

# CARERS GRANT 2006/07 and 2007/08

## GUIDANCE

### Summary

1. In 2006/07 and 2007/08, the Carers Grant will remain at £185 million. It will be paid as a specific formula grant with no conditions attached. Twenty percent has been allocated using the children's formula, 24% using the adults' (18-64) FSS formula and 56% using the older people's FSS formula.
2. In both 2006-07 and 2007-08, the grant will be paid under section 31 of the Local Government Act 2003. Following ODPM guidelines on providing clear guidance to local authorities, good practice requires that a determination be issued, even where no conditions are attached to a grant.
3. While there are no conditions attached to the Carers Grant money for 2006/07 and 2007/08, the **CSCI Delivery and Improvement Statement** will monitor the provision of services to carers. Therefore, the information in this guidance is important and councils should note well the contents of this circular.

### Background

4. The grant forms part of the Government's strategy for carers, set out in *Caring about Carers* published on 8 February 1999. It is designed to stimulate diversity and flexibility in provision of breaks for carers or direct services to carers to support them in their caring role.

### Policy Intentions

5. The Government's objective is to encourage councils to:
  - further develop innovative and high quality carers services in response to local needs;
  - develop pragmatic, outcome focused approaches to the carers assessment, integrated with the development of the Single Assessment Process and promotion of joint working with health services;
  - focus on the needs of carers, which is often the most effective way to prevent loss of independence. In line with *Fair Access to Care Services*, local authorities should ensure no assumptions are made that caring roles can be sustained without assessment and the possibility of support for the carer. For further information *Quality Standards for Local Carer Support Services* was published by the Department of Health in February 2000;
  - provide breaks for carers who provide substantial and regular care to a

'relevant adult' who lives at home and has been assessed under the NHS and Community Care Act 1990;

- provide breaks services for disabled children and their families under part 3 of the Children Act 1989;
  - support children and young people (under 18) who are carers in having a break from caring; or fund voluntary organisations to provide breaks directly on the basis of their own assessments. Level of commissioning of voluntary organisations should be determined by local need and reflect stakeholders views;
  - fund administration relating to local carers strategies and consultation with carers;
  - in line with good practice, councils are encouraged to agree a plan with stakeholders to ensure the grant is spent on locally agreed priorities;
  - implement the provisions of the impact of the Carers (Equal Opportunities) Act 2004.
6. In addition to those services described, it is the Government's intention that councils should continue to respond more imaginatively to requests for diversity in service provision for carers.

### **Carers' Services**

7. It is recognised that the results of a carer's assessment will usually be the provision of community care services to the service user. Such community care services should be as flexible as possible.
8. Where sustainability of the carer's role is dependent on other factors local councils can spend carers grant on Carers and Disabled Children Act 2000 carers' services for carers. Examples might include driving lessons, moving and handling classes or a short holiday for the carer to enable them to have time to themselves.
9. Local authorities should also look at supporting carers' wellbeing through opportunities that might not involve a conventional breaks service. Examples might include funding courses to support carers to move on to new learning and/or work or volunteering opportunities. This might include help with confidence building and skills.
10. Local authorities must also now consider the Carers (Equal Opportunities) Act 2004 which came into force in April 2005. The Act seeks to give carers more choice and better opportunities to lead a more fulfilling life by ensuring that carers receive information about their rights under the Carers and Disabled Children Act 2000. It also ensures that carers' assessments consider leisure, training and work activities, and provides for co-operation between local authorities and other bodies, including housing, education and health, in relation to the planning and provision of community care services that are relevant to carers.
11. In recognition of the need to work across health and social care boundaries councils should consider using some of the money allocated for carers' services to employ a carers' development worker. This role would be to

develop carers' services locally and in particular the links to the NHS. This could be done through a pooled budget arrangement, which would establish a firmer basis for partnership working. Recruitment to such a post should be done in consultation with local stakeholders.

### **Payment of the grant**

12. Three star councils will receive their grant in one payment in April 2006 for the 2006/07 financial year and in April 2007 for the 2007/08 financial year. Payments to two star, one star and zero star rated councils will be made quarterly and by the end of April, July, October and January in the appropriate year.

### **Guidance and Publications on Carers' Issues**

13. Further information, in particular Guidance on the Carers and Disabled Children Act 2000, can be found on the Government Carers' Web-site, <http://www.carers.gov.uk/>

### **Enquiries**

14. Any enquiries should be addressed to:

Policy Management Unit,  
Department of Health  
Team 1, Room 119,  
Wellington House  
133-155 Waterloo Road  
LONDON SE1 8UG  
E-mail: [OPDEnquiries@dh.gsi.gov.uk](mailto:OPDEnquiries@dh.gsi.gov.uk)

## ANNEX A

### **Definition of breaks services**

A 'breaks service' is one which actually gives the carer a break from direct responsibility of supervising or caring for the relevant person by providing a service to that person.

A breaks service must always aim to provide a positive experience for the service-user as well as a break for the carer.

Services provided in an emergency, such as when a carer is hospitalised, or simply to allow the carer to visit the doctor or dentist, should not be regarded as a breaks service but as a core element of supporting the cared for person and carer. Breaks should be about carers having some time for themselves.

Local councils are referred to Policy and Practice Guidance on the Carers and Disabled Children Act, 2000 available at

[www.carers.gov.uk/carers&disabledchildrenact2000.htm](http://www.carers.gov.uk/carers&disabledchildrenact2000.htm) .

### **Young carers' breaks services**

Where the carer is a child, a service which helps the child to take part in activities outside the home, so that they can truly benefit from such a break, is also a breaks service.

In line with existing guidance on young carers, breaks should be provided as part of a package of services that makes sure that:

- services are provided to parents to enhance their ability to fulfil their parenting responsibilities
- young carers are not expected to carry inappropriate levels of caring which may have an adverse impact on their development and life chances
- children do not take on similar levels of caring responsibilities to adults.

### **Voucher schemes**

Guidance on voucher schemes is available on the Government web-site for carers ([www.carers.gov.uk](http://www.carers.gov.uk)).