

# Building Trust Through Integrated Outreach and Mobile Clinics for People Experiencing Homelessness: Tips for Providers

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When [Mathiesen Memorial Health Clinic](#), in California's rural Tuolumne County, received funding for a mobile clinic to support people experiencing homelessness, they were excited to design the vehicle and build their team. However, when they faced the prospect of a potential 16-month build timeline, they had to determine what to do next: wait for the mobile clinic to be completed or modify service delivery while waiting for the mobile clinic to arrive.

The Mathiesen team decided to purchase two smaller vehicles (a minivan and an SUV) and slowly build their team of a certified nurse practitioner, registered nurse, social worker, and community health worker to begin outreach to the community. This approach allowed them to start building relationships with people experiencing homelessness, provide care to those in need promptly, and build care team cohesion. In addition, starting with street outreach will help decrease the "ramp-up" time typically needed to start providing care once the mobile clinic is operational.

Similar to Mathiesen's experience, organizations looking to start a mobile clinic for people experiencing homelessness are often met with the difficult reality that building these vehicles can take well over a year. This challenge delays bringing much-needed care into communities that are facing difficulties accessing current service delivery models. Organizations starting a mobile clinic program can consider the benefits of first beginning medical outreach to better and more quickly meet the community's needs. Rather than choosing between the two methods, organizations can view mobile clinics and medical outreach as complementary, enhancing the effectiveness of both.

Given the lengthy process of building and operationalizing a mobile clinic, it is important to consider alternative ways to meet the needs of communities being served. Beginning consistent outreach and offering a variety of services prior to launching a mobile clinic has multiple benefits. This approach not only allows care to be provided to an underserved community, but can also better inform the structure and staffing of the mobile clinic.

This tip sheet can help guide organizations in using medical outreach for people experiencing homelessness to build trust, identify community needs, and provide immediate care, in preparation for launching a mobile clinic. The tool is a product of [Partnerships for Action: California Health Care & Homelessness Learning Collaborative](#), led by the Center for Health Care Strategies with support from the California Health Care Foundation.

### Background: The Mobile Clinic and Medical Outreach Basics

Health care services offered outside of traditional brick-and-mortar clinic sites focus on engagement and earning trust. These service modalities fall under the umbrella of outreach and can include mobile clinics, medical outreach, and street medicine.

#### Mobile Clinics

Mobile clinics can vary in form, from large, multiple-room vehicles to smaller, “sprinter” vans. Mobile clinics offer a range of care that is provided, including, for example:

- Health screenings and point-of-care testing (e.g., pregnancy, sexually transmitted infections, glucose)
- Triage and wound care
- Access to harm reduction supplies (e.g., naloxone, condoms, clean syringes)
- Women’s and reproductive health screening and testing
- Comprehensive primary care services

#### Medical Outreach

Medical outreach occurs when medical providers go to places in the community to meet their patients. These locations can include encampments and other fixed site locations, such as shelters, meal programs, and drop-in centers. **Street medicine** is a type of medical outreach that provides health and social services to unsheltered people experiencing homelessness. Medical outreach programs offer a range of care, including, for example:

- Wound care
- Measurement of vitals (e.g., blood pressure, pulse)
- Prescription services
- Higher level of care needs assessments
- Comprehensive primary care

## Advantages of Starting Street Outreach in Advance of a Mobile Clinic

Launching a street outreach or street medicine program prior to introducing a mobile clinic provides a variety of key advantages. These benefits support clients and communities as well as care team and operations staff, as described below.

### Benefits for Clients and the Community

- **Building trust within the community.** Establishing trust with a new community takes time and is best done without a timeline or an agenda. Starting outreach efforts before any specific service delivery allows for relationship building to be the focus of the interactions.
- **Empowering individuals.** Street outreach/medicine and outreach to community-based organizations shift the innate power dynamic in medicine. Meeting people where they are gives them the power to determine whether they want to engage in care and what services they would like to access, giving them more autonomy. This will increase their likelihood of engaging in services on the mobile clinic when it arrives.

- **Meeting people in their environment.** Connecting with people where they live helps decrease barriers to accessing health care. Many people are unable and/or unwilling to access care in traditional brick-and-mortar locations, but outreach allows for relationship building in a setting that is not focused on a particular outcome.
- **Fostering relationships through outreach staff.** Outreach teams can establish trust and relationships by providing care outside of traditional clinic settings. When the mobile clinic becomes available, outreach staff can vouch for the mobile clinic team or, even better, provide care at the mobile clinic, ensuring continuity of care.

## Care Team Staff and Operations Benefits

- **Better understanding of community needs.** Outreach and engagement help those providing services better understand and respond to the community's actual needs. Programs that assume a need for or interest in a certain service are often met with resistance and skepticism.
- **Scouting new locations and clients.** Outreach staff can serve as "scouts," finding new clients and locations needing support. They can also help locate clients who have been seen and need follow-up care, but have been difficult to locate.
- **Enhancing operational agility.** The outreach team is more agile and can change locations more easily than a mobile clinic as the community's needs change. When a sudden need such as a new encampment arises, outreach teams can begin building relationships in new areas while the mobile clinic fulfills their obligations at sites that they are already committed to and can move to the new location when possible.
- **Informing mobile clinic team structure and locations.** Outreach teams can provide valuable insights on how to best structure and position the mobile clinic, ensuring it meets the community's needs.

Many steps for starting outreach services are similar to steps taken to assess the need for and appropriateness of mobile care. As a result, programs are often well-prepared to begin outreach to the communities they plan to serve with their mobile clinic once it is operational.

## Tips for Starting Outreach

Following are tips to help organizations begin providing care through community outreach:

- ✓ **Use a needs assessment.** Complete a community needs assessment and review ones completed by other community organizations (e.g., nonprofit hospitals) to inform your efforts.
- ✓ **Ask the experts.** Survey clients to see what programs/organizations they access to inform where the outreach team and mobile clinic should go. Partnering outreach and health services with core services, such as shelters and meal programs, can enhance engagement in care.
- ✓ **Assess transportation limitations.** Consider geographic limitations for getting to brick-and-mortar locations. Cost, public transportation availability, and the time it takes to travel to fixed-site clinics can help inform which locations are ideal for the mobile clinic to visit.
- ✓ **Develop community partnerships.** Develop relationships with shelters and other outreach teams with well-established relationships with the community being served.

- ✓ **Include lived expertise in decision making.** Community members are best positioned to identify locations and inform service offerings. Seek input from people with lived experience of homelessness and provide opportunities for leadership and decision-making roles.
- ✓ **Be consistent.** Outreach workers should try to go to a location multiple times to demonstrate they are dependable. This will facilitate client engagement.
- ✓ **Change it up!** If you are consistent but people are not interested in care, change the days and/or times you visit a location and consider visiting new locations.

## Summary

Outreach services and mobile clinics are essential in bridging care to clients whose needs are not met by traditional health care delivery models. Organizations starting mobile clinic programs can consider beginning with outreach to build trust, identify needs, inform the care team and service delivery model, and provide immediate care while waiting for the mobile clinic to become operational.

### Related Resources

- [Delivering Mobile Health Care to People Experiencing Homelessness](#) – Provides guidance on how to establish a mobile clinic, considerations for launching a new program, as well as insights on assessing the value of a mobile clinic. (*National Health Care for the Homeless Council*)
- [Street Medicine or Mobile Medical Unit? Considerations for Expanding Medical Outreach](#) – Shares considerations for health care providers looking to start street medicine and/or mobile clinic programs. (*National Health Care for the Homeless Council*)
- [Enabling Services Data Collection Implementation Packet](#) – Offers guidance on tracking enabling services, which are the non-clinical services that help people access health care and improve health outcomes such as outreach, linkages to care, and case management. (*Association of Asian Pacific Community Health Organizations*)



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