Objectives

1. Review the history and background of mobile clinics.
2. Discuss the role and purpose of mobile health clinics.
3. Examine the value of mobile healthcare.
4. Discuss the Texas Children’s Mobile Clinic Program.
The American Ambulance Field Service
Paris 1914-1917

UK 1940s

• Mass radiography equipment could be installed in a van

• Allowing readily accessible TB screening to the public

The Mississippi Health Project

- Alpha Kappa Alpha (AKA)* established nation’s first mobile health clinic
- Provided relief to 15,000 Negroes plagued by famine and disease in the Mississippi Delta
- Active each summer from 1935 to 1942
- Became the model for agencies and other organizations

*founded in 1908; first Negro Greek-letter sorority of college coeds at Howard University.
Source: http://aka1908.com/about/history
American Red Cross supplying food and tea
Plymouth 1940s

Mobile health units: ambulatory health services reach isolated populations

Source: www.icrc.org. © ICRC, May 2006 Cover photograph: Carlos Rios/ICRC 0886/001;002 10/2006 1,000
Mobile health clinics serve vulnerable populations in Iraq

- urgently needed clinics from WHO sent to parts of Iraq
- address health needs of displaced populations with limited access to health care:
  - camps, informal settlements, urban and remote areas across the country.

Source: Al-Motakamleh 12 December 2014 [website of the WHO Eastern Mediterranean Regional Office](http://www.who.int)
Role and Purpose
Mobile clinics are an essential element of the healthcare system

• Provide accessibility

• Serve vulnerable populations

• Promote high-quality care at low cost

Mobile clinics provide value

• As of 2013, an estimated 1500 – 2000 mobile clinics received 5 million visits nationwide/year.

• improved access for vulnerable populations

• bolstered prevention and chronic disease management

• reduced costs

Estimated number of visits to mobile health clinics in the U.S. annually

Average number of visits annually \( \times \) Total number of MHCs = Total visits to MHCs across US

\[
\begin{align*}
\text{Avg no. of visits annualy} & \quad 3301 \\
\text{Total no. of MHCs} & \quad 1500-2000 \\
\text{Total visits to MHCs across US} & \quad 5 - 6.5 \text{ million}
\end{align*}
\]

*Average number of annual visits based on reports from 243 mobile clinics that reported this data. Source: Mobile Health Map: Report for the U.S. Department of Health and Human Services. Office of Minority Health. March 2013
Calculating the Return on Investment of Mobile Healthcare: Basic Algorithm*

\[
\frac{\text{E.R. Cost Avoided} + \text{Value of Quality Life} + \text{Years Saved}}{\text{Cost of Mobile Health Clinic}} = \text{R.O.I.}
\]

\[
\frac{($1,719,295 + $18,219,022)}{$565,700} = $35
\]

* All data based on 2008 Family Van Data and calculated values
Calculating Avoidable E.R. Visits

Total Visits \times \text{Percentage of visits expected to otherwise have resulted in an E.R. visit} = \text{number of mobile health visits that prevent an E.R. visit (E)}

4,848 \times 44\% = 2,133

E.R. Cost Avoided

\[
(A - B) \times E = F
\]

\[
(923 - 117) \times 2,133 = 1,719,295
\]

Summary

Mobile clinics have a critical role in providing

• high-quality

• low cost care to vulnerable populations.