**SOCIAL SERVICES AND WELL-BEING (WALES) ACT**

**CASE STUDY**

**Adult P**

Adult P is unknown to statutory services and has had no recent contact with his GP. He is 81 years old, his wife died approximately five years ago. There are no known children or other living family relatives.

Adult P engaged a live-in carer approximately two years after the death of his wife. He had been an active member of his local community; church, bridge club and The Royal British Legion. He began to lose contact with these activities soon after he appointed the live-in carer.

A member of the church recently visited Adult P to see whether he needed transport to attend church services and other activities. The church member was concerned to find Adult P appeared to her to be dishevelled, uncommunicative and living in a dark room, the curtains were closed. The live-in carer suggested Adult P had been unwell for the last 12/18 months and was reluctant to continue his community activities.

The church member was disturbed by what looked like a black bloodshot eye and grazes to the side of Adult P’s face. She felt uncomfortable in her interaction with the carer who was reluctant to let her into the house, rather abrupt and did not leave her alone with Adult P.

The church member left the house after approximately 20 minutes, confused, unsure, uneasy and concerned about Adult P. She discussed her feelings with the local vicar who was relatively new and had never met Adult P. She also discussed her concerns with a friend who lived in the next street to Adult P, although this person had never met Adult P, she was aware his wife had died and he was being looked after by a live-in carer. The friend had noticed a new 4x4 vehicle parked on the drive and in the garage of Adult P’s house. She had wondered how Adult P would be able to access it because of its height from the ground.

Having discussed her concerns again with the vicar, the church member agreed she would contact the local social services office about her concerns.

The social services made enquiries with the GP and police. There had been no appointments or home visits by the GP during the last two years. The police had no record of any incident or contact with Adult P or his address. They also made enquiries and checks with known social and domiciliary care agencies to see if they had any knowledge of Adult P or a carer working at this address; nothing was known about Adult P or his live-in carer.

1. What abuse or neglect is Adult P experiencing or at risk of?
2. What might be the impact of this?