

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Gwella mynediad at gymorth i ofalwyr di-dâl](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Improving access to support for unpaid carers.](#)

UC18: Ymateb gan: Ymddiriedolaeth Gofalwyr Cymru| Response from: Carers Trust Wales



Health and Social Care Committee inquiry: Improving access to support for unpaid carers

Carers Trust Wales evidence

September 2025

[Carers Trust Wales](#)

Carers Trust works to transform the lives of unpaid carers. In Wales it partners with its network of ten local carer organisations to provide funding and support, deliver innovative and evidence-based programmes and raise awareness and influence policy. Carers Trust's vision is that unpaid carers are heard and valued, with access to support, advice and resources to enable them to live fulfilled lives.

Carers Trust Wales delivers high impact national programmes alongside the direct delivery of our local carer organisations. The Carers Support Fund and Short Breaks Scheme, funded by Welsh Government, have a combined reach of almost 30,000 carers annually. These programmes are third sector led, and third sector delivered, with Carers Trust nationally partnering with upwards of 40 organisations to support carers locally. Both programmes have strong evidence to demonstrate significant impact for carers and offer proven models of how nationally-led approaches are a crucial component of the services relied on by statutory partners to deliver the aims, ambitions and duties created by the Social Services and Wellbeing (Wales) Act 2014.

The Carers Trust Network in Wales reached 113,000 unpaid carers, providing direct support to more than 31,000 carers in 2024-25. Of these, 3,630 were young carers or young adult carers under 25.¹ This direct support is funded through a mix of statutory contracts from local authorities, health boards and Regional Partnership Boards; Carers Trust administered Welsh Government programme funding through the Short Breaks Scheme and Carers Support Fund;

¹ Carers Trust Network Data Exchange 2024-25, as yet unpublished.

and through charitable funding via Carers Trust and other trusts and foundations, including the National Lottery.

Approach

Carers Trust Wales welcomes this inquiry by the Health and Social Care Committee on the provision of, and access to, respite care and wider support services for unpaid carers in Wales.

In responding to this inquiry we draw on evidence informed by:

- Unpaid carers, including the voices of our Youth Council, who are a group of young carers supported by our Network across Wales
- The ten local carer organisations part of our Carers Trust Network in Wales:
 - Bridgend Carers Centre
 - Carers Outreach/Cynnal Gofalwyr
 - Carers Trust Crossroads West Wales
 - Carers Trust North Wales Crossroads Care
 - Credu
 - Honeypot
 - Neath Port Talbot Carers Centre
 - NEWCIS
 - Swansea Carers Centre
 - Tu Vida
- Delivery of Carers Trust Wales's national programmes, including the Welsh Government funded Short Breaks Scheme and Carers Support Fund, our Carer Aware programme working with health and social care professionals, our Older Carers programme, and our Raising Aspirations Programme for young carers and young adult carers.
 - Given the remit of the inquiry, with an explicit focus on respite, we draw extensively on the data, evidence and learning available to us in this space as the National Coordinating Body for the Short Breaks Scheme. A list of the 40 partner organisations working across the Short Breaks Scheme and Carers Support Fund, whose data is included in this evidence, are listed in the Annex.

Summary of key issues

- Support for unpaid carers is preventative and is a key aspect of delivering against the Social Services and Wellbeing (Wales) Act 2014.
- Regional Partnership Boards are required to invest a minimum of 5% of their RIF budgets on unpaid carers support. This is in addition to £1m funding to health boards and the RPB allocation of the Short Breaks Scheme.

- Local carer organisations play a vital part in delivering carer support services and are commissioned by statutory partners to support them to deliver their duties under the Act, valued at upwards of £4m annually. However, contract values often fall significantly below the true cost of service delivery to meet need, or cover only part of the full service delivered by the third sector.
- Demand for services exceeds capacity to deliver support, with some services holding waiting lists.
- Young carers may face additional barriers in accessing support with schools and colleges, rather than social services, being the primary statutory contact where identification of caring responsibilities may take place. Despite this, there is a paucity of data around young carers in school in Wales in comparison with other UK nations.
- National approaches to carers support, such as the Carers Support Fund and Short Breaks Scheme complement delivery by local and regional statutory partners in achieving the aims and ambitions of the Act. These models are tried and tested, reach carers that are not otherwise connected with support services and provide a gateway for new carers to access a wider offering of support for them in their caring role.
- The Carers Support Fund provides carers with immediate and ongoing poverty alleviation support to improve wellbeing in the longer term. Demand for support is significant. There is no parallel or alternative support that meets this need.
- The Short Breaks Scheme, funded by Welsh Government and led by Carers Trust, is a national programme delivered by and through the third sector that has brought more than 50,000 breaks to carers since 2022. A proportion of funding for the programme has been allocated to RPBs since 2022 while Carers Trust administer the Amser programme grants to third sector organisations.
- The Short Breaks Scheme sits alongside, and in addition to, the respite provided by statutory services. Together they are part of the fabric delivering the aims and ambitions of our Social Services and Wellbeing Act in Wales.
- The Short Breaks Scheme is a model that works. Independent evaluation of the Short Breaks Scheme demonstrates its positive impact on unpaid carers; that it reaches carers most in need of a break; and reaches carers who have not received a break elsewhere (including from statutory services) in the past 12 months.
- Delivery partners and carers alike value the flexibility and variety of breaks made available to carers through the Scheme.
- However, demand exceeds supply, and the Short Breaks Scheme is only reaching a small percentage of the carer population who need support to take a break. Ongoing investment is needed to grow reach and to enable long term planning that carers, and statutory services, can rely on.

- Local carer organisations are partners in the delivery of local authority respite provision through the delivery of replacement care. Local experiences indicate variation in the allocation of statutory carer Support Plans where respite is listed as an eligible need for carers.
- Improving the Act's implementation and increasing access to support for unpaid carers requires a radical shift towards prevention. This includes sustained, multi-year budgets for the delivery of preventative services and national programmes, as well as support for improving the identification of young carers.

Access to support for unpaid carers

About carer support services under the Social Services and Wellbeing (Wales) Act 2014

The Social Services and Wellbeing (Wales) Act 2014 (the Act) gives unpaid carers the same rights to have their wellbeing needs assessed, and to access support to meet those needs, as the person they care for. Unpaid carers were identified at the outset of implementation as a priority population under the Act.

Local authorities have a duty to assess, through a Carer's Needs Assessment, a carer's wellbeing needs, where it appears they may have needs eligible to be met by the local authority. This includes assessing their need for a break or respite from their caring responsibilities. Where eligible, the local authority then has a duty to prepare a statutory Support Plan for the individual and to deliver the support detailed in that plan.

Local authorities, and statutory partners, also have a duty under the Act to secure preventative services for their population. This includes the provision of Information, Advice and Assistance services, wellbeing provision and breaks for carers. This may be met in part through the provision of day centres or day services or through other non-traditional forms of respite.

While the first decade of the Act saw duties to support unpaid carers predominately directed at local authorities, the Health and Social Care (Wales) Act 2025 amended the Social Services and Wellbeing Act by placing greater duties on health boards and Regional Partnership Boards to deliver integrated approaches to the planning and delivery of carer support services. Carers Trust's Carer Aware Programme works specifically with health and social care professionals within health boards, as well as pre-registered health care professionals at universities, to help equip them with the skills and resources to identify unpaid carers and fulfil their duties under the Act. The project was initially funded by Welsh Government in 2020 and has been extended until March 2026.

Commissioned services to support unpaid carers

Local carer organisations are key delivery partners of statutory bodies in the delivery of their duties under the Act. Local carer organisations part of the Carers Trust network held contracts with local authorities, local health boards and Regional Partnership Boards worth a combined £4m in 2024-25.²

The National Framework for the commissioning of care and support in Wales: Code of Practice was introduced in 2024, providing guidance to statutory partners commissioning care and support, including the commissioning of carer support services.

This Code of Practice notes:

- “Statutory partners **must** demonstrate that they understand the full costs of directly provided and contracted care in their area [...] Statutory partners and provides **must** work collaboratively to understand fair and sustainable costs of delivering care.”³

The National Office have produced a ‘Toolkit’ to complement the Code of Practice which includes the Welsh Government’s Charter for Unpaid Carers and a ‘Good practice approaches to supporting carers in Wales’⁴ guide. This was developed by Carers Trust in 2019 and, while largely relevant and accurate, would benefit from updating to reflect the new Framework.

It is too early to be able to conclude what difference the National Framework has made to commissioning practices for carer support, though anecdotal evidence informs us we are yet to see the hoped for change in culture and practice.

Regional Partnership Boards

The primary route for Regional Partnership Boards to provide support for unpaid carers is through the Regional Integration Fund. Welsh Government guidance requires RPBs to allocate a minimum of 5% of the Regional Integration Fund to provide direct support to unpaid carers (excluding support for other priority population groups, such as older people or people with a learning disability that may indirectly provide support for unpaid carers).⁵ This is in addition to the RPB

² Carers Trust Network Data Exchange 2024-25, as yet unpublished data

³ <https://www.gov.wales/sites/default/files/publications/2024-07/national-framework-for-commissioning-care-and-support-code-of-practice.pdf>

⁴ <https://carers.org/downloads/resources-pdfs/good-practice-approaches-wales/good-practice-approaches-to-supporting-carers-in-wales.pdf>

⁵ [Health and Social Care Regional Integration Fund - Revenue Guidance 2022-27](#)

ringfenced funding of £1m allocated annually (with no increase in over a decade) and split between all seven health boards to deliver support for unpaid carers (“hospital discharge engagement”) and the £1.82m allocated as part of the Short Breaks Scheme between all RPBs.

In 2022-23, the Welsh Government reported that a total of £12.3m was allocated by RPBs to support unpaid carers, which it notes is 5% above the minimum expected investment. No further breakdown of the figures is provided in national reporting with RIF, Short Breaks and health board funding accounted for together.⁶ Carers Trust is also aware that at an operational level, amongst commissioned services and statutory partners, all three funding streams are referred to as “RIF”. There is not always clarity about whether funding for a service comes from RIF or ringfenced funding for health boards or Short Breaks.

Despite budgets for RPBs and RIF being assured until 2027, local carer organisations working with several of the RPBs tell us they continue to have annual contracts to deliver RIF funded programmes, such as supporting carers through hospital discharge. The pattern is the same for some health boards, with uncertainty each year about the continuation of funding to support work with unpaid carers. This leads to an environment of insecurity for services and the experienced staff delivering them, and ultimately risks potential gaps in support for unpaid carers as services prepare to step down and then re-establish on an annual basis. These echo experiences across the third sector, such as those captured by the voluntary sector in West Glamorgan in their feedback on the approach to RPB and RIF funding.⁷

Delivery exceeds contract values

Local carer organisations, as third sector organisations, are able to draw on funding from alternative sources in addition to statutory funds to support their holistic offer to carers. This has the benefit of bringing additional funding to the table and enabling local carer organisations to offer services that enhance carers’ wellbeing but may go beyond the scope of statutory duties (for example, trips and activities, support groups, advocacy support). This is part of the added value brought about by third sector delivery.

However, too many local carer organisations tell us that the value of their current commissioned service, or core contract, is insufficient to meet the demand for support from carers. Moreover, there is often an expectation that local carer organisations seek alternative forms of funding to deliver not only on

⁶ [Health and Social Care Regional Integration Fund](#)

⁷ A Community and Voluntary Sector Response to the West Glamorgan Regional Partnership - Regional Working and Regional Integration Funding. (SCVS and Neath Port Talbot CVS)

the 'additional' costs and services that may enhance carer experience, but to supplement aspects of the delivery of their local authority, health board or RPB commissioned service.

- This is particularly the case for the funding of young carer services. Often the local carer organisation is the primary delivery provider of young carer services in an area. Despite this, many report that their main source of funding for this service is the National Lottery, or smaller trusts and foundations. In one local authority area, there is a minimal investment of £10,000 per annum to the local carer organisation from statutory partners to support young carers in school. The remainder of the service, which involves outreach to all local schools, is funded by the Lottery. Notably, the Lottery funds projects, rather than ongoing services that are key to the delivery of statutory duties.
- In another area of Wales, we are aware that the value of the local carer organisation's commissioned services is less than a third of their annual income. There is an understanding that the core contract with the local authority enables the charity to achieve match or partial funding from other sources, and the local carer organisation is in the best position to coordinate support for carers, no matter (and despite) how the services are funded. However, there is a precedent where the service reports on 100% of their delivery in annual progress reports to their statutory partner, thus giving the impression that the services funded from charitable sources are contributors to meeting statutory duties.
- One local carer organisation described how they have been funded through their local authorities and health board to cover delivery costs, such as staffing, related to an older carers and dementia service. Positively, this service has secured funding until 2027. However, funding from the local authority to maintain rent on the premises to hold the same service was time-limited. Alternative, charitable funding was applied for but this was rejected by a large trust on the basis that the service is statutory and should be fully funded by the statutory partners that rely on it. The local carers organisation is currently funding the costs through their reserves but warn that this will not be possible going forward.

Demand for carers services and current levels of unmet needs

The Social Services and Wellbeing (Wales) Act 2014 places a duty on statutory partners at a regional level to assess the need for carer support services, including through the Population Needs Assessment, and to plan to meet that need in their Area Plan. Each RPB has its own Carers Strategy Board, Partnership or the equivalent to drive improvement and delivery. Local carer organisations report mixed, if not limited, involvement in assessing the need for, and planning of, carer support. This is despite being the primary delivery organisations in many local areas and regions, and often being the services closest to carers and understanding their needs.

Demand exceeds supply

Local carer organisations report an increase in the number of contacts with unpaid carers and significant increases in the referrals to carer organisations from statutory services. While local carer organisations part of the Carers Trust Network in Wales have seen an increase in the number of carers registered for their services *and* in the number of carers directly supported over the past two years, the pace of carers coming forward to access services is greater than the growth in carers directly supported (100,000 registered in 23/24 and 113,000 in 24/25, 28,000 directly supported in 23/24 and 31,000 directly supported in 24/25).⁸ Resource and capacity to respond is the primary reason for this discrepancy, with local carer organisations reporting a rise in the need to respond to more complex and acute needs in recent years.

As such, some local carer organisations tell us they have waiting lists to access aspects of their support:

“We have waiting lists for services. This is principally due to the number of referrals we receive from statutory and other services who themselves are overrun with numbers of people requiring assistance and support, whose needs they cannot meet.”

On the whole, local carer organisations identify as partners with their local authority and see themselves as part of the whole system supporting carers in their community. Local carer organisations understand the financial pressures their colleagues in statutory services are also under. There is a shared understanding that capacity across the system – in statutory services and in the third sector – is unable to meet the demand.

⁸ 2023-24 data taken from ‘National Reach, local impact’ informed by Carers Trust’s Network Data Exchange: [carers-trust-wales.-national-reach-local-impact-report-2025.pdf](#). 2024-25 data taken from the Network Data Exchange, as yet unpublished.

Young carers

As an all-ages framework legislation, the Social Services and Wellbeing (Wales) Act 2014 is the primary legislation supporting the 8,230 young carers under 18 in Wales and a further 14,320 young adult carers aged between 18-24.⁹

The 2021 Census noted a marked increase in the proportion of children and young adults providing significant levels of care, at 20 hours or more per week (up from 15% in 2011 to 27% in 2021) and also at 50 hours or more per week (up from 12% to 15%). The data further demonstrated that young carers and young adult carers in Wales were more likely to live in areas of high deprivation in comparison with their peers without caring responsibilities.

While the local authority social services functions are responsible for providing support for young carers following a young Carer's Needs Assessment, young carers are more likely to be identified, and to be supported day-to-day, in their education setting. Being identified early, at school, then leading to referral to social services, is the first barrier to overcome to ensure young carers access the support they are entitled to.

There are some examples of good practice and positive experiences in schools, with young carers reporting the important role a Young Carers Lead plays in navigating their education and caring role. However, young carers consistently tell us that young carer awareness amongst school and college staff (including administrative and pastoral staff) is poor. They call for greater and more consistent training for staff.

Young carers who are members of the Carers Trust Youth Council tell us that their caring role continues even when they are at school. For some, this is the ongoing concern about the person the care for, the need to be checking phones in case of an emergency or to be available to take a call from the doctor or social worker. For others, their caring continues more directly. Increasingly, young carers who care for a sibling are telling us that they are asked to support their sibling with an additional need in their class setting, with staff citing that the young carer knows best how to support or manage the behaviour of their sibling. This means, in practice, that the young carer is missing out on both their education and on their limited opportunity to take a break from caring to be a child with their friends. It also points to the inappropriate involvement of the young carer as a carer/support to the child with additional needs where alternative support should be put in place by the school or local authority.

Improving support for young carers

⁹ [Unpaid care by age, sex and deprivation, England and Wales - Office for National Statistics](#)

Resources have been created by Carers Trust, through Welsh Government funding, to empower education professionals to appropriately support young carers. However, these need to be accompanied by a national focus to drive improvement by embedding practice change at classroom level and sharpening commitment within leadership.

Carers Trust has advocated over many years for the full implementation of Estyn's 2019 recommendation, which was accepted by Welsh Government, to "produce reliable, nationally-collected data to help identify young carers."¹⁰ Equivalent systems are already in place in Scotland and England, tracking the attainment and onward destinations of young carers. There is, however, a paucity of data about young carers in Wales. Without recording of data at school and then national levels, such as through including young carers in the Pupil Level Annual School Census (PLASC), we are unlikely to drive the improvement that is needed.

Young carers tell us about the importance of the Young Carers ID card (YCID) as a tool to support them in school and in the community to be identified by professionals for their role as a young carer. This was a national Welsh Government programme, supported by Carers Trust, and delivered locally by local authorities. When seed funding for implementation came to an end in 2023, some local authorities deprioritised delivery. As such, young carers in these areas tell us their local authority is no longer issuing YCIDs, or will not renew expired cards. Other local authority areas require a young carer to have had a young Carer's Needs Assessment to qualify for the card. Long waiting lists for assessments mean young carers who would benefit from the YCID are left without both the card and support. If the YCID is to be the success many young carers want it to be, a renewed focus on delivery is needed, with tangible benefits for young carers and awareness amongst the professionals they may encounter.

National approaches to carer support

Alongside and complementing local and regional delivery of the Act, the Welsh Government funds two national programmes to support carers: the Carers Support Fund and Short Breaks Scheme. These use a proven model where Carers Trust coordinates national delivery, allocating grant funding to the local delivery partners best positioned to respond to carers' needs.

Carers Support Fund

¹⁰ [Provision for young carers in secondary schools, further education colleges and pupil referral units across Wales - Estyn](#)

Carers Trust has led the Welsh Government funded Carers Support Fund since its inception in 2020. This programme supports carers at the sharpest end of poverty with hardship grants and income maximisation support. It developed from a programme to protect carers from the impact of the pandemic on finances and wellbeing, and has since sharpened its focus to address the impact of poverty as a key factor underpinning carers' health and wellbeing.

A delivery partner described the development of the Carers Support Fund over recent years:

“CSF is now more of a wraparound service, alleviating crisis point but then also looking at maximising income as much as we can (i.e. better tariffs for utilities, training carers to use price comparison sites, accessing discounts and concessions etc). It's about equipping carers with the resources and tools to help them to maintain a sustainable financial wellbeing.”

In 2025-26, the Welsh Government allocated £1.5m to the Carers Support Fund, extending the programme for an additional year. Carers Trust Wales distributes grants under the fund to 21 local carer organisations, third sector organisations and statutory partners where there is no dedicated carer support service.

Reaching previously unsupported carers

During 2022-25, the Carers Support Fund reached 29,503 unpaid carers. The Carers Support Fund is an all-ages programme, with young carers making up 17.9% of all carers supported in 24-25.

Of all those who accessed support, almost half (14,397 or 49%) were new to services and previously unconnected to support. Delivery partners share the important role the programme plays in identifying previously unsupported carers, with the offer of hardship or microgrants as an important first step.

“By applying for the grant it's definitely opening the door for carers to come onto our books and engage with other activities that we do.”

Once identified, local carer organisations and other community and third sector organisations can offer longer term interventions to support poverty alleviation – such as benefits checks, budgeting skills or support to access further grants – and undertake an holistic assessment of their support needs as a carer. This plays a crucial role in opening the door to the wider support offered by the carer's organisation, such as accessing a short break, or to be referred to the local authority for a Carer's Needs Assessment.

Demand exceeds supply

Delivery partners across all services report significant demand for support through the programme, particularly for hardship grants:

“Our challenge is meeting demand and managing this. Demand is phenomenal, and we have had to temporarily stop taking referrals at

certain times as the waiting list was too large. Staff are working under pressure; they know carers are struggling so additional funding would be very beneficial.”

Services recognise that additional funding is needed to provide greater direct support for carers but also to increase capacity within the organisation to deliver.

Impact

Evaluation of the programme demonstrates the role it plays in the immediate alleviation of the impact of poverty, with 75% of people accessing the fund saying it had reduced their financial burden and an average of 3 people within the household benefiting from the fund per grant given. For those in receipt of hardship grants, 81.5% reported being unsure or unaware of where else to turn for support, citing high rate loans, loan sharks or no other means of support as an alternative to the fund. Of those who received hardship grants in 24-25, a minimum of 69% used this grant to cover the basic essential of purchasing food. The evaluation further found an improvement in carers’ wellbeing as a result, with 86% of respondents agreeing that the support fund had improved quality of life and 84% noting that their mental health had improved.

The Carers Support Fund is a tried and tested national model of support for unpaid carers, providing carers with immediate and ongoing poverty alleviation support to improve wellbeing in the longer term, There is no parallel or alternative support that meets this need. The programme is funded until March 2026 with no certainty about its future going forward.

Respite and Short Breaks

The most common terms used to describe breaks from caring are “respite” and “short breaks”. Sometimes these are used interchangeably but, broadly, these are understood differently. Seddon et al (2021) describe the difference where “respite” is seen as a “break from something that is unpleasant” while a “short break” is “a shift in focus from supporting unpaid carers in their caring role to improving quality of life for *both* the unpaid carers and the person they support, potentially including a break taken *together*.”¹¹

¹¹ Seddon, D., Andrews, N., Hatch, S., & Cubbage, K. (2021). What a difference a break makes: a vision for the future of short breaks for unpaid carers in Wales. <https://carers.org/downloads/wales-pdfs/carers-trust-road-to-respite-report.pdf>

With clear duties on local authorities and statutory partners to deliver acute and preventative services at local and regional levels, the Short Breaks Scheme supports delivery of the Social Services and Wellbeing (Wales) Act 2014 at a national level. The Short Breaks Scheme sits alongside, and in addition to, the respite provided by statutory services. Together they are part of the fabric delivering the aims and ambitions of the Act, underpinned by the principles of prevention and early intervention. The Short Breaks Scheme provides additional capacity and a more flexible and creative approach to breaks, as advocated for in Bangor University's "What a difference a break makes."¹²

In its response to the Health and Social Care Committee's scrutiny of the 25-26 Budget, the Welsh Government outlined this complementary approach:

"The provision of respite remains a statutory responsibility of local authorities under the Social Services and Wellbeing (Wales) Act. The intention of the Short Breaks scheme is to drive a more creative and individualised approach to respite and should enhance what is provided by local authorities drawing from the Revenue Support Grant."¹³

Short Breaks Scheme delivery partners outline their understanding of the preventative nature of the programme, in comparison with the respite provision of statutory partners:

"A lot of the carers who access local authority support are often those who are more at crisis point. The Amser programme has allowed us to also engage with carers who are in the earlier stages of their caring role, which has enabled us to react and offer more preventative measures."
(Short Breaks Delivery Partner)

The Short Breaks Scheme

The Short Breaks Scheme was established in 2022 and initially funded between 2022-25 following a 2021 Programme for Government commitment to deliver a Short Breaks Fund for Wales, worth £9m over three years. This was in response to the case outlined in "What a difference a break makes,"¹⁴ which demonstrated the key principles and features of breaks that matter to carers. The research

¹² Ibid.

¹³ [Written response by the Welsh Government to the report of the Health and Social Care Committee - Mar.pdf](#)

¹⁴ Seddon, D., Andrews, N., Hatch, S., & Cabbage, K. (2021). What a difference a break makes: a vision for the future of short breaks for unpaid carers in Wales.

made it clear that traditional respite alone was not meeting the population need for carer breaks.

Carers Trust became the National Coordinating Body for the Welsh Government's Short Breaks Scheme in late summer 2022 following an open and competitive application process. The Welsh Government required a proportion of funding under the Short Breaks Scheme to be allocated to RPBs with Carers Trust managing the 'Amser' short breaks grant programme to the third sector. The combined scheme had a target reach of 30,000 carers over the three year period until 2025. The Short Breaks Scheme has been extended until March 2026.

Impact

Independent evaluation of the Short Breaks Scheme by Bangor University found that short breaks are highly impactful.¹⁵ The results of the evaluation demonstrate statistically significant improvements in carers' wellbeing, quality of life, and alleviating loneliness:

- Carers accessing a break are demonstrating statistically significant improvements in a measure of quality of life ($p < .001$)
- Carers accessing a break are demonstrating statistically significant improvements in a measure of wellbeing ($p < .001$)
- Carers accessing a break are demonstrating a statistically significant decrease in a measure of loneliness ($p < .001$)

The significance values of $p < .001$ indicate a very low probability that the results are due to chance, indicating the high likelihood that breaks provided through the Short Breaks Scheme have led to the improvement for carers.

Reach: scale¹⁶

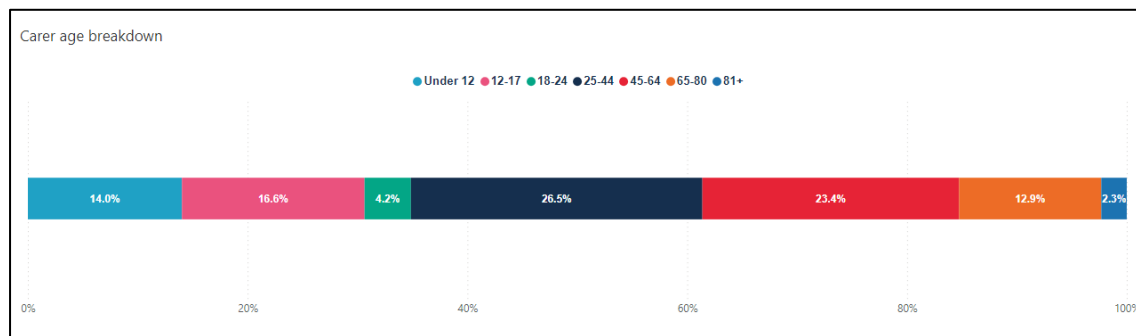
Through Amser alone 21,539 individual unpaid carers received a break, with 17,445 breaks delivered between 2022-25.¹⁷ These were delivered via 33 third

¹⁵ Data as yet unpublished. Shared with permission by Bangor University for the purposes of informing this Inquiry and programme delivery and development.

¹⁶ Data on the Short Breaks Scheme in this response is primarily drawn from the 2022-25 programme, based on complete data sets. Where more recent and verified data is available from the 2025-26 programme, this is indicated.

¹⁷ Between 2022-25 21,539 individual carers received a break. Some carers will have accessed more than one break, such as receiving a microgrant alongside attending multiple day trips. Carers Trust strives for transparency in our monitoring of the programmes reach. As such, we report on individual carers, not on the number of interventions (where the same carer could be counted

sector partners working locally through delivery grants totalling £3.876m. Of those who received a break, 7,496 (or 34.8%) were young carers or young adult carers under 25, though the Amser programme reaches the youngest young carers, working age carers and older carers.



While not all RPBs are able to provide the same level of detail around the reach of Short Breaks funded programmes as that collected under the Amser grants, the combined reach of Amser and RPB funded Short Breaks for 2022-25 is just over 50,000 carers. This combined reach far exceeds the initial target of 30,000, demonstrating the economies of scale achieved through this national model.

In 2025-26 Amser alone has a target reach of 8,000 unpaid carers, with delivery looking likely to exceed 9,000 carers accessing a break.

Reach: carers 'most in need' of a break

Independent evaluation of the programme,¹⁸ found that the Short Breaks Scheme is reaching carers most in need of a break:

- 65.2% of carers who received a break were providing significant levels of caring at 50+ hours of care per week (a recognised indicator of the likelihood of needing a break)

Despite the high likelihood of needing a break within the cohort of carers who accessed the Short Breaks Scheme between 2022-25, the vast majority were not receiving a break through local authority provision or through traditional respite services:

multiple times), avoiding the potential to 'over-report' on the programme's reach.

¹⁸ Data as yet unpublished. Shared with permission by Bangor University for the purposes of informing this Inquiry.

- Four out of five (82.3%) carers who engaged with the evaluation had not accessed a break elsewhere in the last 12 months.

Reach: Assessing the need for a break and connecting carers to support for the first time

The evaluation found that the Short Breaks Scheme identifies carers' needs for a break, and connects them to support, where statutory services are yet to assess the need for support as part of their duties under the Act.

Only a third (34.9%) of evaluation participants who had accessed a break through the Short Breaks Scheme were aware they had been offered a statutory Carer's Needs Assessment. This follows the national pattern found by the Public Services Ombudsman for Wales indicating low levels of Carer's Needs Assessments undertaken by local authorities across the country.¹⁹

Of those carers accessing breaks through the Short Breaks Scheme who had received a Carer's Needs Assessment, only a third (32.4%) had discussed taking a break as part their assessment. While the reasons why assessors are not discussing taking a break or having respite as part of their assessment conversations with carers are not clear, the evidence demonstrates these conversations are not happening routinely as they should be. It further indicates that the Short Breaks Scheme is identifying the need for a break amongst a cohort of carers whose respite needs are not being identified by statutory partners.

Supporting this position, of the 21,539 carers accessing a break through the Amser funded programmes between 2022-25, almost half (46% or 9,959 carers) were previously unknown to support services.²⁰ While positive in itself, this demonstrates the value added by the Short Breaks Scheme in supporting the identification of carers who were not previously accessing support from statutory providers to sustain them in their caring role. It further demonstrates the role of the programme in opening the door to the wider support offering available in third sector and local carer organisations.

Short Breaks Scheme delivery partners echo this:

"An added benefit is that the activities are not provided in isolation, but as a carers organisation we can add so much more to the carer's experience."

Reach: targeted approach to reaching traditionally underserved communities

¹⁹ Public Services Ombudsman for Wales (2024) [Are we caring for our carers? - An Own Initiative investigation into the administration](#)

²⁰ Equivalent data from RPB delivery of Short Breaks is not published

Of the Short Breaks providers funded under the Amser programme:

- **Eight** projects provided short break opportunities to **all adult and young carers** (two of these projects had a specific focus on providing short breaks for carers from minoritised ethnic communities, carers of people with dementia)
- **Three** projects provided short break opportunities for **young carers and or young adult carers**
- **Fourteen** projects provided short break opportunities focussing on **adult carers** (projects included those with a specific focus on older carers, carers supporting people with mental health issues, carers of people with a range of learning disabilities or who are neurodiverse, carers of people with kidney disease and carers from Gypsy, Roma, Traveller communities)
- **Three** projects provided short break opportunities to **all carers** of people with a specific disease or supported people at the end of life (cancer, acquired brain injury, MS)
- **Eight** projects provided short break opportunities for **adult and young carers** of people with a range of learning disabilities and/or physical disabilities or who are neurodivergent.

Targeted funding is allocated to organisations either working with demographic groups traditionally underserved by services, such as people from minoritised ethnic communities, male carers and LGBTQ+ carers.

Carers Trust requires all delivery partners to set targets about their reach with specific demographic groups, as well as requiring carer demographic data as part of our monitoring process.

The following charts demonstrate Amser's reach amongst various demographic groups, in comparison with the population benchmark. They demonstrate the impact of partnering with organisations working with minoritised communities in reaching above population proportion representation of minoritised ethnic carers in the programme. The under-representation of male carers in the programme for 2022-25 has driven targeted approaches to supporting organisations working with male carers as part of the 2025-26 programme.



Carers Trust works consistently with our Network Partners and delivery partners under the Amser programme to improve data collection around carer demographics.

We are not aware of equivalent requirements from RPBs with regards monitoring demographic data in relation to the reach of Short Breaks funded projects, nor whether there is an approach to target support for underserved communities.

Geographic reach

In allocating funding under the Amser grants, Carers Trust seeks to ensure geographic distribution of funding across local authority areas. The following table shows the percentage of the carer population reached through Amser funded Short Breaks during 2024-25:

Local Authority Area	Total Carer Population 2021 Census.	Actual Carer Reach 2024/25	Percentage of Carer Population to Access a Short Break.
Blaenau Gwent	7234	260	3.6%
Bridgend	15309	857	5.6%
Caerphilly	19068	315	1.7%
Cardiff	28987	607	2.1%
Carmarthenshire	20386	259	1.3%
Ceredigion	7246	395	5.5%
Conwy	11640	334	2.9%
Denbighshire	10169	359	3.5%
Flintshire	15262	583	3.8%
Gwynedd	9988	293	2.9%
Isle of Anglesey	6746	167	2.4%

Merthyr Tydfil	6212	300	4.8%
Monmouthshire	9201	150	1.6%
Neath Port Talbot	16556	452	2.7%
Newport	14975	575	3.8%
Pembrokeshire	12890	88	0.7%
Powys	13463	424	3.1%
Rhonda Cynon Taf	24990	472	1.9%
Swansea	24706	847	3.4%
Torfaen	9933	160	1.6%
Vale of Glamorgan	12923	522	4.0%
Wrexham	12858	438	3.4%
TOTAL		8,857	

The percentage reach amongst the carer population varied in 24-25 from 0.7% in Pembrokeshire to 5.6% in Bridgend. Allocations for 25-26 attempt to redress the geographic variations and have targeted delivery partners to support project delivery in previously underserved areas.

Equivalent data at local authority level is not rereported by RPBs.

Demand exceeds supply

Regardless of the local variation, these figures demonstrate that the Short Breaks Scheme, despite exceeding its target reach, is only reaching a very small fraction of the carer population. This is echoed by Delivery Partners, who consistently report that demand exceeds supply.

“The demand for short breaks is so high, we could have delivered four or five times over if we’d had any extra capacity, so it has been a challenge to manage expectations. We are in position when we are not publicly advertising the project as we would have to turn away so many carers which would detrimentally impact on our reputation.”

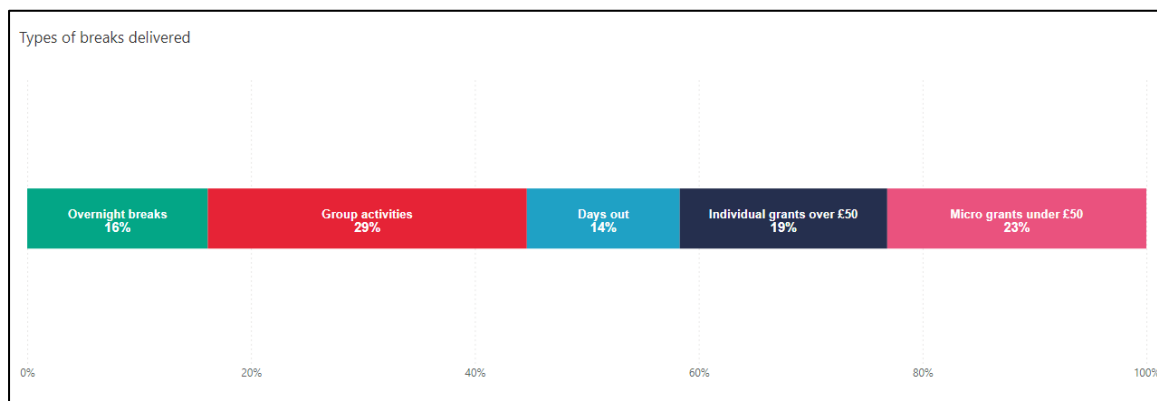
The current reach of the Short Breaks Scheme is, of necessity, determined by the resource and funding available, rather than in response to the carer population need. Greater investment in this preventative programme would enable greater reach and impact for carers, sustaining carers for longer and reducing the likelihood of burnout.

Learning about the breaks carers want to shape future provision

The evaluation of the Short Breaks Scheme helps to inform future breaks and respite provision, and demonstrates that the Scheme is providing the type and range of breaks that carers want:

- Roughly half (52.1%) of all breaks were taken by the carer with the person they care for or as part of a break for the whole family (28.6% whole family breaks, 23.5% carer and cared for person)
- A quarter (25.0%) of breaks give carers some much needed ‘me time’ by taking a break on their own
- Almost a quarter (23.0%) of breaks allow carers to connect with friends and family without the cared-for person

Carers Trust’s monitoring of the Amser programme provides insight into the range and type of breaks delivered. (Individual grants over £50 provide opportunities for the person to have choice and control over their break, Microgrants under £50 might take the shape of a cinema or restaurant voucher, or pay for a equipment for a hobby or subscription):



While traditional respite, such as overnight breaks, is a key element of delivery, this only represents 16% of all breaks. In comparison, group activities and days out account for 43% of delivery. These interventions point to the value of social interaction and the role of activity (rather than just having time away from the cared-for person) as part of taking a break. They may also represent a more cost-effective approach to taking a break than overnight breaks. Delivery partners and carers alike are, however, agreed that a variety of breaks is necessary to respond to individual needs, preferences and the nature of the caring role.

Flexibility of approach and the value of third sector delivery

Delivery partners of the Short Breaks Scheme comment:

“We would also echo that a great strength of the programme is that it’s so flexible so it allows us to be creative. We can build the project to fit carers’ needs, and Carers Trust have been very supportive in any adaptations we want to make to the project. The programme also offers huge value for money.

Reviewing the model in a recent consultation event, delivery partners concluded:

- The flexibility of the model enables a carer centred, tailored approach to the delivery of short breaks to address individual need.
- Carer voice and choice are central to delivery.
- The model is agile and enables a quick response to need.
- The model has supported the development of inclusive short break opportunities to meet a diversity of carer communities.

Respite provided by statutory partners

Carers Trust is not aware of national data held on the statutory provision of breaks. However, regulated care providers (providing replacement care as part of formal respite provision) that are part of the Carers Trust network in Wales tell us anecdotally there is significant variation in the recognition of respite as a statutory right outlined in an unpaid carer’s support plan under the Act.

Following a Carer’s Needs Assessment, a need for a break or respite might be identified. This is the carer’s need for respite, not the cared-for person’s need to be cared for by an alternative care provider or in an alternative care placement (though this is also possible following an assessment of the person with care and support needs). This follows the important introduction in the Act of carers’ rights to support alongside the person they care for. If the carer’s need for respite is an eligible need, this should result in the production of a statutory Support Plan under the Act and lead to the provision of regular breaks. This often means that a regulated care provider is commissioned to provide replacement care for the cared-for person, enabling the carer to take a break.

Respite provision within a Carer’s statutory Support Plan

There is no consistent approach across Wales in the implementation of statutory respite for individual carers. Of those areas where carers are receiving regular respite through the provision of replacement care for the cared-for person, we are aware that there are differences in practice that lead to differences in the impact on carers’ legal rights to support through the provision of Support Plan, or not.

Some local authorities, in line with their duties under the Act, provide a statutory Support Plan for carers to meet the carer’s need for a break. This outlines the

carer's right to a specific number of hours away from their caring responsibility to maintain their wellbeing. This wellbeing outcome would be met by the provision of replacement care for the cared-for person. In contrast, there are a handful of local authorities that only provide the cared-for person with a Care and Support Plan, without a Support Plan for the carer.²¹

In these instances, the material effect may be the same – that the carer has access to respite – but the carer's right to that respite break is only assured in those areas where the local authority prepares a Support Plan for the carer, irrespective of the cared-for person's Care and Support Plan.

A local carer organisation shared with us the example of an elderly couple, where the organisation was providing a respite service to enable the wife to take a break from her caring responsibilities. On inspection of the documentation from the local authority, it was a Care and Support Plan for the husband, the cared-for person. On that Plan, a wellbeing outcome *for him* was that his wife could have a break. The documentation, and the rights that follow it, were all related to the husband. While it was clear to the provider that a conversation had been had with the wife about her own needs as a carer, and that this support had been put in place, this was not documented as a Carer's Needs Assessment and had not resulted in a Support Plan for her, which would have provided her with her own legal right to a break.

Models and approaches to respite

Unpaid carers continue to call for greater availability of traditional models of respite, including regular access to day centres and services for the person they care for. Local carer organisations, such as Swansea Carers Centre and Carers Trust North Wales Crossroads Care, host day centres that provide a service for the cared-for person alongside a service for the carer. These traditional forms of respite continue to be valued by carers as a form of regular and reliable breaks from caring responsibilities.

An alternative approach to securing respite provision has been developed by NEWCIS. Called 'Bridging the Gap', it aims to bridge the gap between the point of referral to the local authority for support and the securing of a longer term package of respite support as part of a statutory Support Plan. 'Bridging the Gap' has a list of 80 confirmed replacement care providers ranging from sitting services to domiciliary care. An assessment is undertaken where a need for a break or respite is identified (this may be a formal Carer's Needs Assessment,

²¹ For example, across North Wales all local authorities with the exception of Gwynedd provide carers with a Support Plan outlining how to meet their respite needs with replacement care. In Gwynedd, the respite need is a need allocated to the cared-for person.

which can be undertaken in many cases by NEWCIS in areas where this service has been commissioned by the local authority). The carer is then provided with a budget of up to £400 to allocate to respite services as and when they are needed within a six month period. Carers have choice over when and how they use their hours of replacement care and liaise directly with the providers to arrange this. This arrangement supports those carers with a short term solution until a full package of care is in place, or in many cases, it meets a carer's need for a break early on, preventing their needs from escalating.

Carers Trust North Wales Crossroads Care also deliver a service on behalf of Betsi Cadwaladr UHB to provide emergency respite to carers or to provide short term, one-off replacement care to enable a carer to attend their own healthcare appointments. While not providing a 'break' as such, this respite from caring responsibilities has prevention as its goal, enabling carers to take care of their own health and wellbeing needs.

Improving the Act's implementation

There is an acknowledged and evidenced gap between the aspirations of the Social Services and Wellbeing Act and its implementation.²² 'From Act to Impact?' recommends greater focus on prevention in the implementation of the Act. Support for unpaid carers, with short breaks and respite as key elements of that support, is the ultimate preventative approach.

Carers in Wales prevent additional pressures in the statutory health and care system by providing the equivalent of £10bn²³ worth of hours of care to friends, family and neighbours who would otherwise need to be supported by the paid workforce. To keep protecting our NHS and social care system, carers need their own preventative support. Regular, reliable opportunities for essential short breaks, being free from poverty, and having their assessed needs met, can prevent carers from burning out, ensuring they can keep on caring alongside pursuing a life with connections, meaning and joy.

²² See, for example, Llewellyn M, Verity F, Wallace S, Calder G, Garthwaite T, Lyttleton-Smith J, and Read S (2023). From Act to Impact? Final Report of the Evaluation of the Social Services and Well-being (Wales) Act 2014. Cardiff. Welsh Government, GSR report number 36/2023. Available at: <https://gov.wales/evaluation-social-services-and-well-being-wales-act-2014>

²³ [valuing-carers-report.pdf](#)

- The Short Breaks Scheme, delivered by the third sector, has proven its impact at maintaining carers' wellbeing over three successive years and should be invested in as an ongoing staple of preventative carer support.
- The Carers Support Fund, working to alleviate the impact of poverty on carers and to lift them from poverty in the longer term, is an essential component of the safety net that allows carers to access the wider support they need to maintain their wellbeing. This model has proven both its impact and the need for this support on an ongoing basis, beyond 2026.

Maintaining the wellbeing of unpaid carers through the provision of support, information, advice and assistance is a central objective of the Social Services and Wellbeing (Wales) Act 2014.

The ability of local carer services to offer the holistic, preventative support needed to sustain carers in their caring role, sometimes preventing the need for statutory support, is hampered by insecure contracts and commissioning practices and the impact of cuts to statutory public services. Real partnership between statutory and third sector organisations is needed if we are to see carers and carer support services thriving.

- The unpaid carer support budget within the regional integration agenda, under RPBs and through RIF, should be protected and increased, with greater focus on multi-year funding and greater accountability, to sustain local carer organisations and increase carer reach.
- Capacity in the health sector as statutory partners to identify and signpost unpaid carers for support as part of their duties under the Social Services and Wellbeing (Wales) Act 2014 should be reflected in an increase to the annual grant of £1m across all health boards and security for this budget on a multi-year basis
- An update is needed for statutory partners to support fair and sustainable commissioning of third sector carer services as part of the National Commissioning Framework

Being identified early, often in school, can be the key to accessing the support young carers need to set them on the path for a future that isn't compromised by their caring role and to access the support they are entitled to.

- To support identification of young carers in school, and to track their attainment, young carers should be added as a category to the Pupil Level Annual School Census (PLASC), or equivalent, alongside care experienced children and those with Additional Learning Needs, implementing the Estyn recommendation to Welsh Government from 2019

Annex

Amser Short Breaks Delivery Partners

Action for Children
Action for Children (Pembrokeshire)
Adferiad Recovery
Age Connects Torfaen
All Wales Forum of Parents and Carers of People with Learning Disabilities
Bridgend Carers Centre
Campfire Cymru
Carers Outreach Services North West Wales
Carers Trust Crossroads West Wales
Carers Trust North Wales Crossroads Care Services
Credu
DAFFODILS
Family Fund
Follow Your Dreams
Headway Cardiff and South East Wales
Honey-pot Children's Charity
Inclusability CIC
Interlink RCT (providing small grants to an additional 10 community organisations)
Kidney Wales Charity
MS Society Cymru
Neath Port Talbot Carers Service
NEWCIS
Race Equality First
Ray of Light Cancer Support
Rewild Play CIO
S.A.N. (supporting additional needs) Neath & District
Swansea Carers' Centre
Techtivity

Travelling Ahead

TuVida

Ty Gobaith Children's Hospice

Y Bartneriaeth Awyr Agored

Carers Support Fund Delivery Partners

Adferiad

Age Cymru Gwent

Blaenau Gwent County Borough Council

Bridgend Carers Centre

Carers Outreach

Carers Trust Crossroads West Wales

Carers Trust North Wales Crossroads

Citizens Advice Merthyr

Citizens Advice Rhondda Cynon Taf

Credu

Merthyr Tydfil County Borough Council

Monmouthshire County Council

Neath Port Talbot Carers Service

NEWCIS

Newport City Council

Race Equality First

Ray of Light Cancer Support

Swansea Carers Centre

The Honey Pot Children's Charity

Torfaen County Borough Council

TuVida