

Room Code 3006

The Clinic Comes to You

Removing Barriers with Mobile Behavioral Health



Disclosure to Learners

2026 Texas Council Conference

June 10-12, 2026



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Successful Completion

To successfully complete this activity, you must:

- Miss no more than 15 minutes of the activity or each session.
- Complete and submit the post-activity evaluation.



Texas Department of State
Health Services

Continuing Education

Continuing education is approved for these professions:

- Nurses (NCPD)
The Texas Department of State Health Services Continuing Education Program is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.
The Texas Department of State Health Services Continuing Education Program has designated a maximum of 6.00 contact hours of Nursing Continuing Professional Development.
This activity is a Joint Providership between The Texas Department of State Health Services Continuing Education Program and Texas Council of Community Centers.



Texas Department of State
Health Services

Continuing Education

Continuing education is approved for these professions:

- Licensed Psychologists (LP)
- Physicians (CME)

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Texas Medical Association (TMA) through the joint providership of The Texas Department of State Health Services Continuing Education Program and Texas Council of Community Centers. The Texas Department of State Health Services Continuing Education Program is accredited by TMA to provide continuing medical education for physicians.

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Health Services

Commercial Support & Disclosure of Conflict of Interest

This event received no commercial support.

Michael Weaver has received research funding from Novo Nordisk and Eli Lilly.

All financial relationships listed have been mitigated. No other speakers or planning committee members for this educational activity have financial relationships to disclose.



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The speakers did not disclose the use of products for a purpose other than what it had been approved for by the Food and Drug Administration.



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Presenters

Ryan McDaniel, Practice Administrator

Christopher Esparza, Team Lead

Dawn McKenna, Psychiatric Mental Health Nurse Practitioner

Roman Icaro, Registered Nurse

Meet James

Grew up in Houston's Third Ward Historic

Oldest of three siblings

Raised primarily by his mother

Father inconsistently present, struggled with substance use

Attended local public schools

Frequent absences due to responsibilities at home

Early mental health symptoms went unrecognized and untreated during childhood



Meet James

First psychiatric hospitalization in mid 20s and difficulties keeping employment

By mid 30s, a combination of untreated mental illness, alcohol use, and job instability led to eviction and eventual homelessness

He is warm and engaging when he feels safe

He loves 90s hip-hop and R&B

If he finds a broken radio, bike, or fan, he'll try to repair it



Meet James

Age: 47

Housing Status: Chronically unhoused, intermittently staying in shelters and sleeping outdoors

Medical/Behavioral Health History: Diagnosed with Schizoaffective Disorder , Co-occurring alcohol use disorder, Hypertension (untreated)

Insurance Status: Uninsured / intermittently eligible but not enrolled

Support System: Limited; estranged from family

Pattern of Service Utilization

- 10+ emergency department visits in the past 6 months
- 3 psychiatric hospitalizations in the past year
- Frequent EMS calls for: Intoxication, disorientation, non-specific medical complaints

Introduction & Context

- Behavioral health disparities among unhoused populations
- High rates of untreated mental illness
- Overreliance on emergency services
- Mobile care as a solution

Barriers to Care

- Transportation & distance
- Documentation & scheduling
- Mistrust & stigma
- Competing survival needs

Why Mobile Care Works

- Increases engagement
- Improves continuity
- Reduces ED utilization
- Supports early intervention

Financial



- Fundraising – van purchases, staff salaries
- Grants – staff salaries
- Reimbursement for services

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Every

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living in rural areas, or have
other barriers to care.

W

The “Fancy” Van

- Designed by Vandoit
- Ford Transit T350 chassis
- Solar power
- Starlink satellite internet
- Mobile water supply
- Gasoline heating system
- Onboard battery supply



Launch

- Social Media
- Turn the Key event
- Outreach to community partners
- Equipment testing
- Hiring and training
- Site visits and planning
- Ramp up schedule



Mobile Clinic Services

- Screening & assessment
- Medication management
- Crisis intervention
- Case management
- Service sites: shelters & community resource sites

Team Structure



Team Lead (QMHP)

Intake Specialist (QMHP)

Psychiatric Mental Health NP

Registered Nurse

Manager



Mobile Behavioral Health Clinic

Integral Care's mobile clinic brings mental health services directly to individuals across Austin and Travis County. This innovative program eliminates barriers to care by providing critical outreach, screenings, and treatment to people who might otherwise go without support.

By integrating mobile services into our broader system of care, we are strengthening crisis response, improving long-term stability for those we serve, and ensuring that more individuals remain connected to critical support.

What Makes Us Different:

- Same-day intake and psychiatric evaluation (when indicated)
- No need to travel—services come to your location
- Support from a licensed behavioral health nurse practitioner
- Connection to long-term, ongoing care

Key Services We Provide:



Comprehensive
Intake
Assessments



Initial
Psychiatric
Evaluations



Ongoing
Behavioral Health
Skills Training



Medication
Management &
Reviews

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512-472-HELP (4357)

IntegralCare.org

A Day in the Life

- Outreach & engagement
- On-site intake
- Same-day medications
- Warm handoffs



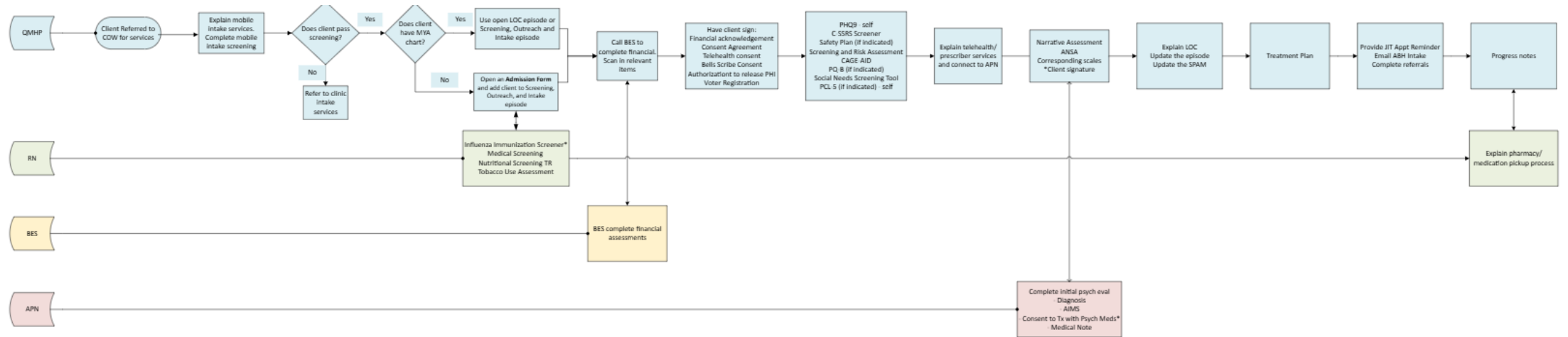
Mobile Clinic Intake Explained

- The mobile clinic provides a private space to assess an individual's clinical needs in the community
- Typical services for a new client last from 1-2 hours and may include:
 - A thorough history of an individual's mental health by a mental health practitioner
 - A psychological evaluation and diagnosis by a licensed provider
 - A prescription for psychiatric medications
 - Follow up appointments at a local mental health clinic
 - Referrals to other resources/services

Intake Screening Questions

- Have you had a fever of over 100.4 degrees in the last 48 hours?
- Do you get claustrophobic sitting in a small-enclosed space?
- Do you have problems sitting for 1-2 hours?
- Have you been drinking or using any substances today?
- Are you carrying any weapons? If yes, will you allow us to store it for you while we meet?

Mobile Clinic Intake Flowchart



Challenges

- Medical emergencies
- Behavioral emergencies
- "Competing" with other services
- Other emergencies on site
- Weather

Community Partner Sites

- Sunrise Homeless Navigation Center
- Trinity Center
- The Charlie Center
- Marshalling Yard
- Northbridge Shelter
- The Other Ones Foundation's Esperanza Community
- RBJ Senior Residences



Other Events



Quotes from Community Partners

- "They meet people where they are and provide them the space and warmth needed for our neighbors to have those tough conversations around mental health"
- "Through same-day assessments, psychiatric support and crisis intervention, the Clinic on Wheels has helped us better address the complex mental health challenges many of our participants face"
- "Their staff are compassionate, professional, and really connect well with people experiencing homelessness. Since they have been on site, we've seen clients become more engaged with mental health services and more willing to seek support when needed. Their partnership has truly made a positive difference for both our clients and our staff."
- "Christopher and his team have been a weekly presence during our morning services throughout the past year, and the impact has been amazing. As a busy homeless navigation center, we are often unable to take the time needed to get our unhoused neighbors the mental health services they need. The regular presence of the mobile clinic has allowed neighbors to gain access mental health services that were otherwise unavailable to them. They have become an invaluable part of what we offer each week, and we cannot wait to continue our collaboration with them!"

Services

- 822 services
- 417 clients served
- 56 intakes

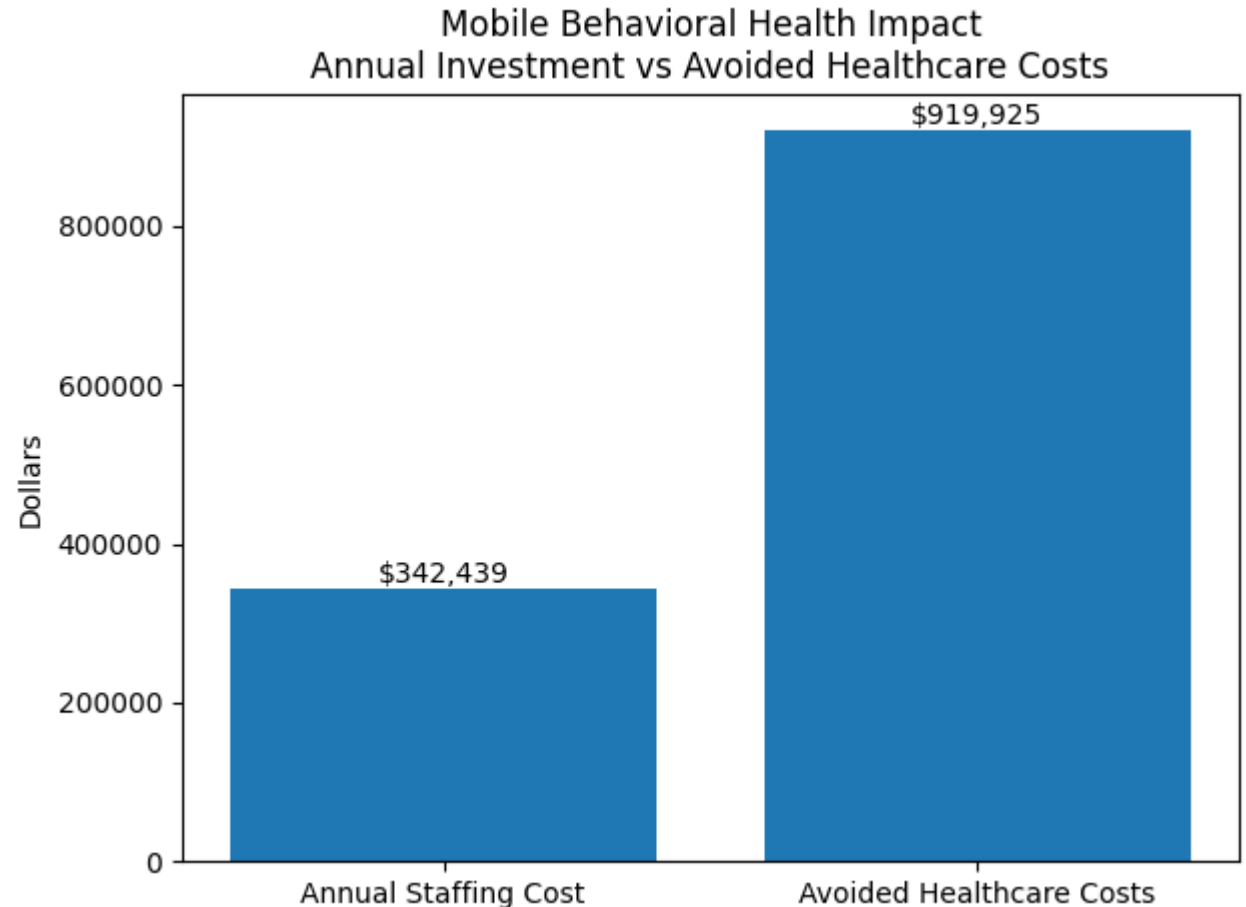


Clinic on Wheels Impact

~\$14,153 saved per person
within 12 months

~\$919,925 avoided healthcare
costs annually

Annual staffing cost: \$342,439





Community Impact

Reduced disparities

Improved system efficiency

Increased access



Meet James

Initial Contact:

Mobile team encounters James at a shelter/community resource site

Engagement is informal, low-pressure

First Visit:

Intake Specialist completes assessment on-site

RN conducts basic medical screening

PMHNP evaluates psychiatric symptoms



Meet James

Immediate Support:

- Initiation of psychiatric medication
- Brief psychoeducation
- Coordination with community partners
- Connection to other resources

Follow-Up:

- Mobile team returns regularly to same site
- Builds rapport over time
- Fills/bridges gaps in care
- Gradual engagement in ongoing care



Meet James

Outcomes Over Time (Example Trajectory)

Accepts consistent medication support

Reduction in acute psychiatric symptoms

Decrease in emergency department visits

Increased trust in providers

Eventually linked to outpatient services



Conclusion

- Meet clients where they are
- Mobile care improves engagement
- Opportunity for system change

Peer-Reviewed Research

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Questions?