

Models of Care for Older Adults Experiencing Homelessness: A Scoping Review

Rationale

A major gap exists in long-term care home (LTCH) processes that has not met the needs of older adults experiencing homelessness (OAEH). In Toronto, over 35,000 older adults live in insecure housing while awaiting subsidized, supportive housing. Rapid physiological aging commonly seen among OAEH puts them at a higher risk for cognitive and functional impairment as well as adverse outcomes including death, compared to housed peers. To meet their needs, we propose to co-create, pilot and evaluate the first purpose-built LTCH model in Canada.

Implications

Results from the scoping review will guide decision-makers to bridge the gap of LTCH processes to meet the needs of OAEH, ensuring their transition from shelters to LTCH is supported.

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Background

- OAEH exhibit rapid physiological aging compared to their housed peers, increasing their risk of outcomes.
- Nearly 50% meet adverse criteria for LTCH admission but only 5% are admitted due to barriers to LTCH screening, assessment and acceptance.

Objective

- To conduct a scoping review of LTCH models and processes for OAEH.

Methodology

- Our methodology is guided by the JBI methods for scoping reviews.
- **Eligibility Criteria: PICOT**
 - Population:** OAEH defined as ≥ 50 years who have experienced chronic/short-term homelessness, according to Canadian Observatory on Homelessness categories.
 - Interventions:** Studies that describe, evaluate and identify LTCH models that recognize and transition OAEH from insecure housing, barriers and facilitators to LTCH models and experiences, and implementation strategies and their barriers and facilitators for LTCH models.
 - Context:** Studies from any country; LTCHs from any payer
 - Outcomes:** Any outcomes reported for OAEH, LTCH staff, residents, families, buildings and systems
 - Types of studies:** Any primary research studies
- **Literature Search:** We will conduct searches in the following databases: MEDLINE, Embase, CINAHL, Web of Science, Avery Index to Architectural Periodicals, the Cochrane Library, and the Campbell Library. For grey literature sources, we will include the Canada's Drug Agency Grey Matter and the [Homelessnesshub](#).
- **Study Selection:** We will screen title and abstracts (level 1) using Continuous Active Learning @ tool and full-text (level 2) articles using Synthesi.SR with the PICO(T) framework described above. For Non-English articles, we will translate using DeepL Classic LanguageTranslator.
- **Data Abstraction/Collection:** We will collect data on study characteristics, participant characteristics, intervention characteristics, implementation determinants, and outcomes. A third reviewer will resolve discrepancies. For missing data, we will contact study authors.
- **Synthesis:** We will report results using the PRISMA (Preferred Reporting Items for Systematic reviews and Meta-Analyses) extension for scoping reviews. We will present data synthesis using descriptive frequencies, tabulation, and simple content analysis. We aim to consider intersections of identities with interventions and outcomes, using an intersectionality analytic lens with PROGRESS-Plus factors.

Knowledge Translation Strategy

- We will disseminate findings through a publication, a lay summary circulated to our networks, and a presentation.

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