



***Continuum of Care
Age Friendly Shelter Guidelines
April, 2022***

Shelter providers throughout San Diego have been working with an older adult population for years and have already made many modifications to services and built environments, and are commended for their effort. The following recommendations should be considered as leveraging both strengths currently in place within the system and opportunities for enhancement.

Given that there are older adults experiencing homelessness for the first time in older age; that diversion and prevention activities to pre-empt the need for a shelter stay continue to be a priority in service delivery, along with opportunities to support aging in place when possible; and the needs of older adults can differ from the needs of other shelter guests, it is recommended that shelter providers implement or amend existing assessment practices to consider the unique needs of older adults within shelters at or near the time of intake. The purpose is to identify what the individual feels they need, natural and social supports, history of housing and cause of current homelessness, income amount and source, the ongoing ability to perform Activities of Daily Living¹ (ADL) independently, incontinence, impacts of various health issues commonly attributed to age, use of substances, history and engagement with mental health supports, onset or existence of any cognitive issues, mobility, and interest in housing, type of housing, and support needs for independent or supported housing. Training should be provided to shelter staff on how to complete this assessment in the intake process.

The following pages provide guidelines on areas to be incorporated into shelters to accommodate the needs of older adults, whenever possible and feasible in the areas of:

- Overall Approaches
- Built Environment
- Nutritional Needs
- Service Navigation Needs

¹ Activities of Daily Living are defined as: Personal Hygiene (bathing/showering, grooming), Dressing (physically able to dress and undress oneself), Eating (ability to feed oneself, not necessarily prepare meals), Maintain Continence, Transferring/Mobility (being able to stand from a sitting position, and get in and out of bed)



Overall Approaches

1. Lower staff to shelter guest caseloads be implemented for those that work with older adults in shelter, and/or, that dedicated case managers with requisite training be made available to work specifically with older adults in shelter.
2. Transitions to, and education about, hospice, recuperative and palliative care be developed and implemented.
3. Referral to supportive services such as Occupational Therapy, Physical Therapy, Behavioral Health and Care Coordination.
4. Identify supports to assist older adults in shelter who cannot fully perform their ADLs and to the degree possible, make accommodations to meet the needs of the older adult, or refer to a more appropriate setting.
5. Resources and/or supports (for example, IHSS, PACE, CalAIM, etc.) can be coordinated, accessed and leveraged in the support of older adults when appropriate.

Built Environment

1. Integrate elements of universal design to the extent possible.
2. Continue to provide bottom bunks or other more easily accessed beds to older adults.
3. Continue to consider proximity to the restroom when assigning a bed to an older adult.
4. Continue to situate older adult beds within proximity of staff, or with a clear sightline from floor staff.
5. Accommodate the mobility needs of older adults in showers and toilets.
6. Provide consideration for older-age friendly spaces for gathering and socio-recreational activities within the shelter environment.
7. Consider mechanisms to reduce noise level within the shelter.
8. Lighting at night should be sufficient to locate amenities such as the bathroom and the walkways to the bathroom.
9. In addition to meeting ADA requirements, accessibility for mobility be in place with an eye to the needs of older adults at all entrances, walkways, hallways and gathering spaces (e.g., dining area).
10. Adjustments are made to the built environment to better serve the pets and service animals of older adults.
11. Provide secure storage that older adults can access.



Nutritional Needs

1. Plan meals in the shelter that consider the unique nutritional needs of older adults and their ability to chew.
2. Provide food that is acceptable for people with health conditions, such as diabetes.
3. Make available meal supplements for older adults if and when necessary.
4. Offer staff assistance for older adults who need support in accessing food within the shelter and transporting food to a place to sit and eat.

Service Navigation Needs

1. Communicate with older adults in a variety of formats, including oral and written instructions, visuals, larger print, and multiple languages.
2. Deploy SOAR workers specifically trained with advanced knowledge of older adult benefits and opportunities to enhance income to shelters with older adults.
3. Conduct case conferences specific to the needs and care coordination of older adults, with relevant community partners, as needed.
4. Ensure housing assistance staff know about and can implement age-specific housing options, as well as more general housing options, based upon preference and needs of the older adult.
5. Increase shelter staff's training and knowledge of health resources specifically for older adults, and ability to navigate those health resources.
6. Facilitate connections to other services when warranted, provide or arrange transportation as necessary, and accompany people to appointments when possible and feasible and requested by the older adult, instead of making passive referrals to other organizations or services.