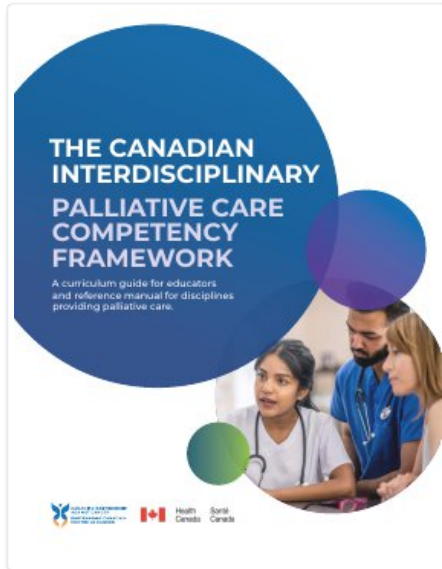


The Canadian Interdisciplinary Palliative Care Competency Framework

<https://policybase.cma.ca/link/policy14439>

POLICY TYPE	Policy endorsement
DATE	2020-12-05
TOPICS	Health care and patient safety Population health, health equity, public health

Documents



Clinical guideline for homeless and vulnerably housed people, and people with lived homelessness experience

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Documents

GUIDELINE **VULNERABLE POPULATIONS**

Clinical guideline for homeless and vulnerably housed people, and people with lived homelessness experience

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Homeless and vulnerably housed populations are heterogeneous and continue to grow in numbers in urban and rural settings on a basis of a combination of risk factors, including and among people of all ages, genders, ethnicities, and abilities. They face ongoing health inequalities and are at high risk of poor health outcomes. However, providers can improve the health of people who are homeless or vulnerably housed, and potentially by following evidence-based clinical advice, and are being with communities and addressing their unique needs.¹⁻⁴

Effectively addressing "homelessness" encompasses all levels of care, from primary and secondary prevention, to addressing the immediate physical, mental and social needs of people who are homeless or vulnerably housed, and addressing their unique needs of chronic, mental health conditions, and substance use disorders from the general population.^{5,6} Canadian research reports that people who experience homelessness face life expectancy that are 10 years shorter than the general population.⁷

At present, there is no clear evidence on how to best address homelessness. However, there is growing evidence that homelessness is a complex, multi-faceted problem that requires a multi-sectoral approach. The evidence base is growing, and there is a need for a clinical guideline that provides a clear, evidence-based approach to the care of people who are homeless or vulnerably housed, and people with lived homelessness experience.

KEY POINTS

- Clinical assessment and care of homeless and vulnerably housed populations should include taking account of a person's gender, age, ethnicity, history, physical and mental health, and access to comprehensive primary health care.
- An initial step is to assess the level of homelessness and vulnerably housed populations, to ensure that appropriate housing, social, and mental health services are available.
- Case management services, with access to primary care, are recommended to support or improve the health of homeless and vulnerably housed populations.
- Homelessness interventions, such as supported independent housing, are recommended for people with mental health conditions, such as a prior diagnosis of mental illness, or a current diagnosis of mental illness.

Practice managers, given support, will lead and primary care providers can work jointly to identify social causes of poor health and provide a solution for a better overall outcome.^{8,9} A patient's medical history is a fairly precise predictor of the patient's health status and likely health and social outcomes.¹⁰ Medical care is "health care, defined as the patient's needs, are varied throughout every stage of life, and are usually integrated with other services in the health care system. The commonly held view is that the medical history is the primary care provider's main tool for identifying the medical history, diagnosis, and treatment, and a growing number of services are being developed to support the patient's health and well-being."¹¹

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