



## Understanding Pica

Summer 2026



Family carers lead busy and challenging lives and we are grateful to all the family carers who have contributed to the work highlighted in this newsletter, in support of other families. The CBF community is a positive and supportive space and families tell me this makes such a difference when life gets tough. This edition of challenge is focused on pica behaviour. Families and staff supporting individuals with pica have to be especially vigilant.

Too often, the professionals across the system are not as aware as they should be of pica and the extremely serious risks of this behaviour. We're pleased to feature in this newsletter a range of developments, which we hope will help to improve that situation. We have a pica podcast coming soon, a new information resource for families (which we hope will also be useful to staff), our updated pica training workshop and the CBF has also been involved in the development of a pica pathway for Northern Ireland. The pathway helps all professionals involved to understand their role, to recognise what they should be doing, and to provide families with the support that they need, both to prevent harm, but also if an emergency arises. Families are experts in their relatives behaviours but often find that when they need to call on health professionals or others, the expertise they expect to find is not there. Families shouldn't have to be the ones to pull everyone together and work out how to get different systems and services to each play their part. Having a pica pathway in every area would help to make it clear to all professionals what their role is and what they need to do and could be potentially life-saving for people with learning disabilities, who display pica behaviour. We would like to see pica pathways in every area of the UK.

We're also pleased to feature in this newsletter research on Video Interaction Guidance (VIG) - an approach which really builds on the strengths of family carers, the latest developments on two CBF projects, updates on our policy and strategic influencing work and the CBF advocacy guide to help support you as you advocate for your relative's rights.

We hope you enjoy this edition of Challenge.

**Jacqui Shurlock, CEO**

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## Resources in this Issue

All the resources featured in this edition of our newsletter (and many others) are available on [our website](#). You can access any resources in this newsletter that are underlined by clicking on them or by calling us on 01634 838739.

# Let's Talk About Pica

We're really pleased to share our new resource, *Pica: supporting someone with severe learning disabilities who ingests non-food substances*. Not the catchiest of titles, we know, but not everyone even knows what pica is!

We know from working with families that if your relative engages in pica, it can feel frightening and confusing. Often, even the professionals supporting you haven't been taught about it. This resource has been developed to bring together clear information, real-life learning from our Family Support Team's casework, and practical tools to help you feel more confident and supported.

### What's pica, and why does it matter?

Pica is when someone eats or drinks items or substances that aren't food and don't have any nutritional value, such as stones, fabric, or small objects (but not always as small as you'd think!).

**It's important to make this clear: all pica behaviour is high risk and can have serious implications.**

It's less important to say how to pronounce 'pica', but it should be pronounced 'pie-ka' not 'pee-ka'. While some items may pass through the body without harm, others can cause choking, infections, blockages, or poisoning, and in some cases the consequences can be life-threatening or require surgery. You might not know whether something will cause harm, and we are told often that pica isn't taken seriously at first, or that you've had to push for professionals to understand the risks. This guide will help you to advocate for your relative and clearly explain those risks.

**Like all our information, it's free to download [here](#). We believe cost should never be a barrier to accessing the information you need, when you need it.**

## Support and Information

If you want to talk it through or are looking for some support to take action, please do contact the Family Support Team on 0300 666 0126 or at [support@theCBF.org.uk](mailto:support@theCBF.org.uk). There's no such thing as a silly question and we are here to help you get to where you want to be.

### Why is my relative eating things?

There is always a reason for behaviour, even if it's not immediately obvious.

Pica may meet needs including:

- Social attention
- Access to preferred items
- Escape
- Sensory stimulation, including reducing boredom

The resource explains how a positive behaviour support approach, including a functional assessment of the behaviour or keeping simple records (like noting what happens before and after episodes), can help build a clearer picture and lead to more effective support.

### What's inside the resource?

This is not just an information resource, like many of the CBF's resources it's designed to help you take action.

Inside you'll find:

- The UK's most comprehensive information resource focusing on pica and written for families of people with severe learning disabilities
- A template letter to use to explain pica to professionals and ask for the right level of support, because not all schools and care providers know about the risks
- A guide to writing a pica support plan to share what you know about your relative – and a template to get you started.

# CBF Delivers Open Letter to 10 Downing Street

Earlier this year, family carers and young people, supported by the CBF and children's charity Kids, went to 10 Downing Street. The group delivered an open letter to the Prime Minister with 3 key asks to improve the experience of transition from children's to adult services:

- Introduce a national, cross-departmental plan for transition co-produced by young people with SEND and their families
- Introduce a named Transition Coordinator to facilitate a person-centred and ambitious approach to transition
- Amend the Care Act 2014 to introduce a statutory age to begin transition planning



When a young person turns 18, their rights and access to support can change dramatically. This, combined with significant changes to the legal rights of parents, delayed planning, and a lack of suitable community provision, means that the transition process can often feel rushed and lack thorough communication between families and different services. We firmly believe



More information about the open letter, including any responses we get back from government officials, can be found [here](#).

that everyone deserves the opportunity to live and thrive in an environment that is the best for them and to live near those they love. Our letter was signed by over 335 family carers, individuals with lived experience of disability, professionals, and organisations. We are following up with key ministers and officials in the Department for Education, the Department of Health and the Ministry of Housing.

*Thank you to everyone who signed our letter.*

## Lived Experience of Pica: A Parent and Sister's Perspective

*By Louise, family carer*

Pica is not a behaviour we can switch off, it's not a phase, it's not just sensory, it is a constant life-threatening reality that follows us into every room, every outing, and every moment of the day. As a mother, I do not relax, I do not sit down and assume my child is safe, because everyday objects, things most families never think about, can become life-threatening within seconds – soil, Blu Tack, coins, cleaning products, magnets, puddles, plants, ice, anything within reach. Our home is not a normal home; it is a controlled environment. Things are locked away, toys are restricted, rooms are locked and checked constantly, and freedom is replaced with supervision. This is not how families imagine raising their children, but it is the only way to keep them alive.

We have explained the same condition over and over to professionals who have never heard of severe pica and too often we are just handed a 'fact sheet'. No pathway, no specialist, no plan, just "manage it at home". We are already managing it every minute of every day. What families like mine need isn't sympathy. We need understanding, we need professionals who listen, we need a clear medical pathway and we need practical support, not just information. Because pica is not rare to the families living with it; it is our everyday life. **And when services don't understand it, families don't just feel unsupported, they feel invisible.** Pica is often described clinically as the ingestion of non-food items. That definition does not come close to

capturing the reality of living with it. For our family, pica is not a behaviour we can manage. It is a constant, life-threatening risk that shapes every moment of every day.

My daughter Erin's pica is severe and persistent. She does not distinguish between what's safe and what's dangerous; stones, soil, plastic, foam, paper, wood, fabric, paint, faeces, hair are all potential hazards. Outdoor spaces, which should be places of freedom and joy, are environments of extreme risk. Erin cannot be left unsupervised, not even for a second. Every outing requires scanning the ground, the walls, furniture, and other people's belongings. **There's no mental rest. The fear is not abstract.**

Pica strips away normal parenting assumptions. Simple things like playing outside, visiting a park, being in a garden become risk assessments. There is guilt for restricting freedom, for constantly saying no, for having to physically intervene. There is fear of missing something, of what might happen next, of what adulthood will look like. And there is grief for the ease and safety other families take for granted. Pica does not only affect the individual, it shapes the emotional climate of the whole family. It is about parents and siblings doing everything possible to keep someone safe in a world full of hazards, often without understanding, resources or support. Pica is not just about ingestion, it is about fear, vigilance, restriction, exhaustion and love.

**“There's ongoing anxiety which creates a constant background of hypervigilance that is exhausting and isolating.”**

### **To prevent harm, I believe the following are essential:**

- **Recognition of the physical and psychological toll on families, the cumulative trauma of constant risk, the exhaustion of long-term vigilance, and the impact on siblings and family dynamics**
- **Pica carries real immediate medical danger, and the knowledge of families and their lived experience should be recognised and treated as clinical information**
- **Professionals who understand that pica is not a phase and recognise that serious injury, internal injury, can occur before visible symptoms**
- **Partnership approach with families taken seriously from the outset, and decisions made clearly with shared responsibility for safety**
- **Families should not be blamed for access issues**
- **Practical support in relation to home safety, environmental adaptations, specialist equipment, respite, and safe environments outside the home**
- **Training on pica-related risk, not just ingestion events**
- **Clear, consistent medical pathways including clear referral routes from GPs, a person-centred care plan and appropriate follow-up**
- **A risk assessment pathway with honest explanations of risk, clear reasoning for decisions with families involved, believed and supported during waiting periods**
- **Annual pica clinics for clinical monitoring and oversight with regular testing and imaging**
- **Holistic assessment including nutritional deficiencies, gastroenterological complications, dental issues, and triggers for pica**

**This is an extract from the full story, which is available on [our website](#).**

### **Support and Information**

The [Family Support Service](#) can provide information and support about the needs of your family member with a severe learning disability and behaviour described as challenging. Our support is confidential, and we won't judge you or tell you what to do. You can call the Family Support Service on 0300 666 0126 or email us at [support@theCBF.org.uk](mailto:support@theCBF.org.uk)

# Making it Matter: no voice but a lot to say

We are pleased to announce a new project, building on two areas of work that have been shown to make a difference to individuals and families.

The first area of work is our co-produced [training workshops](#), which share evidence-based practice with both professionals and family carers, making a difference to people's lives.

Second is our [What Matters to Me](#) project, which showed that it is possible to find out what matters to people with severe or profound and multiple learning disabilities, and it is possible to use what matters to make a difference.



Thanks to National Lottery players, The Challenging Behaviour Foundation has received more than £2.2 million from The National Lottery Community Fund. The funding will be used for Making it Matter to increase direct engagement with young people who have been historically excluded from engagement activities.

The aim is to increase direct engagement with young people with severe or profound and multiple learning disabilities across the UK, with a specific focus on understanding the barriers faced by young people from minority ethnic groups.

## **The project will involve:**

- Co-producing a new training workshop to support and encourage other organisations to directly engage with young people in a way which will influence policy and practice
- Ensuring the perspectives of young people with severe or profound and multiple learning disabilities whose behaviours challenge inform the work of the Challenging Behaviour - National Strategy Group
- Establishing a national online community of practice to share learning and identify themes for UK-wide policy influencing

You can find out more about the CBF's newest project in our full statement [here](#).

And if you are interested in joining the community of practice later this year please sign up to the network [here](#).

## Forward Together *Building Networks, Improving Lives*

The Forward Together project is a three-year, CBF-led project running until March 2027. It aims to improve the lives of individuals with severe learning disabilities and behaviours that challenge, and their families. Building on earlier work from our [Getting it Right](#) project, Forward Together is creating stronger links between families, services, and decision-makers by developing regional networks and focusing on four key communities of families: early years, transition, older family carers, and families at risk or in crisis.

At its heart, the project is about reducing isolation and helping families feel more heard, informed, and connected. It brings together families and professionals to share what works, strengthen local partnerships, and influence policy and practice nationally. The project has engaged 380 members across three regional networks in the Black Country, Manchester and Salford, and Kent and Medway, and has delivered seven Community of Practice events plus seven workshops, with more to come.



The work is also generating valuable learning. Families and professionals continue to highlight challenges such as disjointed services, limited early planning, poor access to respite and short breaks, workforce shortages, and a lack of meaningful support options for adults over 25. By surfacing these issues and sharing good practice across regions, Forward Together is helping services to better understand families' needs and respond earlier to prevent a crisis.

Looking ahead to Year 3, the project will focus on delivering the final workshops to family carers and professionals, holding further in-person events, publishing regional reports, and feeding into national influencing work through the Challenging Behaviour - National Strategy Group (CB-NSG). Together, these efforts are helping to build lasting, supportive networks for families now and into the future.

**“We found the event most beneficial and enjoyed meeting the various specialists, learning new ideas, gaining their support, all invaluable”**  
- family carer



If you are a family carer living in, or a professional working in, any of the three project areas, please sign up [here](#) to your area's regional network to be kept up to date on the project's progress.

For more information, contact [forwardtogether@theCBF.org.uk](mailto:forwardtogether@theCBF.org.uk)

## A Statement on the Use of Restrictive Interventions:

### Children and young people with a learning disability in England, Northern Ireland, Scotland and Wales

The Protecting Rights; Eliminating Restraint Group (PR;ERG), led by the CBF, has co-produced a statement highlighting the significant harm caused by the misuse of restrictive interventions on children and young people with a learning disability across England, Northern Ireland, Scotland and Wales.

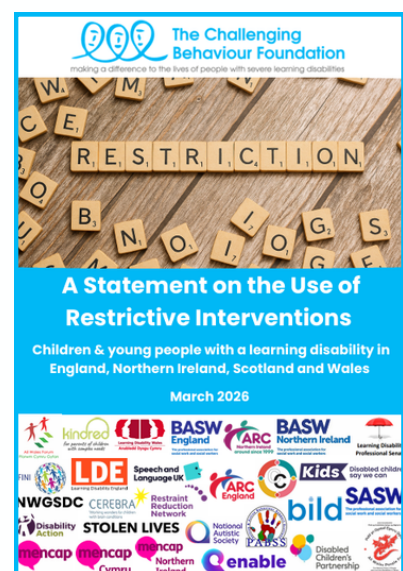
Published in March, the statement brings together a substantial body of research and evidence demonstrating the physical and emotional harm caused by the misuse of restrictive practices across education, health and social care settings. The statement sets out a range of policy recommendations and clear calls for action, including the need to recognise the misuse of restrictive practices as a child protection issue, targeted investment in early intervention and

prevention, the development of national training standards and ending the inhumane and unsafe misuse of seclusion and solitary confinement.

The statement has received support from 30 third sector organisations from across the UK, demonstrating widespread support for the need for governments to act to tackle the harm caused by the misuse of restrictive practices.

The CBF will continue to work with the PR;ERG and other partners to engage governments across the UK on the key asks set out in the statement and push for meaningful change to strengthen protections for children and young people across the UK.

You can read the full statement [here](#).



# Video Interaction Guidance – Learning Disability Study

Video Interaction Guidance (VIG) is a way of looking at how parents interact and communicate with their child. VIG looks at what parent carers are already doing well. The VIG therapist works with parents by looking at successful and positive moments between the parents and the child. The therapist helps parents reflect and take notice of what they are doing that is making a difference in their relationship with their child.

**“ I learned... that I shouldn't be so hard on myself. ”**  
-parent

The Video Interaction Guidance – Learning Disability study aimed to find out whether VIG could be offered remotely to parents whose children with a learning disability have been referred to specialist mental health services. It is currently not typically offered in specialist mental health services.

The study worked with several services in England, working with parents who have a child aged 6–12 years old with a learning disability who had been referred due to behaviours that challenge or mental health difficulties. Most parents liked VIG, describing it as “powerful” and “brilliant”. Clinicians also liked VIG, emphasising its powerful impact on parent-child relationships.

The findings support the need for a larger study to examine VIG's effectiveness in improving parent-child relationships in families who have a child with a learning disability.

The research paper is available to read [here](#), with an accessible summary [here](#).

Ayesha, from the parent carer advisory group, and Vaso Totsika, lead researcher, have co-produced a video on the study, which is available [here](#).



## Why not make a donation to the Challenging Behaviour Foundation?

Your donation helps us continue being there for families who need us most. Give the gift of care and help the CBF continue to be a trusted source of information and support.

- **£10** provides a family without internet access receives a vital printed information pack
- **£30** means a family carer can receive a listening ear call from an expert in active listening who also knows what it's like to be a family carer.
- **£75** connects a family carer with a caseworker who can offer expertise and moral support in a virtual meeting
- **£125** enables a family to be supported in sharing their lived experience publicly, to influence policy and change for others.
- **£250** facilitates an episode of 'Challenge Accepted' our podcast giving family carers a voice and practical guidance wherever they are.



Every donation helps families feel less alone. You can donate online here [here](#).

# Coming Soon – Pica Podcast Episodes

We're currently recording three new episodes of our Challenge Accepted podcast about pica – when someone persistently eats, or tries to eat, non-food items. For many families, pica can be frightening and exhausting, and it can be hard to explain to other people what is happening day to day.

Our panel of experts will include:

- Viv Cooper – family carer with lived experience of pica
- Kate Sanger – family carer with lived experience of pica
- Linda Hume – Registered Nurse for People with Learning Disabilities
- Peter Baker – Senior Lecturer, Tizard Centre, University of Kent



These episodes will give clear information, practical ideas, and reassurance. As with most things, what helps will depend on the individual – but having the right words and a shared understanding can be a good place to start.

## Episode 1: what is pica?

We will kick off with the basics: what pica means, how to say it, and why it can help to name what's going on. Families often tell us they worry they won't be taken seriously, or that other people will misunderstand the risks, so the panel will talk about how recognising pica can support clearer planning, safer support and conversations with services.

## Episode 2: getting help at hospital

What happens when someone swallows something that could be harmful and they need urgent medical help? The panel talk through the reality of going to A&E – a high pica risk environment itself – and how to ask for it to be made safe. Hear top tips from families who have been there including how to explain what's happened, ensure you are listened to and make sure the right checks are done. Using a real-life example the panel will discuss what good practice can look like.

## Episode 3: living a good life with pica

In this episode, the focus is on living day-to-day with pica and how to balance safety with a good quality of life. The panel will respond to questions from the CBF's [Family Carer Email Network](#) – so expect real situations and practical suggestions.

**Thank you to the families who have shared their questions and experiences with us – it makes such a difference to have real-life situations to discuss.**

If pica is part of your family's life, we hope these episodes help you feel a bit more informed and a bit less alone. You might also want to share an episode with relatives, school staff or support workers. Sometimes listening together can make it easier to have a calm, practical conversation about risk and support.

We hope the episodes will be live by the time you receive this newsletter, but if they aren't and you can't wait to listen to some chat about real-life issues affecting families like yours, then you can find the other episodes by scanning the QR code, visiting [our website](#) or searching 'Challenge Accepted' wherever you get your podcasts.



If you 'subscribe' or add Challenge Accepted to your library, you'll get notified when the pica episodes go live.

Our most recent episode [Bodies, boundaries and big changes](#) is about puberty and sexual expression, and episodes [Mission Impossible](#) and [Reconnaissance, research and risk assessments](#) tackle the summer holidays.

If you have an idea for a future series or episode, we'd love to hear it, you can tell us [here](#).

You can contact our [Family Support Team](#) or call them on 0300 666 0126.

## Co-producing a Pica Pathway

By Viv Cooper

Pica behaviour has very serious consequences for the child or adult – and providing them with support to have a good life whilst also being vigilant and minimising risk to keep them safe is a daily challenge. Often, pica is not acknowledged or taken seriously, and there have been too many people and families who have had to have urgent medical treatment, or who have lost their lives through pica behaviour.

We were really pleased to be asked by colleagues in Northern Ireland to join them in co-producing a *pica pathway* – a clear route for individuals and families to receive the information and support they need about pica.

Co-producing the pathway was important. Through this process family carers and a range of practitioners all contributed as equal partners to identify the important elements to include, the support and expertise each profession and the family could input and, most importantly, to ensure that the pathway led to an individualised pica support plan. This plan is a personalised and practical tool with information and advice about support. As pica can occur anywhere, the support plan is designed to be used in all settings, across home, school and any other service and situation.

A key part of the co-production process was gathering information and ideas from family carers supporting a relative who displays pica behaviour. At the start of the process they identified key principles and practical support that were essential to include – and then reviewed and shaped the final version. Family

carers described how pica behaviour is often the most difficult behaviour they confront on a daily basis and the impact this has on the child and the rest of the family – and how this was compounded by others not taking it seriously. As the people who provide the most hours of support to their child, their knowledge and experience is essential – and a key principle written into the pathway is that they provide expert experience which must be treated as such. The pathway takes the child and family through a multi disciplinary assessment process, including identifying any potential physical causes and functions of the behaviour, and covers both proactive (preventative) and reactive (when the pica occurs) strategies.

It provides co-ordinated input from CAMHS, speech and language therapists, occupational therapists, behaviour support therapists and dentists, with the flexibility to refer to other specialist as needed.

The pica pathway is not only a tool that helps raise awareness of pica providing a route to a range of support leading to a pica support plan, but also aligns with other support plans, such as a behaviour support plan. It also includes a fast track element for hospital treatment in urgent situations when something has been ingested – and a regular review process so the plan is updated as needed.

As the pica pathway is rolled out, it should lead to better outcomes and quality of life for individuals and their families – and it is something we encourage others to co-produce.

# Pica Awareness Workshop

The CBF'S Pica Awareness workshop is specifically designed for professionals, support staff and family carers supporting children, young people or adults who have severe learning disabilities and display pica behaviour (ingesting inedible objects).

The workshop will ensure that you have a good, practical introduction and understanding of pica behaviour and how to support people to keep them safe. It is 4.5 hours long and can accommodate up to 25 attendees in person, or 12 attendees online.

Research into the causes, assessment and strategies for pica is very limited. The information discussed in the workshop is based on the available research and current clinical practice. The workshop was developed through co-production with family carers with experience of pica and, like all our workshops, it is co-delivered by family carers with lived experience alongside qualified practitioners, ensuring a comprehensive

and practical learning experience.

## Main Aims:

- Understand reasons for and risks of pica behaviour
- Recognise the importance of vigilance, reporting and recording pica
- Identify strategies for supporting the person at risk of pica
- Feel confident in understanding pica and advocating for the person



## Takeaways

- Practical understanding of the risks of pica
- Assessment and support planning for pica
- Opportunities to discuss and problem-solve real-life scenarios

**“The workshop worked very well for me, explanations were very clear, and having real examples from a family carer made it easier to understand concepts.”**  
-participant testimony

**For further information** visit [our website](#), email: [workshops@theCBF.org.uk](mailto:workshops@theCBF.org.uk) or call us at 01634 838739



## Questions From the Family Carers' Email Network



Dear members of the Family Carers' Email Network, Can you help?

My nearly 4-year-old son has pica. I am really struggling to manage this. I do my best to fulfil his sensory needs daily with sensory diet, sensory activities and as much time outside as we can. He eats the plaster off my walls. He eats everything from paper to soil, cotton, fluff, hair, sand, Play-Doh, etc. When I say anything, I really mean it. It doesn't matter if it tastes bad or not. Any help appreciated.

*Sorry to hear of this. It is distressing to watch. I had this with my son for a number of years. In the end, a private nutritionist advised he was short of zinc - meaning his taste buds tasted nothing. This explained a lot! The zinc supplementation was a big help in resolving it.*

*My son did this too. It was especially bad for about 3 years, but has improved with age. For him, it seemed linked to sensory seeking and noticing things out of place. We repaired damaged items quickly, supervised him closely, kept everything very clean and tidy, and made sure all carers understood the risks.*

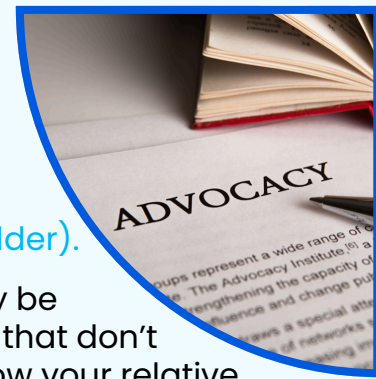
*My 24-year-old is the same. He seeks out strong tastes, including things that are poisonous or bitter, so we train staff on risks and check gardens or play areas carefully. We give him foods that have a strong flavour. Sensory support did not resolve it for him; the main need has been constant supervision and practical adaptations to keep him safe.*

Please note the opinions expressed are not necessarily those of the Challenging Behaviour Foundation and responses have been edited to fit the available space. Our [Family Carers' Email Network](#) is just one of the ways in which we connect families across the UK to share experiences, concerns and tips with others experiencing similar challenges. Email [network@theCBF.org.uk](mailto:network@theCBF.org.uk) or call 0300 666 0126 to find out more and be connected.

# CBF Family Carer Advocacy

## Resource

Information and guidance for family carers when they are required to advocate alongside or on behalf of their relatives (aged 16 years or older).



Advocacy can be infuriating and exhausting in equal measures. You may be trying to explain your relative's needs over and over, challenge decisions that don't feel right, or push for the support that should already be in place. You know your relative better than anyone else – how they communicate, what matters to them, what helps, and what may be a sign that something is wrong – but we know (because you tell us) that all too often you still have to fight to be heard.

### What's inside the guide?

Practical information, legal guidance and lived experience all in one place. It covers a wide range of topics families may come across while advocating, including the Human Rights Act, Equality Act, Mental Capacity Act, Care Act, Mental Health Act, safeguarding, transition to adulthood, communication, complaints, discharge planning and person-centred support. Like all the CBF's resources, it is designed to help you feel empowered and bring about positive change for your relative. It will quickly become your go-to for fact checking!



This is not just a guide to the law and the many different (often broken) systems you'll encounter. It has been co-produced and includes a powerful story from Rosemary, who describes what it was like to keep speaking up for her son through years of poor support. So, it reflects your real experiences, and the trauma and emotional weight advocacy can carry.

At the CBF, we know family carers are not an optional extra, they aren't a nice to have, they are essential to good support and happy lives. They are often the people holding vital knowledge,

asking the difficult questions and keeping the focus on what matters most. You can find the resource here and we hope it helps you feel more informed, more confident and better supported when advocating for your relative.

If you'd like to chat in a future episode of the CBF Challenge Accepted podcast about advocacy and telling the CQC about your relative's care, please contact Gemma H at [support@theCBF.org.uk](mailto:support@theCBF.org.uk) or on 0300 666 0126.

**Thank you to Audrey Giles and friends for your work to produce such a comprehensive Family Carer Advocacy Resource, which can be downloaded [here](#).**

The Care Quality Commission's (CQC) Share for Better Care campaign wants people who are advocating for their relative to share their experiences of health and social care services – both good and bad – so that services can improve.

A big focus is hearing from people whose views are often missed; we know this includes people advocating for relatives with severe learning disabilities, people from ethnic minority communities and people on lower incomes.

By gathering feedback about what is working well and what is not, the campaign helps CQC identify concerns, highlight good practice and spot where services need to do better.

**Tell the CQC about your relative's experiences [here](#) or search for 'CQC share for better care'.**

# THANK YOU

We are very grateful to every single person and organisation who donates or fundraises for us

Thank you to those who have donated to CBF in memory of a loved one. We very much appreciate you thinking of us at such a difficult time.

## Thank you to the following trusts and foundations for their support:



John Ellerman  
Foundation

phf Paul Hamlyn  
Foundation

## Supporting CBF with a legacy



A recent legacy has enabled us to provide additional free training workshops to family carers and to update the information we provide to families. Understandably your first priority will be looking after your loved ones and leaving a gift to charity in your will reduces the tax liability of your estate – helping you to do more with what you leave for future generations.

**The Challenging Behaviour Foundation** relies on the generosity of our donors whose support enables us to continue to be there for people with severe learning disabilities and their families. Not everyone is able to give in their lifetime and a gift in your will ensures that your impact will live on long after you have gone.

If you'd like more information or an informal chat about remembering The Challenging Behaviour Foundation in your will please **contact Emma** at [emma.deabill@theCBF.org.uk](mailto:emma.deabill@theCBF.org.uk)

While every care is taken in the compilation of this newsletter, the Challenging Behaviour Foundation cannot be held responsible for any errors or omissions, nor accept responsibility for any goods or services mentioned.

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