

Supporting HIV and SUD Care Retention through Community Outreach and Mobile Health Care Units

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08/28/2025

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Other Health Professionals	Confirm equivalency of credits with relevant licensing body.





EXPANDING ACCESSIBLE MOBILE MEDICAL UNITS FOR UNDER-ENGAGED COMMUNITIES

Why Mobile Units Matter

Presenter Lisa Binkley, Director of Prevention, Education,
Mobile Medical Services for Nashville CARES

INTRODUCTION

- Bridging Access Gaps
- Reaching Underserved Populations
- Building Trust and Engagement
- Improving Health Outcomes
- Health For All Cost Savings



BRIDGING ACCESS GAPS:

- Mobile units overcome barriers like transportation, insurance, and institutional distrust
- Serve high-risk populations with higher mortality and overdose rates
- Reduce ER reliance by bringing preventive care to the community

REACHING UNDERSERVED POPULATIONS:

- Reach 6M+ annually across the U.S.; majority are people of color
- Engage people in encampments, shelters, and remote areas
- Deliver HIV/HCV testing, STI screening, prevention services, & more



BUILDING TRUST AND ENGAGEMENT:

- Mobile units build familiarity and trust through repeat visits
- Help reduce stigma and fear by meeting clients in their own environments
- Become trusted, non-judgmental spaces for ongoing care

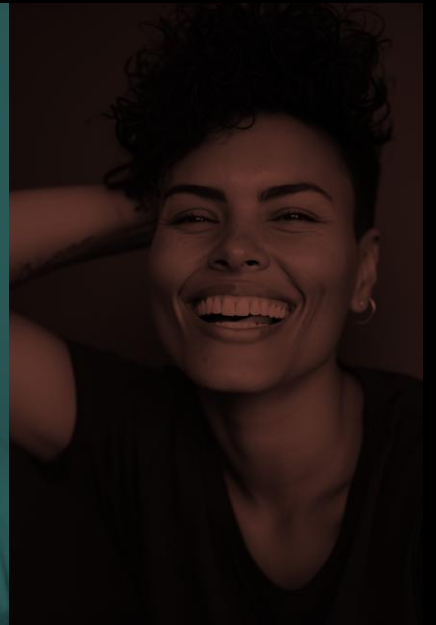
IMPROVING HEALTH OUTCOMES:

- Lead to major reductions in HIV transmission and improved chronic condition control
- Enable high adherence to HIV treatment via mobile delivery
- Reduce overdose risks

COST SAVINGS & HEALTH FOR ALL:

- Save millions in ER costs by providing preventive care
 - Deliver \$36 in savings for every \$1 invested in some models
 - Address disproportionate health challenges and improve outcomes for under-engaged populations

KEY CONSIDERATIONS BEFORE PURCHASE – BUILDING THE RIGHT MOBILE UNIT



COMMUNITY NEEDS ASSESSMENT:

- Engage directly with the impacted communities before designing services
- Align offerings with actual local needs
- “Build it and they will come” doesn’t work—co-design is critical

DEFINE MISSION AND SERVICES:

- Clearly articulate who you're serving and what services will be offered
- Match services to community needs and funding opportunities
- Include wraparound supports like case management and supplies



REGULATORY AND LEGAL COMPLIANCE:

- Understand state/local laws and certifications (CLIA, SSP laws, etc.)
- Plan for insurance, permits, and provider licensing
- Engage compliance/legal early to avoid costly delays

LOGISTICS AND OPERATIONS PLANNING:

- Identify service areas, parking locations, and schedules
- Develop a communication plan to promote the unit's presence
- Plan for staff safety, extreme weather, and operational flow

FUNDING STRATEGY - STARTUP & SUSTAINABILITY:

- Plan for both startup (vehicle) and ongoing operating costs
- Diversify funding sources (grants, partnerships, billing where feasible)
- Build a 3–5 year budget to ensure sustainability

START-UP COSTS TABLE:

Budget Items	Costs
MMU Purchase Price	\$187,850
MMU Tow Hitch Install	\$2,905
MMU Wrap	\$5,952
MMU Trailer	\$5,464
MMU Trailer Dolly	\$1,039
MMU Trailer Wrap	\$3,047
Cargo Van Purchase Price	\$57,832
Cargo Van Wrap	\$3,967
Cargo Van Trailer	\$4,999
Cargo Van Trailer Wrap	\$3,047
Golf Cart	\$9,999
Transit Van	\$68,863
Insurance All Vehicles	\$1,391/month
	\$16,694/year
Gas Yearly Avg	\$2,363
Other Misc	\$7,521

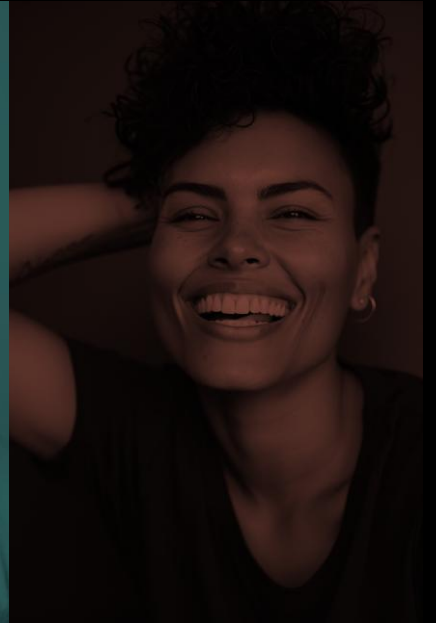
TIMELINE AND PROCUREMENT:

- Custom builds take 12–18 months
- Used options may be faster – Repurposed box truck or RV
 - Explore dealers who specialize in used vehicles for Mobile Services
 - [UsedMobileClinic.com](https://www.UsedMobileClinic.com)
 - [Specialty Vehicle Exchange \(SVE\)](#)
 - [Craftsman Industries](#)
 - [Global Emergency Vehicles](#)
- Consider interim outreach while waiting for vehicle delivery

TIMELINE AND PROCUREMENT:

- Learn from peers' purchase experiences to avoid pitfalls
- Ask:
 - What do they wish they had known or done differently?
 - Did they experience delays?
 - What were the pros and cons of their purchase?
 - Would they use the seller again?

RESEARCH & DESIGN PARAMETERS FOR THE MOBILE UNIT



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LEARN FROM EXISTING MODELS:

- Study successful clinics, including layout, services, and workflows
- Involve staff and community in design input
- Avoid reinventing the wheel by leveraging existing knowledge

VEHICLE SELECTION (SIZE & TYPE):

- Balance capacity with drivability and parking flexibility
- Consider ADA accessibility and licensing requirements
- Choose size based on privacy needs, maneuverability, and service type



NASHVILLECARESSM

INTERIOR LAYOUT & SPACE PLANNING:

- Prioritize privacy, workflow, and storage
- Include key areas like intake, exam, counseling, and supply storage
- Plan for ADA compliance and secure, sanitary equipment layout



NASHVILLECARESSM

CRITICAL EQUIPMENT AND FIXTURES:

- Equip for testing, basic care, and risk-reduction services
- Include secure storage, sharps disposal, refrigeration, and workspace
- Use bolted-down and portable equipment for safety and flexibility

POWER, WATER, AND CONNECTIVITY:

- Ensure sufficient generator or battery power for all devices
- Include water tanks, HVAC, and internet (Cradlepoint recommended)
- Build with medical-grade materials and integrated tech

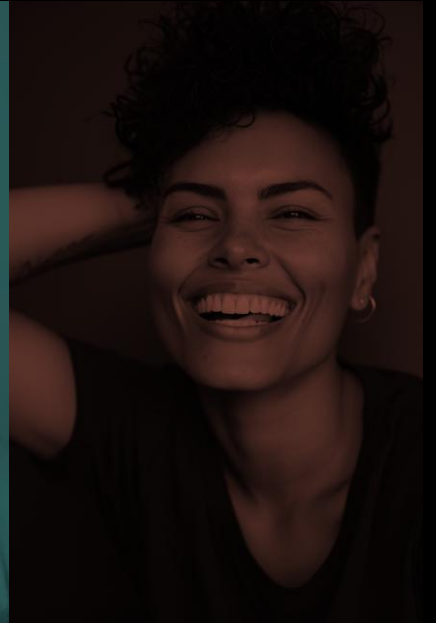
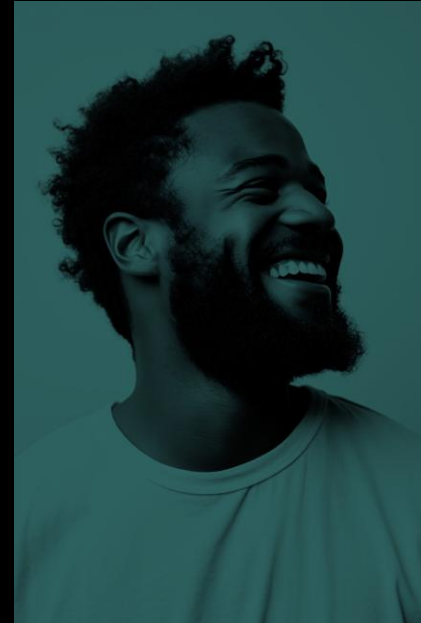
SAFETY AND COMPLIANCE FEATURES:

- Meet safety codes (non-slip flooring, lighting, privacy)
- Include biohazard handling, fire suppression, & narcotics security if needed
- Design for confidentiality and professional presentation

BRANDING AND EXTERIOR DESIGN:

- Use the van as a moving billboard—clear, community-inclusive messaging
- Avoid stigmatizing language; use inclusive design
- Add practical exterior elements like awnings and storage

COST ANALYSIS: BUDGETING FOR A MOBILE CLINIC



INITIAL PURCHASE & OUTFITTING COSTS:

- New vans range from \$125K–\$225K; custom RVs up to \$400K+
- Include equipment, tech, wrap, licensing, and contingency (~10%)
- Consider used vehicles or phased buildouts for cost savings

OPERATIONAL COSTS (ANNUAL):

- Average annual cost: ~\$275K; most goes to staff salaries
- Plan for fuel, maintenance, insurance, supplies, and storage
- Maintain reserves for unexpected repairs or equipment needs

OPERATIONAL COSTS TABLE:

Budget Items	Costs
MMU Purchase Price	\$187,850
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Golf Cart	\$9,999
Transit Van	\$68,863
Insurance All Vehicles	\$1,391/month
	\$16,694/year
Gas Yearly Avg	\$2,363
Other Misc	\$7,521

FUNDING & REVENUE CONSIDERATIONS:

- Mix of grants, contracts, donations, and billing (where possible)
- Avoid over-reliance on single-year grants
- Align program with public health priorities for long-term support

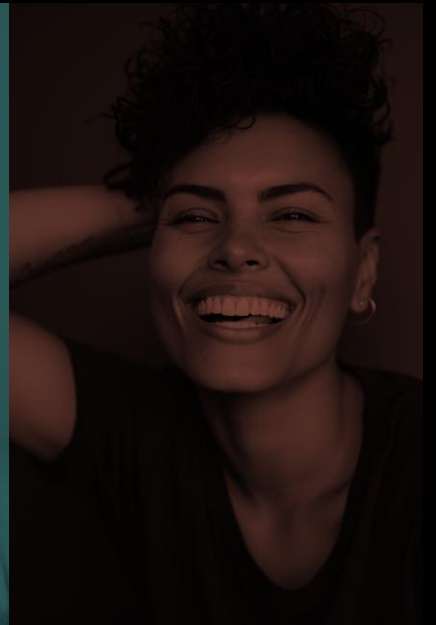
COMPARING COSTS TO BRICK-AND-MORTAR CLINICS:

- Far lower startup costs than fixed clinics
- Mobile clinics offer flexibility and high ROI
- Proven to reduce ER visits and prevent high-cost health outcomes



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MAINTENANCE & UPKEEP OF THE MOBILE UNIT



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VEHICLE MAINTENANCE:

- Follow a proactive maintenance schedule (oil, tires, brakes, etc.)
- Partner with local mechanics for faster turnaround
- Plan for longevity—10+ years with good care

MEDICAL EQUIPMENT UPKEEP:

- Maintain and calibrate testing and medical devices regularly
- Assign responsibility and/or contract biomedical services
- Track expiration dates and replace worn equipment

INTERIOR CLEANLINESS & SANITATION:

- Daily and deep cleaning needed to prevent infection
- Manage waste disposal per OSHA and local regulations
- Maintain exterior cleanliness and van wrap integrity

SUPPLY MANAGEMENT:

- Implement a supply inventory and restocking system
- Designate a staff member to oversee logistics
- Keep critical supplies and backups on board

STAFF TRAINING AND WELL-BEING:

- Train staff on vehicle systems, safety, and responsive care
- Cross-train roles for flexibility



STAFF TRAINING AND WELL-BEING:

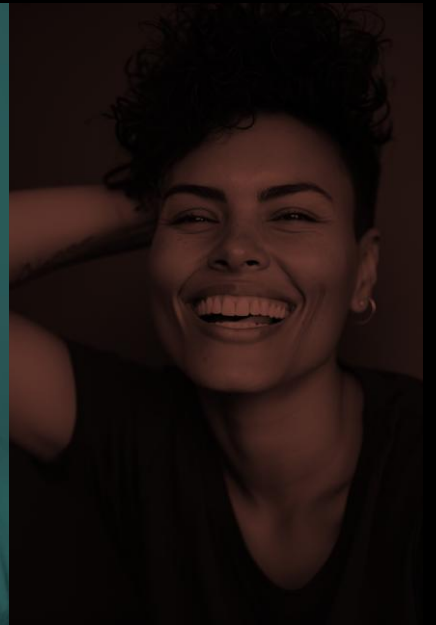
- Monitor for burnout and support staff wellness
- Encourage debriefings after sessions and provide resources to support staff well-being



FINANCIAL & PROGRAM SUSTAINABILITY:

- Track outcomes and tell your story with data
- Secure multi-year funding and build diverse revenue streams
- Position the unit as integral to the organization's mission

**CONCLUSION:
DRIVING HEALTH FORWARD FOR ALL**



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CONCLUSION:

- Mobile units meet people where they are with compassion and dignity
- Address systemic access gaps and reduce community health burdens
- Require investment, planning, and care but deliver immense impact
- Build trust, save lives, and deliver care for all—mile by mile



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Father Joe's Villages



**Village
Health Center**
Street Health Program



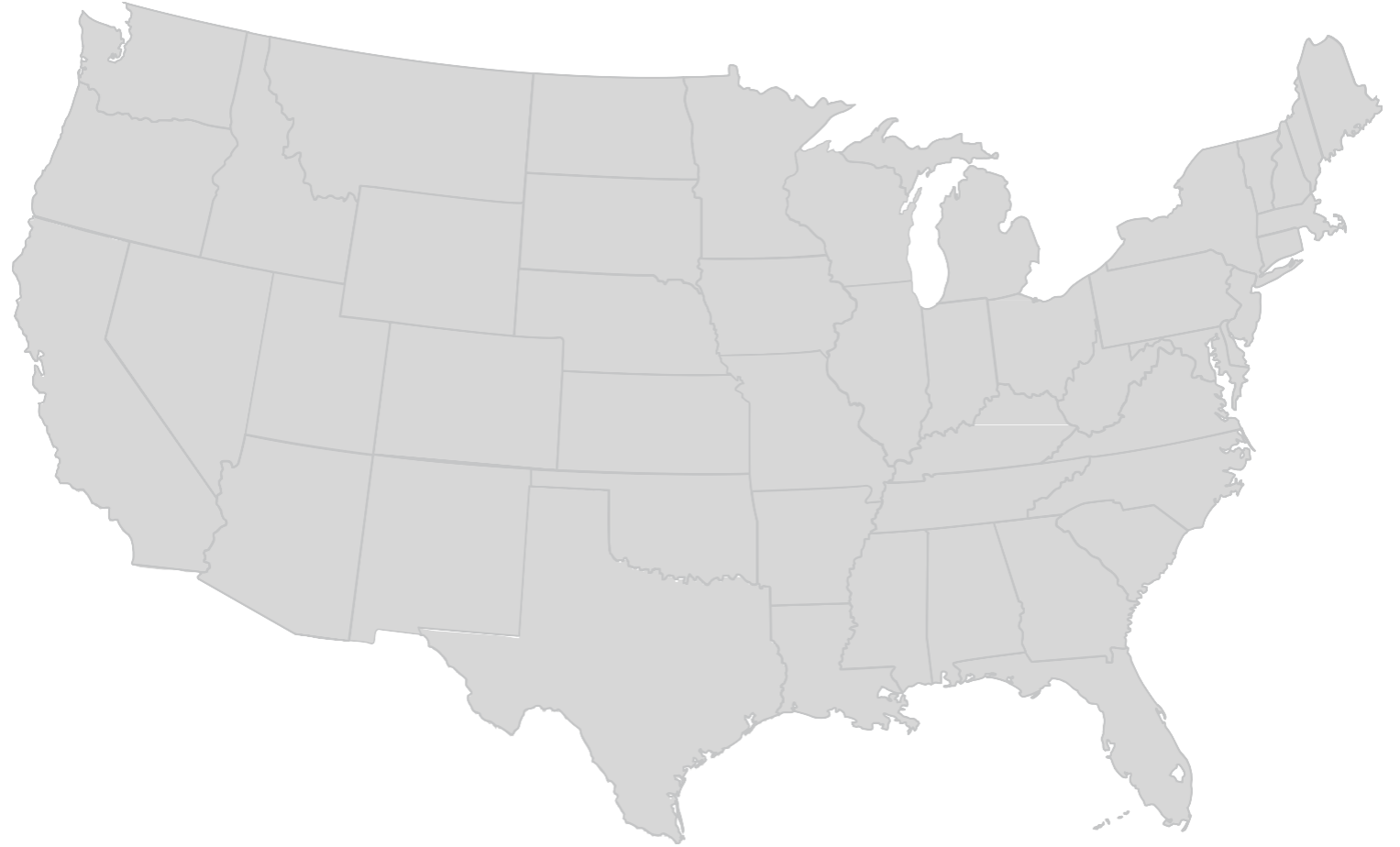
Homelessness: United States

771,480

Experienced
homelessness in the
United States in 2024

274,224

Unsheltered



*The 2024 Annual Homelessness Assessment Report (AHAR) to Congress, Housing and Urban Development



Homelessness: California

187,084

Experienced
homelessness in
California in 2024

123,475

Unsheltered



*The 2024 Annual Homelessness Assessment Report (AHAR) to Congress, Housing and Urban Development



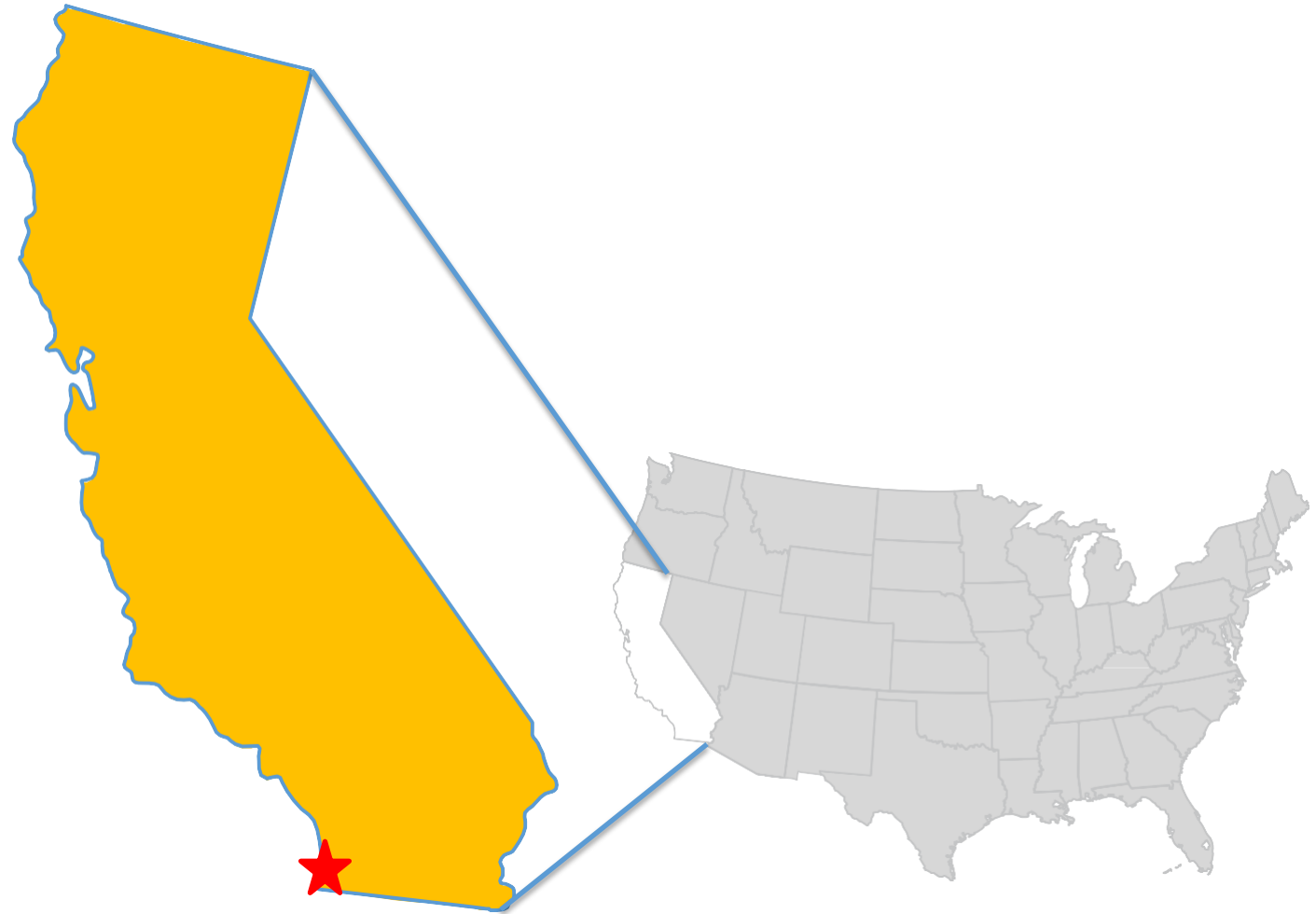
Homelessness: San Diego

10,605

Experiencing
homelessness in
San Diego in 2024

6,110

Unsheltered



*The 2024 Annual Homelessness Assessment Report (AHAR) to Congress, Housing and Urban Development



■ Father Joe's Villages – “One-Stop Shop”

Mission

To prevent and end homelessness,
one life at a time.

Vision

A San Diego without homelessness.

CREED



Our Solutions

We do not merely address immediate needs; we are committed to resolving the underlying issues of homelessness.



- Interim & Transitional Shelter
- Affordable & Supportive Housing
- Meals
- Day Center

Meeting Basic Needs



- Village Health Center (onsite FQHC)
- Integrated Healthcare Services
- Street Health
- Recuperative Care
- Detox Program

Making Health a Priority



- Therapeutic Childcare
- Development Assessments
- Parenting Classes
- Family Services

Investing in Children



- Vocational Training
- Chaplaincy Services
- Employment and Education Services

Strengthening Self-Sufficiency



■ FJV's Village Health Center

- Primary Care
- Psychiatry
- Dental
- Behavioral Health Services
 - Individual & Group Counseling
 - State-certified Outpatient Substance Use Disorder Treatment
- Registered Nurse Triage
- Onsite Lab
- Insurance Enrollment
- Referrals to Specialty Care
- Scheduled Appts, Telehealth, & Same-Day Walk-In Access
- Evidence-based Modalities:
 - Motivational Interviewing
 - Cognitive Behavioral Therapy (CBT)
 - Dialectical Behavior Therapy (DBT)
 - Eye Movement Desensitization and Reprocessing (EMDR)
 - Medication Assisted Treatment (MAT)

Village Health Center: 2024

We served ~4,000 unique individuals at the VHC

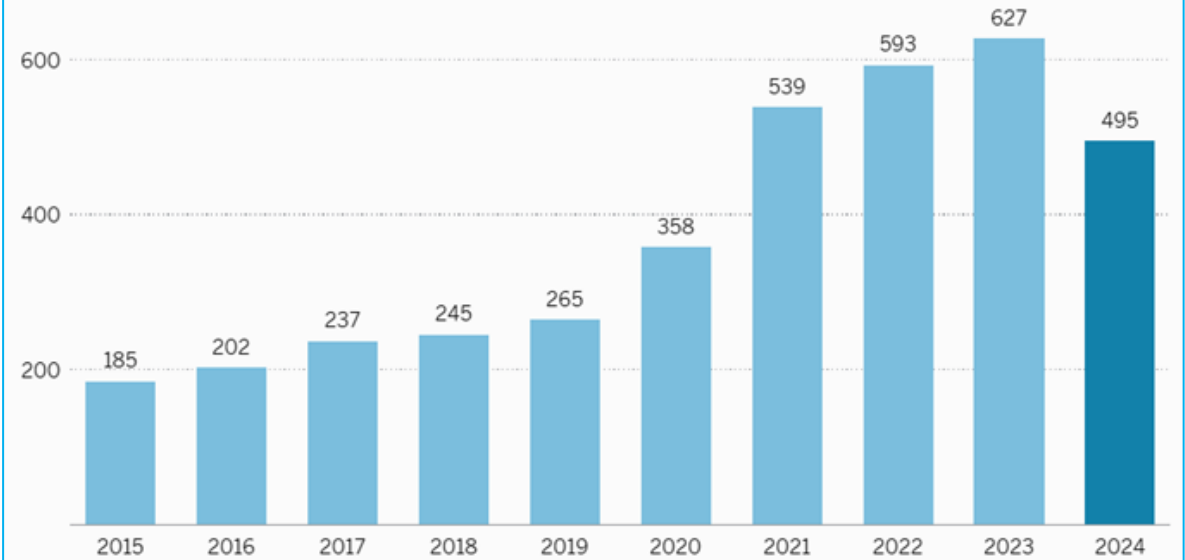
- 16,648 Medical
- 4,043 SUD
- 3,301 MH
- 2,703 Dentistry
- 2,446 Street Health
- 1,145 Psychiatry

In 2024, there were over **218** overdose deaths.

At least **44%** of all homeless deaths were related to substance use.

Homeless deaths in San Diego County

Nearly 500 people countywide died while living outside last year, marking the first decline in such deaths in more than a decade.



Source: The San Diego County Medical Examiner

Blake Nelson / The San Diego Union-Tribune



Common Barriers to Care

- Trauma
- Shame
- Distrust
- Behavioral Health Diagnoses
- Belongings
- Childcare
- Pets
- Transportation
- Disabling Conditions
- Health Benefits



When you don't know how to address your basic needs each day –

where you can rest safely and what you'll eat next –

taking care of one's health is not a top priority.



■ Health Outcomes of People Experiencing Homelessness

3-4x

more likely to die prematurely than those who are housed.

3-6x

higher rate of illness than their housed peers.

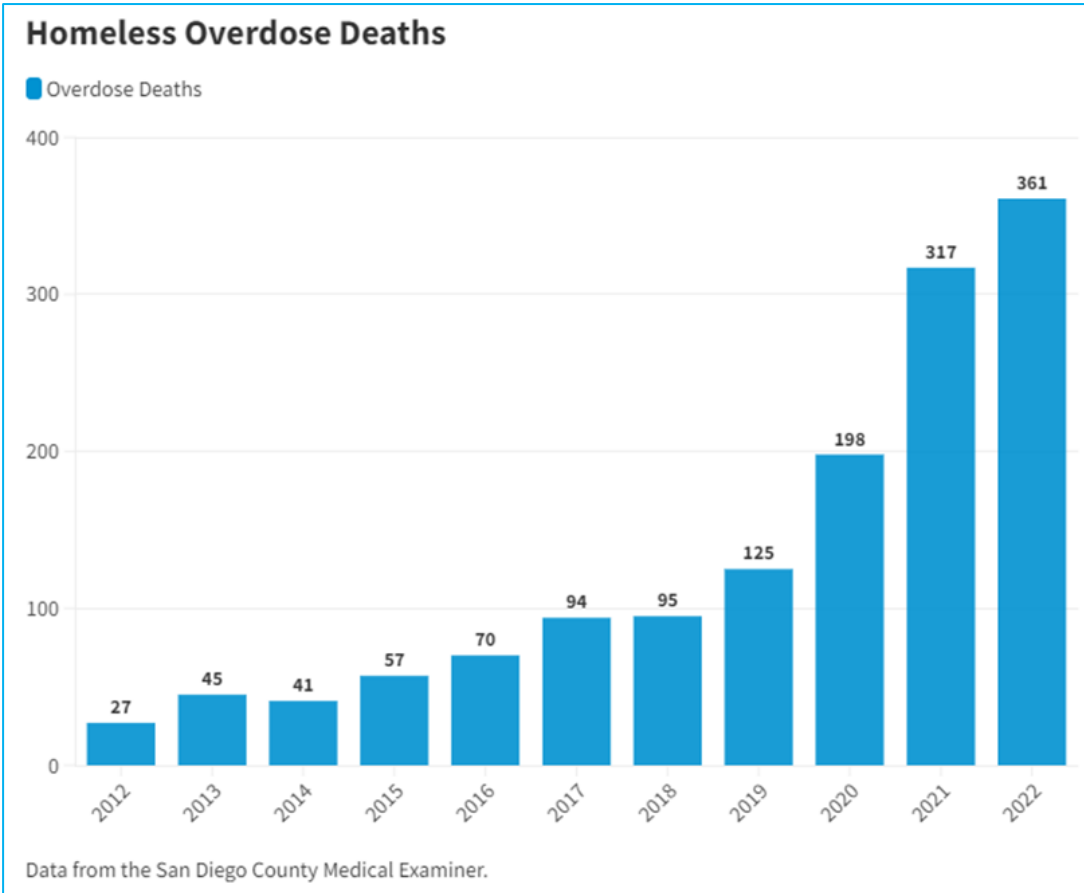
10x

more likely to be the victim of a violent crime.

*The 2024 Annual Homelessness Assessment Report (AHAR) to Congress, Housing and Urban Development



Substance Use in the Homeless Community



7 SAN DIEGO LOCAL WEATHER TRAFFIC SPORTS ENTERTAINMENT IN YOUR NEIGHBORHOOD NEWSLETTERS 60

550 homeless people have died since January 2023: San Diego Medical Examiner

The current death count is almost four times as much compared to 2013

By Priya Sridhar • Published November 22, 2023 • Updated on November 22, 2023 at 9:43 pm

[f](#) [✉](#)

Higher Rates Of Homelessness Are Associated With Increases In Mortality From Accidental Drug And Alcohol Poisonings

[W. David Bradford](#) and [Felipe Lozano-Rojas](#)

[AFFILIATIONS](#) ▾

PUBLISHED: FEBRUARY 2024 [Open Access](#)

<https://doi.org/10.1377/hlthaff.2023.00951>



FJV's Innovative Programs & Services

FJV has strategic goals related to our programs centered around reducing the harm caused by untreated health conditions, including:

- Medication Assisted Treatment (MAT)
- RISE Sober Shelter – Opened January 2025
- Detox – Opening Fall 2025
- *Street Health Program*

We fill cracks in the current continuum of care:

- 24/7 Vending Machines
- Recuperative Care Program (RCP)

SAVE A LIFE

HOW TO RESPOND TO OPIOID OVERDOSE



← **NALOXONE**

Naloxone Nasal Spray (Narcan) is an Opioid Overdose Reversal Medication. Access is simple and Naloxone is FREE: Scan the QR code to sign up today!



TESTING STRIPS & MORE →

To access free Fentanyl testing strips, Xylazine testing strips, sharps disposal containers, and wound care kits, use your existing Personal Identification Number (PIN). If you do not have one, call (760) 691-1880. You'll be directed to provide the first letter of your first name, the first letter of your last name, and the year of your birth. Example: John Doe 1/15/1968 is "JD1968".

You will be given a 4-digit PIN that you may use immediately to access products by entering your new PIN followed by a # sign. Then select the product number you want, followed by the # sign, and access up to 10 items per day.

Both Vending Machines are located in front of Guest Services at the Joan Kroc Center (JKC), 1501 Imperial Ave.



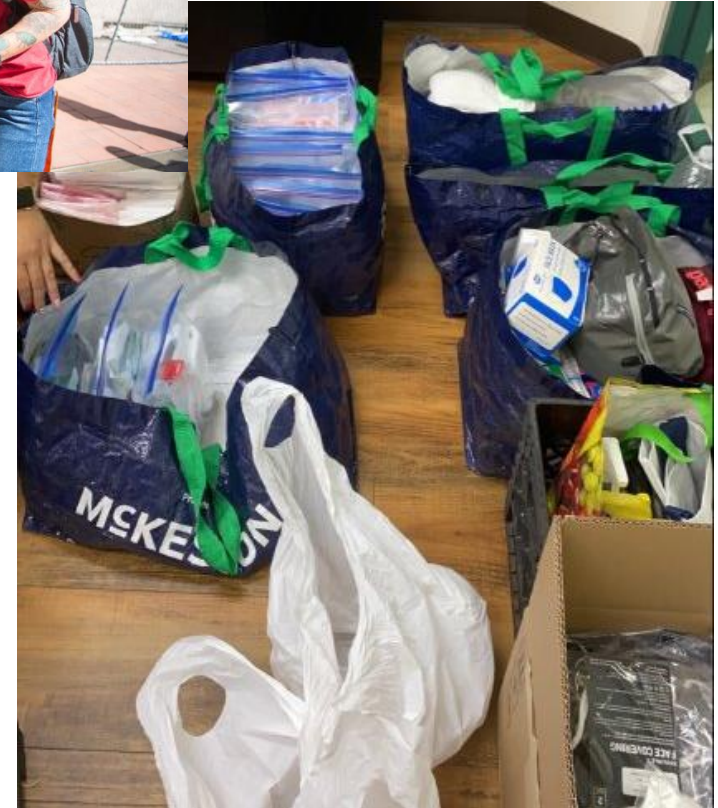
Father Joe's Villages 



■ Program Inception, Building, & Growing Street Health

Leveraged:

- Assets
- Resources
- Partnerships: Obtained Technical Assistance – took advantage of training & shadowing opportunities



Sought & Acquired Donor, Grant & Managed Care Plan (MCP) Funding



Street Health - Services

- Street Medicine (Primary Care)
- Street Psychiatry
- Street Behavioral Health
 - Mental Health Therapy
 - SUD Counseling
- Outreach & Education
- Case Management & Referrals
- Enhanced Care Management
- Insurance Enrollment
- Same-Day Walk-In Access



Street Health – Origin Story



Street Health - Collateral

Father Joe's Villages Street Health Program



Street Health Outreach ▶ Cel. (619) 601-4689
Village Health Center, 1501 Imperial Ave, San Diego, CA 92101
Ph. (619) 645-6405 • my.neighbor.org

Father Joe's Villages Village Health Center



The Village Health Center is dedicated to serving individuals currently experiencing homelessness, individuals who were recently homeless, and individuals who are at-risk of homelessness.

STREET HEALTH PROGRAM

Our Street Health Program provides a range of direct care services to people residing on the streets, in parks or in canyons, and who may not otherwise have the resources needed to make it into the Health Center.

SERVICES INCLUDE:

▶ PRIMARY CARE

- Physical Exams
- Acute/Chronic Disease Management
- Prescriptions and Refills
- Wound Care
- Suture/Staple Removal
- Treatment of Abscess
- Medication for Addiction Treatment (MAT)
- Specialty Referrals

▶ PSYCHIATRY

- Prescription of Oral and Long-Acting Injectable Medication

▶ BEHAVIORAL HEALTH CARE

- Mental Health Therapy
- Substance Use Disorder Counseling

▶ HARM REDUCTION SERVICES

- Naloxone & Safer-Use Supplies
- Substance Use and Risk Education
- Referrals and Support with Additional Levels of Substance Use Disorder Care Services
 - Detoxification, Residential Treatment, Outpatient Treatment, Sober Living, etc.

▶ OUTREACH SERVICES

- Case Management
- Insurance Enrollment
- Transportation Assistance
- Document Readiness
 - ID's, Social Security Cards, Birth Certificates
- Connection to Other Resources and Referrals
- Distribution of Food, Water, Hygiene Packs, and Other Essential Items to Meet Basic Needs

Father Joe's Villages Street Health



Monday-Friday | 9:00 am-4:00 pm
To contact Street Health, please call (619) 601-4689
1501 Imperial Ave, San Diego CA 92101 • neighbor.org



■ Building Trust

SERVICES

Primary Care, BH & SUD
Case Management
Referrals
Documentation
Insurance Enrollment
Health System Navigation
Pet Care
Transportation

SUPPLIES

Water
Food
Socks & Clothing
Hygiene Items
First Aid Packs
Wound Care Supplies
OTC Medications
Prescription Medications
Naloxone & Safer Use Support
Pet Supplies



■ Staffing – Sustainability & Scalability

MODEL

- Outreach & In-Reach models
- Referrals
- Creation of Partnerships (Ongoing)

TEAM

- Outreach Workers are driving force (hybrid positions – specialize in MA, AOD, CM + Reg.)
- Medical: MD/APP + Outreach Worker/MA
- Psychiatry: MD + Outreach Worker/CM
- BH: AOD or MH Clinician + Outreach Worker/CM

ACTIVITY

- 8 sessions/week in community
- 2 onsite (ECM)
- All sessions at VHC include “on-call” support
- MOUs with community partners to provide on-site care



Street Health - Fleet



Betty



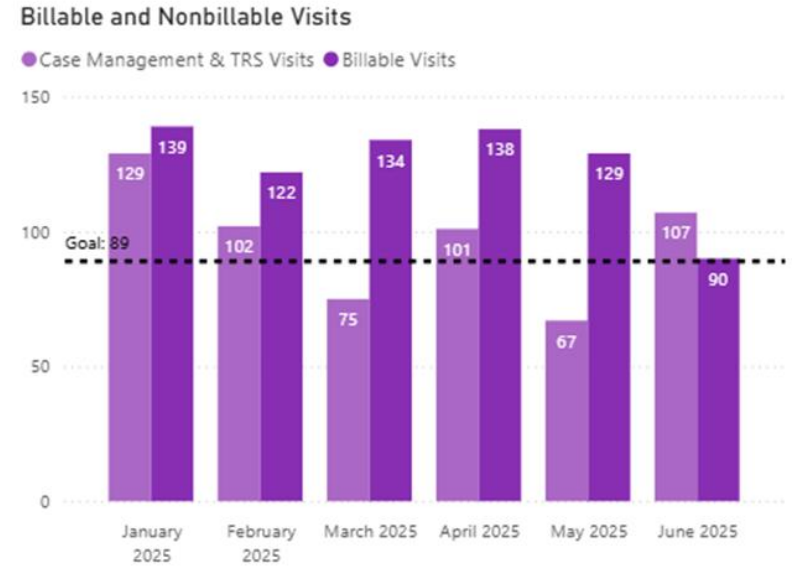
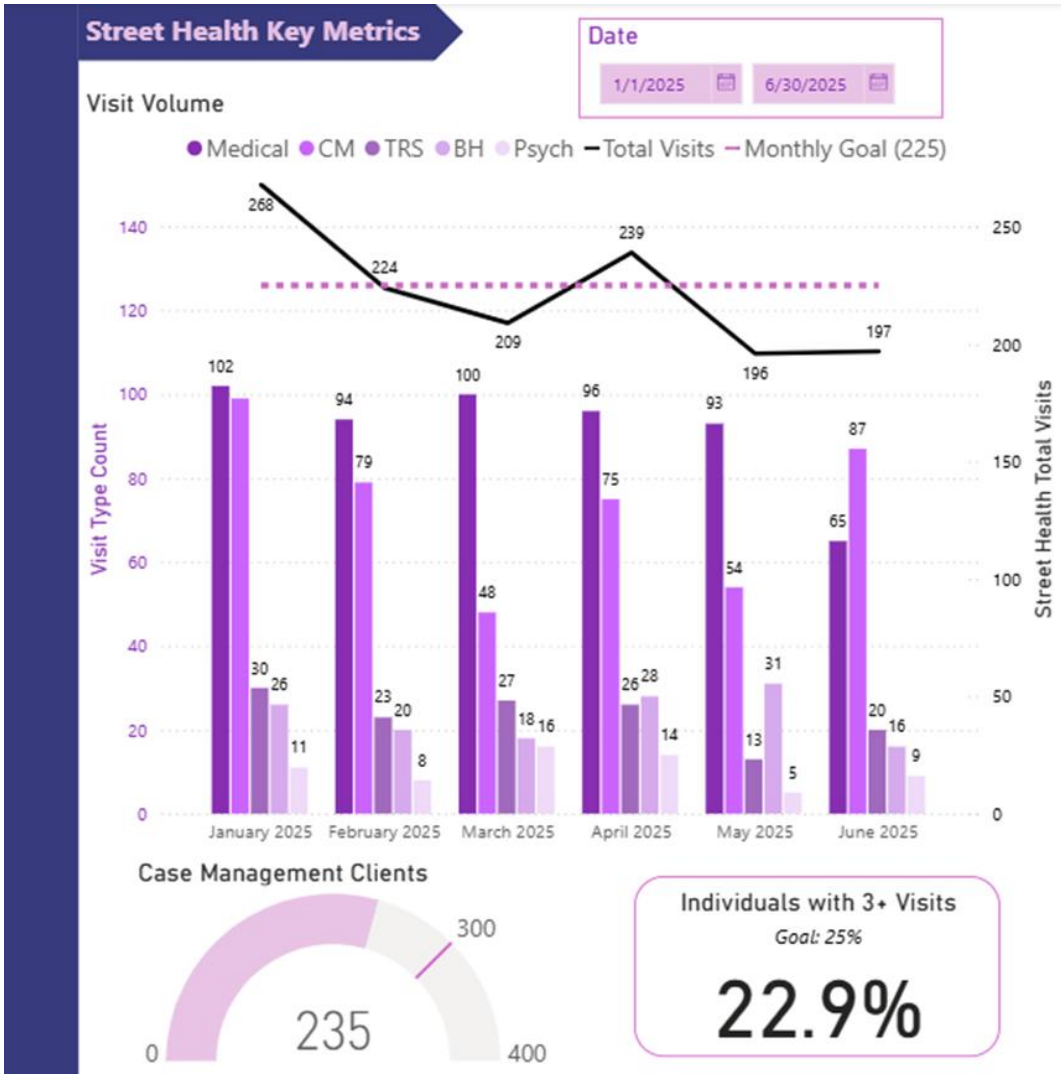
Florence



Mercy

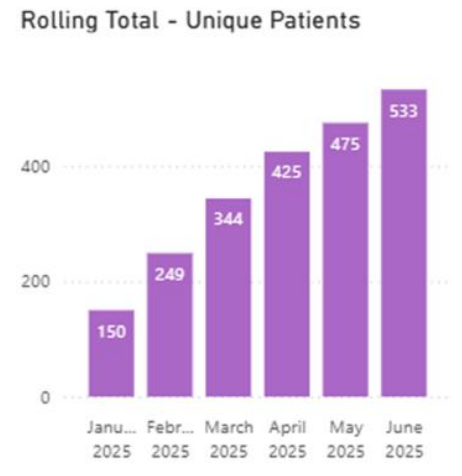


Metrics



Total Encounters
1333!
Goal: 1350 (-1.26%)

Unique Individuals
533✓
Goal: 500 (+6.6%)



What We Do Now

- Leverage relationships formed by Outreach Workers to connect with care providers the Patient consents to engage with.
- Provide education, resources to meet basic needs during outreach & street health sessions.
- Create & sustain partnerships that promote access to critical resources.
 - Referrals to other departments at FJV and other Community-Based Orgs, etc.
 - Partnerships with Police, Fire, EMS, Hospitals & Health Plans.



■ What We Do Now

We support:

- The creation of policies & programs that promote the rights and dignity of PWUD – providing them with resources & opportunities to stabilize & thrive.
- Improved access to care & deployment of life-saving resources to our community's most vulnerable - our neighbors experiencing homelessness.



PATIENT SUCCESS STORY



■ Don't Reinvent the Wheel!

- How much does a vehicle cost with after-market storage & wrap?
- What do you put in your clinician's "go-bags"?
- What safety & emergency equipment do you keep in your vehicles?
- How did you....?



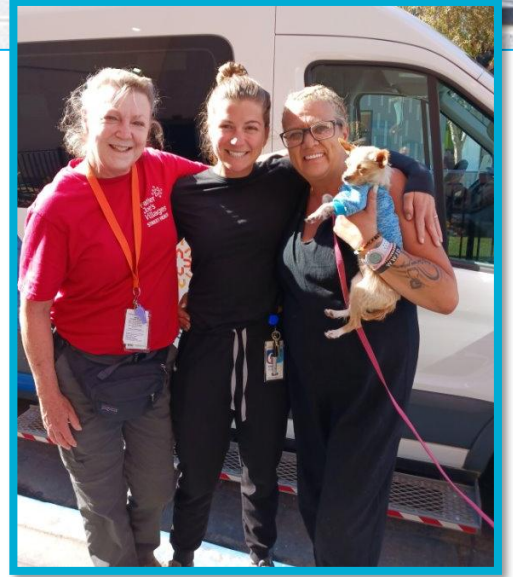
Contact Information

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Megan.Partch@neighbor.org

1.619.HOMELESS
MY.NEIGHBOR.ORG

     @FatherJoesVillages

 @FatherJoes



THANK
YOU!

HOPE
LIVES
HERE



Father
Joe's
Villages

Thank You!

Questions/Comments?

HRSA Disclaimer

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