**4%**

GIFT AID

**1%**



# THANKS TO OUR FUNDRAISERS

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## LONDON LANDMARKS HALF MARATHON, MARCH 2019

16 runners helped raise a huge total of £4,130.

Runners included Daniel and Karen who raised £150 each, Kien who raised £189, Judith, who raised £189, Gemma, who raised £175 and Paul who raised a massive £743.

Alice raised £565 and wanted to run for Allergy UK due to her own allergies and family members' allergies.

Paul raised over £650 and was keen to raise money because of his daughter's allergies and hoped to increase awareness.

Jodie raised just under £300 and wanted to raise money because Allergy UK had been a great source of information for family and friends who have experienced childhood allergies.

Laura ran the half marathon and organised a cake sale in February, raising a total of £240.

Sally-Ann works with children and adults who have food allergy and raised £417 for Allergy UK. Her husband David also ran and raised a further £357.

Gemma raised £175 as she wanted to raise awareness of the severity of allergies.

Samantha raised nearly £300. She wanted to run for Allergy UK after using the services and information the charity offer for her own allergies.

## GREAT NORTH RUN, SEPTEMBER 2018

10 runners raised a massive £3,153.80 by taking part in the **Great North Run**.

Amy raised over £300 for Allergy UK running the **Great North Run** for the fourth time as her daughter has severe allergies.

David, who has a number of allergies himself, raised £178 for Allergy UK.

Chris also ran the **Great North Run** raising £129 for Allergy UK because of his son's peanut allergy.







### POLAR BEAR PLUNGE

David's fundraising journey was a cold one – raising £286 for doing a **polar bear plunge in January 2019**. David was inspired to raise funds for Allergy UK because of his daughter's food allergies.

### CHARITY FOOTBALL MATCH

Gav took to the pitch to raise money for us by organising a **charity football match in September 2018**. The event raised almost £750.

### WINDSOR HALF MARATHON

Amit took part in the **Windsor Half Marathon in September 2018** and raised over £550. Amit was raising money in memory of Nainika Tikoo, who died in 2017.

### READ-ATHON AND BAKE SALE

Nine year-old Holly raised £255 by doing a **read-athon and bake sale in November 2018**. Holly has asthma and food allergies and wanted to raise money to help people like her and their families. School pupil Ryan also raised £40 by having a **cake and book sale in December 2018**, raising £40 for the charity.

### GLOWORM NEON NIGHT RUN AND SKYDIVE

Ben, Adam and their friends took part in the **Gloworm Neon Night Run in August 2018** to raise awareness and donations for Allergy UK in memory of their friend and brother Aaron. They raised over £500. Alongside the run, Adam, Aaron's older brother, also completed a **charity skydive**.

### 1,000 MILE WALK

Jo took on an enormous **challenge to walk 1,000 miles** for Allergy UK, which started in **February 2018**. Finishing in November 2018, and walking 340 hours, the equivalent of 14 days and nights, Jo was keen to raise money for Allergy UK because of allergies in her family.





### RIDE LONDON

Two riders raised over £200 for Allergy UK by taking part in **Ride London** in July 2018.

### BRITISH 10K

Six runners raised a total of £2,751.92 for Allergy UK by running the **British 10k** in July 2018. Runners included Sarah, who raised £448 and supported Allergy UK because of her children's allergies.

### COLCHESTER HALF MARATHON

Vanessa and Hannah raised nearly £1000 by running the **Colchester Half Marathon** in March 2019.

### BEDFORD TWILIGHT 10K AND BEDFORD HALF MARATHON

Amrik raised over £750 for Allergy UK by taking part in the **Bedford Twilight 10k** and **Bedford Half Marathon** in September 2018. Amrik's son has a number of food allergies and he raised money to help make a difference for others.

### DUNDEE KILTWALK

Kathryn and her children raised £150 by taking part in the **Dundee Kiltwalk** in August 2018. They have taken part in a number of family and individual events to raise awareness for Allergy UK in the past and wanted to continue to do so because of the support and help the charity gave them to help diagnose their allergies.

### ST HELEN'S 10K

Chantelle and Jodie ran the **St Helen's 10k** in March 2019, raising £209 for Allergy UK. Both of them have children with allergies and want to raise awareness and educate people about the seriousness of allergies.



# Thank you



## SERVICES TO SUPPORT THE ALLERGIC COMMUNITY

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Allergy UK is the only charity that supports everyone living with allergy, the donations and fundraising that we have received have helped to ensure the allergic community have access to a range of support services, such as our Helpline. Donated funds enable us to continue to advocate on behalf of those living with allergy in the UK and the following sections outline some of the key areas of work that these donations have enabled us to achieve in the last year.

### Helpline and web chat

Our Helpline and web chat facilities are an essential way of supporting people living with allergy. We provide support, information and advice to thousands of people from across the UK who contact us. Our calls and web chat enquiries cover all allergies and related symptoms whether mild, moderate or severe reactions such as anaphylaxis. We also provide clinical advice as the team are able to escalate calls directly to our in-house clinical experts for more

complex questions. We can call on support from our Health Advisory Board, which has 44 allergy specialists including immunologists, dietitians, pharmacists, dermatologists and primary care professionals. We are extremely grateful for the support and advice provided by these experts.

Over the summer our main Helpline calls are from people asking for advice on hay fever, and wasp and bee venom allergies. Food allergy is a key topic throughout the year with milk, nuts, peanuts and egg being the top foods enquired about. Many of our calls are from people asking for recommended allergy clinics.

### Translation cards

Our bespoke translation cards enable people with food allergies to feel more confident when travelling abroad. They provide vital information about allergies and are offered in 37 languages.

# 5,396

HELPLINE CALLS

# 1,471

WEB CHATS TAKEN

# 1,163

EMAIL EXCHANGES

# 863

TRANSLATION CARDS SOLD



## ***“Translation cards helped me travel the world”***

Jake has a severe peanut allergy but that didn't stop him wanting to fulfil his dream to travel Asia. Here's Jake's story of travelling armed with translation cards from Allergy UK.

“

*Asia is a tough place for someone with a severe peanut allergy!*

*However, I am lucky enough to be in the middle of a year-long adventure around the continent. We've travelled through south Asian countries such as Sri Lanka, India and Nepal and now we are exploring South East Asia, including the Philippines, Borneo, Brunei, Indonesia, Malaysia, Thailand, Cambodia, Vietnam, Laos, Myanmar and then onwards to China and Japan.*

*I have tried to learn the local language as much as possible to let them know about my allergy but I am rarely fluent enough to properly explain. As well as this, while it is often clear that I am allergic to peanuts, the local people do not understand about peanut and groundnut oil, washing the woks/pans properly between meals and contamination across foods.*

*Fortunately, I have translation cards in all of the languages we have needed. The cards are clear and well translated, the locals have never had an issue understanding them. They explain about contamination, oil and the foods that I cannot eat. They are credit card sized and I carry them everywhere along with my Epipens. I am extremely grateful to have them! On a number of occasions they have meant that we have not eaten at a restaurant or local eatery, but this is absolutely fine considering what would have happened had we stayed.*

*Having the cards has also meant that I can explore the foods of Asia much more than I would have without them. I've eaten at incredible fish markets, having the most delicious lobster, shrimp and squid, and been able to try some of the weirdest tasting salads I've ever known!*

*Thanks to AllergyUK for making a great tool for travelling, it's made me feel so much safer knowing that if my dreadful foreign languages aren't understood I can rely on the cards! They have given me a much more immersive experience in Asia - thank you!*

”





## MASTERCLASSES

Allergy UK's Masterclasses continued to provide education and training for healthcare professionals who have an interest in allergy across the UK.

Our free Masterclasses provide support and clinical information for healthcare professionals by giving them an opportunity to learn more about key issues related to allergy, which ensures that they can provide the highest level of care to the allergic community. This is delivered through presentations and practical sessions on treatments and devices.

In 2018-2019, we held three Masterclasses across the UK. Over 300 GPs and over 60 health visitors and practice nurses attended to learn more about allergy and allergic conditions.

Thank you to Nutricia Advanced Medical Nutrition, Mylan, Nutricia Early Life Nutrition, Thermo Fisher, Aimmune for funding our Masterclasses.

- “ Great sessions, I will definitely attend another Masterclass ”
- “ Practical sessions are very good. It gives us understanding and knowledge on how to demonstrate it to our patients ”
- “ This was one of the best courses I have ever been on as a GP. All the information was GP focused and relevant to practice. I would definitely recommend it ”





## FACTSHEETS

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Learning about allergy can be daunting and confusing. Our easy to use, clear Factsheets are a useful tool for people who have allergies or suspect they may have an allergy.

This year has seen 78,054 Factsheet downloads – an increase of 28.8 per cent compared with last year.

### New weaning Factsheet

We regularly review the types of information that we are being asked for and in January 2019 we launched a new weaning Factsheet in order to provide a useful resource for parents and carers who are introducing their baby to solid foods.

This was in response to lots of queries and requests by members of the public via our Helpline service and social media channels who were concerned about introducing foods that commonly cause allergies. The Factsheet has been shared on our web page and across social media.



## SEAL OF APPROVAL

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Allergy UK works with manufacturers worldwide to test and promote the benefits of products and appliances which may benefit people living with allergy.

All products that receive our Seal of Approval have been through scientific testing which is carried out by an independent laboratory to protocols which have been created by leading allergy specialists. When you see a product with this logo on it, you have the reassurance the product has been scientifically tested and proven to restrict/reduce/remove allergens from the environment. The Seal of Approval is also awarded to products with significantly reduced allergen content, which have been independently clinically/dermatologically tested and proven suitable for sensitive skin.

Our Seal of Approval is currently used in 170 countries worldwide, and we work with 120 companies and endorse 218 different product ranges.

### Allergy Friendly Product

Our Allergy Friendly Product Award is for products which 'may be of benefit' and are 'unlikely to cause a reaction'. These products are reviewed based on their composition alone, i.e. reduced allergen, fragrance free, MI (methylisothiazolinone) free.



## RAISING AWARENESS AND COMMUNICATING OUR MESSAGES

Raising awareness of allergy through our external communications remains a constant area of focus for Allergy UK. As the national charity for allergy, we utilise our digital platforms and relationships with the media to encourage improved attitudes towards allergy and to proactively influence behaviour changes, ensuring that people with allergy are listened to and that they feel supported. Our multi-channelled approach to communications provides us with direct access to various industry groups and stakeholders, helping us work towards creating a better and safer world for people living with allergic disease.

### Seasonal messages

Our seasonal messages help to raise awareness of social issues that affect people with allergy and offer advice for those who need it, to help them manage their condition and enjoy seasonal occasions. For example, as well as the timely Halloween and Christmas themes, we have also produced messaging around travelling with allergies and weddings.

These messages have increased online engagement and also offer opportunities for corporate partners to support our work throughout the year. These messages helped to increase visits to our website and social media pages, helping us to reach more people and continue to raise awareness. The majority of our seasonal campaigns also link to Factsheets and we saw a 28 per cent increase in Factsheet downloads in 2018/2019.

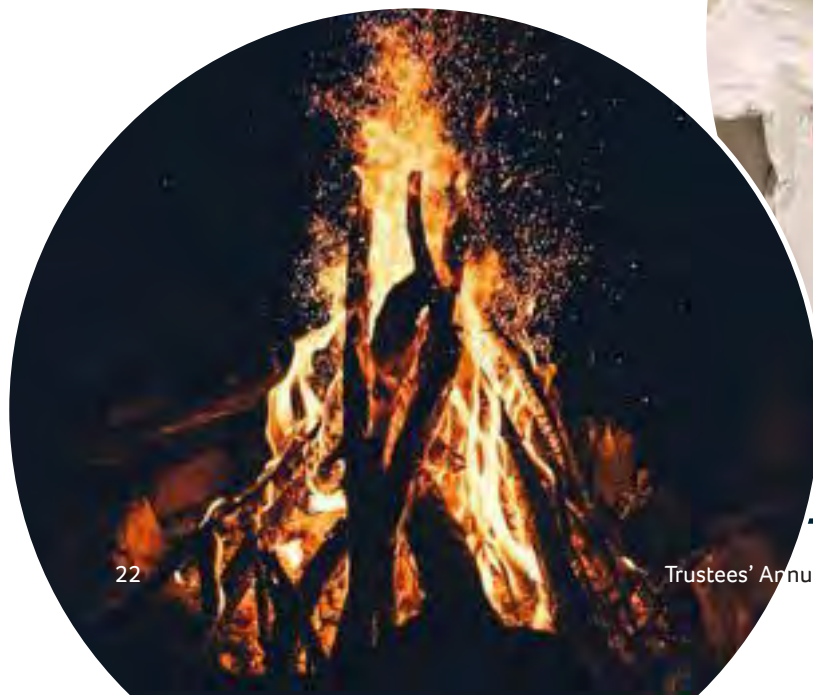
### Web and digital

Our resourceful website continues to attract a high level of traffic averaging 82,000 visits each month. It is a powerful communications tool for the charity, enabling us to engage with both healthcare professionals and the allergic community through our provision of useful resources and timely and relevant news updates.

Our social media channels enable online engagement with the allergic community. As well as giving us a platform to converse with our supporters, broadcast our news and signpost to our resources and services, they also act as a social listening tool which can help us with the development of multi-media campaigns.



Dear Mum,  
When I was born, Anna was near  
allergic to about every good food you ate  
who checked every ingredient, read a  
Anna and George could have ch  
I would still really like to know what  
I know what I could and couldn't eat  
inhalers, antibiotics and AAI's.  
T-shirts for me to wear that don't  
outgrow some of the allergies, I  
me felt different, you encouraged  
this Mother's day, I sent  
  
Love,  
Robert





# RAISING AWARENESS AND COMMUNICATING OUR MESSAGES

## Media activity

Working with the media enables us to keep allergy on the national news agenda. Our strong relationships with key journalists helps us to ensure that important allergy issues stay in the spotlight for longer, giving us more opportunities to raise awareness of the potential seriousness of allergy and the impact that it has on those living with all kinds of allergic disease.

We have attracted a constant flow of media enquiries and spokesperson requests throughout the year. Key media outlets, such as the BBC, Sky and other news channels, contact us regularly to discuss current issues around allergy giving us a national platform for advocating on behalf of the allergic community.

In 2018-2019 our CEO was invited onto BBC Breakfast and a range of radio talk shows to give our views on the changes being made to food labelling in the UK (reach 12 million) because of the influential involvement we had as a stakeholder in the development of food labelling legislation.

## Video messaging

We launched a video in April 2018 to help raise awareness and generate a better understanding of the seriousness of allergy and the impact it has on those living with allergic disease.

We have since developed more video content including a promotional piece for Allergy Awareness Week and a thank you to our supporters, both featuring our CEO. These videos can be found on our YouTube channel: [youtube.com/allergyukcharity](https://youtube.com/allergyukcharity).

## Allergy Alerts

Allergy UK sends Allergy Alert emails to an opted-in database regarding the top 14 food allergens. These alerts help to ensure that people with food allergies are made aware of any food production issues, such as mistakes in labelling due to packaging errors or risks of cross contamination. Our alerts are also circulated on our social channels and our website. We issued 137 alerts between April 2018 and March 2019 and currently have over 17,000 people subscribed to receive them.

### ***'Allergy UK saved my life'***

“ One young boy with allergies was particularly grateful to our alerts after it made his mum aware of incorrectly packaged sweets that they had in their cupboard. He is anaphylactic to peanuts and fish, which means eating either of them could cause a severe and possibly fatal reaction. His mum received an alert about a well known brand of sweets that contained peanuts but had been incorrectly labelled. The next day a family member bought these to share which reminded them of the alert and when they checked it was the contaminated batch. He was so grateful for the alert which helped him avoid a potential reaction that he went on to do a number of challenges and events to raise money for Allergy UK. ”

## ONLINE REACH

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AVERAGE WEBSITE VISITS  
A MONTH

**82,000**

ARTICLES

**131**



FACEBOOK REACH

**2.5 million +  
+431%**



TWITTER FOLLOWERS

**9,730+  
+13%**



INSTAGRAM FOLLOWERS  
SINCE JUNE 2018

**+1,241**



LINKEDIN FOLLOWERS

**600**



FACTSHEET DOWNLOADS

**78,054**

VS LAST YEAR

**+28.8%**



ENEWS REACH

**20,305**

ALLERGY ALERT EMAIL REACH

**17,059**

# ALLERGY TODAY

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Allergy UK's magazine for healthcare professionals re-launched with our new branding in Autumn 2018, in time for the British Society of Allergy and Clinical Immunology (BSACI) conference.

The content is written by healthcare professionals and includes vital information about allergy research, clinical developments and advice around the diagnosis and treatment of allergic conditions. All of which is valuable content for both healthcare professionals already specialised in allergy and for those who are wanting to develop their knowledge and understanding of allergic disease.

Our Spring/Summer edition was published in April 2019 and covered a broad range of topics, including allergic eye disease which can be a painful and serious condition. There are also topical features on pollen, pollution and paediatric health and allergic rhinitis. The results of a national audit by the Royal College of Anaesthetists on perioperative anaphylaxis are explored, with the outcomes and the lessons learnt from these life threatening reactions and the presentation of drug allergy in primary care is also featured. All Allergy Today articles are written by experts in their fields, providing information and guidance.

The magazine is available online and is sent to the healthcare professionals on our database. It will also be included as a resource in delegates packs at Allergy UK's Masterclasses.

Allergy Today will now be published twice a year – Spring/Summer and Autumn/Winter.



## ALLERGY UK RESEARCH AND DEVELOPMENT NURSE

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In 2015, Allergy UK provided a grant (which included a generous donation received with thanks from MEDA (Mylan)) to the University of Edinburgh to research the feasibility of creating a nurse-led, primary care based allergy clinic in NHS Lothian. The research aims to highlight the positive impact that an allergy nurse-led service can have on improving diagnosis, treatment, appropriate referral to secondary and tertiary care, and, ultimately, improved quality of life for patients living with allergic disease.

The nurse-led allergy clinics are run out of two GP surgeries based in the South East of Edinburgh, The University Health Centre and St Leonards Medical Practice. The pilot nurse-led allergy clinic now covers 19 GP surgeries who can refer into this service, so this has extended its breadth.

The allergy nurse collects both quantitative and qualitative data, as well as helping patients to manage their condition by providing practical advice and information, for example how to use an asthma inhaler, asthma steroid sprays and apply emollients. The allergy nurse is also a nurse-prescriber with authority to prescribe appropriate allergy treatments and medicines to patients. This phase of the research completes by January 2020, when outcomes will be published.





## SPECIALIST PAEDIATRIC DIETITIAN SERVICE

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Allergy UK's Dietitian Service has now helped over 800 children with food allergy symptoms since its inception in 2015. The service provides specialist allergy advice to parents of children (0 to five years old) presenting symptoms of food allergy. The service was developed in response to the number of parents calling our Helpline who felt that they had not been able to access supportive advice elsewhere. This highlighted a need in this population group for a service to stream children highlighted as having symptoms suggestive of allergy, and who may be at risk of an allergic reaction, into an effective diagnostic pathway for timely diagnosis and optimal management. It raises awareness of food allergy in babies, predominantly cow's milk allergy and aims to help people to gain an accurate diagnosis and treatment from GPs.

It was essential to Allergy UK that the outcomes of this service were evidenced. We therefore conducted a two year project aimed at evaluating the impact of the specialist paediatrician dietitian service on improving the health and wellbeing of children with suspected food allergy and their parents and carers. Three study-specific questionnaires have been sent to parents and carers of children referred to the service, and an evaluation to the GPs involved in their care. The results are currently being analysed and will be published next year once this evaluation is complete.

We would like to thank Nutricia Advanced Medical Nutrition and Danone Nutricia Early Life Nutrition for the donation provided which has enabled Allergy UK to develop this service and evaluation.

## COW'S MILK PROTEIN ALLERGY CAMPAIGN

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Allergy UK is the point of contact for many parents who are desperate for support and advice on the symptoms that their infants may have which are suggestive of food allergy. For many infants pre-weaning the main food source will be breastmilk and or cow's milk. Educating people on cow's milk allergy and directing the patient to their GP to discuss their condition and symptoms is key to ensure a quick diagnosis, or reassurance that symptoms are not related to cow's milk. There is a recognised need in primary care for more education and information on allergy and therefore Allergy UK provides leaflets on cow's milk allergy, which are located in GP surgeries across the UK to provide advice and support on this area of allergic disease.

In April 2018, 320,000 leaflets were distributed to 6,000 GP surgeries and were displayed for a six month period. A healthcare professional pack was also provided for the lead GP of the surgery, which included a letter from Allergy UK that introduces the leaflet as an educational tool.

A further 6,000 copies of the leaflet were distributed throughout the year at relevant primary healthcare professionals events. These leaflets also encourage parents to contact Allergy UK for further advice and help should they need it. If they call about their infant's symptoms and meet the criteria set for the Dietitian Service, then with their agreement they are referred for an appointment with one of the specialist paediatric dietitians.

This activity is being supported by a donation from Nutricia Advanced Medical Nutrition and Nutricia Early Life Nutrition, who we wish to thank for their support with this project.



# CLINICAL DIETETIC ADVISOR CLINIC

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Over 20 per cent of calls to the Helpline relate to food allergy. To provide a clinical support to all of these callers, Allergy UK established a Clinical Dietitian Advisor Clinic. This provides a weekly clinic where calls escalated from the Helpline for dietetic advice, are given appointments for a one-to-one discussion with the dietitian, with a letter written to the GP if necessary. Thank you to Nutricia for supporting this project.

Main themes of clinic appointments are:

1. Suspected allergy/intolerance
2. Multiple allergies/restricted diet
3. Cow's milk allergy (including reintroduction, milk ladder, weaning advice)
4. Advice on what to give a child to eat following diagnosis of allergy
5. Gastrointestinal symptoms
6. Weaning advice including how to introduce allergens



# A UK EXPLORATORY STUDY SURVEYING PARENTS WITH PEANUT ALLERGIC CHILDREN

At Allergy UK, we wanted to explore the realities for parents of a peanut allergic child, living with the burden of a potentially fatal condition.

Food allergy is a global concern increasing in prevalence in westernised countries.<sup>13</sup>

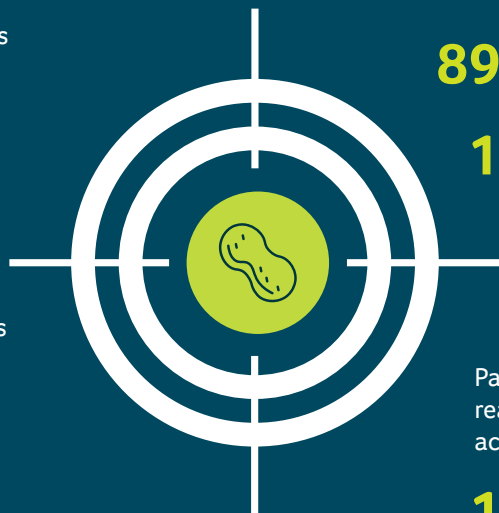
In the UK it is estimated that five to eight per cent of children have a food allergy.<sup>14</sup> Peanut allergy commonly presents in the first five years of life with 80 per cent persisting into adulthood.<sup>15</sup> Currently there is no cure, therefore avoidance remains the key part of management. Thank you to DBV technologies for sponsoring this survey.

**To understand more, we surveyed the parents and carers of children between two and 11 years old living with this condition in the UK. From our 1,079 responses we learnt...**

**Symptoms of severe allergic reaction were reported more often in children aged 9-11 years old**

**22%** of children aged 10 years old collapsed  
**vs**  
**5%** of children aged 2 years old

**13%** of children aged 11 years old reported symptoms of swelling  
**vs**  
**4.5%** of children aged 2 years old



**99%** highlighted avoidance as key in their management plan

**89%** associated label reading

**89%** carrying prescribed adrenaline auto-injectors at all times

**1st** expectation of treatment is to reduce the likelihood of a reaction due to accidental exposure

Parent/carer belief that it is possible to react to airborne peanut protein increases according to number of A&E visits

**100%** of parents whose children attended A&E 10 times or more believed it was possible to react to inhaled peanut protein

## Conclusions:

- Perceptions about risks and satisfaction with management plans were associated with the severity of previous allergic reactions
- Initiatives and therapies which reduce the likelihood of reactions from accidental exposure could have a positive impact on the quality of life for children and families
- Advances in science and research bring hope and treatment choice to those with peanut allergy.



## SCHOOLS AND UNIVERSITIES

The UK has some of the highest global prevalence of allergy.<sup>16</sup> The increasing number of pupils with allergic disease are presenting schools with a major challenge around providing support for these pupils and ensuring their school experience is as safe as possible. Research shows around 20 per cent of food allergy reactions occur in schools, and children may experience their first severe reaction whilst at school.<sup>17</sup>

### Anaphylaxis in school-age children

Over two thirds of UK schools have at least one child at risk of anaphylaxis<sup>18</sup>. School-aged children account for 82 per cent of anaphylaxis, with more fatalities due to allergy in teenagers and young adults than any other age group<sup>19</sup>. These alarming statistics indicate an obvious need for robust allergy management in schools. The Children and Families Act 2014 places a duty on schools to support pupils with medical conditions.<sup>20</sup>

It has become increasingly important to work with schools to help influence their decisions and policies on allergy and educate teachers and schools staff to help them feel confident in managing children with allergies within their school. In turn, more education and awareness in schools about the seriousness of allergy will help parents of children with allergies to feel more confident about the school environment.

### Back to School Campaign

We have put together a variety of resources to help students, teachers and parents with the transition back to school. This is in response to the questions we receive on the Helpline from anxious parents and teachers during the summer holidays and in the run up to the new school year. The frequently asked questions section came directly from queries we have received. It is hoped that the materials will empower parents and children to feel safe in schools, and feel more confident in having discussions with their school about allergy.

### Other work in schools and universities

- Allergy UK conducted a guest lecture to third year hospitality students at Christ Church University in Canterbury to highlight how their future careers might bring them into contact with people living with allergy.
- As a member of the Health Conditions in Schools Alliances for both England and Wales, we work collaboratively to lobby for improved care provision for children with a wide range of health conditions while they are in school. Children with conditions such as allergic disease face challenges in their day-to-day school life and the Alliance's work is focused on the further development of the guidelines and policies that can help these children (and their parents) feel safe at school.
- In January 2019, Ofsted launched a consultation on changes to the inspection framework. AllergyUK played an active part in this, responding both independently as a charity and as part of the Health Conditions in Schools Alliance. This presented an opportunity to encourage Ofsted to include inspection of how schools support children with medical conditions, and specifically those living with allergic disease.
- While no specific change in the Ofsted framework was made, the Department for Education has expressed an intention to build on its relationship with the HCSA to explore what more could be done around staff training and awareness on allergies and anaphylaxis.



## SCHOOL ALLERGY ACTION GROUP (SAAG)

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This secondary school programme was set up in 2014 as a joint venture aiming to improve allergy management in schools and it was led by Food to Fit and Allergy UK.

During 2018 the SAAG programme was reviewed and adapted into an online toolkit managed entirely by Allergy UK.

This free, easy to use, online toolkit allows schools to work through the seven-step programme at their own pace and self-assess their progress to develop a whole-school allergy management policy. This involves senior management,

school nurses, teachers, caterers, pupils, parents and governors in the policy development and in the ongoing work to ensure that its implementation is effective and consistent.

The SAAG online toolkit was launched during Allergy Awareness Week in spring 2019 supported by social media and press activity as well as an email marketing campaign to local councils and other relevant stakeholders. In the first three months 75 licences have been awarded to schools for them to access and progress through the SAAG seven step programme.



## ALLERGY AWARENESS FOR AIRLINES

Travelling by air with a food allergy can present significant challenges, with a number of fear factors around how well an airline is equipped to record and cater for the needs of people with allergy, and the procedures to help them if something happens.

Our Allergy Awareness Week in 2018 focused on travelling with allergy and we carried out a survey on the topic. Over 70 per cent of respondents felt that airlines' policies on passengers with food allergy were unclear and inconsistent and 69 per cent rated their experiences between average and poor.<sup>21</sup>

### Aviation 2050

As part of its Aviation 2050 consultation document, the Department for Transport devotes a chapter to the enhancement of the passenger experience.<sup>22</sup> Specifically, the consultation expresses the government's desire to "see improved clarity and consistency in how the sector deals with nut allergies."

Along with other patient charities, airline representatives and the Civil Aviation Authority (CAA), Allergy UK has been attending a series of meetings on the improvement of services for allergic air passengers, from booking to disembarking, hosted by the Department for Aviation and Airlines UK.

These discussions are ongoing and cover a range of topics, including the need to broaden the scope of the consultation to other foods, such as milk and eggs.

In all of its comments around the suggestion of a complete nut ban, Allergy UK has been consistent in highlighting the risk of contamination through the transference of peanut residue to arm rests and tables, which is possible if nuts have been touched and consumed before boarding.

### Virgin Atlantic

Early in 2019 we were contacted by the Head of Medical Services at Virgin Atlantic to discuss 'refresher' training on allergy for the Virgin Atlantic medical team. The agenda for the intensive one day training session at the Virgin hub near Gatwick airport included the physiology of allergy, the challenges of living with allergy, specifically the fears around travelling with an allergic condition, and anaphylaxis emergency procedures. The session was led by Dr. Paul Turner, a member of our Health Advisory Board, and Amena Warner, our Head of Clinical Services, with additional input from the CAA.

Members of the Virgin Atlantic Medical Team attended the training day and used the opportunity to discuss procedures for managing passengers with food allergy, crew training and on board resources for dealing with anaphylaxis, with a lengthy question and answer session to review the day's content.

This session was a great example of Allergy UK's commitment to collaborative work with service providers, such as airlines and food outlets, towards better understanding of the particular needs and service requirements of people who live with allergy.



# ALLERGY AWARENESS WEEK

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Allergy Awareness Week is our national awareness week and one of our most important and wide-reaching national campaign activities. It is held in April every year and provides us with a strong platform to raise awareness and inform the general public about allergic disease and its impact on those directly or indirectly affected.

The theme for our 2018 Allergy Awareness Week was: 'Travelling with Allergies'. This was focused around flying with allergies using data collected from our 'Flying with Allergy' survey, which highlighted the challenges faced by the allergic community.

Our survey attracted 786 respondents from within the allergic community. It showed that over a third of respondents rated their experiences of flying with an allergy as poor or very poor, with 37 per cent not flying as often as they'd like because of their allergy. 75 per cent also said that they felt that airlines' policies around managing passengers with allergic conditions were not clear.<sup>23</sup>

Throughout Allergy Awareness Week we published the results of our survey across various communication channels, and developed a new 'Travelling with Allergies' page and Factsheet.

This work set the scene for further discussions with the CAA and airlines on how to improve the management of allergies on flights and protect people living with food allergy.

As a result, we achieved on and offline media coverage that included:



## 182

articles in national print media



## 20

features on BBC and commercial radio stations, with an audience reach of 1.25million



## 638

information packs sent to organisations



## +25%

calls to Helpline vs previous week



## 35,000

e-News subscribers





## ALLERGY AWARE SCHEME

At Allergy UK we understand that eating out is a huge area of concern for those living with food allergy, which is why we developed our Allergy Aware Scheme. Our ultimate ambition is to support all caterers to become allergy aware and that those living with allergy feel safe when dining out. This scheme is a recognition for catering outlets that have trained staff in food allergen management and have put in place procedures to provide a safe meal for anyone living with food allergy.

As well as contacting food businesses directly, we have developed a pilot programme during this year and teamed up with Local Authorities (London Borough of Bexley and Horsham District Council) and their Environmental Health and Trading Standards teams who are responsible for mandatory food safety and hygiene inspections in their local areas. These local authority Environmental Health Officers provide an independent on-site audit as a part of the Allergy Aware Scheme process.

The pilot started in January 2019 and will run for a year to assess and measure the interest in our Allergy Aware Scheme from various types of food businesses. At regular intervals throughout the year we will assess the pilot then review and further refine the Allergy Aware Scheme programme with a view to a phased full national roll-out, working with local authorities countrywide.

“ 75 per cent of people living with food allergy have decided to not eat out due to their lack of trust in allergy knowledge of the café/restaurant/takeaway outlet staff members ”



# FOOD LABELLING CHANGES IN THE UK

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Allergy UK has been a key stakeholder in on-going discussions at a national level to influence changes to food labelling as well as threshold levels. Our Chief Executive was invited to be a key note speaker at a Westminster Food and Nutrition Forum looking at the future of food allergen labelling in the UK, lifting standards of transparency in the supply chain and producing British food.

The outcome from this was a connection with DEFRA who we wrote to, copying in the Food Standards Agency (FSA), expressing our view that action was needed. This resulted in several meetings with DEFRA, FSA and other stakeholders, a meeting with the Right Honourable Michael Gove MP, the then Secretary of State for Environment, Food and Rural Affairs, and the Food Minister David Rutley, to discuss our view for the need for full ingredient labelling and allergens in bold. This led to a series of media coverage, including Sky News interview, BBC Breakfast and two other BBC News interviews and 10 radio show interviews to highlight Allergy UK's advocacy.

## Public consultation

The introduction of the 2014 EU legislation was a great move forward, however this did not provide sufficient safety for the food allergic consumer. For some allergic consumers, a small trace of allergen is enough to cause severe allergic

symptoms, which in some cases may be fatal or near-fatal and several recent tragic deaths have provided an increased focus on finding ways to address this issue.

A public consultation was launched on 25th January 2018 into the policy surrounding allergen information on food pre-packed for direct sale. Our direct access to the allergic community via our social channels, website and mailing list enabled us to share information on the consultation, associated workshops and regular updates in order to encourage and empower those living with allergy to engage with this consultation to ensure their views on this important issue are heard.

## Tougher labelling laws

An announcement in June 2019 directed that full allergen information should be provided on pre-packed direct sale food and this comes into effect next year. These tougher labelling laws will provide improved protection for the estimated two million food-allergic consumers and allow them to make informed decisions when purchasing food. Allergy UK, as the leading patient charity supporting those living with allergy disease, continues to be closely involved in discussions around this important issue of allergen labelling.



## EASY TO ASK CAMPAIGN

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Living with a food allergy is never easy, but many young people are too embarrassed to talk publicly about having a food allergy, particularly in social settings putting them at greater risk of severe and even fatal allergic reactions. That's why the Food Standards Agency in partnership with Allergy UK and Anaphylaxis Campaign launched #EasytoASK. A campaign designed to empower young people to ask about allergens when eating out and also to remind food establishments to ask customers about their dietary needs. The aim is to help put people with food allergies (especially those who are young and may be embarrassed) at ease.

Allergy UK supported the campaign through the development of a survey for people ages 16 to 24 living with food allergies. The charity promoted the survey via its digital channels and received a record 2,150 responses.





# INTERNATIONAL LIFE SCIENCES INSTITUTE EUROPE FOOD ALLERGY EXPERT GROUP

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Allergy UK is also actively involved in the drafting of an internationally developed guidance document for best practice allergen management, which will facilitate awareness and good practice.

This is being led by the International Life Sciences Institute (ILSI) Europe Food Allergy Expert Group and the guidance will be 'A framework to help define an appropriate level of protection for consumers with food allergies'.

This group is looking at defining the safety threshold levels of a food allergen in food both for individuals, and populations. This group is also looking at international precautionary allergen labelling and situations where unintended allergens may be present and what actions could be taken to mitigate the risks associated with all of these.

Allergy UK advocates on behalf of the food allergic patient in this group and brings knowledge through our surveys and engagement on what it means to live with food allergy. Other stakeholders in this group include the FSA from the UK, food industry experts and university experts.





## SKIN ALLERGY

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New evidence recently emerged that an impaired skin barrier is a potential route to sensitisation of allergy. Allergy UK has developed an on-going programme of activities to raise awareness of skin allergy. In 2016 we focused on children with atopic eczema and cow's milk allergy, and in 2017 our focus was on adults. This work led to the publication of the report, *Seeing Red: Scratching underneath the surface of atopic dermatitis*, which was developed in partnership with Sanofi Genzyme.

In 2018 we decided to focus on paediatric atopic dermatitis and our work in this area entailed workshops at our Masterclasses demonstrating best practice on emollient use and topical skin treatments, as well as best practice management of atopic dermatitis in children. Our Eczema Factsheet was also updated and reviewed against current British Society of Allergy and Clinical Immunology (BSACI) guidelines.

Allergy UK was involved in a global collaboration project to look at country specific guidelines on atopic dermatitis services and the impact on quality of life. Our Head of Clinical was a key opinion leader representing the UK

on an advisory board which consisted of eight patient organisations from Australia, Brazil, Israel, Italy, South Africa, Taiwan, the UK and the US representing a cross-section of the World Health Organisation regions, World Bank income bands and health system types.

This collaboration led to a report 'A misunderstood skin disease: Mapping the policy response to atopic dermatitis' written by The Economist Intelligence Unit, and sponsored by Pfizer and the International Alliance of Dermatology Patient Organizations (GlobalSkin). It considers the healthcare system approaches and policy responses to the management of atopic dermatitis, often referred to as atopic eczema. It explores a number of factors that play a part in the development of high-quality services for patients with atopic dermatitis. It explains the impact of this skin allergy on people's lives, the burden of this atopic dermatitis and concluded with key issues for policy makers.

These key issues include; re-aligning established guidelines for care, measurement and monitoring of atopic dermatitis per country with the report's findings. For example, the UK's National Institute of Clinical Excellence (NICE) atopic dermatitis guidelines only covers up to the age of 12 and the report findings suggest this should apply up to 18 which is the age of paediatric care. Another key issue relates to consistency of measuring atopic dermatitis and consensus on which scoring system needs to be used.

The report was published in November 2018 and is available on the EIU (Economist Intelligence Unit) website. Chapter three focuses on best practices and complete care. This discusses patient advocacy and support groups. It also has a section on recognising the role of support groups, with the conclusion drawn into key issues for policymakers. The aim of this report is for the EIU white paper team to review the findings and hopefully some of the key recommendations will be developed further. Allergy UK is already working towards some of these key issues, for example atopic dermatitis at primary care level through our workshops and lectures.



## SKIN ALLERGY

### Collaborative work

Allergy UK has also continued collaborative work with other stakeholders, including Sanofi Genzyme, on adult atopic dermatitis. A letter was written to NICE signed by all stakeholders to advocate for the need for NICE guidelines for the treatment and management of atopic dermatitis in adults. This includes development of a Patient Bill of Rights. This set out the NHS constitution pledges and what people living with atopic dermatitis should expect from their NHS.

### EADV Conference in Paris 2018

Our Head of Clinical Services was a guest panel speaker at the Pfizer Symposium, held at the European Academy of Dermatology and Venereology conference in Paris. This panel was discussing atopic dermatitis and its impact on patient quality of life.

Our Chief Executive was also invited to Chair a panel at EADV at a Symposium held by the European Federation of Allergy and Airways Diseases Patient Organisations (EFA), of which Allergy UK is a board member. EFA launched their European research on Atopical Lives Itching for Life: Quality of Life and Cost for People with Severe Atopic Eczema in Europe. This report found that one in four patients living with atopic dermatitis are often unable to face life, especially for the elderly living with this skin allergy condition.

Patients believed that there needs to be greater recognition of the disease by the public, healthcare professionals and policy makers. Access to affordable and improved healthcare is needed, with support with financial costs to reduce the economic burden, with the need for further research into ways to treat and prevent this disease.

## VERNAL KERATOCONJUNCTIVITIS (VKC)

This year, Allergy UK identified a need for resources on the subject of allergic eye disease and VKC. VKC is a severe and recurrent allergic eye condition that is mainly observed in children and young adults.

VKC is linked to allergy and can cause blindness. Research showed that children with this condition had allergic manifestation such as atopic dermatitis, allergic rhinitis and allergic asthma and is more prominent in boys. This is classified as a rare condition and as a result, parents whose children were living with VKC could not find information in the public domain or any support. These children need an ophthalmologist to closely manage this condition.

We have established a suite of materials to offer information and support to patients, families and healthcare professionals. These include an article on allergic eye disease published in Allergy Today Spring/Summer 2019, a Factsheet 'Living with VKC', top tips for parents from parents and a video case study, which can be found on our YouTube channel.

We also collaborated with Medikidz/Jumohealth, a company providing resources for children and families in print and digital formats, using videos, podcasts and games, to develop an 'Understanding Allergic Eye Disease' comic.



## CONSULTATIONS AND LOBBYING

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As the leading patient organisation supporting people living with allergy, we engage with policy makers and work to influence policy around the issues affecting the allergic community. We have responded to public consultations to represent people living with allergy and make sure that their voice is heard at government and parliamentary level.

## RAISING CONCERNS ABOUT THE IMPACT OF THE NHS ENGLAND GUIDANCE ON CONDITIONS FOR WHICH OVER THE COUNTER ITEMS SHOULD NOT ROUTINELY BE PRESCRIBED IN PRIMARY CARE

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In summer 2018, we wrote (together with the then President of the BSACI) to all of the Clinical Commissioning Groups (CCGs) throughout England, highlighting our concerns about the impact of the NHS England Guidance on conditions for which over the counter items should not routinely be prescribed in primary care.

We believe that there could be a misunderstanding and misinterpretation of the terms 'self-limiting', 'minor illness' and 'mild to moderate' in the context of long term allergic conditions.

We expressed our concern that the misinterpretation of these terms in the new guidance would result in people living with seasonal or perennial rhinitis, contact and allergic dermatitis and allergic eye conditions no longer being prescribed the medicines that they need in order to manage their conditions.

While the letter did not specifically ask for a response (its purpose was to highlight our concerns), a small number of CCGs did reply, acknowledging our concerns and indicating that local guidance would take those concerns into account. A couple also pointed out that they had carried out local consultations and continued to consult with stakeholders on the development of their own local guidance.

The key points raised in the responses indicate that, while local consultations have supported the principles of the guidance, implementation will be subject to their own local guidelines; the key role of health professionals in assessing conditions and the importance of communication among stakeholders.

We continue to monitor calls to our Helpline on this issue to assess the impact of this guidance on people living with allergic disease and their medication needs.





## CLEAN AIR CONSULTATION

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Given the scientific research to outline the detrimental impact of air pollution on people living with allergy, Allergy UK considers the environmental and social issue of improving air quality as a high priority. Allergy UK therefore take the opportunity to partake in discussions around this issue with stakeholders, advocating for and representing the voice of the allergic community.

We responded to DEFRA's 'Draft Clean Air Quality 2018'<sup>24</sup> consultation which outlined the Government's plan to improve air quality. Whilst the charity welcomed the Government's commitment to this issue, the document mentioned allergy only in passing, and failed to mention the growing body of evidence that air pollution may exacerbate symptoms of allergy (particularly in those individuals living with allergic asthma, allergic rhinitis and eczema).

Allergic sensitization commonly occurs in 80 per cent of asthmatic children.<sup>25</sup> Despite the growing body of evidence suggesting that asthma is often associated with allergic disease, references to air pollution and its impact on asthma in the document do not address the fact that these exacerbations may be caused by allergic sensitisation.

Allergy UK continues to campaign for improved air quality, working closely with governmental bodies and industry stakeholders with the aim of raising awareness of the link between poor air quality and allergic disease.



# ACTIVITY AROUND AIR QUALITY

Our CEO attended a **Building Research Establishment (BRE) Trust Conference** to help set the priorities for research and education in the built environment. There were opportunities to raise awareness of the needs of the allergic community and several connections have been made with university projects relating to air quality and housing.

**Public Health England's 2018 annual UK review meeting**  
- Allergy UK presented a well-received poster entitled 'The Walk to School' on the impact of air quality for school children.

**Effects of Indoor Air Quality on Children and Young People's Health**  
Royal College of Paediatric Child Health (RCPCH) and Royal College of Physicians (RCP) – Allergy UK attended discussions for collective views on the issues surrounding air quality and young people and is involved as a stakeholder in this research.

**UK Indoor Environments Group 2018 Conference** Allergy UK presented a poster on 'Raising awareness of how poor indoor air quality can affect human health'

Allergy UK is part of an **All-Party Parliamentary Group (APPG) for Healthy Homes and Buildings** which discusses the key health problems being caused through poor quality, damp, noisy, poorly ventilated and inefficient homes and buildings. Allergy UK and associated stakeholders are calling for the Government to provide a public health focus that considers the indoor environment as much as the external environment, consistent with the fact that most people spend 90 per cent of their time indoors.

**National Institute of Clinical Excellence (NICE) – Guidelines on Indoor Air Quality** – Allergy UK met and influenced discussions around indoor air quality and its implications for those living with allergy, informing these future guidelines to be published.

**Activity around air quality**  
Allergy UK has been an advocate for improving indoor air quality for many years due to the link between air quality and its impact on people living with allergy. We have been involved in round-table discussions and panels on this issue, including:

**Westminster panel on indoor air pollution: Health Impacts and Potential Solutions** – Allergy UK was invited to present and take part in a panel session entitled 'Indoor Air Pollution: Health Impacts and Potential Solutions' for the All Party Parliamentary Group (APPG) on Air Pollution. The goal of the session was to educate parliamentarians and stakeholders on the issue of indoor air pollution, its health impacts and potential policy solutions to combat it.



## OTHER WORK AND PROJECTS

### ALLERGY UK HAS BEEN INVOLVED IN

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#### National Allergy Strategy Group

Our CEO is vice-Chair of the National Allergy Strategy Group (NASG) which provides the secretariat for the All Party Parliamentary Group for Allergy. The NASG has been involved in various reports on the unmet needs of those living with allergy, including the lack of training for primary care and lack of specialists in allergy. The NASG is currently drafting an updated report for the All Party Parliamentary Group for Allergy, with Allergy UK contributing to several sections of this report, in particular the socio and economic burden of allergy.

#### **'Self-Care Matters: How to improve health outcomes and build a stronger NHS'**

We attended a roundtable at the House of Commons on 'Self-Care Matters: How to improve health outcomes and build a stronger NHS', which was hosted by Westminster's 'The House' magazine in partnership with Sanofi. This panel of stakeholders discussed how increasing the role of self-care can help change the dynamics of healthcare and was chaired by the All Party Parliamentary Pharmacy Group. Our CEO presented the position of the patient with allergy and how changes in restricting prescriptions for over the counter medicines could have a negative impact on the finances of those living with the disease and thus an impact on their quality of life.

#### Prescription Charges Coalition

As members of the Prescription Charges Coalition of 40 health organisations, we have been involved in advocating for a review and reform of the medical exemption criteria for prescription charges to include all those living with long- term conditions, which includes people living with allergy.

#### Visit to Eurofins

Allergy UK visited a Eurofins laboratory in Wolverhampton to see their allergen testing procedures for food products, thank them for their donation and begin to develop a connection.

#### Improving Quality in Allergy Services

Our CEO is Lay Assessor for the Royal College of Physicians Improving Quality in Allergy Services (IQAS) Accreditation Scheme, representing Allergy UK and the patient perspective. This role involves taking the patient journey and interviewing patients to assess the quality of the services at NHS Trusts working towards accreditation.





## POLLERGEN

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Allergy UK continues to be involved in the important research project 'Linking grass pollen biodiversity and human health: An environmental genomic approach'.

PollerGEN ([pollergen.bangor.ac.uk/](http://pollergen.bangor.ac.uk/)) is a multi-disciplinary project led by researchers at Bangor University and funded by the Natural Environment Research Council (NERC). Other project researchers are based at Aberystwyth University, the University of Worcester, the University of Exeter, The University of Queensland (Australia), the Met Office and the National Botanic Garden of Wales

In Europe, grass pollen is the single most important outdoor aeroallergen, and the prevalence of sensitivity to grass pollen is generally greater than for other pollen types. In severe cases, exposure to high levels of grass pollen can even lead to hospitalisation. But, whilst we know that grass pollen is important, there are many different species of grass, and we do not know which ones contribute to hay fever symptoms and other health outcomes. This is one of the key issues being addressed by the PollerGEN Project.

PollerGEN researchers have been using specially redesigned pollen samplers to collect air samples and subject them

to genetic analyses: an approach that has allowed the monitoring of different types of grass pollen for the first time. The results of the first year of this monitoring, tracking changes in airborne grass pollen diversity through the pollen season, have recently been published in *Nature Ecology and Evolution*.

They are now using this data to investigate whether different types of grass are more influential than others on respiratory health and exploring the link between different grasses and indicators of population respiratory health, such as prescribing rates of respiratory antihistamines and asthma-related hospital admissions. PollerGEN researchers have also been investigating how pollen grains likely move across landscapes, and may lead to new approaches to pollen forecasting in the future.

In the long term, the vision is to develop tools for providing specific pollen forecasts for grass, and to unravel which species are most likely causing allergic responses. More broadly, the team wants to provide information to healthcare professionals and charities, who can translate this information to help people with asthma and respiratory allergies live healthier, happier lives.



## GLOBAL CONNECTIONS AND INFLUENCE

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### Global Allergy and Asthma Patient Platform (GAAPP)

Allergy UK's Head of Clinical Services conducted a seminar led by the Global Allergy and Asthma Patient Platform (GAAPP) at the European Respiratory Society (ERS), raising our profile and presenting the work that Allergy UK does in relation to respiratory allergy.



### International Food Allergy and Anaphylaxis Alliance (IFAAA) meeting

Our CEO attended the IFAAA meeting and EAACI's Food Allergy and Anaphylaxis Meeting (FAAM) in Copenhagen. This provides connection to other patient organisations as well as an awareness of key issues relating to allergy that are happening across the globe.

We also attended several European insight meetings held by industry/corporate partners. This provides connection to other patient organisations as well as an awareness of key global issues relating to allergy.



### European Academy of Dermatology and Venereology (EADV) conference

Our CEO chaired a panel for the EFA session during the EADV Conference in September.

The session provided insight into the impact on quality of life for adult patients with severe atopic eczema, with the aim of creating awareness and understanding for this disease within healthcare professionals, health journalists, patient organisations, patients and their families, and EU policy makers.



### International Alliance of Dermatology Patient Organisations (IADPO)

Allergy UK joined the IADPO in 2018, a global network with the aim of developing a voice for those living with skin disease, including atopic eczema. Allergy UK is a representative on the atopic eczema steering group and has been involved in international conferences and panel discussions with patient organisations from across the globe. The aim is to understand and influence global awareness and support for people living with atopic eczema.



### European Academy of Allergy and Clinical Immunology (EAACI) – Task Forces

Allergy UK is a member of EAACI's Patient Organisation Committee and provides patient representation at several EAACI meetings. Our CEO is the patient organization representative on the new EAACI Guidelines Committee which has been recently established to consider consistency of approach across all EAACI Guidelines. In addition, Allergy UK works alongside internationally renowned allergy experts and represents the patient perspective on an EAACI Task Force considering formulas for the treatment of cow's milk allergy, and an EAACI Task Force reviewing the EAACI Prevention Guidelines for food allergy.



# GLOBAL CONNECTIONS AND INFLUENCE

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## European Federation of Allergy and Airways Diseases Patient Organisations (EFA)

Our CEO has been re-elected as Board Secretary of the European Federation of Allergy and Airways Diseases Patient Organisations (EFA), which is based in Brussels, Belgium. EFA is an alliance of 43 patient organisations across Europe and advocates on their behalf at the European Parliament and beyond on European policy and health discussions. EFA also provides the Secretariat for the European Parliament Interest Group on Allergy and Asthma, along with the European Academy of Allergy and Clinical Immunology.

Examples of the European advocacy work that we are involved in include:

- In 2018 EFA attended the first World Health Organisation (WHO) Global Conference on Air Pollution and Health: Improving Air Quality, Combatting Climate Change – Saving Lives to seek to influence the inclusion of allergy into the current non-communicable diseases (NCDs) global monitoring framework. Allergy is not currently included which means that national plans on NCDs do not feature allergy.
- EFA has been influential in advocating at the European Parliament Environmental and Health Committee, that indoor air quality should be taken into consideration for all new and renovated buildings within the European Union.



- At the European Food Security Agency Stakeholder (EFSA) Forum EFA advocated for EFSA support in developing European guidance on precautionary labelling and threshold levels for food allergens. EFA has also been involved in the WHO and World Food Organisation initiative, Codex Alimentarius Commission, which is looking at a code of practice on food allergen management for food business operators. Allergy UK is also involved in this work supporting the UK Food Standards Agency who are chairing this important initiative.
- EFA projects include focus on specific areas of allergy and launched the first European Atopic Eczema Awareness Day in September and the results of EFA Itching for Life – Quality of life and costs for people with severe atopic eczema in nine European countries.



## CORPORATE PARTNERS

Our heartfelt thanks go to the following Corporate Partners and sponsors for supporting our work during the last year:

### Corporate Partners:



### Organisations who have donated this year:

- Guy's and St Thomas' Reunion
- AS Star Halford Media
- Caudex, McCann Health
- Econ Construction, Sidcup
- Fidelity International
- Food Standard Agency
- Forget-Me-Not Fundraising
- Gulf International Bank
- LEFA Enterprises Ltd
- Selenity Ltd
- Services Machinery Trucks
- St Joseph's College
- The Khalr Charitable Trust
- Walgreens Boots Alliance

# STRUCTURE, GOVERNANCE AND MANAGEMENT

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### Structure, governance and management

The organisation is a charitable company limited by guarantee incorporated in August 2002 having been first registered as an unincorporated charity in 1991. The company was established under a Memorandum of Association which states the objects and powers of the charitable company and is governed under its Articles of Association. In addition to the Articles and Memorandum of Association the charity also operates under the Code of Good Governance approved by the National Council of Voluntary Organisations and the Charity Commission.

### Trustees

A maximum number of 12 trustees can be appointed and currently there are nine on the Board. The Trustees meet at least four times a year at board meetings, with an Annual General Meeting usually held in September. The Board of Trustees are responsible for the strategic direction of the charity and its policy. The Chief Executive (CEO), and appropriate members of the Executive team, attend the Board meetings as required but have no voting rights.

### Recruitment and appointment of the Board of Trustees

The directors of the company are also the charity Trustees for the purposes of charity law and serve for a period of three years, but may be re-elected for further periods of three years, up to a ten-year period. The Trustees have the power to appoint any person to be a trustee who may have a required skill-set or expertise. By the nature of the work that the charity carries out, medical and business knowledge is required on the Board of Trustees and this is well represented on the present board. Trustees annually review the skills within the Board against a desired list of skills and should particular skills be required then the advertisement of posts for new trustees is undertaken accordingly. The skills and expertise of the Trustees are used appropriately to support the CEO as and when required.

There have been two new trustees appointed at the time of audit. In September 2018 the Board welcomed a new trustee with legal expertise and in May 2019 welcomed a trustee who is a paediatric allergy consultant. This has ensured that the charity can continue to benefit from this area of expertise as one of our trustees has reached the full term of service and resigned as of September 2019. Their support and advice has been invaluable to the charity and we thank them for their much valued contribution. We are pleased to benefit from their continued engagement as the Chair of our Health Advisory Board.





# STRUCTURE, GOVERNANCE AND MANAGEMENT

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## Trustees induction and training

New trustees are provided with a recruitment pack which provides detailed information on the work of the charity, the Articles and Memorandum of Association, the Code of Good Governance operated by the charity, trustee job description and responsibilities and the last published accounts. An induction period is arranged for new trustees to familiarise them with the work of the charity by meeting the staff carrying out the various activities of the charity.

## Operational structure

Allergy UK has a CEO who supports the Board to deliver the organisation's strategic objectives. The CEO has delegated powers of responsibility for all of the resources of the charity and directs the day-to-day operation of Allergy UK. The CEO also acts as the Company Secretary to the charity and its trading company. In the last year the Trustees approved

the introduction of an Executive team to support the CEO and an Operations Director and Commercial Director were recruited. The Executive team is supported by the Head of Clinical who provides subject matter expertise. The directors oversee the Operational Management Team who are responsible for the delivery of service area activities focused on achieving our objectives.

## Risk review

Strategic risk assessment is carried out regularly and reported to every trustee board meeting for review, and more often if needed. A disaster recovery plan and internal controls continue to be reviewed and, where needed, have and will be strengthened. Procedures are in place to ensure compliance with employment law and the health and safety of staff, volunteers and visitors to the office.



## CHALLENGES AND RISKS

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### Income generation and sustainability

Allergy UK's mission to raise the profile of allergy, and the charity, has had success over the last few years and this brings further opportunities to deliver more for the allergic community. The challenge that this brings is that, to achieve this, significantly more resources and income are needed to align with the charity's growing influence. Historically Allergy UK has not actively fundraised with the public or the allergic community because the charity has always tried to be self-sufficient through its trading subsidiary. However, greater activity opportunities require more staff and resources and therefore in the latter part of this financial year the Board has approved investment in a Fundraising team and other required posts so that we can identify wider income generation opportunities.

This commitment has included the Board and Executive team receiving external expertise training on developing a fundraising culture and opportunities. This training is also being cascaded to all staff during the following months and will inform the next five year strategy and growth of the charity.

### Growth and influence

As we embrace more opportunities to support the allergic community our staffing resources have had to grow to bring in skill-sets, experience and knowledge, as well as ensuring we have sufficient staff numbers to deliver these ever expanding and wide ranging activities. Our current office spaces were at capacity and during the review of our lease in 2018 an opportunity arose to include additional office space. Recognising the capacity issues and focus in future investment the Board approved expanding the office area. This brings additional set up costs which we are seeking where possible grants and voluntary support. Per annum costs will increase as well.

Our involvement in national, European and global advocacy, policy and influencing activities continues to build and this also places a demand on the staff resources. It is essential that the voice of the allergic community is heard and our role in this both in the UK and across the globe is often led by the CEO and Head of Clinical Services, because of the nature of these meetings and forums. The charity is seeking to develop ways to build upon the clinical and other expertise we have available to us to ensure our involvement in all areas of influence is possible. This will be a part of our five year strategy.



## CHALLENGES AND RISKS

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### Digitalisation

The pace of change in digital is accelerating and charities are having to find ways and funds to keep aligned with these technical changes to be able to maintain business needs and operate in this ever developing society. This requires identifying ways to ensure we have the right skills and technology to participate in the developing digital environment. Microsoft's decision to discontinue service support for Windows 7 is requiring investment in new hardware and software during the future months, which is at a considerable cost for the charity.

In addition, digital society expects transformation of the way we support beneficiaries and engage with donors, which requires changes to the way we operate our in-house and back office functions. In 2018 our trustees approved a major project to replace our Customer Relationship Management (CRM) system with Salesforce, a modern and efficient system able to support our ongoing service needs and digital transformation. Due to funding limitations this is having to be phased in over time.

The first basic phase went live in May 2018 and we were very grateful to receive a grant from Fidelity UK of £35,700 for the third phase. To align with this we have recently updated our financial system to SAGE Cloud Professional which will connect with the CRM.

Future phases include the development of fundraising functions, content marketing and reporting, for which we will also have to seek external grants to support implementation. Alongside this there is a requirement for skills development in the team structure, all of which is a challenge in relation to time and funding and a digital strategy will be a key part of the future five year strategy.

### Differences of opinion on working with industry

Like many charities, and public and private sector businesses, our work connects across a range of other organisations with a connection to our field of work. Allergy UK is a charity which provides advice and information to the allergic community and works closely with the clinical and medical experts in our field. Like many other charities, we also engage with the industry experts and corporate organisations connected to our field. One of the challenges faced on an on-going basis is that there is a risk of often being caught 'in the cross fire' between experts who may have differing opinions on whether those in the medical and charity sector should connect with industry involved in the subject area. In the past year there have been some media discussions around this topic.

The challenge, and risk to reputation, is that media sensationalism, or specific individual views, can sometimes portray a position which is not accurate and we have had to allocate time to providing responses to mitigate inaccuracies. Allergy UK is fully transparent in all of the work that we undertake and follows required regulation and law. We are focused on providing advocacy, support and services for those living with allergy, with advice from experts informing the work that we do. To be able to deliver our services, we require income and we are grateful to our corporate partners who support the work that we do to improve the lives of those living with allergy.



## FINANCIAL REVIEW

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### Reserves policy

In 2018 the Board of Trustees undertook a very detailed review of the reserves policy as a part of the charity's strategic planning, operational decisions, budgeting and risk management processes. At every board meeting, the Trustees can see the movement on reserves and therefore are continuously aware of the current level of reserves held by the charity and the reserves position is reviewed twice a year.

The outcome of this detailed review was that the Trustees have set a financial range for contingency reserves of between 3 to 6 months, whereas previously contingency was set at 6 months. A 100% loss of income over a 6-month period is considered unlikely, therefore trustees do not consider it appropriate to retain reserves above a 6-month income period (£810,000) and will always seek to utilise funds above this level to further its core objectives. The Trustees expect management to maintain a reserve cushion above the three-month minimum and must be notified immediately of any events or expenditure that might cause the reserves to fall below 4 months of income (currently at £540,000). There would always be three months reserve available to cover a sudden closure of business.

The charity will hold up to 25% of its reserves in term deposits that have varying maturities in order to enable it to turn earn interest income. The actual amounts will be agreed by the Management Accountant and Chief Executive in accordance with the reserves policy as and when each deposit matures. The Trustees of BAF have therefore set a minimum reserves requirement at 3 months of current average income (£405,000) to cover a potential stressed reduction in income. The 3 months of reserves must be held on deposit accounts at a mix of maturities to enable the funds to be accessed when required.

### Inter-company accounts

Inter-company accounts for the group are used to manage the charitable funds between BAF and the trading subsidiary Allergy Research Limited (ARL) over the financial year. ARL provides business services through its endorsement activities and generates corporate partnership funds. It is our policy to draw down up to £75,000 from ARL to transfer to BAF each month to cover operational costs.

This accumulates over the year and forms part of the total donation of profits from ARL to BAF by the year end. However, it is essential that ARL is able to function as a trading subsidiary at all times and therefore has to retain a small fund to be able to operate day-to-day. We would aim to hold about 5% of ARL's annual turnover in the ARL accounts on-going for operational need.

### Financial statement

The financial statements show total incoming resources of £1,602,775 and total resources expended of £1,627,550 giving a decrease to reserves of (£24,775).

During the year there was no net transfer from free reserves to designated funds to maintain the reserve policy in respect of the contingency fund (holding six months relevant expenditure). In addition, £246,000 remains allocated to the Allergy UK Research Nurse project to the estimated total of grants over three and a half years. The Trustees had approved an allocation of reserves towards the project - Connecting with Our Customers, for our re-brand, new website and new CRM. £120,000 has been allocated to this project and will roll forward year on year as the phases of implementation are developed.

Expenditure covers all operational activities and staffing resources. In 2018 the Trustees decided to expand the team structure to align with our growth plans so that the charity can continue to meet the ever expanding level of activity. This required a consideration of office space and the timely renewal of the Lease enabled the charity to extend office space in the same location. The Trustees introduced an executive team to support the CEO in delivering the charity and trading subsidiary strategic objectives and



an Operations Director and a Commercial Director were recruited mid-way through the year. The charity recognises the need to diversify income generation and a fundraising team has been introduced to the structure, with a Projects Coordinator post to support with planning future activities.

In this year, a small fundraising team including a Fundraising Manager, Fundraising Officer and a Fundraising Communications Assistant have been recruited. Initial focus has been on supporting donors, especially those taking part in challenge events to raise funds for Allergy UK. The fundraising materials have also been reviewed and research into the types of grants that may be available has been undertaken by the team. Allergy UK does not use professional fundraisers or commercial participators to raise funds. Whilst, the Board recognises that there may be a need to restrict an element of the limited unrestricted funds to enable the charity to move forward the future fundraising activities, we cannot deliver the range of support needed by the allergic community without external funding opportunities being realised through donations and grants and this will be a future area of focus. Our work this year has included development of our systems so that there is an easier process for donations and gift aid.

Allergy UK is registered with, and has paid the Levy requested from, the Fundraising Regulator. The charity is a member of the Institute of Fundraising and complies with all required regulations, including ensuring all procedures comply with General Data Protection Regulations to protect the data of all who contact the charity. All staff have up-to-date safeguarding training for both children and vulnerable adults. We are pleased to advise that we have not received any complaints relating to fundraising during this year.

We are extremely grateful to those who have donated and continue to support our charity, without which our work would not be possible.

Other operational expenditure is through the provision of a helpline; the funding of a communications team to promote awareness of allergic diseases; the employment of two allergy nurses and a dietitian to support the Helpline and provide subject matter expertise on allergy and immunology; a team supporting the trading activities and involvement with other organisations with the same

objectives as our own. All surpluses will be used to finance future charitable expenditure, either for ongoing activities, or one-off projects.

The trading subsidiary provides the principal funding source and has continued to perform well and generated additional income from both its major activities (operation of endorsement programmes and working with corporates). Our trading subsidiary activities are all aimed to be beneficial in achieving the charity's aims to provide support for those living with allergy and raise awareness of allergic disease.

Cash flow has not been a matter of concern for the year and the reduction in cash and cash equivalents at the year-end of (£48,485) is after investing £750,000 into three individual one year deposits of £250,000. The future cash flows may be net outflows as funds are paid out in respect of the Allergy UK Research Nurse project and the CRM project. These outflows are planned and well within the charity's resources.

The two reserves, Fixed Assets and Allergy UK Nurses, established in 2013 continue to differentiate free funds from those invested in fixed assets or committed to placing allergy trained nurses in the community.

All donated income directly finances this expenditure. The other fundraising income, an activity mainly carried out by the subsidiary Allergy Research Limited, requires higher than normal costs compared to a charity seeking public donations. The Endorsement Scheme independently tests applicants' products using specialist laboratories at commensurate fees. Corporate partner activities involve BAF projects supported by our corporate partners, aimed at increasing public and healthcare professional knowledge and awareness of allergy issues. These schemes and projects incur costs, such as printing, distribution and venue costs to enable the achievement of project outcomes. These costs are covered using donated contributions from our corporate partners. The majority of the charity's income is generated, via the subsidiary, by these two means.

Financial forecasts suggest that the charity may be able to fund operating costs over the next few years, however this is an area of continuous challenge for the charity, especially if it wishes to achieve future strategic objectives. It is

hoped that the new fundraising element will be successful, including successful grant applications over the next few years to support the financial income needed to deliver increased activity and levels of service to support those with allergy in the UK. However, this is in a climate of resource challenges for many in the third sector.

This is a proper reflection of the use of designated funds and the payment of liabilities included on the balance sheet at 31 March 2019. The cash resources have been placed on twelve months deposits in a manner that provides for one quarter of the funds to be available each quarter should they be required. In this manner we seek to maximise the interest earned from prudent investments while maintaining accessibility.

### **Key management personal remuneration**

The Trustees consider the Board of Trustees and the Chief Executive as key management personnel of the charity. No remuneration was paid to the Trustees in the year. The pay of the charity's Chief Executive is reviewed yearly by the Board of Trustees and benchmarked with charities of similar size. The Board acknowledged that the Chief Executive's pay was found below the lower benchmark position and approved a pay remuneration increase from April 2019 to ensure that the remuneration is fair.

### **Plans for future periods**

During the next 12 months we will continue working on the objectives outlined in our current strategy 2016-2020, much of which has been successfully focused on embedding foundations for the next strategic phase and raising the profile of BAF nationally, at European and global level.

2019 will see the development of our next five year plan for 2020-2025, which will focus on:

- Empowerment of the voice of the allergic community through advocacy and campaign programmes focused on addressing their needs.
- We will be concentrating on expanding our supporter bases and ensuring we promote programmes that have a significant impact on the quality of life of the allergic community.
- We have become members of the Helplines' Partnership with a plan to work towards accreditation of our Helpline.
- The investment in a fundraising team at Allergy UK in 2018/2019 will allow us to increase income through targeted fundraising approaches.
- Broadening the work that we are doing with UK companies, as we continue to diversify our income generation activities through fundraising and our trading subsidiary activities.
- Digitalisation transformation across the work that we do, including the next phases of the Customer Relationship Management (CRM) system and content marketing.
- Enhancing our engagement activities with the allergic community and other key partner stakeholders.

# FINANCIAL REVIEW

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## Trustees' responsibilities

The Trustees (who are also directors of The British Allergy Foundation for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the Charities SORP 2015 (FRS 102);
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume the charitable company will continue in operation.

The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

## Disclosure of information to the auditors:

We, the directors of the company who held office at the date of approval of these Financial Statements as set out above each confirm, so far as we are aware, that:

- There is no relevant audit information of which the charitable company's auditor is unaware; and
- The Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

In preparing this report, the Trustees have taken advantage of the small companies exemption provided by Section 415A of the Companies Act 2006.

This report was approved by the Trustees on .....

On behalf of the Board

Signature

Name, Trustee

Date

# INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF THE BRITISH ALLERGY FOUNDATION

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## Opinion

We have audited the financial statements of The British Allergy Foundation (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2019 which comprise the Statement of Financial Activities and the Balance Sheet and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

### In our opinion the financial statements:

- give a true and fair view of the state of the group's and parent charitable company's affairs as at 31/03/2019, and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, Charities Act 2011, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006.

## Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group and parent charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the Trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's or parent charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

## Other information

The Trustees are responsible for the other information. The other information comprises the information included in the Trustees' annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.



# INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF THE BRITISH ALLERGY FOUNDATION

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## Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' report (incorporating the Directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Directors' report has been prepared in accordance with applicable legal requirements.

## Matters on which we are required to report by exception

In the light of our knowledge and understanding of the group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006, the Charities Act 2011 and the Charities Accounts (Scotland) Regulations 2006 requires us to report to you if, in our opinion:

- adequate and sufficient accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company's financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies' exemptions in preparing the Directors' report and from the requirement to prepare a strategic report.

## Responsibilities of Trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees (who are also the Directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the group's and parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

## Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditor's report.

## Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and to the charitable company's Trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008 and Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members and its Trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's Trustees as a body, for our audit work, for this report, or for the opinions we have formed.

.....

*Alyson Howard FCCA DChA CF*

*(Senior Statutory Auditor)*

*For and on behalf of MHA MacIntyre Hudson*

*Chartered Accountants*

*Statutory Auditor*

*71 New Dover Road*

*Canterbury*

*Kent*

*CT1 3DZ*

*Date: .....*

*MHA MacIntyre Hudson is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.*

**THE BRITISH ALLERGY FOUNDATION**  
**STATEMENT OF FINANCIAL ACTIVITIES**  
**(INCLUDING CONSOLIDATED INCOME AND EXPENDITURE ACCOUNT)**  
**FOR THE YEAR ENDED 31 MARCH 2019**

		Unrestricted Funds	Restricted Funds	Total 2019	Total 2018
	Notes	£	£	£	£
<b>Income</b>					
Donations and Legacies	3	64,255	35,700	99,955	67,652
Income from charitable activities	4	18,649	-	18,649	11,794
Income from trading activities :					
Seal of Approval	5	524,619	-	524,619	356,625
Renewals	5	543,781	-	543,781	530,978
Allergy Friendly Products	5	54,500	-	54,500	49,850
Allergy Aware Scheme	5	850	-	850	1,913
Alerts	5	875	-	875	2,175
Corporate Partners	5	303,673	-	303,673	283,733
Charity shops		-	-	-	10,274
Fundraising events		49,224	-	49,224	-
Investment Income	6	6,649	-	6,649	9,577
<b>Total Incoming Resources</b>	7	<u>1,567,075</u>	<u>35,700</u>	<u>1,602,775</u>	<u>1,324,571</u>
<b>EXPENDITURE</b>	8				
<b>Cost of raising Funds :</b>					
Voluntary income		53,496	-	53,496	32,614
Commercial trading operations		773,422	35,756	809,178	554,219
<b>Expenditure on charitable activities</b>		764,878	-	764,878	813,686
<b>Total resources expended</b>		<u>1,591,794</u>	<u>35,756</u>	<u>1,627,550</u>	<u>1,400,519</u>
<b>Net income /(expenditure) for the year</b>	9	(24,720)	(56)	(24,775)	(75,948)
<b>Reconciliation of funds</b>					
Total funds brought forward		1,160,640	36,356	1,196,996	1,272,943
<b>Total funds carried forward</b>		<u>1,135,920</u>	<u>36,300</u>	<u>1,172,221</u>	<u>1,196,995</u>

The statement of financial activities includes all gains and losses recognised in the year. All incoming resources and resources expended derive from continuing activities.

**THE BRITISH ALLERGY FOUNDATION**  
**CONSOLIDATED BALANCE SHEET**  
**AS AT 31 MARCH 2019**

Company registration number 04509293

		<b><u>2019</u></b>		<b><u>2018</u></b>	
	<b>Notes</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
<b>Fixed Assets</b>					
Intangible Assets	<b>14</b>		151,425		104,216
Tangible Assets	<b>14</b>		18,195		20,014
			<u>169,620</u>		<u>124,230</u>
<b>Current Assets</b>					
Debtors	<b>16</b>	352,316		301,817	
Investments	<b>17</b>	600,000		750,000	
Cash at Bank and in Hand		<u>401,605</u>		<u>225,045</u>	
		1,353,921		1,276,862	
<b>Creditors :</b>	Amounts falling due within one year				
Other Creditors	<b>18</b>	<u>351,320</u>		<u>204,097</u>	
<b>Net Current Assets</b>			<u>1,002,601</u>		<u>1,072,765</u>
<b>Total Assets Less Current Liabilities</b>			1,172,221		1,196,995
<b><u>Net assets</u></b>			<u>1,172,221</u>		<u>1,196,995</u>
<b>Funds</b>					
Restricted	<b>19</b>		36,300		36,356
Unrestricted	<b>20</b>		1,135,920		1,160,640
<b><u>Total funds</u></b>			<u>1,172,221</u>		<u>1,196,995</u>

The financial statements were approved and authorised by the Board of Trustees on

2019 and signed on their behalf by:

L Pritchard - Chairman

The notes on pages 64 to 74 form part of these financial statements.



**THE BRITISH ALLERGY FOUNDATION**  
**BALANCE SHEET AS AT 31 MARCH 2019**

Company registration number 04509293

		<u>2019</u>		<u>2018</u>	
	Notes	£	£	£	£
<b>Fixed Assets</b>					
Intangible Assets	14		147,767		100,196
Tangible Assets	14		16,556		17,907
Investments	15		12		12
			<u>164,335</u>		<u>118,115</u>
<b>Current Assets</b>					
Debtors	16	48,423		17,764	
Allergy Research Limited	16	310,713		185,859	
Short term investment	17	600,000		750,000	
Cash at Bank and in Hand		125,900		149,569	
		<u>1,085,036</u>		<u>1,103,192</u>	
<b>Creditors :</b>	Amounts falling due within one year				
Other Creditors	18	98,333		45,496	
		<u>98,333</u>		<u>45,496</u>	
<b>Net Current Assets</b>			<u>986,703</u>		<u>1,057,696</u>
<b>Total Assets Less Current Liabilities</b>			1,151,038		1,175,812
<b>Net assets</b>			<u>1,151,038</u>		<u>1,175,812</u>
<b>Funds</b>					
Restricted	19		36,300		36,356
Unrestricted	20		1,114,737		1,139,457
<b>Total funds</b>			<u>1,151,038</u>		<u>1,175,812</u>

The financial statements were approved and authorised by the Board of Trustees on behalf by:

2019 and signed on their

L Pritchard - Chair of Trustees

The notes on pages 64 to 74 form part of these financial statements.

**THE BRITISH ALLERGY FOUNDATION**  
**STATEMENT OF CASH FLOWS AND CONSOLIDATED STATEMENT OF CASH FLOWS**  
**FOR THE YEAR ENDED 31 MARCH 2019**

	Notes	2019 £	Group 2018 £
Cash inflow from operating activities	23	234,307	(162,354)
Cash inflow from investing activities			
Interest income		6,649	9,577
Purchase of fixed assets		(64,396)	(99,045)
Purchase of investments		-	-
Cash used in investing activities		(57,747)	(89,468)
Increase in cash and cash equivalents in the year		176,560	(251,822)
Cash and cash equivalents at 1 April 2018		225,045	476,867
<b>Total cash and cash equivalents at 31 March 2019</b>		<b>401,605</b>	<b>225,045</b>
<b>Cash and cash equivalents consists of:</b>			
Cash at bank and in hand		401,605	225,045
Short term deposits		-	-
<b>Cash and cash equivalents at 31 March 2019</b>		<b>401,605</b>	<b>225,045</b>

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**1. Accounting policies**

**Legal status of the charity**

The charity is a company limited by guarantee, registered in England and Wales and has no share capital. The liability of each member in the event of a winding up is limited to £1. Its registered office and place of business is Planwell House, LEFA Business Park, Edgington Way, Sidcup, Kent DA14 5BH.

The principal activity of the charity is the relief from suffering from allergic diseases, the increase of awareness of allergic diseases, the promotion of research and education of allergic diseases.

**General information and basis of preparation**

The British Allergy Foundation meets the definition of a public benefit entity under FRS 102. The financial statements are prepared on a going concern basis under the historical convention modified to include certain items at fair value. The financial statements are prepared in Sterling which is the functional currency.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) – (Charities SORP (FRS 102), the Financial reporting standard applicable in the UK and Republic of Ireland (FRS 102), the Charities Act 2011, Charities and Trustee Investment (Scotland) Act 2005, the Companies Act 2006 and Generally Accepted Practice as it applies from 1 January 2015

The significant accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented unless otherwise stated.

**Group financial statements**

These financial statements consolidate the results of the charity and its wholly-owned subsidiaries Allergy Research Limited, Allergy UK Limited, Allergy Aware Scheme Limited, Allergy England Limited, Allergy Scotland Limited and Allergy Europe Limited on a line by line basis. A separate statement of financial activities, and income and expenditure account are not presented for the charity itself following the exemptions afforded by section 408 of the Companies Act 2006.

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**1. Accounting policies (Cont.)**

**Recognition of income**

All incoming resources are included in the Statement of Financial Activities (SOFA) when the charity is legally entitled to the income after any performance conditions have been met, the amount can be measured reliably and it's probable that the income will be received.

Incoming resources from charitable trading activities are recognised as follows:

The sale of goods – revenue is recognised when donated goods are sold;

The rendering of services – revenue is recognised as follows:

Applications for the seal of approval when the application has been signed and the terms agreed;

Renewal of the seal of approval in the month of commencement of the new period; and

Services by Corporate Partners in the month the services are supplied.

Voluntary income is received by way of grants, donations, legacies and gifts and is included in full in the Statement of Financial Activities when receivable. Grants, where entitlement is not conditional on the delivery of a specific performance by the charity, are recognised when the charity becomes unconditionally entitled to the grant.

Incoming resources from grants, where related to performance and specific deliverables, are accounted for as the charity earns the right to consideration by its performance.

Investment income is included when receivable.

Legacies are included when the Charity has legal entitlement, the amount can be measured reliably and it's probable that the income will be received.

**Intangible Income**

Donated services is included in income at a valuation which is an estimate of the financial cost borne by the donor where such a cost is quantifiable and measurable. No income is recognised when there is no financial cost borne by a third party.

**Resources Expended**

Resources expended are included in the Statement of Financial Activities on an accrual basis and have been classified under headings that aggregate all costs related to the category inclusive of any VAT which cannot be recovered. Expenditure is recognised where there is a legal or constructive obligation to make payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Fundraising costs are those incurred in seeking voluntary contributions and the staging of fundraising events.

**Support costs**

Support costs are those costs incurred directly in support of expenditure on the objects of the company.

**Allocation to support costs**

Certain expenditure is directly attributable to specific activities and has been included in those cost categories. Certain other costs, which are attributable to more than one activity, are apportioned across cost categories on the basis of an estimate of the proportion of time spent by staff on those activities.

**Pension costs**

The charity participates in defined contribution schemes. The pension costs charged in the financial statements represent the amounts payable by the company to the fund in respect of the year.

**Intangible assets**

Intangible fixed assets are amortised on a straight line basis over their useful lives. The useful lives of intangible assets are as follows:

Website: 10 years from when the website is live

Development costs: 10 years from when the CRM system goes live



**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**1. Accounting policies (Cont.)**

**Tangible fixed assets**

Tangible fixed assets, except low value items (below £500) which are not capitalised, are included at cost. Depreciation is provided on all tangible fixed assets, at rates calculated to write off the cost, less estimated residual value over their expected useful life as follow:

- Furniture and fittings 25% reducing balance basis; and
- Other assets three or four years, straight line.

**Operating leases**

Amounts payable under operating leases are charged to the Statement of Financial Activities as incurred over the period of the lease.

**Foreign currency**

Monetary assets and liabilities denominated in foreign currencies are translated into sterling at rates of exchange ruling at the balance sheet date.

Transactions in foreign currencies are translated into sterling at the rate ruling on the date of the transaction.

Exchange gains and losses are recognised in the Profit and Loss account.

**Fund accounting**

Funds held by the charity are either:

**Restricted** - these are funds that can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

**Unrestricted** - these are funds that can be used in accordance with the charitable objects at the discretion of the trustees. Unrestricted reserves are split between separate funds as disclosed in note 20.

**Designated funds** - comprise unrestricted funds that have been set aside by the trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

**Investments**

Investments in subsidiaries are measured at cost less impairment.

Current assets investments are short term highly liquid investments and are held at fair value. These include cash on deposit and cash equivalents with a maturity of less than one year.

**Debtors and creditors receivable/payable within one year**

Debtors and creditors with no stated interest rate and receivable or payable within one year are recorded at transaction price. Any losses from impairment are recognised in expenditure.

**Judgements and key sources of estimation uncertainty**

No judgements (apart from those involving estimates) have been made in the process of applying the above accounting policies that have the most significant effect on amounts recognised in the financial statements. There are no key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next year.

**Volunteers**

The volunteers' time is not included in the financial statements.

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**2 Financial performance of the charity**

The consolidated statement of financial activities includes the results of Allergy Research Limited one of the charity's wholly owned subsidiaries which operates the trading activities of the group including Endorsements, Corporate Partners, Allergy Aware Scheme and an allergy alert service.

The summary financial performance of the charity alone is:

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
Income	174,478	89,023
Service charge from a subsidiary company	300,000	264,000
Gift aid from a subsidiary company	649,381	679,557
	<u>1,123,858</u>	<u>1,032,580</u>
Expenditure on fund raising	53,496	32,614
Expenditure on trading	330,259	262,228
Expenditure on charitable activities	764,878	813,686
	<u>1,148,633</u>	<u>1,108,528</u>
<b>Net income</b>	(24,774)	(75,948)
Total funds brought forward	<u>1,175,813</u>	<u>1,251,761</u>
<b>Total funds carried forward</b>	<u><u>1,151,039</u></u>	<u><u>1,175,813</u></u>

**3 Income from donation and legacies**

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
Gifts	<u><b>99,955</b></u>	<u>67,652</u>
	<u><u>99,955</u></u>	<u><u>67,652</u></u>

The income from donations and legacies was £64,255 unrestricted (2018: £67,652) and £35,700 restricted (2018: Enil).

**4 Income from charitable activities**

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
Income from translation cards	14,365	11,382
Fees received	4,068	-
Affiliate marketing	217	400
Pin Badges	-	12
	<u>18,649</u>	<u>11,794</u>

Income from charitable activities was £18,649 unrestricted (2018: £11,794) and Enil restricted (2018: Enil).

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**5 Income and expenditure of trading subsidiary**

The wholly owned trading subsidiary Allergy Research Limited is incorporated in the United Kingdom (company number 03550847) and pays all its profits to the charity under the gift aid scheme. Allergy Research Limited operates: the charity's Seal of Approval scheme; through Corporate Partners works with corporates in the allergy sector; the Allergy Aware scheme the charity's foodservice operators accreditation scheme; and issues allergy alerts.

The following subsidiaries are wholly owned, incorporated in the United Kingdom and are dormant: Allergy Aware Scheme Limited (06300759); Allergy UK Limited (06302734); Allergy England Limited (08494679); Allergy Europe Limited (08695950); and Allergy Scotland Limited (SC447980).

The summary financial performance of the Allergy Research Limited alone is:

	<b><u>2019</u></b>	<b><u>2018</u></b>
	<b>£</b>	<b>£</b>
Turnover	1,428,297	1,233,539
Cost of sales and administration costs	(778,916)	(553,991)
Interest income	-	9
	<u>649,381</u>	<u>679,557</u>
Net profit	649,381	679,557
Amount gift aided to the charity	(649,381)	(679,557)
	<u>-</u>	<u>0</u>
Retained in subsidiary	-	0

The assets and liabilities of the subsidiary were:

Fixed assets	5,287	6,117
Current assets	579,596	373,529
Current liabilities	(563,700)	(358,460)
	<u>21,183</u>	<u>21,186</u>
Total net assets	21,183	21,186
Share capital	2	2
Profit and loss reserve	21,181	21,184
	<u>21,183</u>	<u>21,186</u>

All income and expenditure from trading activities are attributable to unrestricted funds.

**6 Investment income**

All the groups investment income arises from money deposited with the group's bankers.  
All income from investment income are attributable to unrestricted funds.

**7 Turnover**

	<b><u>2019</u></b>	<b><u>2018</u></b>
Turnover split geographically:		
United Kingdom	757,670	682,671
The Rest of the World	845,105	641,900
	<u>1,602,775</u>	<u>1,324,571</u>

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR 31 MARCH 2019**

**8 Total resources expended**

	Basis of allocation	Charitable activities														Total
		Voluntary income		Trading income		Advice & information*				Education & training				Governance		
		2019	2018	2019	2018	2019		2018		2019		2018		2019	2018	
Costs directly allocated to activities	direct	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
		33,596	22,904	221,678	178,416	369,731	-	383,227	-	36,250	-	38,832	-	-	661,255	623,379
Professional fees	direct	-	-	909	110	3,637	-	80,115	-	-	-	-	-	-	4,546	80,225
Trading costs	direct	-	-	433,616	268,701	-	-	-	-	-	-	-	-	-	433,616	268,701
Communications	direct	-	-	-	-	18,406	-	18,207	-	-	-	-	-	-	18,406	18,207
Other direct costs	direct	8,088	-	2,015	1,308	33,740	35,756	17,384	-	18,000	-	6,235	31,207	17,624	115,223	68,744
Bad debts	direct	-	-	41,918	-	-	-	-	-	-	-	-	-	-	41,918	-
Depreciation	direct	-	-	920	2,855	-	-	8,565	-	-	-	-	-	-	920	11,420
Support costs allocated to activities		41,684	22,904	701,056	451,391	425,514	35,756	507,498	-	54,250	-	45,067	31,207	17,624	1,275,883	1,070,676
Premises	staff costs	4,552	2,760	22,194	26,071	43,309	-	50,425	-	4,321	-	4,898	-	-	74,376	84,154
General office & Finance Staff	staff costs	2,648	5,337	61,687	61,526	120,383	-	118,766	-	12,006	-	10,892	-	-	196,723	196,521
Communications	staff costs	455	597	2,218	5,640	4,328	-	10,909	-	432	-	1,060	-	-	7,432	18,207
Legal & professional	staff costs	1,983	223	9,670	2,102	18,869	-	4,066	-	1,883	-	395	-	-	32,405	6,785
General office expenses	staff costs	881	355	6,051	3,354	11,809	-	6,488	-	867	-	630	-	-	19,608	10,828
Depreciation	staff costs	1,107	337	5,397	3,183	10,531	-	6,157	-	1,051	-	598	-	-	18,086	10,275
Financial charges	staff costs	186	101	906	952	1,768	-	1,841	-	176	-	179	-	-	3,036	3,073
		11,812	9,710	108,122	102,828	210,997	-	198,652	-	20,736	-	18,651	-	-	351,667	329,842
Total resources expended		53,496	32,614	809,178	554,219	636,511	35,756	706,150	-	74,986	-	63,719	31,207	17,624	1,627,550	1,400,518

\*Advice & information is supplied to allergy sufferers and their carers via our telephone Helpline, website and web chat facilities. More details are available in the Trustees' Report. Governance costs are split between auditors remuneration £4,684 (2018- £4,900) trustees meeting and travelling expenses £7,436 (2018 - £7,710). Restricted expenditure for 2019 is shown above and the amounts of restricted expenditure in 2018 were Education & training: Other direct costs £31,207



**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**9 Net income for the year**

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
This is stated after charging:		
Operating leases - office and shop premises	42,676	56,073
Operating leases -equipment	8,437	7,246
Auditors fees	7,183	7,380
Other services from the auditors	-	-
	<u>-</u>	<u>-</u>

**10 Analysis of staff costs, trustees expenses and the cost of key management personnel**

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
Salaries and wages	680,642	725,235
Social security costs	62,784	67,589
Pension costs	21,451	20,862

No employees' emoluments as defined for tax purposes amounted to over £60,000 in the year.

The average monthly number of employees and full time equivalent (FTE) during the year was as follows:

	<b>2019</b>	<b>2018</b>
	<b>Number</b>	<b>Number</b>
Charitable activities	19	20
Generating funds	8	7

**Chief Executive Office**

During the year the CEO was responsible for the day to day running of the charity and her benefits amounted to £75,543 (2018: £75,543) being salary, national insurance contributions and pension contributions.

**Pension costs**

The charity operates defined contribution pension schemes for the benefit of 25 employees. Contributions payable by the charity for the period was £21,451 (2018 £ 20,862).

**The charity Trustees**

The charity Trustees received no benefits from employment with the charity or its subsidiary in the year nor the previous year. They were all reimbursed expenses incurred in properly performing their duties as trustees that in aggregate amounted to £4,638 (2018:£4,914) which included travelling costs and overnight accommodation for those trustees who reside overseas or when attendance was required earlier than was reasonable for their normal journey time. One trustee was also reimbursed for the cost of carer support.

**11 Auditors remuneration**

	<b>2019</b>	<b>2018</b>
	<b>£</b>	<b>£</b>
Fees payable to the charity's auditors for the audit of the charity's annual accounts	<b>4,683</b>	<b>4,900</b>
Fees payable to the charity's auditors for other services:		
Audit of the charity's subsidiaries	<b>2,500</b>	<b>2,480</b>
Other services	-	-
	<u><b>7,183</b></u>	<u><b>7,380</b></u>

**THE BRITISH ALLERGY FOUNDATION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31ST MARCH 2019**

**12 Related party transaction**

There were no related party transactions during the year.

**13 Corporation taxation**

The charity is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or section 252 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects.

**14 Intangible fixed assets**

	Group		Charity	
	2019	2018	2019	2018
	£	£	£	£
<b>Website and development costs</b>				
<b>Cost</b>				
At 1 April 2018	153,917	55,842	149,451	55,842
Additions	61,155	98,075	61,065	93,609
Disposals	-	-	-	-
At 31 March 2019	215,072	153,917	210,516	149,451
<b>Depreciation</b>				
At 1 April 2018	49,701	44,862	49,255	44,862
Charge for the year	13,946	4,839	13,494	4,393
On disposals	-	-	-	-
At 31 March 2019	63,647	49,701	62,749	49,255
<b>Net book value</b>				
At 31 March 2019	151,425	104,216	147,767	100,197
At 31 March 2018	104,216	6,141	100,196	6,587

**Tangible fixed assets**

	Group		Charity	
	2019	2018	2019	2018
	£	£	£	£
<b>Office furniture and equipment</b>				
<b>Cost</b>				
At 1 April 2018	112,854	111,883	97,797	96,826
Additions	3,241	971	3,241	971
Disposals	-	-	-	-
At 31 March 2019	116,095	112,854	101,038	97,797
<b>Depreciation</b>				
At 1 April 2018	92,840	86,259	79,890	74,008
Charge for the year	5,060	6,581	4,592	5,882
<b>On disposals</b>	-	-	-	-
At 31 March 2019	97,900	92,840	84,482	79,890
<b>Net book value</b>				
At 31 March 2019	18,195	20,014	16,556	17,907
At 31 March 2018	20,014	25,624	17,907	22,818

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15 Investments	Reserves		Shares	
	2019	2018	2019	2018
	£	£	£	£
Shares and reserves in subsidiary undertaking.				
All subsidiaries are 100% holdings.				
Allergy Research Ltd: 2 ordinary shares	21,184	21,184	2	2
Allergy UK Ltd: 2 ordinary shares (dormant)	-	-	2	2
Allergy Aware Scheme Ltd : 2 ordinary share (dormant)	-	-	2	2
Allergy England Ltd: 2 ordinary shares (dormant)	-	-	2	2
Allergy Scotland Ltd: 2 ordinary shares (dormant)	-	-	2	2
Allergy Europe Ltd: 2 ordinary shares (dormant)	-	-	2	2
			12	12

No subsidiary made a profit or a loss during the year or the previous year. The reserves were increased by £2 during this year but unchanged in the previous year.

16 Debtors	Group		Charity	
	2019	2018	2019	2018
	£	£	£	£
Trade debtors	306,979	286,479	3,086	2,426
Prepayments	8,637	14,338	8,637	14,338
Other debtors	36,700	1,000	36,700	1,000
Amount owed by group undertakings:				
Allergy Research Ltd	-	-	310,713	185,859
	352,316	301,817	359,136	203,623

17 Current assets investments	Group		Charity	
	2019	2018	2019	2018
	£	£	£	£
Short term deposits	600,000	750,000	600,000	750,000

18 Creditors	Group		Charity	
	2019	2018	2019	2018
	£	£	£	£
Trade creditors	54,585	38,865	44,606	5,749
Taxation and social security costs	54,302	40,900	25,701	22,334
Other creditors	242,432	124,332	28,026	17,413
	351,320	204,097	98,333	45,496

19 Restricted funds	1/04/2018	Incoming	Outgoing	31/03/2019
	£	£	£	£
HCP Scotland Training Fund	600	-	-	600
Allergy UK Nurses Appeal	35,756	-	35,756	-
Fidelity Grant	-	35,700	-	35,700
	36,356	35,700	35,756	36,300

The Allergy UK Nurses Appeal is to improve the services offered to all allergy sufferers.

The Fidelity Grant is to fund Phase 3 of the CRM system.

The HCP (health care professional) Scotland Training Fund is to provide a grant towards training costs for HCPs in Scotland.

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20	Unrestricted Funds	2019 Group £	2019 Charity £	2018 Group £	2018 Charity £
	<b>General reserves</b>				
	At 1 April 2018	96,039	74,856	130,562	109,379
	Surplus for the year	(24,720)	(24,720)	(44,740)	(44,740)
	Transfer from other reserves	35,091	35,091	44,911	44,911
		106,410	85,227	130,733	109,550
	Transfer to other reserves	0	0	(34,694)	(34,694)
	At 31 March 2019	106,410	85,227	96,039	74,856
	<b>Fixed assets reserve</b>				
	At 1 April 2018	17,907	17,907+	22,818	22,818
	Transfer to General reserve	(1,351)	(1,351)	(4,911)	(4,911)
	At 31 March 2019	16,556	16,556	17,907	17,907
	<b>Allergy UK nurses reserve</b>				
	At 1 April 2018	246,000	246,000	246,000	246,000
	Transfer to General reserve	(33,740)	(33,740)	0	0
	At 31 March 2019	212,260	212,260	246,000	246,000
	<b>CRM reserve</b>				
	At 1 April 2018	200,000	200,000	240,000	240,000
	Transfer to General reserve	0	0	(40,000)	(40,000)
	At 31 March 2019	200,000	200,000	200,000	200,000
	<b>Contingency fund</b>				
	At 1 April 2018	600,694	600,694	566,000	566,000
	Transfer from General reserve	0	0	34,694	34,694
	At 31 March 2019	600,694	600,694	600,694	600,694
	<b>Total unrestricted funds</b>	1,135,920	1,114,737	1,160,640	1,139,457

The fixed assets reserve is to differentiate the funds already invested in fixed assets from free reserves. The Allergy UK nurses reserve is to part fund the cost of an allergy nurse in the community. The contingency fund is set at six months relevant expenditure and is available to fund the costs should unforeseen events disrupt the charity.

**21 Analysis of group net assets between funds as at 31 March 2019**

	General Reserves £	Fixed Assets £	Contingency Fund £	Nurses Reserve £	CRM Reserve £	Restricted Funds £	Total Funds £
Tangible fixed assets	151,713	17,907	0	0	0	0	169,620
Current assets	304,667	0	600,694	212,260	200,000	36,300	1,353,921
Current liabilities	(351,320)	0	0	0	0	0	(351,320)
Net assets at 31 March 2019	105,060	17,907	600,694	212,260	200,000	36,300	1,172,221



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**22 Obligations under operating leases**

The future minimum rentals payable under non-cancellable operating leases are as follows:

	2019	2018
Within one year	107,643	14,824
In two to five years	420,272	14,896
	<u>529,934</u>	<u>31,738</u>

**23 Reconciliation of net income to net cash flow from operating activities**

	2019	2018
Net income for the year	(24,775)	(75,948)
Adjustments for:		
Depreciation charges	19,005	11,420
Interest income	(6,649)	(9,577)
(Increase)/decrease in debtors	99,503	(40,077)
Increase /(decrease) in creditors	147,223	(48,171)
Net cash provided by operating activities	<u>234,307</u>	<u>(162,353)</u>



## FOOTNOTES

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