carers
WALES

TRACK
THE ACT

Monitoring how the implementation of the Social Services and Wellbeing (Wales) Act 2014 is affecting unpaid carers

About this research

Carers Wales carried out an online survey with unpaid carers between November 2023 and May 2024. The information requests to Local Authorities, Health Boards and Welsh Government were made in June 2024.

A total of 454 carers responded to the survey in Wales. This report summarises their responses. As not all respondents completed every question in the survey, some figures are based on responses from fewer than 454 people.

The survey was promoted extensively amongst both carers and organisations supporting carers across Wales. It was shared on the Carers Wales website, on Carers Wales social media channels, and with Carers Wales members, volunteers, previous survey respondents, campaigners, affiliates, Employers for Carers members, and other organisations.

Of respondents to the survey:

- 79% of respondents were aged between 18-65 years old and 21% were aged 66 and over. The biggest proportion of respondents were in the 50-66 year category (46%)
- 79% of respondents were female, 18% were male and 3% said their gender was not the same as the one assigned at birth
- 32% of respondents card for a parent, 38% cared for a partner or spouse, 27% for a child and 3% cared for other assorted friends or family.
- 82% of respondents were female, 17% were male. 1% said their gender was not the same as the one assigned at birth
- 64% of respondents cared for 1 person, 24% cared for 2 people and 12% cared for 3 or more people.

17 of the 22 Local Authorities, 7 Local Health Boards and the Welsh Government responded before October 31 2024.

Diolch

Carers Wales would like to thank every carer who took the time to fill out this survey.

Your responses will be used in all our policy and campaigning work over the next year.

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Introduction

2024 marks the return of our Track the Act report, Carers Wales's assessment of the gap between unpaid carers' rights in Welsh law, and the reality many carers face in practice on a daily basis.

As illustrated in the Evaluation of the Social Services and Well-being (Wales) Act published in 2023 and the 2024 Are we caring for our carers report by the Public Services Ombudsman for Wales, there are significant challenges regarding the implementation of the Act.

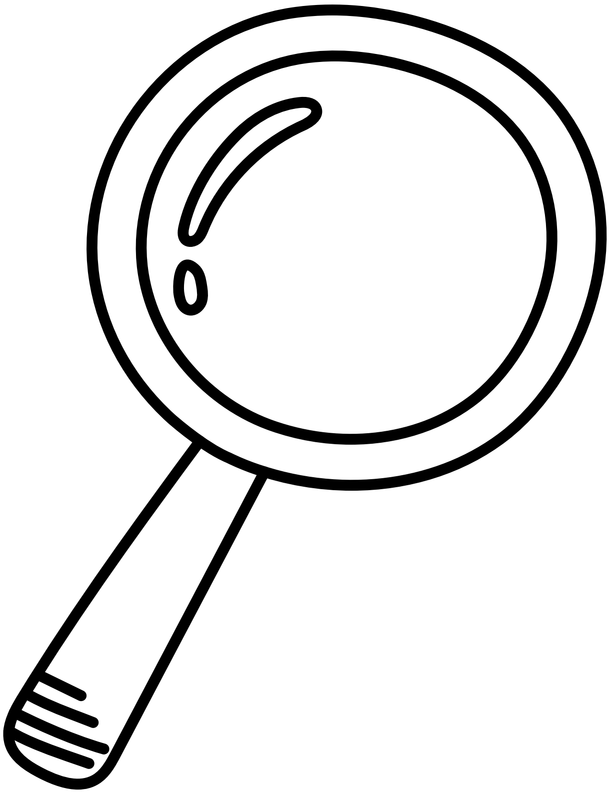
Track The Act seeks to explore these themes further, bringing together an extensive survey of unpaid carers as well as data and findings from a survey of local authorities, health boards and the Welsh Government. The report sets out a comprehensive review of the issues faced by statutory services in implementing the Act, the impact this has on the hundreds of thousands of unpaid carers across Wales and makes recommendations as to how we believe we can work together to close the gap between the rhetoric of the Act and the reality for carers across Wales.

Whilst we explore issues and pose constructive challenge to Welsh Government and statutory services, it would be unfair to not draw attention to the significant examples of good practice occurring across Wales with regard to supporting unpaid carers. When writing the report, we were struck by the innovation and dedication happening in parts of Wales to help realise unpaid carers' rights. We hope to publish a more extensive illustration of these examples in 2025 and believe that this can be a catalyst for development which makes life better for unpaid carers throughout the nation.

Research shows that the value of care provided by unpaid carers in Wales alone is over £10 billion per year. The human impact of the care provided, while more difficult to tangibly measure, is vast. What is clear, is that Wales's unpaid carers are doing vital work, supporting hundreds of thousands of people across our communities to live more independent, happier and healthier lives.

We owe it to them, to ensure that their rights are upheld and that they are supported to live healthy, happy and fulfilling lives of their own.

Finally we want to say a huge thank you to everybody who contributed to this report. From the hundreds of carers who shared their experiences, to the statutory services who engaged with us constructively and transparently. We hope you will see that the report seeks to offer a constructive assessment of how we can make carers' lives better. Carers Wales stands ready and willing to work with everyone to achieve this aim.



Executive Summary

The key findings of the Track The Act report.

- Carers are not being identified early enough in their caring role. 25% took between 1 and 3 years to be identified and 36% took more than 3 years to be identified.

- Carers are not seeing enough information to signpost them to support. Less than half of carers (47%) have seen information about their caring role over the financial year April 2023 to March 2024.

- Carers in employment are even less likely to see information that may support their caring role. Only a third of carers in employment (37%) have seen any information about their caring role.

- There is a gap emerging between carers seeing information and going on to get advice about their caring role. Less than a third (31%) of carers had advice in the financial year from April 2023 to March 2024.

- Medical settings are noticeably low on the translation of information into advice. Only 23% who saw information in hospitals and 48% who saw information in GP surgeries went on to get advice.

- When carers do get advice, the advice at least partly helps them. 79% of carers who got advice from local authorities found the advice partly or completely helpful.

- Community-based support is not reaching enough carers. Only a quarter (26%) have accessed community-based support despite 58% of carers knowing of its existence.

- Sessions may not be pitched correctly to carers' needs. More carers want to access information, mental health support or peer-to-peer support as opposed to entertainment.

- Carers are disillusioned with Carers Needs Assessments. 16% of carers do not think they help carers at all while 15% do not think it will help with their caring role. This means nearly a third (31%) of carers are cynical about Carers Needs Assessments.

- Not enough carers are getting Carers Needs Assessments. Only 6% of carers had a Carers Needs Assessment despite 25% of carers saying they were not in need of a Carers Needs Assessment.

Executive Summary

- A framework that defines when a carer should get support is desired by carers. 79% of carers asked about the future of Carers Needs Assessments want a framework so they can decide whether or not to undertake an assessment.
- Carers want Carers Needs Assessments to be worthwhile. Many carers spoke about the fear, anxiety and sadness of going through the Carers Needs Assessment process.
- Local Authorities systems and processes have matured but are all distinct from each other.
- There is significant evidence of good practice to provide carers with information and advice when carers reach Local Authority support.
- There are multiple examples of Local Authorities providing good and innovative support to carers as part of community based support.
- There are too few Carers Needs Assessments being completed in Wales with the county producing the highest number of Carers Needs Assessments only reaching 6% of carers in that Local Authority area.
- Reporting from Local Authorities strongly indicates that these number of Carers Needs Assessments are capped by capacity.
- Many Local Authorities are unable to define if a carer has been supported by a Disabled Person’s Need Assessment and are not recorded if a joint assessment has occcured.
- There is minimal support packages for unpaid carers due to the lack of Carers Needs Assessments.
- There is a lack of clarity between support plans and support packages with community-based support factored into support packages in some Local Authority areas.
- The cost of each suppport package varies wildly between Local Authorities.
- The majority of Health Boards are not able to report how many carers are referred for Carers Needs Assessments via the hospital discharge process.
- There is significant funding for carers from health via partnerships but the recording and impact of this investment is still at an early stage.

Recommendations

Welsh Government

The Welsh Government must commit to the production of an Action & Implementation Plan for unpaid carers in relation to the Social Services and Well-being (Wales) Act 2014. This plan must be published by Carers Rights Day 2025 (25th November 2025) and should:

- Be fully co-produced with unpaid carers and carer representative organisations.
- Utilise and address the findings of the Welsh Government-commissioned Evaluation of the Social Services and Well-being (Wales) Act 2014, published in 2023, findings of the 2024 Ombudsman for Wales report and Track the Act.
- Set out how the Welsh Government intends to ensure effective monitoring of the implementation of the Act in Wales and how this will be transparently reported on.
- Ensure that the Welsh Government takes greater leadership in the implementation of the Act, ensuring a consistent minimum level of support across local authority areas in Wales.
- Address the inconsistencies in terminology relating to Carers Needs Assessments and the carer journey through statutory support services across local authority areas in Wales.
- Include plans for a large scale and coordinated awareness campaign, co-produced with unpaid carers and carer organisations, to improve carers' awareness of their rights and to help more people with caring roles identify themselves as unpaid carers.

The Welsh Government must ensure that there is sufficient capacity within statutory bodies to deliver on their legal duties as outlined in the Act. Consideration should be given as to whether additional resource should be protected and provided to local authorities to increase the number of assessments carried out and support provided where required.

In March 2024, the then Welsh Government committed to co-producing guidance for professionals in healthcare settings to help better identify and support unpaid carers. We believe that the findings of this report demonstrate that this is still very much required and believe the Welsh Government should outline a plan for its creation and dissemination by Carers Rights Day 2025.

Recommendations

Local Authorities

- Should ensure all public-facing staff receive appropriate carer awareness training to better enable them to identify and support unpaid carers in accordance with local authorities' legal duty to carers. This must include training at the point of induction and regular refresher training.

- Should work regionally and across agencies within Regional Partnership Boards and wider where appropriate, to ensure greater consistency in the manner that information, advice and support for unpaid carers is offered and provided.

- Should map the carer population in their county and, through the annual budget setting process, set out how they will allocate sufficient funding to meet the expected needs for support of their carer population.

- Must build capacity to ensure a greater proportion of unpaid carers in their local authority area receive a Carers Needs Assessment. Timescales between referral and assessment must also be reduced as a priority.

- These assessments must be provided flexibly, committing to transparency relating to outcomes and decisions and working with unpaid carers to establish next steps after an assessment.

- Should consider allocating additional funding for those caring in the most extraordinary circumstances to ensure the most vulnerable receive timely support.

- Must, as a minimum, ensure contingency planning for unpaid carers is completed at every Carers Needs Assessment, even if unpaid carers are not eligible for any other statutory support.

- Reviews of services and support should be carried out regularly and co-produced with unpaid carers and representative organisations. The outcomes of these reviews should be publicly available.

Recommendations

Health Boards

- Must work urgently to improve carer awareness among staff, to better identify and support unpaid carers navigating health settings themselves or on behalf of the people they care for.

- Must improve data collection relating to unpaid carers interfacing with health settings and use this to review (in partnership with unpaid carers and representative organisations) what support is available to unpaid carers and its effectiveness.

- Must work regionally and across agencies within Regional Partnership Boards and wider where appropriate, to ensure greater consistency in the manner that information, advice and support for unpaid carers is offered and provided.

- Must better monitor and evaluate the impact of funding allocations to support unpaid carers as part of collaborative projects and initiatives.

Carer Survey

Carers Wales carried out an online survey with unpaid carers between November 2023 and May 2024.

A total of 454 carers responded to the survey in Wales. This report summarises their responses. As not all respondents completed every question in the survey, some figures are based on responses from fewer than 454 people.

The survey was promoted extensively amongst both carers and organisations supporting carers across Wales. It was shared on the Carers Wales website, on Carers Wales social media channels, and with Carers Wales members, volunteers, previous survey respondents, campaigners, affiliates, Employers for Carers members, and other organisations

Identification

Only 39% of unpaid carers identified or were identified within the first year of their caring role. 25% identified or were identified within 1 and 3 years while 36%, more than a third, took more than 3 years to identify as a carer.

This severe delay in identification fundamentally undermines the Social Services and Wellbeing Act's objective to provide preventive measures that should lead to fewer carers needing acute support during their caring role.

There are distinct differences between who someone cares for and their likelihood of being identified within the first year. Someone caring for a parent has a 43% chance of being identified in the first year compared to a 35% chance caring for a partner and a 32% chance caring for a child. This also leads to those caring for a child having a nearly 50/50 chance (46%) of only being identified after 3 years.

Family involvement also significantly impacts whether someone is identified as 42% of people who get family support were identified in the first year compared to only 30% of those who don't receive formal or informal support.

This influence is clearly evidenced by half (50%) of carers self-identifying themselves as carers. Concerningly, only 12% were identified in medical settings and 9% by local authority officials.

What is identification?

Identification is when someone understands that the support they are giving a friend or family member with an illness, disability, addiction concern or due to a person getting older means they are providing unpaid carer therefore they should be supported under the definition of unpaid carer.

This puts a significant onus on carers to cope with the understanding of their new role while having to find where to get support on their own. This resulted in half of carers (50%) not having anything happen once they had been or were identified to support them early in their caring role.

We asked carers where they thought they should be identified and more than 7 in 10 (72%) mentioned either hospitals or GP surgeries. This shows a clear cultural expectation on health services being in the ideal position to identify unpaid carers.

Before the Social Services and Well Being Act, there was the Carers Strategies (Wales) Measure 2010 that required local authorities and the NHS in Wales to work together to create a strategy for carers.

The measure was intended to fill gaps in service provision by ensuring that carers had the right information and were involved in the care process.

This requirement was effectively removed with the installation of the Social Services and Wellbeing Act so there is no legal duty on Health boards to provide information and advice support at this time outside the hospital discharge process.

Information

Less than half (47%) of carers saw information about unpaid care between April 2023 and March 2024. This is higher than when Track The Act 4 and 5 (in 2019 and 2020 respectively) where only 45% and 38% had seen information but still not as high as 2018 where 53% had seen information.

Interestingly, someone's caring role has a significant impact on whether a carer will see information but this is the inverse of the chances of being identified early. More than half of carers caring for a child have seen information with 51% seeing information, compared to 42% who care for a partner and 39% who care for a parent.

More strikingly, those in employment are far less likely to see information with only 37% seeing information compared to 52% of people who are not balancing paid work with their unpaid care role.

Of those who had seen information, the majority saw this from a national carers organisation like Carers Wales (51%) or from a local carers charities/groups (28%).

How is information defined?

Information is when a carer sees, reads or hears about something that signposts them to further advice or support.

These numbers are somewhat enlarged by the demographics who completed the survey, but also indicate that carers who are already engaged are not seeing information elsewhere.

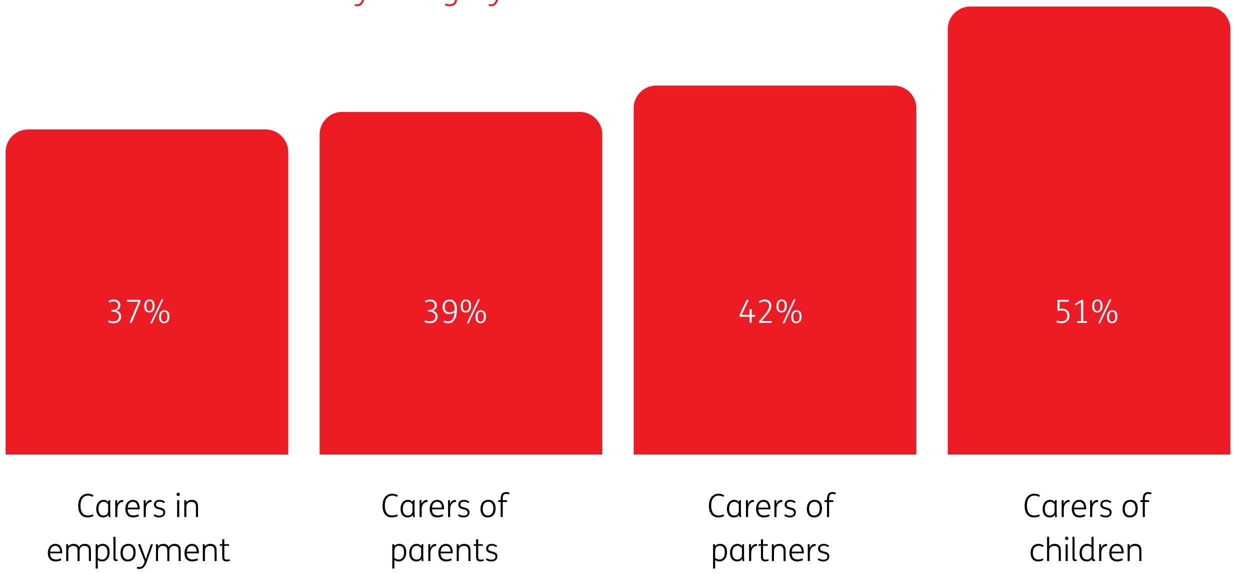
GP surgeries or community health centers were the most likely place for information to be seen with 28% seeing it in the community. However, only 9% saw information in council settings or meeting council workers, 8% in hospital settings and 7% in pharmacies.

It should also be noted that carers were asked to say all of the places they saw information so carers could choose multiple options. A high proportion of those who did see information in the community were signposted to national or local carers charities which demonstrates the importance of enhancing the positive connection between government agencies and the third sector.

We also asked those who hadn't seen information about where they had been, and they might expect to have seen information. More than half (53%) had been to a GP surgery or community health center. More than a third (36%) had been in a hospital setting and one-fifth (20%) had been to or had been in contact with a council worker.

This highlights that there are opportunities for carers to be provided with good quality information and advice on what services and support may be available to them. Further empowering and encouraging our core medical and support agencies to achieve this is key to better support for unpaid carers.

Table 1: Percentage of carers who have seen information by category



Advice

Less than a third of unpaid carers (31%) had received advice between April 2023 and March 2024. This is significantly less than before the pandemic when 42% reported they received advice in Track The Act 5.

Carers commented on being disillusioned by the lack of advice with one carer stating “I asked my GP and contact[ed] the council. No one had a clue about anything but to give me a leaflet”. This strongly indicates carers actively searching for advice are not only not receiving it but are being turned away when looking for it.

Those caring for more than one person were less likely to receive advice with only 1 in 5 (20%) accessing advice. This is deeply concerning as this suggests that those with the most complex caring roles are also the least likely to be accessing advice.

Unsurprisingly, those who had seen or received information were far more likely to go on to receive advice with more than half (54%) compared to just 13% of those who had not. However, this also shows a disconnect as three-quarters (72%) of those who had seen or received information but had not received advice would have preferred to have gone on to receive advice.

There is a clear disparity between the different places where someone has seen or received information and then gone on to receive advice.

How is Advice defined?

Advice is when a carer speaks to someone about their caring role, has their concerns and needs listened to, and is provided with guidance or information to gain further knowledge or support

92% who spoke to national carers organisations or local carers centers went from information to advice compared to just 23% who had seen information in a hospital. Those who had seen or received information from a GP surgery were only 48% likely to get advice. However, local authorities faired far better with 74% of carers seeing or receiving information going onto receiving advice.

Some carers will not need further advice and those seeking support from a charity are more likely to be in direct need than those who may have come across information in their daily lives. However, the disparity between information leading to advice in health settings compared to those speaking with a local authority is significant enough to strongly imply there is an issue in the information being provided in health settings translating into carers being empowered to go on to receive the advice they need.

Positively, when asked if the advice they were given was useful, 79% of carers said that the advice provided by the local authority was at least partly useful. General Practitioners' advice was 77% at least partly useful and hospitals 69% at least partly useful. This highlights that when advice is given in a timely manner, the vast majority of carers go away feeling supported and better positioned to continue their caring journey.

The most common topics spoken about were access to practical support including respite, mental health support and accessing financial information including information about benefits for themselves or the person they care for. Interestingly, the fourth most common topic was something highly specific to the individual's caring role.

This shows the value of advice and also the need for specialist advisors who have access to detailed knowledge of the complex nature of unpaid care roles and how they intersect with various other topics such as housing, infrastructure (like gas and electricity) and employment law.

This is confirmed by those who spoke to national carers charities where 76% said advice was very useful and a further 20% said the advice given was partly helpful showing that support from the third sector remains a highly valuable and effective asset to unpaid carers and statutory services.

Only a third (31%) of unpaid carers received advice between March 2023 and April 2024

Less than a quarter (23%) who saw information in hospital went on to get advice between March 2023 and April 2024

1 in 5 (20%) of unpaid carers caring for multiple people received advice between March 2023 and April 2024

Support in the community

Just over a quarter of carers (26%) accessed community-based support between April 2023 and March 2024 despite nearly three-fifths of carers (58%) being aware of community-based support in their area.

Carers were most likely to cite not having enough time to attend (31%), sessions not being at a time they could attend (23%) and not having respite care to attend (23%) for the primary reasons they are not accessing support in the community.

This highlights the most significant common factor being that carers are time-poor so activities need to be at times that they have the chance to attend and consideration needs to be made for how the person they care for can either be incorporated into support or segmented into their own kind of support sessions at the same time.

Carers' comments also highlight that the types of sessions being run are a factor for their choice not to attend with one carer saying "The only support sessions I've seen are online stress management or relaxation etc. type sessions. These aren't helpful to me." while another stating "I have to decide between making time for my family and the person I care for or going out and spending some time with strangers. If the activity had more purpose, I might make a different decision".

What is Community-based Support?

Community-based support is a range of services and programs that help carers be supported in their communities. These services are available without needing to go through a formal assessment or be allocated financial support to attend.

This is reinforced by the difference between the services carers have attended and when we asked carers what sort of sessions they would like to put on for their benefit.

The most commonly attended sessions were in-group support sessions (47%), roadshows or activity days (25%) and sessions on how to access financial support (23%). With pamper days only accessed by 11% of carers, tea mornings by 10% of carers and fun days by 7% of carers

However, carers wanted to access sessions on financial support (67%), sessions on information on how to access and find support for short breaks (59%) and the ability to access individual mental health support (57%). Peer-to-peer support sessions were wanted by half of carers (50%) while 41% wanted access to places or subsidies to stay healthy (including gyms, eating healthily classes or leisure centers).

This strongly implies that carers want more proactive community support that either gives them access or knowledge to something that will improve their caring role or access to facilities or sessions that will support their physical or mental health.

Peer-to-peer support sessions were the most commonly highlighted activity that had a positive effect on carers with one carer stating, “I have received more help from the group than anywhere else” and another saying that attending a peer-to-peer group gave them a “feeling a sense of belonging and understanding with no judgement.” and another caring simply stating “peer support is amazing and it truly saved my life and sanity.”

This is in line with the theme of more proactive support in community-based support as carers are gaining more from each other than the sessions put on for their entertainment.

There is a clear disparity between the relationship a carer has with the person they care for and whether they have accessed community-based support. A third of carers caring for a child (34%) have accessed community-based support compared to a quarter of carers caring for a partner (25%) and 22% of people caring for a parent.

The same disparity can be seen between carers in employment where only 21% have attended sessions compared to 28% of unemployed carers. This is despite more carers in employment knowing about these sessions 61% compared to 55% of carers not in employment.

Carers Needs Assessments

Nearly a third (30%) of carers who completed the Track The Act survey were not aware of what a Carers Needs Assessment was before completing the survey, despite local authorities having a duty to promote Carers Needs Assessments since 2016 when the Social Services and Well-being (Wales) Act 2014 came into force. This shocking statistic shows that there are still too many carers who do not know their basic rights in Wales.

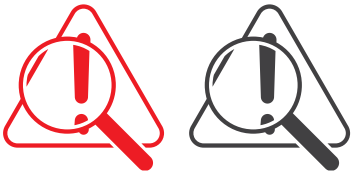
Less than half of carers (43%) have received a Carers Needs Assessment since the Social Services and Wellbeing Act came into force in April 2016 and only 6% of carers had a Carers Needs Assessment between April 2023 and March 2024.

Worryingly, this number is less than in 2020 when 8% of carers had received a Carers Needs Assessment in the 12 months prior and in 2019 when 15% of carers had received a Carers Needs Assessment in the past 12 months. Of those who have not had a Carers Needs Assessment, only 5% did not believe they needed one as they had enough support, while 20% did not think their caring role or personal circumstances would make them eligible for anything from a Carers Needs Assessment.

What is a Carers Needs Assessment?

A Carers Needs Assessment is the process of a carer potentially gaining statutory support through the local authority to support their caring role.

Nearly a third (30%) of carers were unaware of Carers Needs Assessments when completing the survey



Less than half of carers (43%) have received a Carers Needs Assessment since the Act came into force

Therefore, discounting the quarter of carers that have declared a Carers Needs Assessment is not appropriate for them, that still means that only 8% of those who may benefit from a Carers Needs Assessment accessed one in the calendar year April 2023 to March 2024.

More concerningly, 16% are so disillusioned with Carers Needs Assessments that they do not think they help carers and a further 15% do not think a Carers Needs Assessment would help them with their caring role.

This combination of carers not knowing about Carers Needs Assessments (30%) and those who do know about them being actively dissuaded from interacting with the process (31%) is more than 10-times higher (61%) than those who underwent an assessment (6%).

The limited percentage of carers means that just less than our minimum sample size of 50 carers completed the questions on undertaking a Carers Needs Assessment. We have included an analysis of what carers have stated but we are aware that the limited sample creates a larger chance of discrepancies.

Two-fifths of carers (40%) received a Carers Needs Assessment within one month of requesting or being offered a Carers Needs Assessment, 18% between 1 and 3 months, 9% between 3 and 6 months and 32% more than 6 months. Even with the limited sample size, this shows that the Carers Needs Assessment process isn't often happening in a timely manner which is exacerbating carers' concerns about the process.

Asked what was discussed in their assessment, 48% were asked what support they needed to continue working, 39% said that they were asked if they were willing or able to continue caring, and 30% said they were spoken to about activities they wanted to do outside caring.

These figures are concerning as the carers who received a Carers Needs Assessment strongly indicated that the discussion was primarily to do with the person they cared for and their needs rather than for the carer's needs. One carer stated "It was all about how my son could get this or that. No thought how I might get them there" while another said "Then awful as you think you will be listened to and get appropriate support...how wrong depends on the person you get".

It is possible that these carers had joint assessments with the person they care for however there still should be room within these types of assessments to listen and understand the carer's need. Under the 2014 Act, carers have a legal right to an assessment of their own needs in their own right.

The majority of carers (73%) felt they were at least partly listened to when their Carers Needs Assessment was given to them with over half (53%) saying the assessment process was useful for improving their caring role by simply undertaking the process.

A fifth of carers (21%) received a support package after undergoing a Carers Needs Assessment with another fifth (21%) having their support package continued. Interestingly 17% turned down a support package as they did not think it met their needs. 38% were told they were not eligible and signposted to community-based support and 3% did not hear anything back after having an assessment.

The evidence provided by carers, whether having undertaken a Carers Needs Assessment or not, strongly indicates that this process is not working as it was intended and is set out in the Act, for carers. Too many carers are disenfranchised by the process and lack of perceived benefits that might come from them. A significant review process and, most likely, significant reform needs to be considered to readdress this critical system.

Future of Carers Needs Assessments

We asked carers what they thought the future of Carers Need Assessments should be and what could be done to improve them.

The majority (80%) believed the current system of anyone who has or may be in need of support should be eligible for Carers Needs Assessments. Some carers thought that Carers Needs Assessments should be prioritised for people with the most need (15%). The largest write-in comment was that Carers Needs Assessments should be reinvested into directly paying carers to provide care.

When asked what should be the priority for a Carers Needs Assessment, the three most common answers were to look into and provide for mental health, look at what support a carer may need to sustain their caring role and look into and provide support for a carers physical health with more than half of carers indicating these to be a priority.

Also deemed important by a majority of carers was how intense a caring role is, whether they are willing and able to continue caring and how to access respite care. Positively, this falls in line with the ethos of the Social Services and Wellbeing Act and should all be covered in a Carers Needs Assessment.

However, the overwhelming commentary was that these were all pointless if the support these questions identify is not resourced. One carer stated “All of the above are important, but, when needs are identified they need to be backed up with a plan and resources.” while another made the point “It needs to be holistic and funded correctly.”

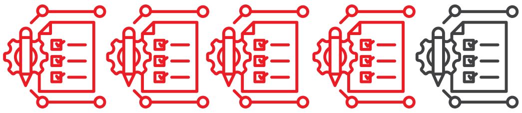
Others pointed out that support needs to be ongoing as shown by a carer saying “support should actually continue not just 6 counselling sessions and told there's a peer support meeting a few towns away if you can get there. I wasn't even offered a support worker after the counselling”.

We also asked carers whether there should be a standard framework for Carers Needs Assessments and, if so, what should that look like. 79% said that yes it would be easier if there was a framework with the majority (62%) saying it would be easier to know whether to do one if they knew if they were eligible for support. The other 17% said they would like to see the end of the postcode lottery.

As one carer so adeptly put it “It's really odd to apply for something that you have no idea what you might get. Would you do this for a credit card?” while another said straightforwardly “It would clarify what my needs were and not raise my expectations.” This sentiment was echoed over and over with others further raising the point about geographic difference by saying “If it standardised then we would know what support is available regardless of where we live” while others see the need for a standard framework to transition to a more tailored approach by saying “While it should be a standard framework, it would be helpful if Carers Needs Assessments should be based on unique circumstances in addition so nothing is ruled out as inaccessible as being from a different area or ineligible due to not meeting one rule”.

Of the 21% of carers who didn’t think there should be a framework, the vast majority believed that caring (19%) is too unique to be put under a framework.

The biggest change carers want is to feel the process is going to be worthwhile. Many carers echoed this comment “If I knew I could get support I would [have] an assessment. It’s so soul-destroying to apply for help and be told no.” While many others thought of Carers Needs Assessments as a “paper exercise” as encapsulated by this quote “That it's not just a paper exercise and absolute waste of time. LA'S are quite happy for carers to continue in their roles unsupported as it saves them thousands of pounds a year.”



4 in 5 carers (79%) say it would be easier if there was a standard framework for Carers Needs Assessments

Most carers also reflected on a version of this carer’s comment of “It should all be based on realistic help support actually available” which was emphasized by another carer’s experience “I would have an assessment if I know I would get the help we need. My previous assessment said we should have a carer come and help with my son and daughter to give myself and my husband a break however we weren’t ever able to find anyone to fill this position and the local authority wasn’t helpful either so the only thing we really needed hasn’t ever happened so no point in doing it again.”

All the evidence points to the future of Carers Needs Assessments to be provably useful for carers. To do so, the process needs to be less ambiguous and have a clear demarcation of what is and is not possible when it comes to statutory support. The loss of confidence in Carers Needs Assessments is only going to hinder the support carers need and increase the number of crisis situations that have a larger overall cost for local authorities, health and, most importantly, carers themselves.

Information requests

Carers Wales requested information from all 22 Local Authorities, 7 Health Boards and the Welsh Government in June 2024. These requests were designed to enlighten how these key bodies are enacting carers' rights under the Social Services and Wellbeing Act, identifying good and innovative practices already happening and the challenges these bodies face in providing unpaid carers their rights.

17 of the 22 Local Authorities, all 7 Health Boards and the Welsh Government provided us with information. Carers Wales would like to thank everyone who provided these insights and every response is available to read in full on the Carers Wales website.

The information was requested for the period April 2023 to March 2024. All information received by Carers Wales has been presented as interpreted by each body. The responses were not in a standardised format and different methodologies, as interpreted by the responding body, have been used. When necessary, some data has been combined. This will be clearly demarcated in the analysis.

Local Authorities

What did Carers Wales ask?

Carers Wales are Local Authorities the following questions;

Section 1: Please can you tell Carers Wales:

1. Please describe the standard journey of an unpaid carer in your local authority area from identification through to a Carers Needs Assessment. If this is modelled in your local authority, then please feel free to share this with us.
2. In what ways can unpaid carers receive information and advice from your local authority and how many unpaid carers received information and advice through these sources?
3. What carer-related training and development do staff supporting unpaid carers receive and how many staff have accessed carer-related training and development? This could include customer service, social workers/OTs, carer teams, housing teams etc.
4. How many fulltime equivalent posts were available and able to undertake Carers Needs Assessments in your local authority and/or funded by your local authority?
5. How many Carers Needs Assessments have been undertaken in your local authority area? Please define the total number of Carers Needs Assessments and how many were stand alone and how many were part of a combined disability needs assessment.

1. On average, how long did a Carers Needs Assessment take in your local authority, from referral to when carers are informed of the outcome of their assessment?
2. Within the relevant 2023-24 budgets, how many Carers Needs Assessments could be theoretically delivered each calendar year in your local authority area? (We understand this may be an estimate)
3. How many unpaid carers were in receipt of a support package or direct payments? If possible, please split between where a carer has been included as part of a disabled person's support package and where a carer gets support in their own right.
4. What is the cost of an average support package or direct payment over a financial year for an unpaid carer?

Section 2: Please can you tell Carers Wales:

1. What new services for unpaid carers were commissioned and delivered by the local authority in the financial year April 2023 to March 2024?
2. What ongoing services for unpaid carers continued to be funded and delivered by the local authority in the financial year April 2023 to March 2024?

Please provide examples and how these have supported unpaid carers so we can share good practice.

Section 3:

There is currently a gap between the aspirations of the Social Services and Wellbeing Act regarding unpaid carers receiving information, advice and support and the reality of carers receiving this. We understand that this is due to a variety of reasons. How do you think the gap could be closed and more specifically, what would help your local authority to do this?

Answers from these questions have been incorporated to reflect the carer survey as closely as possible.

Carer Journey

All 17 Local Authorities who responded to our questions gave detailed responses about how carers travel through receiving information, getting advice and, if required, the process of gaining support in their area.

It was heartening to see all 17 Local Authorities actively acknowledging that carers can enter the system in a myriad of ways including, but not limited to, self-referral, signposting from professionals from health, the third sector or their local authority teams and via specific carers teams. Furthermore, the openness to these approaches and the understanding that carers may need to be fed into the system at different points also shows a positive carer-led approach across the sector.

It is encouraging that all Local Authorities work with the third sector to a greater or lesser extent to support their information and advice services and there is significant good practice happening in co-production to improve their services with Merthyr Tydfil and Torfaen directly working with carers in their area to improve services. Broadly speaking, carers also followed a similar generic path through each system.

Each Local Authority follows a system of information leading to specific places to receive advice which, in turn, leads to carers' first being offered entry into community support and the potential of a Carers Needs Assessment and support if appropriate.

However, each specific Local Authority system is drastically different concerning who owns the individual elements of carer support and the terminology used while navigating the system

For instance, Blaenau Gwent runs the entire service in-house with its information and advice team being the primary unit to provide carers with information and advice, which is handed over to the adult or child social services team if a Carers Needs Assessment is required.

This is distinctly different to Denbighshire where their single point of access team is the primary place to receive information but advice and Carers Needs Assessments are passed onto North East Wales Carers Information Service (NEWCIS) so handled, via contract, by a third sector partner. Carmarthenshire has a wholly-owned private company ‘Lleisant Delta’ that runs the information, advice and assistance for all areas of enquiries for the council but passes the need for a Carers Needs Assessment back to the central social work team to enact.

The language used over the different stages also varies widely. Some councils have a ‘What Matters Conversation’ which is considered the first part of a Carers Needs Assessment while others consider this the stage before being referred to a Carers Needs Assessment. Although functionally similar processes, the carers survey clearly shows this has caused confusion about whether they have or have not had a Carers Needs Assessment.

Carers Wales has no cause to suggest that any of these systems are more or less effective than any other. The concern is the confusion caused by the mix of terminology and partnerships that carers have to understand to be confident in these systems.

Carers Wales strongly advocates for a standardised overarching terminology to be applied to the caring journey that would empower carers to better follow and understand where they are in their caring journey with the Local Authority. This will support carers understand who to contact as and when their caring roles change and build confidence in the system. Such terminology should not impinge on Local Authorities' ability to administer their processes in their preferred manner but simplify the wording for ease of understanding. This should be co-produced by the Welsh Government alongside Local Authorities, partners in the third sector and carers so for the most positive result.

Information and advice

The evidence provided by Local Authorities shows that there is a strong core to their ability to provide information and advice once a carer is made aware of the services available. The majority of councils are able to provide key stats when carers are in contact with their primary teams and most were able to record numbers of carers receiving information and advice when carers made contact with contracted or third sector partners.

Several Local Authority areas including but not limited to Monmouthshire, Rhondda Cynon Taf and Wrexham provide ongoing information via direct newsletters or emails while all have events that reach out to carers in the community.

There is some really positive innovation to provide carers with the right information happening. Newport and Pembrokeshire provided 617 and 511 information packs respectively for carers who requested information so carers have a set of resources to go from at the beginning of their acknowledged caring journey. Denbighshire has incorporated identifying and supporting unpaid carers as part of its universal offer program on early intervention and prevention.

Integration with third-sector services is also a highlight with many working with one or more partner services to provide carers with an alternative place to get information.

This strongly supports the carers survey where 74% of carers who received advice from local authorities found the advice given to them at least partly useful while 88% of carers who got advice from local carer charities found the advice at least partly useful.

However, the numbers provided by Local Authorities also emphasises that many carers are not getting to the stage where they are receiving information and advice. For example, Ceredigion core Carers and Community Team had over 1,300 enquiries and membership to their Carers Information Service of 2219. Even if these are all unique carers, this is only half (48%) of the unpaid carers in the county compared to the 2021 census numbers.

This is reaffirmed by page visits to carer pages on websites. Cardiff reported 1,543 total visits, Conwy reported 874 unique visits and Newport reported 4,324 web hits. Allowing for these to be unique visits, this would be 3% of the carer population of Cardiff (according to the 2021 census), 8% of the carer population of Conwy and 29% of the carer population of Newport.

Although we do note some outliers to this like Flintshire, whose website hits, if they were all unique, would total 107% of the Flintshire carer population. However, this was via the NEWCIS website where there are far more pages of information and advice so this number is likely to be more divisible per user than Local Authority websites with limited pages.

Most Local Authorities emphasised that the total number of interactions cannot be monitored as interactions made by other professionals interacting with Local Authority information can not be measured. However, this is highly unlikely to make up for the deficit between the number of carers and the need for information and advice required.

There are also questions about why some Local Authorities can record carer contact at the first point of contact with local authority staff and why some can not.

It is positive to see many Local Authorities have included this as standard procedure at all first point of contact enquiries but this should be universal as it is a prerequisite of understanding the caring population in each area and the potential financial need to support carers moving forward.

Compared to pre-pandemic information and advice resourcing, the current provision to support carers is significantly stronger with more carers likely to benefit once engaged with a Local Authority. However, more needs to be done to raise awareness and to get first-point information into more places.

Training

It was insightful to see what training opportunities are made available by Local Authorities to their staff and how. It was particularly heartening to see internal and external training opportunities being actively promoted to first point of contact as well as carer-specific roles.

This includes Carers Wales 'Social Worker' training as part of our Carer Aware project in partnership with the Carers Trust Wales which 15 of the 17 Local Authorities directly promoted to their staff.

It was also interesting to see how carer awareness and carer wellbeing has also been incorporated into non-carer-specific training and engagement. For instance, Conwy highlighted how their carers team linked in with the Community Resource Team to support staff in the community on other business be able to provide basic support.

Many of these innovations are likely to increase the overall awareness of staff across all Local Authorities and a positive development for carers.

Services in the community

There is a wide variety of core and innovative support being provided by councils in the community whether produced by Local Authority teams or in partnership or contracting third-sector partners.

This embracement of the core objective of the Social Services and Wellbeing Act to provide preventative services before a carer gets to crisis point should be applauded.

Some of the innovation highlights include Carmarthenshire, Ceredigion and Pembrokeshire working with Age Cymru Dyfed to launch their 'Connecting Realities' program where carers have been offered a break through virtual reality technology, Cardiff creating a sitting service pilot exploring the opportunities for carers to take a one-off break and Swansea have created targeted approaches to better identify and support male carers and carers from ethnic minority backgrounds.

There has been positive cross-learning displayed. For instance, Newport highlighted their Bridging the Gap Gwent short breaks program based on the successful model already underway in North East Wales established by NEWCIS. This group learning is hugely progressive and positive to see.

Carers Wales was also mindful to ask about funding for ongoing services when requesting information on community support as maintaining innovation to support carers is just as important as developing new ideas.

This included all Local Authorities funding local information and advice services, often in partnership with local charities as well as support funds that are so critical when carers are in crisis.

There are also previous innovations that have continued to be funded that show great commitment to carers. In Gwynedd, a mental health carer support officer, a parent carers support officer and the active dementia service are all still in place. Torfaen have continued with their carers training programme including courses on first aid, manual handling and medication management. Interestingly, these programmes align better with what carers in the carer survey want to attend as part of community support that suggests, although not stated by all Local Authorities, an increase in co-production between Local Authorities and carers.

What is also highlighted is how many carers are missing out on the opportunity to get community-based support. This supports the carer survey's conclusion more needs to be done to identify where carers are commonly and get people from information to advice more consistently.

Carers Needs Assessment

Carers Wales asked a series of questions on the implementation, capacity to provide, number delivered and resulting support derived from Carers Needs Assessments. We would like to praise the openness that Local Authorities responded with.

Processes

Each Local Authority has a different approach to providing a Carers Needs Assessment.

Many Local Authorities including Denbighshire and Merthyr Tydfil have an 'active offer' of a Carers Needs Assessment when a carer makes themselves known to the Local Authority. This is hugely positive to see as the importance of highlighting Carers Needs Assessments was evident from the 30% of carers from the survey being unaware of Carers Needs Assessments existence.

A significant number of Local Authorities break the process into at least two stages. This can be defined as a proportionate and full assessment as defined by Ceredigion and Rhondda Cynon Taf or a 'What Matters Conversation' as defined by Newport and Vale of Glamorgan.

There is distinct value in breaking the process down to provide carers with access to community-based support and timely advice more quickly. This preventative approach should mean fewer carers require statutory support and can support the identification of those who are not eligible or not in need of more concentrated support.

However, there is concern that these additional steps, as emphasised in the carer survey, are not clearly defined as information gathering about the carer and advice opportunities as opposed to the full assessment that may result in direct statutory support. Protecting the terminology of a 'Carers Needs Assessment' or equivalent title is key to maintaining carers confidence in the statutory support system.

It is Carers Wales' opinion that there is room to incorporate these additional steps into the carer journey as a unique step.

Who carries out a Carers Needs Assessment or the information gathering before a Carers Needs Assessment is also widely different across Local Authorities.

The majority of Local Authorities including Carmarthenshire and Torfaen are primarily undertaken by their respective Social Work Teams. This extends to all Local Authorities in concern of joint assessments when a carer's need is assessed alongside the person they care for.

It was also interesting to note how Carers Needs Assessments were distributed within social work teams via the information provided by Rhondda Cynon Taf. The Carers Needs Assessment is attributed via condition of the person cared for. There is considerable value in this approach as the skills of understanding the condition can only support the understanding of the type and extent of care a carer may be providing although there is also concern that this siloed or fragmented approach could lead to inconsistencies in support.

Some Local Authorities including Cardiff, Conwy and Monmouthshire have dedicated carer teams whose primary role is to provide Carers Needs Assessments alongside other carer support in the community. While Denbighshire, Flintshire, and Wrexham utilise the third-sector (NEWCIS) to provide Carers Needs Assessments.

There is value in each of these approaches as a dedicated Carers Need Assessment team is going to have more experience and cohesion whether this is part of the Local Authority or via third-sector partnership.

However, few have a single source of Carers Need Assessment provision. Merthyr Tydfil, for instance, has an internal system where all social workers and reviewing officers are able to undertake Carers Needs Assessments while their Carer Support Coordinator role is able to take "Carer Conversation" where needs can be captured.

All Local Authorities also have separate processes for young carers with trained professionals who specialise in working with young people. This is hugely positive as this is clearly the right approach for vulnerable young people.

Unfortunately, there are some practices reported by Local Authorities that also cause concern.

Carers report a level of gatekeeping in some Local Authority areas when they attempt to access a Carers Needs Assessment. This may be a byproduct of carers being unclear of the process.

For instance, Newport sends a Social Work Assistant to complete a ‘What Matters Conversation’ and only ‘if necessary’ becomes a full Carers Needs Assessment. Equally, Rhondda Cynon Taf states “At SPA, a proportionate assessment is completed, identifying what matters to the unpaid carer and whether these outcomes can be met by preventative services, or are likely to require a statutory needs assessment.”

As stated, not all carers will require a Carers Needs Assessment and early intervention, data gathering about the carer and highlighting community-based support can be enough to support a carer before statutory support is required. However, the choice for a carer to go onto a Carers Needs Assessment is for the carer to make and not the Local Authority.

We recognise that this could just be an error of wording in trying to illustrate a carer’s journey to assessment. However, it is important to recognise the basic principle that carers’ ability to receive a full Carers Needs Assessment should they wish, is enshrined across all local implementation plans and strategies.

There is also a concern around Denbighshire and Swansea incorporating carers of children under 18 into child services as opposed to being part of the adult team. Although there is value in having the expertise in working with people who understand children with disability, there is a concern that this natural interest may dissuade against prioritising the needs of the carer.

Carers Wales would welcome a discussion to know more about this rationale, its benefits and how this is meeting carer’s rights.

There was also concern raised by Monmouthshire’s young carer reply where it stated:

- If the young person is referred to the Young Carers & Young Adult Carers Assessment Worker, the worker will have an initial conversation with the young person and their family to ascertain
- a) Who the adult is within the caring network, and where and with whom the caring responsibilities lie. If the caring responsibilities lie with an adult, they (adult) will be offered a carer needs assessment.
- b) If caring responsibilities sit with a young person, a carer needs assessment is offered

A child who is providing care, even if this is secondary to the care provided by an adult, may still be in need of a Carers Needs Assessment. The intention of this statement may be that a more holistic assessment, incorporating the needs of the whole family, is undertaken if an adult is found to have a primary caring role is undertaken, which would be positive, but the wording of this appears to be suggesting that only one person can be in need of statutory support.

This would be out of line with the Social Services and Well-being (Wales) Act.

It is also evident how complicated Carers Needs Assessments are to understand from an outside point of view. For many people whose first interactions with support, the number of terms, different people they may potentially meet and the requirements are likely to feel daunting. This reinforces our previous point that a standardised, overarching terminology needs to be implemented.

With these reservations outlined, Carers Wales is still pleased that the process and theoretical implementation of Carers Needs Assessments are in a more substantive and process-orientated position than before the pandemic when the previous Track The Act report was written.

Capacity and Delivery of Carers Needs Assessments

There is a significant disparity between the number of carers receiving Carers Needs Assessments and the caring population.

In Table 2, we show how many Carers Needs Assessments were given and to who. This is compared to the 2021 census figure for each Local Authority area. If a single number has been given by a Local Authority, this has been assumed to be for carers over the age of 18.

The highest number of Carers Needs Assessments provided by one Local Authority area was Carmarthenshire with 1,151 total assessments across individual, combined and young carers assessments. The lowest total was 13 by Merthyr Tydfil. This means that the Local Authority with the most assessments given only provided Carers Needs Assessments for 6% of their carer population and Merthyr Tydfil only provided Carers Needs Assessments for 0.2% of their carer population. A range of 1 in 20 and 1 in 500 carers receiving a Carers Needs Assessment.

Notably, Carmarthenshire recommissioned their Carer Assessment Service in April 2023 and this new service has shown positive results. This is particularly impactful considering the relatively lower performance of other Local authority areas.

As stated by many of the Local Authorities, not all carers require a Carers Needs Assessment. Utilising the carer survey, we can create two proportionate groups for comparison on this statement.
25% of the carers who completed the Track The Act survey said they were not in need of a Carers Needs Assessment as they did not need further support.

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Table 2.1: Number of Carers Needs Assessments per county

Local Authority	Number of carers according to the cenus	Carers Needs Assessments given to adults	Joint/ combined assessments	Carers Needs Assessments given to children
Blaenau Gwent	7,240	46	44	74
Bridgend	15,310	N/A	N/A	N/A
Caerphilly	19,065	N/A	N/A	N/A
Cardiff	28,995	481	4	Information not stated
Carmarthenshire	20,385	592	510	49
Ceredigion	7,250	436	Information not stated	Information not stated
Conwy	11,630	300	37	38
Denbighshire	10,160	370	Information not stated	Information not stated
Flintshire	15,265	695	Information not stated	94
Gwynedd	9,990	52	569	Information not stated
Isle of Anglesey	6,745	N/A	N/A	N/A

Table 2.2: Number of Carers Needs Assessments per county

Local Authority	Number of carers according to the cenus	Carers Needs Assessments given to adults	Joint/ combined assessments	Carers Needs Assessments given to children
Merthyr Tydfil	6,205	13	Information not stated	Information not stated
Monmouthshire	9,205	147	Information not stated	16
Neath Port Talbot	16,560	N/A	N/A	N/A
Newport	14,970	250	Information not stated	107
Pembrokeshire	12,885	327	219	55
Powys	13,465	N/A	N/A	N/A
Rhondda Cynon Taf	24,985	279	Information not stated	129
Swansea	24,720	409	Information not stated	27
Torfaen	9,935	150	100	Information not stated
Vale of Glamorgan	12,940	280	Information not stated	Information not stated
Wrexham	12,865	698	11	51

If this is taken into account, Carmarthenshire provided 8% of Carers Needs Assessments to those who would need one and Merthyr Tydfil provided 0.3% of the Carers Needs Assessments to those who would need one.

There was also the 30% of those who did not receive a Carers Needs Assessment because they did not think they would be useful for their caring role or not useful for carers at all. This, combined with the group who do not need any more support totals 55%. Interestingly, this aligns with Swansea's data that 45% of carers who contact them request a Carers Needs Assessment. In this case, Carmarthenshire provided a Carers Needs Assessment to 13% of the carer population who need a Carers Need Assessment and Merthyr Tydfil provided 0.5% of the carer population who need a Carers Needs Assessment.

Even with the most heavily reduced number, this still means that in a best-case scenario only 1 in 8 carers are getting received a Carers Needs Assessment in the Local Authority area that undertook the most.

Gwynedd also provided additional interesting information that their combined 621 assessments were made on 3833 cases. This is a 16% presentation to need of an assessment rate. This is somewhat complicated by the majority of their assessments being joint assessments but it gives a clear indication of a 1 in 7 chance of someone making contact and being involved in an assessment.

This clearly illustrates a significant gap between the implementation of the Social Services and Wellbeing Act and the well-intentioned processes of Local Authorities and what carers are actually experiencing in the way of accessing support.

Other caveats should be noted such as 8 Local Authority areas could not respond with accurate figures when it came to joint or combined assessments. This is likely to mean there is a small number of carers who are receiving additional support but it is highly unlikely that this would significantly impact these global figures.

It also raises a significant concern as to why carers are not being recorded accurately in some Local Authorities as Denbighshire, Pembrokeshire and Wrexham have demonstrated good practice in how this can be done.

To uncover more about why there are so few Carers Needs Assessments happening across Wales, we asked the Local Authorities challenging questions on what their theoretical capacity is to deliver Carers Needs Assessments and how many full-time equivalent posts were available to provide Carers Needs Assessments.

To uncover more about why there are so few Carers Needs Assessments happening across Wales, we asked the Local Authorities challenging questions on what their theoretical capacity is to deliver Carers Needs Assessments and how many full-time equivalent posts were available to provide Carers Needs Assessments.

Understandably, most Local Authorities heavily caveated their answers or could not give an answer at all but those who did give answers indicates a clear indication that Carers Needs Assessments are hugely underfunded.

For instance, Cardiff had funding for 6 full-time posts which they estimate to translate to 750 Carers Needs Assessments per year. On the positive side, this means they delivered at 65% of capacity (more considering not all the roles were filled during the year) but this would equate to a carer getting a Carers Needs Assessment every 38 and a half years if every carer declared on the census was in need of a Carers Needs Assessment.

With most Local Authorities using their social work teams as their primary source, we can also suggest from Carmarthenshire’s reply that their 231 social workers (rounded) are at maximum capacity, that most authorities are also running at close to capacity to deliver Carers Needs Assessments.

This provision is clearly and significantly under the required need in each area. This is also shown by waiting times for Carers Needs Assessments:

Table 3.1: Days from a Carers Needs Assessment referral until decision

Local Authority	Carers Needs Assessments given to adults from referral until decision
Blaenau Gwent	28 days
Bridgend	N/A
Caerphilly	N/A
Cardiff	118 days
Carmarthenshire	75 days
Ceredigion	162 days
Conwy	70
Denbighshire	N/A
Flintshire	11 days
Gwynedd	N/A
Isle Of Anglesey	N/A
Merthyr Tydfil	14 days
Monmouthshire	N/A
Neath Port Talbot	N/A
Newport	N/A

This clearly shows that in order for the Act to be successfully implemented, and more carers to have access to assessments as needed, more resource will need to be allocated. Closing the gap between the Act's rhetoric and the reality facing many unpaid carers will be vital to restoring carer confidence in the Act and in statutory support more generally.

Table 3.2: Days from a Carers Needs Assessment referral until decision

Local Authority	Carers Needs Assessments given to adults from referral until decision
Pembrokeshire	136 days
Powys	N/A
Rhondda Cynon Taf	50 days
Swansea	59 days
Torfaen	30 days
Vale of Glamorgan	N/A
Wrexham	12 days

Support packages from Carers Needs Assessments

The lack of Carers Needs Assessments translates into few carers receiving support in their own right across Wales.

Concerningly, many Local Authority areas find it difficult to distinguish between Carer Support Packages and Support Plans. A plan is how a carer should be supported. The package is the actual delivery of it and the cost of supporting the carer.

It is also clear that many councils like Wrexham are including community-based support like peer-to-peer support groups or mindfulness sessions amongst the support packages. Although these should be clearly defined in Support Plans to enable carers to access these if desired, the Support Package should be concentrated on the direct need of the individual carer. For instance, the Carer Support Package should include the cost of replacement care and transport to attend a peer-to-peer support session but not the cost of the session itself as this is available to carers who have been signposted without the need of a Carers Needs Assessment.

This is a recurring theme across the different Local Authorities' statements and undermines the purpose of Carers Needs Assessments.

Local Authorities do rightly point out that many carers benefit from the support packages provided to the person they care for in the form of replacement care and direct provision..

However, many carers are unable to record when this is accurate so a true picture to how extensive this support is cannot be made.

The lack of recording is highly concerning as it makes it very difficult be sure how much actual support is being given to carers across local authority areas in Wales. This naturally poses problems with regard to monitoring the effectiveness of the Act locally and nationally.

Compared to community-based support, there is also a considerable lack of innovation with most direct support being referring to some kind of replacement care. While this is key to many carers, the lack of empowerment with technology, access to facilities or general individual need is not following the ethos that support plans were designed around.

As refinorced by a carer from the carers survey “I accept that I can’t go out when I want due to my children’s need. But give me ways to stay in contact with the world”

Without investment in Carers Needs Assessments, and the presumed increase in support plans and packages that would result from this, it is difficult to draw any other conclusions.

Supporting Local Authorities to support carers

Carers Wales asked Local Authorities what would close the gap between the aspirations of the Social Services and Wellbeing Act and the reality carers face.

Unsurprisingly, sufficient and sustainable funding was at the top of most Local Authorities' wish lists. From the information supplied, it is clear that Local Authority departments are stretched and appropriate funding is a must to secure carers' rights as set out in Welsh law.

Other priorities vary and show the differing strains on Local Authorities' priorities. Gwynedd highlighted the need for Health settings to have a greater onus on supporting unpaid care and the need for the Welsh Government to pressure Health settings to provide more practical support.

Torfaen drew attention to the need for clear and consistent guidance and standards from the Welsh Government on the implementation and monitoring of the Act.

Cardiff, amongst others, spotlighted the need for more national campaigns aimed at carers highlighting self-identification and recognising their role. Denbighshire went further highlighting that caring is everyone’s business and not the sole responsibility of social care. Societal support would do a lot for addressing carers need before getting to a crisis point.

Many local authorities also emphasised the need for more good practices to be shared and for more partnership working so the same information isn’t being given to carers multiple times.

Promisingly, many of these are the same actions carers have extolled.

Summary

The foundations of carer support within Local Authorities are significantly more predisposed to support carers with the right information and advice and to be able to offer beneficial community-based support than before the pandemic when Track The Act last requested this information from Local Authorities.

This is a positive result of more carer co-production and innovation from Local Authorities to better cater to the needs of carers. Unfortunately, this also highlights the carer survey where so many carers are missing out on these opportunities due to the lack of awareness of the good practice that is going on.

However, Carers Needs Assessments and the support that should derive from these when there is a need have not developed in the same positive way. There is a clear and significant gap between what Local Authorities can provide and what the legal rights of unpaid carers are under the Social Services and Wellbeing Act.

Health Boards

What did Carers Wales ask?

Carers Wales are Health Boards the following questions;

Question 1: How many unpaid carers have been given access to a Carers Needs Assessment as part of the hospital discharge process across your Local Health Board area?

Question 2: Please can you tell Carers Wales:

a) How many new services for unpaid carers were commissioned and/or delivered by the health board in the financial year April 2023 to March 2024?

b) How many ongoing services for unpaid carers were continued to be funded and/or delivered by the health board in the financial year April 2023 to March 2024?

Carers Needs Assessments as part of the hospital discharge process

Only three health boards, Aneurin Bevan, Hywel Dda and Swansea Bay hold this information.

Aneurin Bevan offered 370 What Matters conversations as part of their discharge process. They highlight this is a considerable underestimation of carer guidance and interaction due to the complexities of data coding and recording for health boards.

Hywel Dda noted 85 referrals as part of their Carers Officers to Social Services work. They also highlighted that much of this service is commissioned to third sector partners so the true number exceeds this figure.

Swansea Bay referred 56 carers to NPT Carers Services and 30 to Swansea Carers Centre.

We commend the three Health Boards that have some recording matrix and would strongly support all calls for a more connected system to be installed into health boards so carers can be identified and supported more easily.

However, this underpins concerns brought up by the carers survey that health boards are struggling to effectively support unpaid carers. The fact that four of seven in Wales do not even hold this information insinuates that unpaid carers have become a decreasing priority within healthcare settings.

As stated, this slows down or prevents the identification of carers at the earliest possible point. This means carers care alone for longer and are far more likely to reach a crisis point where statutory support then needs to be put in place. This increases costs for Local Authorities and goes against the ethos of the Social Services and Wellbeing Act.

Health Boards are also likely to deal with additional costs as not supporting a carer before discharge increases the chances of the person in need of care returning to an acute medical setting.

New and ongoing services commissioned by the Health Board

5 of the 7 Health Boards were able to respond to this request. Cardiff and Vale and Cwm Taf Morgannwg were the two health boards unable to respond.
Health Boards gave varying amounts of detail on what new and existing services were provided.

The most new services were provided by Aneurin Bevan (12) while the other Health Boards commissioned either 4 or 2 new services. As expected, these services were primarily completed in partnership with Local Authorities and third-sector partners. Similarly, ongoing services were also produced in collaboration.

This is interesting as a significant number of the services either piloted or ongoing highlighted in community-based support by Local Authorities had some type of Regional Integration Funding (RIF) support.

As highlighted by Aneurin Bevan, they “continued to fund/deliver services utilising the Regional Integration Fund and its’ associated ringfenced funding” to support unpaid carers.

This included supporting five short break schemes, assistive technology for carers and supporting third sector regional models like the Gwent Carers Hub and Young carers in-school programme.

Similarly, Hywel Dda showed the extent of their support by jointly funding the Carers Information Service Outreach Service across the different Local Authorities alongside hospital discharge services. Powys supported Adferiad’s respite scheme and Credu’s engagement.

There was not enough detail to highlight what Betsi Cadwaladr or Swansea Bay specifically funded.

What is somewhat more concerning is that outside Aneurin Bevan and Hywel Dda, there appears to be a lack of easily accessible information on this significant amount of money and where precisely it is being spent and how effective this investment is. For this critical cross-county border support to be effective, the same constraints and monitoring should be applied to Local Authority investment in care.

Summary

The worrying lack of information across the majority of health boards on how they actively support carers to gain support, and the lack of detail on how money is being spent through Regional Integration Funding is disappointing.

Many unpaid carers speak about feeling overlooked and undervalued in health settings, and we would argue the lack of traceability and transparency contributes to this perception from carers in relation to the disparity of esteem between healthcare and unpaid care.

This is despite research indicating that unpaid care in Wales would cost over £10 billion per year to replace, which is comparable with the entire NHS budget in Wales

It is clear from this evidence and the picture painted by the carers survey that greater focus on recognising and supporting unpaid carers in health settings must be a priority going forward. We make recommendations on how we think this can be achieved in this report.

Welsh Government

Carers Wales asked the Welsh Government:

Question 1: How are the obligations on local authorities under the Social Services and Wellbeing (Wales) Act 2014 accounted for within the Welsh Government’s funding formulas to local authorities?

Question 2: How is the Welsh Government planning to directly support Local Authorities to better implement the Social Services and Wellbeing (Wales) Act 2014 as recommended by

A) ‘Rapid review of how unpaid carers' rights have been upheld during and after the Covid-19 response’?
B) From Act to Impact? Final Report of the Evaluation of the Social Services and Well-being (Wales) Act 2014

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The full Welsh Government response is below:

Question 1: How are the obligations on local authorities under the Social Services and Wellbeing (Wales) Act 2014 accounted for within the Welsh Government’s funding formulas to local authorities?

The Social Services and Well-being (Wales) Act imposes duties on local authorities, health boards and Welsh Ministers that require them to work to promote the well-being of those who need care and support, or carers who need support. This includes the duty to assess the needs of a carer for support (s24-27) and to meet the support needs of carers (s40-45). Section 34(1) of the Act provides examples of the ways in which a local authority may meet needs under sections 35 to 45 and section 34(2) sets out examples of what may be provided to meet a person's needs for 'care and support.'

Local authority revenue funding is provided through the annual local government settlement. This funding is un-hypothecated, meaning local authorities use this funding according to local need to meet their statutory and discretionary priorities. The local government settlement is determined using a formula-based approach predicated on relative needs for each service area.

Full details, by each local authority, can be found in the Green Book which gives the detail of the settlement calculations - Local government revenue and capital settlement calculations - Local government revenue and capital settlement: background information for standard spending assessmnents 2024 to 2025 GOV.WALES

Question 2: How is the Welsh Government planning to directly support Local Authorities to better implement the Social Services and Wellbeing (Wales) Act 2014 as recommended by:
A) 'Rapid review of how unpaid carers' rights have been upheld during and after the Covid-19 response'?

We have established a Task and Finish group under the auspices of the Ministerial Advisory Group to take forward actions to promote national best practice. We appreciate Carers Wales' membership of this group, along with senior colleagues in local authorities, health boards, the third sector and individual unpaid carers.

This working group is concentrating its efforts on improvement in access to Carers' Needs Assessments and information and advice provision for unpaid carers.

We are grateful to Carers Wales for arranging a series of engagement events with unpaid carers in September. We will then be working with local authorities and health boards to establish how we can bring most value to promoting best practice and agree an action plan.

The rapid review also recommended action to consider the education and training of health care professionals to support and value unpaid carers. Our Carer Aware programme provides £4.4m of Welsh Government funding for 2020-2025. It is jointly delivered by Carers Trust Wales and Carers Wales. The objective of the programme is to work with staff and practitioners at all levels of the health and social care sector to create meaningful cultural change to benefit unpaid carers in Wales. Training is provided to social workers and health car professionals. Guidance and good practice principles have also been established. This includes a hospital discharge guide and a toolkit enabling healthcare settings and patient experience teams to recognise unpaid carers.

Our £9million Short Breaks Fund (2022–25) provides unpaid carers with opportunities to take a break from their caring role to relax or pursue their own interests.

The programme will deliver 30,000 short breaks. The funding can be used for overnight breaks or day trips (with or without the cared for person) and other more innovative approaches such as attending a weekly keep-fit class or provision of a small grant to cover the purchase of trainers and earbuds for a carer to take up running or a sports club membership. The intention is to encourage innovation and move away from over reliance on traditional models of residential respite provision. Carers Trust Wales oversees the scheme and co-ordinates a third sector grant scheme, Amser, as an additional aspect of the Short Breaks Fund. The Fund has attracted carers who were not previously known to services, evidencing the additional value of the scheme, in connecting carers with support services.

B) From Act to Impact? Final Report of the Evaluation of the Social Services and Well-being (Wales) Act 2014

The final report asked a series of sector-wide questions. Local Authorities and Welsh Government are instrumental in responding, along with Social Care Wales and Care Inspectorate Wales. We are working closely with these organisations to better understand the challenges and needs of the sector to drive improvement.

The new National Office for Care and Support is key in bringing about a more collaborative and coordinated response to these challenges. The evaluation found substantial support for the principles and ambitions of the Act, but that the sector is not yet achieving those ambitions.

There is more work to be done, and Welsh Government is working with the sector so that it is better able to meet the needs of local populations both now and in the future.

We are considering the strategic intentions (recommendations) of the report regarding carers' needs assessments. As outlined above, we have established a Task and Finish Group that is working collaboratively with the statutory and the third sector to drive national improvement.

We will consider the remaining strategic intentions in the report as we revise our National Strategy for Unpaid Carers. We intend to undertake this work, including the revision of the Delivery Plan which will underpin the Strategy, in partnership with our stakeholders and will ensure the voice of the unpaid carer is intrinsic to the development of the updated strategy.

Yours sincerely,
Albert Heaney CBE
Chief Social Care Officer for Wales

Conclusion

Unpaid carers are feeling less supported than before the pandemic which has led to a cynical view on how the Social Services and Wellbeing (Wales) Act 2014 is working.

However there are positive developments in some areas of support undermined by the Carers Needs Assessment process that is under-resourced and overly complicated.

There is a distinct tonal change in the way carers are reciting their observations since the last Track The Act survey was undertaken in the year running up to the pandemic.

Many carers are actively dismissing the statutory support being offered to them due to personal or societal disappointment generated by a lack of perceived tangible support.

Many carers highlighted the lack of support experienced in health settings while showing caution towards interacting with Local Authorities due to the process being complicated with little promise of positive change.

This is emphasised by the near-third of carers who have chosen not to engage in the Carers Needs Assessment process due to a core belief that these assessments will not result in their caring role improving.

However, the evidence also shows that there are net benefits when carers are engaged in the process. The majority did say advice had at least been partly useful when speaking with professionals whether from Health, Local Authorities or the third sector.

Those who were able to particpate in communiy-based support also benefitted from these activities.

This is reaffirmed by the evidence from Local Authorities that shows a matured system compared to pre-pandemic period that has solidifed processes and moved towards innonative and, often, co-productively produced community support that is more likely to benefit more carers.

For these positive developments to be capatlaised on, more carers need to know of the impact advice and community support can have on their lives.

This requires global efforts to identify carers or help carers self-identify earlier so these preventative measures are fully in effect rather than becoming evident after a carer has got to a crisis point.

It also requires an effort to get carers who have had poor experiences with statutory bodies to re-engage. This will require more open communication and evidence-based improvements. Every statutory body who submitted evidence took a step towards this via this report.

Most pressingly, Carers Needs Assessments and the direct care packages that should result from these need heavy and immediate investment.

Carers Needs Assessments are clearly seen by carers as the lesser partner compared to other statutory support and this is having an overwhelmingly negative effect on the confidence in the overall system.

This will require the process to be more understandable and transparent with meaningful outcomes. Investment will be required to increase capacity that will inevitably lead to the need for more resourcing of support.

Statutory bodies also need to focus on better recording methodology to understand and report the number of carers in their vacinity. Without these ecords, opportunites to support carers are lost and this further ebbs away confidence in the system.

The biggest positive is the core ethos of the Act can still improve carers lives and the core processes of Local Authorities are in place to achieve this goal.

However without investment and steps to improve confidence in the system, more carers will choose to disengage and the verging carer crisis will continue to build steam.

carers
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Across Wales today 310,000 people are carers -
supporting a loved one who is older, disabled or seriously ill

Carers UK is here to listen, to give carers expert information and tailored advice. We champion the rights of carers and support them in finding new ways to manage at home, at work, or in their community.

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Carers Wales - Unit 5, Ynys Bridge Court, Cardiff, CF15 9SS

T 029 2081 1370 E info@carerswales.org

@carerswales /carerswales /carerswales @carers_uk