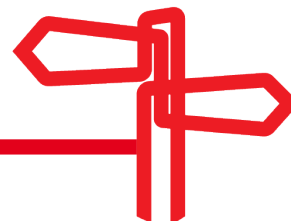


When caring ends or changes



Looking after someone may be a large part of your life, but it is inevitable that your caring role will change over time. This may be because the person you cared for has recovered and no longer needs care, they can no longer be cared for at home, or because they have died.

This resource is for carers who are experiencing significant change in their lives.

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Introduction

Caring can bring many changes. Sometimes the person you cared for will need extra support, or you will find you are no longer willing or able to provide the level of care needed. In this factsheet, we'll cover different options you may choose to take if there are major changes in the care needs of the person you care for. The factsheet will also give you advice on things to consider if the person you care for dies.

Help in the home

While the focus of this factsheet is on major changes in care, you may find that you are able to continue to care if you get extra help in the home. There could be a wide range of services available to you. This is a complex topic and the support you might receive will depend on your individual circumstances.

You can access pages on finding support in the home by visiting our website:

www.carersuk.org/wales/help-and-advice/practical-support/arranging-care-and-support-for-someone/

If you or the person you care for has not had an assessment of their needs, it might help to request one from your local authority. To find out more about assessment in Wales please visit:

www.carersuk.org/wales/help-and-advice/practical-support/carers-assessment/

Residential care

You may reach a point where you are unable to provide the care that the person you look after needs. This could be for many reasons, including that you are no longer willing to provide it, as well as if their needs have become too great for you to manage. If this is the case, residential, dual, or nursing care can be a realistic option.

Is residential care the right option?

Residential care for the person you are looking after might feel like a difficult option to consider.

You may experience conflicting feelings. Carers have told us that they experience a mixture of sadness and guilt, whilst also feeling relief that the person they are looking after will be given a level of practical care and assistance that is now too difficult to maintain at home.

Caring can be both physically and mentally exhausting and it can be much better to arrange the best residential care possible than struggle on until you reach crisis point.

It might be time to consider residential care if the person you care for:

- is struggling to live at home, even with support
- has had a needs assessment that suggested a care home is the best option
- has a complex medical condition that needs attention both day and night
- you are no longer willing or able to provide the level of support they need.

“I know that feeling of having a huge weight lifted off your shoulders. It’s what I felt when I made the decision that my brother had to be in a care home, and simply could not live independently any longer. I also know the guilt that comes with that decision.”

Anon – Forum user

If possible, you should talk with the person you are looking after about how they feel about a move into residential care and discuss what is best for both of you. If either of you are finding the thought of a move upsetting or difficult to deal with, it may help to talk it over with a friend, family member, another carer, your GP or social worker.

Residential care homes should be happy for you to go and visit to look around and should answer any questions you both may have.

If the person you are looking after moves into residential care then this might mean your caring role changes or it might mean your caring role comes to an end. You can find information about life after caring later in this booklet.

If you will still be providing care to the person, then remember that there might still be support you can get through the local authority as a carer; there may still be benefits that you can claim as a carer and/or there may still be rights in work you can access as a carer.

Residential care options

There are three main types of residential care options:

Care home – This type of home provides support to residents with things like personal care, medication, and social activities.

Nursing home – This type of home provides a much higher level of personal care. They have registered nurses who can provide care around the clock, as well as staff who will assist with personal care.

Dual care home – These homes provide care for people who don't need a high level of nursing care, and those that do. An advantage to this type of home is that if the person you care for nursing needs increase, they won't have to move homes.

There are different costs depending on what type of residential care you choose and where financial support may come from can also change. You can find out more about how to find residential care on page 6.

Supported living options

If the person you care for needs support to live more independently but does not need round the clock care and support, supported living could also be an option.

Different types of supported accommodation may be available, depending on the level of support the person you care for needs, and what their needs are – for example with physical or mental health.

Sheltered Housing

Sheltered housing generally tends to be available to people who are older and who want to live independently but have access to a higher level of support than they would in their usual home. For example, there are often wardens and support staff, or 24-7 emergency help via an alarm system. There are also often communal areas and social activities. This type of accommodation does not typically offer personal care or help with things like medication, however.

To find out more about sheltered housing you can visit Age Cymru:

www.ageuk.org.uk/cymru/information-advice/care/housing-options/sheltered-housing/

Supported Housing

This tends to refer to housing for people with needs like mental health needs or a disability or substance misuse issue. It could consist of shared accommodation or individual accommodation (like a flat) with support workers available to help with tasks like cooking, benefits, training and other life skills. The type of support might vary depending on the needs of the people in the scheme – for example if it is aimed primarily at people with mental health needs, or a physical disability.

An example of how supported living can work for someone with a disability can be found by visiting Mencap: www.mencap.org.uk/advice-and-support/services-you-can-count/supported-living-services

Finding residential care

The local authority should be able to provide you with a list of residential care homes in the area and should be able to advise on suitable residential care homes within their budget (if they are helping with the cost – see below) or the budget of the person you are looking after if they are self-funding.

▶▶ **Note:** The Care Inspectorate Wales is the independent health and social care regulator and has an online directory of registered residential care homes: [careinspectorate.wales](https://www.careinspectorate.wales)

▶▶ **Note:** You can also use the Which? Care Services Directory where you can search for residential care homes anywhere in the UK: [which.co.uk/elderly-care/care-services-directory](https://www.which.co.uk/elderly-care/care-services-directory)

Paying for residential care

The person you are looking after may be able to get help with the cost of their residential care home fees from their local authority depending on their income and capital. Alternatively, the person you are looking after may have to pay the full cost of their residential care home fees.

Help through the local authority

If the local authority assesses that person you are looking after needs residential care, then they may help with the cost. To work out whether they will help with the cost they will firstly look at whether the person you are looking after has capital over a certain amount – this is explained in further detail below.

If the person you are looking after does not have capital over this amount, then the local authority will carry out a full financial assessment to see whether they will help with the cost. The local authority must follow statutory guidelines when carrying out financial assessments.

The capital limits

If the person you are looking after has capital over a certain limit (which includes savings, investments and property which they own or have a legal entitlement to) then they will need to pay the full cost of their residential care home fees.

▶▶ **Note:** The current capital limit in Wales is £50,000. You can find out more information about capital limits by visiting:
www.carersuk.org/help-and-advice/practical-support/arranging-care-and-support-for-someone/residential-care/

Only the capital of the person you are looking after, plus half of any joint capital, is taken into account.

If the person you are looking after owns their own home then it will usually be counted as capital 12 weeks after they permanently move into residential care. However, the value of the home will not be counted if certain close relatives are still living there (see below), and have been continually occupying the property as their main home since before the person entered residential care.

The value of the property can be disregarded (indefinitely if circumstances don't change) if it is occupied by:

- a spouse, civil partner, or partner (unless they are estranged)
- a lone parent if they are the person's estranged or divorced partner
- a relative or member of their family who is aged 60 or over
- a child under 18 (in England & Wales) or a child under 16 (in Scotland & Northern Ireland) who the person has a duty to maintain
- a close relative or member of their family who is incapacitated.

Other discretionary disregards may also apply.

Help through the NHS

NHS continuing healthcare (CHC) is a package of ongoing care for those who have a 'primary health need' that is arranged and paid for by the NHS. This package of care is provided outside the hospital setting and can be provided in any setting, including the home of the person you care for or in a care home.

In a care home, if you are eligible for CHC, the NHS pays for your care home fees in total. CHC is funded by the NHS, unlike help from social services for which a charge may be made depending on your income, savings, and capital assets.

The 'primary health need' is a nursing or other medical need that is not just incidental to services that the local authority could provide.

For example, someone with a complex medical condition or conditions requiring specialist nursing care may qualify for NHS continuing healthcare.

If the person you care for is in hospital you may want more information about the discharge process and help you might be able to get. You can read the Carers Wales guide *Coming out of hospital* and download a free copy by visiting this link: www.carersuk.org/wales/help-and-advice/practical-support/coming-out-of-hospital/

Paying the full cost themselves

If the person you are looking after is going to pay the full cost of the residential care fees themselves, then you should ensure that the fee payable is clear and transparent, and you know what any charges are for and when they are due.

Benefits

If you or the person you are looking after receive any benefits, these may be affected by a move into residential care.

If the person you care for is funding their own care, all their benefits – including Disability Living Allowance (DLA), Personal Independence Payment (PIP) and Attendance Allowance – will continue. Your entitlement to Carer's Allowance may continue if you are still caring for them for 35 hours a week or more.

If the residential care home is funded (fully or partially) by the local authority, the DLA care component/PIP daily living component / Attendance Allowance will stop being paid to the person you care for once they have lived in the care home for 28 days. The mobility component of DLA and PIP can continue to be paid.

Once the person you care for stops getting the DLA care component, PIP daily living component or attendance allowance, your entitlement to carer's allowance will also stop (unless you are also caring for another person and meet the criteria for carer's allowance as their carer). You'll need to contact the DWP to reflect this change in circumstances.

If you are receiving any means-tested benefits eg Income Support or Pension Credit, you might be getting an additional amount of money included in this means-tested benefit called a Carer Premium or Carer Addition.

If your carer's allowance stops then this additional amount can continue to be paid for an extra eight weeks. You will need to contact the benefit agencies and let them know about your change in circumstances. They should then adjust the amount of benefit you get for the eight weeks.

After the eight weeks the benefits you are able to claim may change. This is because some benefits such as Income Support rely on the person you care for getting their qualifying disability benefit.

If you are getting Universal Credit you might be getting an additional amount of money called a Carer Element. If your carer's allowance stops then this additional amount can continue for the rest of your universal credit assessment period. At the end of this time it will stop and you may need to discuss a new Claimant Commitment with your work coach.

If the person you care for is your partner or spouse, you will no longer be assessed as a couple for means-tested benefits. You will be assessed as a single person.

End of life planning

It can be difficult to think about death and the person you care for reaching the end of their life. However, open discussions can help you and the person you care for to understand the options available.

When someone is nearing the end of life they may want to consider and plan how they will be looked after at this time. You can find out more about end of life care on www.advancecareplan.org.uk

This may include advance care planning or thinking about moving into a hospice.

Advance or future care planning

If the person you are looking after is nearing the end of their life and the expectation is that their condition will deteriorate and they may lose capacity to make decisions about their care, they should be offered advance care planning. This means they can record their wishes around the end of life care they will receive.

This is a voluntary process and the advance care plan (sometimes called a statement of wishes) can be used to record care and treatment wishes. It should be attached to the medical notes and should also be easily accessible to those who are involved in looking after the person.

The advance care plan can include:

- where they want to be cared for when they are dying
- where they want to die
- who they want to be with them
- values such as religious beliefs
- routines that are important to them
- anything that helps them feel safe and comfortable.

Through this planning, the person you are looking after can also make an Advance Decision about the treatment they wish or do not wish to receive. This is known as an Advance Decision to Refuse Treatment (ADRT) is a decision the person you care for can make to refuse a specific type of treatment at some point in the future.

It is used only if they lose the ability to make their own decisions about their treatment. It should be discussed with a doctor or nurse who knows the person you care for and their medical history. When someone goes into hospital, these plans are turned into a Treatment Escalation Plan (TEP) alongside other important elements of the person's needs like dietary requirements and next of kin.

You can find out more by visiting the advance care plan website;
www.advancecareplan.org.uk

▶▶ **Note:** The charity Compassion in Dying contains comprehensive information on advance planning: www.compassionindying.org.uk

If none of the above measures are in place, decisions about care and treatment for the person you are looking after will be made in their 'best interests' by medical and/or social care professionals. Family and carers should be involved in this process.

Moving into a hospice

If the person you are looking after is nearing the end of their life, it may be recommended that they move to a hospice. They may move into a hospice from their home or from a residential care home or hospital.

The end of life palliative care that people receive at a hospice is for those whose illness may no longer be curable, but for whom a hospital stay is not necessary.

A hospice can offer a wide range of supportive care that focuses not just on medical needs but on emotional wellbeing and support as well, both for the person being looked after, and for family members and carers.

End of life palliative care services include:

- skilled medical and nursing care, including pain and symptom control
- counselling
- complementary therapies
- practical advice
- spiritual/religious support
- creative activities
- physiotherapy
- bereavement support.

There are normally no set visiting times for family members and friends. This means that you can be with the person as often as you wish, and the hospice will aim to provide a welcoming, informal, warm and supportive environment.

People are usually referred to a hospice by their GP, hospital doctor or nurse. Time spent at a hospice and the services they provide are given free of charge.

If the person you are looking after moves to a hospice their disability living allowance (DLA), personal independence payment (PIP) or attendance allowance can continue to be paid in full. This is as long the Disability and Carers Service are informed in writing that the person you are looking after is terminally ill. If you receive carer's allowance, then this should also continue to be paid if you still meet all the eligibility conditions.

Bereavement

Losing someone close to you is devastating. If you have been caring for that person, the loss can seem even greater. How you cope with the death of the person you cared for is a very personal thing. There is no right or wrong way to feel following a death.

Immediately after a death there are a lot of practical things to do, like registering the death and arranging the funeral, and family and friends tend to be around a lot more. It may be that only when all the practicalities are dealt with, and the people around you get back to their everyday lives, that you really start to grieve.

How grief might affect you

Everyone's reaction to losing someone is different. There is no right or wrong way to deal with your own grief. Many people find that it is beneficial to listen to their own feelings; to do what's best for you rather than what other people think is best.

There are no time limits on grief and no set pattern of emotions and behaviours that everybody follows. Grief does not always happen straight away.

As well as coping with the loss of the person you cared for, you also have to deal with the loss of your caring role. You may feel guilty about feeling relief, but you may also feel exhausted and alone.

Grief can affect you physically as well as emotionally and your experience will be unique to you. It can be confusing so finding support is vital, as well as information about ways people can be affected by grief.

To find out more about the different ways many people experience grief you can visit Cruse by clicking this link: www.cruse.org.uk/understanding-grief/effects-of-grief/

“I have been caring for my wife for the past eight years. She passed away a few weeks ago, and I am feeling so bereft. Not only is it the acute sadness of losing the woman I love, whom I had been married to for 45 years, but I am no longer needed for the caring role that I had spent 24 hours a day thinking about.” **Anon – Forum user**

“I think we can all relate to how hard it is losing someone, but when you’ve also been that person’s carer it’s a double whammy. Your whole identity is changed in an instant” **Anon – Forum user**

The death of the person you cared for may mean that the relationships you built up with the professionals involved in their care come to an end. Carers also often talk about losing contact with friends and family because of the demands of their caring role and picking up old social contacts or meeting new people may be the last thing you feel like doing when you have just lost someone.

Finding support

The best help and support often comes from the people you know best – and who know you best. You may find that some people seem awkward around you, often because they want to do and say the ‘right thing’ but are not sure what that is. If you feel able, tell the people around you what you need from them and how they can help. Close family and friends may also be able to help you do this.

Talking about what has happened, and about the person who died, can help you to come to terms with their death and to cope with the feelings you have. Friends and relatives who knew the deceased and can share memories of them with you can be a great source of support. Talking to other people who have been bereaved, and who have a better understanding of what you are going through, can also help.

►► **Note:** There are many organisations, such as Cruse Bereavement Care: cruse.org.uk/wales which run groups for people who are grieving. Your GP can put you in touch with a local bereavement counsellor if you’d like more formal one-to-one counselling. A hospice may also provide bereavement support for the families of people who have used their services.

Practical matters following a death

Thinking about what we need to do in the short- and long-term can be helpful. Here is some information on questions and practical matters that arise when a person dies.

▶▶ Note: You can also find a useful information about what to do when someone dies at: www.gov.uk/after-a-death

Medical Death Certificate

When you have the medical death certificate, you need to take this to the local registrar's office to register the death. The hospital, hospice or GP will issue the medical certificate for the cause of death with a form called Notice to informant, which explains how to register the death.

A Post-mortem

A post mortem is a medical examination of the body of the deceased. Post mortems are usually carried out when there is uncertainty about the cause of death. The doctor who certifies the death has a legal responsibility to inform the coroner if a post-mortem is needed.

Post mortems can be requested by the coroner (an independent official who enquires into un-natural death, for example, sudden, unexpected or those related to procedures or operations) or by the hospital or close relatives.

Permission of the close relatives of the deceased must be sought if the hospital wants a post mortem to be carried out but permission is not needed if the post mortem is requested by the coroner.

Post mortems usually take place within a couple of days of the death and the body is released on the day of the post mortem, so planning for the funeral should not be affected.

Following the post mortem, reports are sent to the GP/consultant of the deceased person and the coroner (if applicable). Relatives can also request a copy.

Organ donation

In Wales, legislation for organ donation is 'deemed consent'. This means that, unless the person you care for has opted out of organ and tissue donation, they are deemed to have no objection to being a donor.

To find out more, including how to opt out, please visit this link:

www.organdonation.nhs.uk/uk-laws/organ-donation-law-in-wales/

Other practical issues you may need to consider

The following would be useful to get done as soon as you can manage it:

- The 'Tell Us Once' service lets you tell some central and local government services that need to know about the death by just having one contact. The service is offered by most local councils on behalf of the Department of Work and Pensions. The registrar will tell you which government services take part. www.gov.uk/tell-us-once
- contact any relevant insurance companies, pension providers, banks and building societies
- contact the executors of the Will if there is one or, if there is no Will, decide who will apply for letters of administration
- if the person you cared for had any NHS equipment on loan, eg crutches, wheelchair or medical equipment, you will need to arrange for this to be returned - the person's GP or local health trust will be able to tell you how to do this.

Registering the death

Deaths have to be registered within five days in the area in which the death occurred, unless the coroner is investigating the circumstances of the death.

Where do I register the death?

Deaths are registered at the local registry office. You do not have to register the death yourself. Another relative may be able to register the death as long as they take all the necessary documents – including the medical death certificate.

Many registry offices now only see people by appointment so it is a good idea to phone the office first. You can find details of your local registry office in the telephone directory or follow this link to find your local office:

www.gov.uk/register-offices

What documents do I need to take with me?

When you register the death, the registrar will ask for:

- the medical certificate showing cause of death
- the deceased's NHS medical card (if possible)

You will also need to tell the registrar:

- the date and place the deceased was born and the date and place they died
- their full name (including any maiden name) their occupation and the name and occupation of their spouse or civil partner
- their usual address
- whether or not the deceased received a pension or any state benefits.

▶▶ **Note:** For further information on registering a death visit:
www.gov.uk/after-a-death

What do I need to get from the registrar?

The registrar will give you:

- the certificate for burial or cremation (you will normally need to give this to the funeral director)
- a death certificate - a small fee will be charged - it is advisable to have a few extra copies for dealing with the Will and other tasks
- a certificate of registration of death issued for social security benefits (Form BD8).

Arranging the funeral

The funeral can be very important in helping you, friends and family to mourn. It is an event where the person's life can be thought of, valued, and celebrated. It is a time to think of the person who lived, and not just the difficulties of the last few weeks, months or years spent caring for them.

When the funeral takes place may depend on factors such as religious or cultural requirements. Aside from that, the funeral or cremation does not have to happen immediately, unless that is what you want. In any case, you will not be able to finalise the date until the death has been registered.

When planning the funeral, you should find out whether the person who died left any instructions about their funeral in a Will or other written document.

Other than that, you can choose between burial, cremation or alternative burials of various sorts and, if you choose to use one, a professional funeral director will help you make the arrangements.

Paying for the funeral

Funeral costs can be quite high, so it is worth obtaining quotes from more than one funeral director if you are using one. Make sure that everything has been included (church or other venue for the service, burial or cremation fees, cars for the mourners, flowers etc). You can ask for written quotations.

If you arrange the funeral, you will be the person responsible for ensuring the fees are paid, so it is sensible to check in advance if the deceased had money available to cover the funeral costs.

You could check their paperwork to find out:

- whether they took out a prepayment funeral plan
- whether they had a pension scheme or insurance plan which included a lump sum for funeral costs
- whether they belonged to a union or professional association which pays benefits when a member dies
- whether a lump sum could be released from a national savings account (bank or building society accounts may be frozen until probate is granted but some banks or building societies may agree to release funds).

Alternatively, you or the executor (the person responsible for sorting out the deceased's estate) may be able to pay the costs of the funeral yourself and then recover those costs from the estate.

Help with funeral costs for people with a low income

If there are no other means of paying for a funeral, you may be able to claim a Funeral Expenses Payment. Eligibility is based on your circumstances (rather than those of the deceased). You may be eligible if you, or your partner, are in receipt of at least one of the following benefits:

- Income Support or income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Pension Credit
- Housing Benefit
- Child Tax Credit (which includes an amount higher than the family
- Working Tax Credit (where a disability or severe disability element is included)
- Universal Credit.

You can still claim Funeral Expenses Payment if you've applied for these benefits, and you are waiting to hear about your claim. You must apply within three months of the funeral, even if you are waiting a decision on a qualifying benefit. If you get Universal Credit, you won't get a decision on your claim until after your next payment.

If there is a close relative of the deceased who isn't getting on of these benefits, you might not be able to claim a Funeral Expenses payment.

You can make a claim before the funeral if you have got an invoice from the funeral director. You cannot make a claim if you have only been given an estimate. You can claim the Funeral Payment any time between the date of the death and up to three months after the date of the funeral. The Social Security Agency must accept that it is reasonable for you to be responsible for the funeral expenses. There are specific rules about this and you should seek advice.

The payment covers the cost of specified necessary items and services (eg burial fees) and up to £1000 for other funeral expenses such as funeral director fees, flowers or other costs.

Be aware, though, that the payment will not necessarily cover all the costs of the funeral, so there may be an outstanding amount that you have to pay. You must also pay back the Funeral Expenses Payment if you receive money from the deceased's estate.

Wills and probate

When someone dies, everything they own (their money, property and possessions) is called their estate. If the person who has died has left a Will, this will indicate how they wanted their estate to be divided after their death.

It will also usually name executors (the people they want to deal with the Will). The estate cannot be used to pay bills or debts, or be divided up for gifts and inheritance until either of the following takes place:

- the Will has been granted probate – this is a formality which confirms that a Will is legally in order
- a grant of letters of administration has been given – this is a formality which allows the personal representative to deal with the estate when there is no Will.

This means that any bank accounts in the deceased person's name will be frozen until the formalities have been completed. Bank accounts in joint names can be used by the other account holder.

If you had Power of Attorney for the person you cared for, because they were no longer able to deal with their own money and affairs, the Power of Attorney stops being in force as soon as the person dies.

You will not be able to continue to use their bank account, or carry out any business on their behalf.

▶▶ **Note:** For further information about Power of Attorney visit: www.gov.uk/power-of-attorney

If you had deputyship for the person you cared for your powers as the deputy ends when that person dies. There are, however, still things that need to be done. You must notify the Office of the Public Guardian and the Court of Protection that the person has died, giving the date of death, as soon as possible; you will then be told by letter what else needs to be done.

▶▶ **Note:** For more information about deputyship visit: www.gov.uk/government/organisations/office-of-the-public-guardian

If the person you cared for has an estate worth more than £325,000, Inheritance Tax will have to be paid on any amount above that. However, Inheritance Tax does not have to be paid if the estate goes to the deceased's spouse or civil partner (no matter how much they inherit).

Benefits

The death of the person you cared for may have an effect on your own financial situation and you may need to find out which benefits you can claim.

Carer's Allowance and carer premium/carers addition

If you were receiving Carer's Allowance when the person you cared for died, this will usually continue for eight weeks from the Sunday following their death.

If you are 65 or over and were entitled to Invalid Care Allowance on the 27 October 2002 (as carer's allowance was then called), you will be entitled to carer's allowance indefinitely after the person you looked after has died.

If you are receiving a carer premium as part of your Income Support, income-related Employment and Support Allowance, income-based Jobseekers Allowance, Pension Credit, Housing Benefit or Council Tax Reduction, this can continue for eight weeks following the death.

If you are receiving universal credit, the carer element can continue for the rest of your universal credit assessment period in which the death occurred, and for the next two assessment periods. At the end of this time, it will stop and you may need to discuss a new claimant commitment with your work coach.

Benefits you may be able to claim now your circumstances have changed

If your income is relatively low, you may be able to claim one or more of the following means tested benefits:

- Income Support – for people under state pension age who do not have to look for work - for example, single parents of young children and carers
- Employment Support Allowance (ESA) - if you have an illness of disability and your ability to work is limited due to this
- Jobseeker's Allowance (JSA) – for people under state pension age who are available for and actively seeking work - it is important to sign on if you want to continue to get National Insurance Contribution Credits and you can sign on even if you will not be paid any JSA
- Universal Credit (UC) – this is for people who are under State Pension age who have a low income
- Pension Credit – for people of pensionable age or over
- Housing Benefit – help to pay the rent
- Council Tax – help to pay your council tax.

You may also be entitled to Personal Independence Payment (PIP) (if under 65) or Attendance Allowance (if 65 or over) if you need help to look after yourself or with getting around.

▶▶ **Note:** For further information about benefits and tax credits visit:
carersuk.org/benefits

Bereavement Support Payment

If it was your spouse or civil partner who has died then you may be able to get a Bereavement Support Payment.

There are two rates of Bereavement Support Payment, and which one you might be eligible for will depend on your circumstances.

▶▶ **Note:** For further information www.gov.uk/bereavement-support-payment

Housing

Your housing situation may change when your caring role changes or comes to an end.

If the property is a rented property, then the right to inherit a tenancy when the tenant dies is known as succession. Succession rights depend on your relationship with the tenant and the type of tenancy they had.

If the property is mortgaged then what will happen will depend on whether anyone else is also on the mortgage, what type of mortgage it is, and whether there is any mortgage protection insurance in place.

▶▶ **Note:** For specialist housing advice you could contact Shelter Cymru: <https://sheltercymru.org.uk/>

Life after caring

The end of your caring role may take some time to adjust to. Having more time to yourself may give you the opportunity for a much needed rest, but it can also leave you feeling that you have a lot of time to fill.

If you are used to always having things to do, it can be hard to stop and think about what you would like to do now. Some people find that once they are no longer caring, exhaustion – both physical and emotional – catches up with them and they may feel unwell for a while.

Some practical matters, such as making sure you are claiming the right benefits for your situation now you are no longer caring, and dealing with any changes to your housing situation (if there are any), have to be dealt with fairly quickly. However, you do not need to rush into making decisions about other aspects of your life. The following suggestions may be helpful for you if and when you feel the time is right.

Taking time for yourself

Resting and letting yourself have a break now your caring role has ended, is just as important as taking on a new endeavour.

►► **Note:** You could see if you can take a short break somewhere, and it might be that there are grants you could apply for to help with the cost of such as break. For more information visit:
[carersuk.org/help-and-advice/financial-support/help-with-household-finances/grants](https://www.carersuk.org/help-and-advice/financial-support/help-with-household-finances/grants)

You could take some time for yourself just to do things you enjoy, such as reading, going for a walk, or seeing family/friends.

“Yesterday, dad died. I know life will be hectic for the next few weeks. So, today, I did something I’ve never done before. I have sat in my garden all day and done absolutely nothing. I didn’t read or listen to music; I just sat and reflected.” **Anon – Forum user**

Access support from other former carers

You may feel isolated after many years of caring, and you might want to see if there is any support you can get from others in a similar position.

You could find out what support your local carer's organisation or local carers group offers to former carers.

►► **Note:** You could also speak to other former carers on the Carers UK Forum: carersuk.org/forum

Learn something new

You may feel that you would like to refresh skills that you have not used for a while; return to hobbies or interests that you put aside; or learn something completely new.

You may have also gained new skills or interests from your caring role that you want to pursue.

You could contact your local library or regional college to find out about courses or training in your area.

Many community colleges and universities offer evening and part time courses in a broad range of subjects, from courses to help you retrain for employment to those purely for interest and enjoyment.

Taking a course can also be a great way to meet new people.

Volunteering

If you have some spare time, and feel you are ready to take on something new, you may be interested in volunteering.

As well as offering much needed help to local people or organisations, volunteering can be a very social activity, and can be a good way to meet new people.

Volunteering opportunities can range from befriending older or disabled people, offering your skills to a local charity (for example, administration, fundraising, legal advice etc.), to helping out on a local conservation project.

You can find your local volunteering centre by contacting Volunteering Wales: volunteering-wales.net

Many former carers volunteer with Carers Wales. The volunteering opportunities range from community champions, carer voice champions, workplace champions and listening support volunteers. You can get involved in social media, admin assistance and offer insights to help with policy and campaigning.

Many former carers go on to become great campaigners. They have the experience of knowing what it is like to be at the sharp end of caring and they often have more time than those who are still caring.

If you want to get involved, you can contact Carers Wales.

▶▶ Note: Read more about the opportunities on our website: www.carersuk.org/wales/get-involved/volunteer-with-us/

Starting (or returning to) paid employment

You may be interested in starting, or returning to, paid employment.

If you are not sure what you would like to do and where to begin, start by recognising the skills and interests you have.

Think about the skills you have gained from:

- ▶ any paid work that you have done
- ▶ any volunteering work that you have done
- ▶ your role as a carer

Think about the interests you have:

- ▶ what you enjoy doing
- ▶ how you would like to use your skills
- ▶ things you miss doing that you once did, eg from previous work or volunteering

You could have a look on some careers websites to try and identify the sort of job which might match your skills and interests.

▶▶ **Note:** The Careers Service has a job matching tool to help you make career decisions that best suit you: www.careerswales.com

However you choose to move forward in your life, you are still able to contact Carers Wales for help and support, including attending things like online support sessions.

Useful organisations

Carers Wales

Caring can present all kinds of challenges. We are here to help you with information and support every step of the way.

t: 029 2081 1370 | e: info@carerswales.org

www.carerswales.org

Other organisations

Age Cymru

Information and advice for the over 50s.

t: 08000 223 444

ageuk.org.uk/wales

Careers Service

Impartial, all-age careers information, advice and guidance service.

t: 0800 028 4844

www.careerswales.com

Citizens Advice

Citizens Advice local offices for advice/ representation on benefits, debt and housing, local services.

t: 03444 772020

www.citizensadvice.org.uk

CRUSE Bereavement Care Cymru

Support, advice and information for children, young people and adults when someone dies.

t: 0808 808 1677

cruse.org.uk/wales

Samaritans

Confidential emotional support available by telephone 24 hours a day, 365 days of the year.

t: 116 123

www.samaritans.org

Shelter Cymru

A national organisation which advises anyone in housing need

t: 0345 075 5005

sheltercymru.org.uk

Care Inspectorate Wales

The independent body responsible for monitoring and inspecting the health and social care services in Wales.

t: 0300 7900 126

www.careinspectorate.wales

Wales Bereavement Information Support Service (BISS)

Marie Curie and Diverse Cymru have a bereavement support service available to everyone in Wales. They offer bereavement counseling, telephone bereavement support and group support.

t: 0800 090 2309

www.mariecurie.org.uk/help/support/wales-bereavement-information-and-support-service

Wales Council for Voluntary Action

Works to promote, develop and support volunteering across Wales

t: 0300 111 0124

wcva.org.uk

Benefit Helplines

Attendance Allowance

t: 0800 731 0122 (textphone: 0800 731 0317)

Carer's Allowance

t: 0800 731 0297 (textphone: 0800 731 0317)

Disability Living Allowance

- If you were born on or before 8 April 1948: t: 0800 731 0122 (textphone: 0800 731 0317)

- If you were born after 8 April 1948:

t: 0800 121 4600 (textphone: 0800 121 4523)

For Jobseekers Allowance, Income Support and Employment and Support Allowance:

Jobcentre Plus

New claims t: 0800 055 6688 (textphone: 0800 731 7339)

Existing claims t: 0800 169 0310 (textphone: 0800 169 0314) Pension Credit

Pension Credit

t: 0800 731 7898 (textphone: 0800 169 0133)

Personal Independence Payment

New claims t: 0800 917 2222 (textphone: 0800 917 7777)

Enquiry line t: 0800 121 4433 (textphone: 0800 121 4493)

Tax Credits

t: 0345 300 3900 (textphone: 0345 300 3909)

This factsheet is designed to provide helpful information and advice. It is not an authoritative statement of the law. We work to ensure that our factsheets are accurate and up to date, but information about benefits and community care is subject to change over time. We would recommend contacting the Carers UK Helpline or visiting our website for the latest information.

Give us your feedback on this factsheet by emailing your comments to info@carerswales.org
This factsheet was updated in April 2023. Next review due April 2024.

Carers Wales

029 2081 1370

info@carerswales.org

Carers UK

20 Great Dover Street

London SE1 4LX

020 7378 4999

info@carersuk.org

However caring affects you, we're here.

Caring will affect us all at some point in our lives.

With your help, we can be there for the 6,000 people who start looking after someone each day.

We're the UK's only national membership charity for carers.

We're the UK's only national membership charity for carers: join us for free at carersuk.org/join

We're both a support network and a movement for change.

Visit us at our website to join us, help us or access more resources:

carersuk.org

**This information can be requested
in large print or as a text file.**