

Mobile Outreach Vans

JULY 2020

BACKGROUND

Public health professionals refer to “hard to reach populations” as those who are not likely to access traditional health care and social services on their own due to various barriers that may include mental illness, unstable housing, lack of transportation, and substance use disorders (SUDs). Stigma and trust issues may play a role in those with SUD not seeking out services.

With hard to reach populations, one of the most effective engagement strategies is through community outreach. By meeting individuals where they are, community outreach programs can gain their trust and that of the community and provide people with health care, social services, and harm reduction assistance. One popular method of community outreach is through mobile outreach vehicles (MOV) which usually consist of large vans, trailers, or campers that are customized to provide health care and harm reduction services in targeted communities. A large benefit over brick and mortar clinics is the fact that MOVs are ambulatory and can travel to those who most need services. Additionally, one MOV can service multiple neighborhoods and can travel to targeted areas in the community as drug use patterns emerge. By becoming a recognizable presence in a community, MOVs become familiar to, and gain credibility with, the community in high risk neighborhoods.

MOVs provide a variety of services to the communities they service including referrals to SUD treatment, naloxone distribution, needle exchange services, fentanyl test strip dissemination, and pill disposal assistance. Some MOVs provide health services in addition to harm reduction services, including wound care, hepatitis and

tuberculosis testing, STD and HIV screening, and pregnancy testing. Medication for addiction treatment (MAT) for opioid use disorder (OUD) is also available at some MOVs. Additional community outreach programs through MOVs include providing toiletries, non-perishable food, clothing, or monetary incentives (e.g., gift certificates) to encourage individuals to seek care and follow up services.

MOVs are being used throughout the United States to provide services directly to those with SUDs. Below are some examples:



PROJECT RIDE (RAPID INITIATION OF DRUG TREATMENT ENGAGEMENT) PHILADELPHIA, PA

Project RIDE is an MOV operated by Penn Medicine (the University of Pennsylvania Health System) in South Philadelphia. Started in July 2019, its primary mission is to begin buprenorphine treatment to those with OUD. The RIDE van is parked at the same location every Tuesday, Wednesday, and Thursday from 8:00 AM to 3:00 PM and provides free

buprenorphine treatment for up to 30 days or until the patient enters a treatment program. The van staff assists individuals in finding a treatment program that is right for them. Additionally, Project RIDE offers HIV and hepatitis C testing and provides naloxone. A nurse practitioner, a case manager, and a peer recovery specialist work in the van. For people that cannot make it out to the van, Project RIDE will also make house calls.

COTI PROJECT (CENTERS OF TREATMENT INNOVATION) NEW YORK STATE

The New York State Office of Addiction Services and Support (formerly the Office of Alcoholism and Substance Abuse Services) (OASAS) launched the COTI Project in 2017 to provide people across the state with SUD treatment through mobile clinic services. There are currently 20 COTI providers in the state, each one operated by a different OASAS-certified provider. As of now, the COTIs cover 35 counties and tribal territories in New York and offer mobile telehealth services, naloxone, harm reduction education, and peer outreach and engagement.

PCARE VAN (PROJECT CONNECTIONS AT RE-ENTRY) BALTIMORE, MD

The PCARE Van is operated by the Behavioral Health Leadership Institute, a nonprofit organization that works with vulnerable populations suffering from mental health and SUDs in Baltimore, Maryland. The van parks outside of the Baltimore Central Booking and Intake Center and is open Monday through Friday to serve the needs of recently-released inmates and others who need help managing their SUDs. Patients can access the van's services without having to provide identification or proof of insurance. The PCARE Van provides patients with buprenorphine treatment, naloxone, and referrals to primary care physicians so they can maintain their buprenorphine prescription in the long-term.

CAROLINE COUNTY MOBILE HEALTH UNIT CAROLINE COUNTY, MD

The Caroline County Mobile Health Unit serves those with SUD in a rural area of the Delmarva Peninsula in Maryland. The unit is funded by the U.S. Health Resources and Services Administration, the University of Maryland School of Medicine, the Maryland Department of Health and Behavioral Health Administration, and the Caroline County Health Department. The project consists of one large RV that is formatted with a seating area, equipment for urine screens, and a separate telehealth counseling room with a camera and a monitor. A nurse and a peer recovery specialist staff the RV. Patients also can participate in a telehealth appointment with a psychiatrist affiliated with the University of Maryland. The psychiatrist can electronically send any necessary prescriptions to a nearby pharmacy for the patient to pick up. All prescriptions cost \$1.



WELLNESS WINNIE DENVER, CO

Wellness Winnie is a mid-size RV that travels through designated areas of Denver for the purpose of providing services to those with SUDs. The RV is staffed with mental health counselors and peer navigators and is operated by the Denver Department of Public Health and Environment (the Department). Services provided by Wellness Winnie include peer support; sharps disposal; behavioral health screenings and assessments; naloxone dissemination; referrals to medical, legal, and social services; and toiletry and clothing distribution.

Currently, needle drop off is available on board the RV, but needle exchange is not. The Department has received authorization to offer a needle exchange program on the RV, but no date has been set for adding that service. At some of the RV's stops, it partners with shower trucks and food banks to provide these services to those suffering from SUDs.

LIBERATIONS MOBILE WELLNESS VAN *LOWER FAIRFIELD COUNTY, CT*

The Mobile Wellness Van is a service of Liberation Programs, Inc., a non-profit behavioral health organization specializing in the treatment of SUDs, and receives funding from the Connecticut Department of Mental Health and Addiction Services. Every Monday through Thursday, the van travels throughout Lower Fairfield County, Connecticut (*i.e.*, the state's southwest corner) to provide recovery support services. A health care professional with prescribing privileges and a recovery coach work on the van and provide referrals for treatment, prescriptions for buprenorphine, naloxone, needle exchange services, and educational resources. Patients do not need insurance to access the van's services.



MOBILE HEALTH UNITS *COLORADO*

The Colorado Department of Human Services, Office of Behavioral Health operates six mobile health units in rural and underserved areas of Colorado. A nurse, a licensed SUD counselor, and a peer recovery coach are on each RV, and the individuals that operate the units come from four different clinics across the state. A doctor who can prescribe buprenorphine is available to patients via

telemedicine. Additionally, the RVs provide naloxone and referrals to treatment services. Some of the RVs also provide needle disposal services.

THE STIGMA CRUSHER *GREATER CHICAGO AREA, IL*

The Stigma Crusher is an MOV developed by Live4Lali, a non-profit organization that works to reduce stigma and prevent SUD in the Greater Chicago Area. The project is designed to provide peer support and harm reduction services throughout suburban Chicago. The staff on the Stigma Crusher counsel patients on various recovery methods and help refer patients to local treatment and recovery resources. The van also provides, naloxone, fentanyl test strips, safe consumption supplies, safe sex supplies, pill and needle disposal, and toiletries, food, and clothing.

TEEN VAN *SAN FRANCISCO, CA*

Stanford Children's Health operates the Teen Van, which provides care to high-risk kids and young adults ages 10 to 25. The van makes scheduled visits to schools and shelters in Santa Clara, San Mateo, and San Francisco counties to provide medical care to underserved individuals. The program is staffed by an adolescent medicine physician, a nurse practitioner, a social worker, and a dietitian. On board the van, patients can receive STD testing, HIV counseling and testing, SUD counseling and treatment referrals, mental health counseling and treatment referrals, and risk behavior reduction counseling. The social workers also provide group classes on drug and alcohol education. All services and medications are provided at no charge to the patients.

CONCLUSION

These nine examples represent only a handful of the MOVs across the country. As harm reduction practices and telemedicine services continue to expand, so will the number of MOVs in communities. While MOVs feature different levels of services depending on funding, area resources, and local laws, they all have the same mission: to provide compassionate support and care to those in their community affected by SUD. By providing medical, social, and harm reduction services directly to people who might not be able to

otherwise access these services, MOVs offer those with SUDs an opportunity for treatment and recovery.

RESOURCES

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ABOUT LEGISLATIVE ANALYSIS AND PUBLIC POLICY ASSOCIATION

The Legislative Analysis and Public Policy Association (LAPPA) is a 501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

LAPPA produces up-to-the-minute comparative analyses, publications, educational brochures, and other tools ranging from podcasts to model laws and policies that can be used by national, state, and local criminal justice and substance use disorder practitioners who want the latest comprehensive information on law and policy. Examples of topics on which LAPPA has assisted stakeholders include naloxone laws, law enforcement/community engagement, alternatives to incarceration for those with substance use disorders, medication-assisted treatment in prisons, and the involuntary commitment and guardianship of individuals with alcohol or substance use disorders.

For more information about LAPPA, please visit: <https://legislativeanalysis.org/>.