

A Preliminary Inventory and Assessment of Health Care Facilities within Manhattan Community District 3

Presented to Manhattan Community Board 3
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Project Overview

People and Areas
to Highlight

Methodology

Initial Analysis

Summary

Project Overview - Tasks

To determine the demand for certain types of health care facilities within Community District 3

To create an inventory of health care facilities within Community District 3

To evaluate if current facilities meet the current demand, and where demand is unmet or saturated

To identify potential solutions to meet the demand

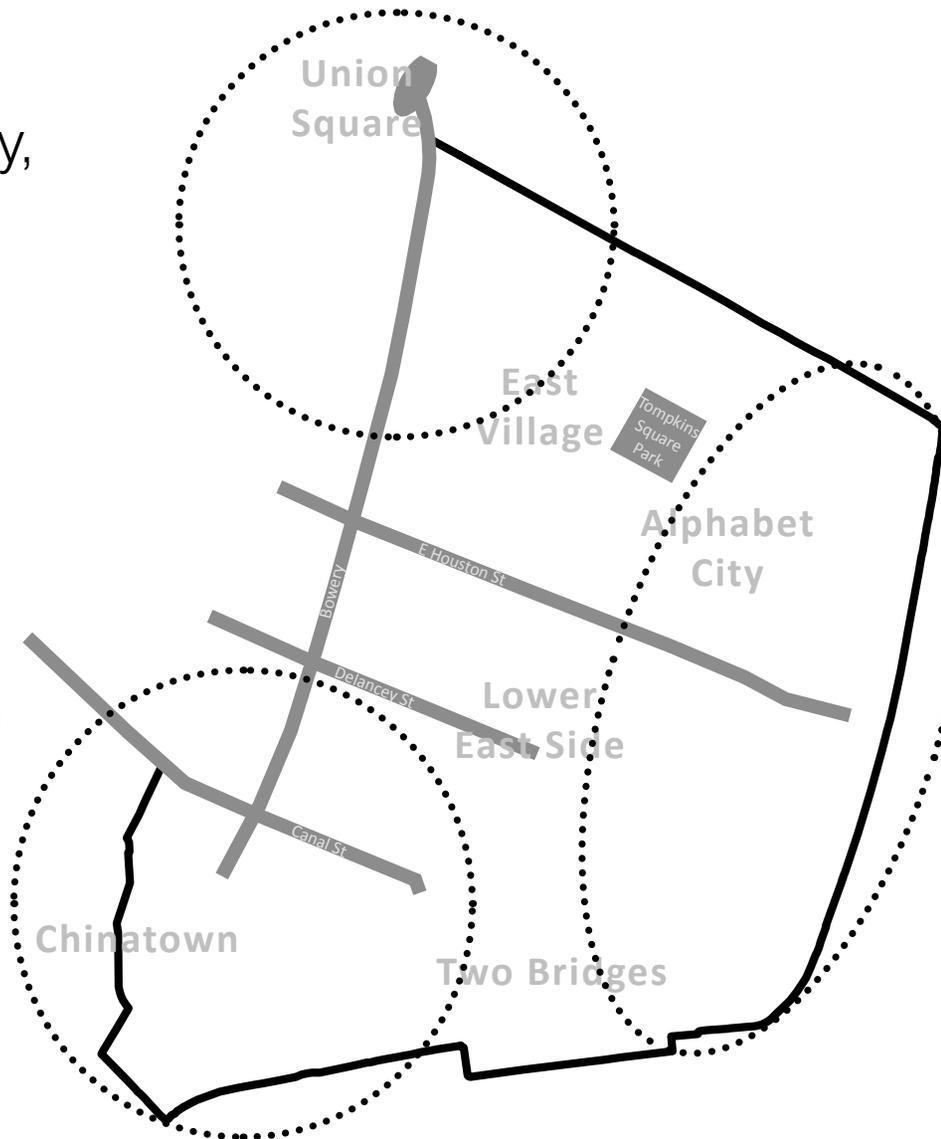
People and Areas to Highlight

Union Square:

Disability accessibility,
binge drinking

Chinatown/Two

Bridges: Care for the elderly, affordable care, disability accessibility, care for Chinese speakers, TB treatment and prevention, mental health services



East side: Care for Spanish speakers, STD care and education, binge drinking, affordable care

Methodology

Compiled lists from various sources

Developed a structure that allows for:

- Flexibility in analysis

- Breadth of issues

- Updatability

Facilities entered: 1629

Challenges

- Many specialized or hybrid service and facility typologies

- Definitions and categorizations

- Data was

 - Not standardized

 - Missing

 - Incorrect

 - Outdated

FACILITY TYPES

PRIVATE OFFICE (EXCEPT ALTERNATIVE)

RETAIL

SOCIAL SERVICES

ALTERNATIVE MEDICINE

HOME HEALTH SERVICE

SCHOOL-BASED HEALTH CENTER

COMMUNITY HEALTH CENTER

DIAGNOSTIC CENTER

MEDICAL LABORATORY

RESIDENTIAL FACILITY

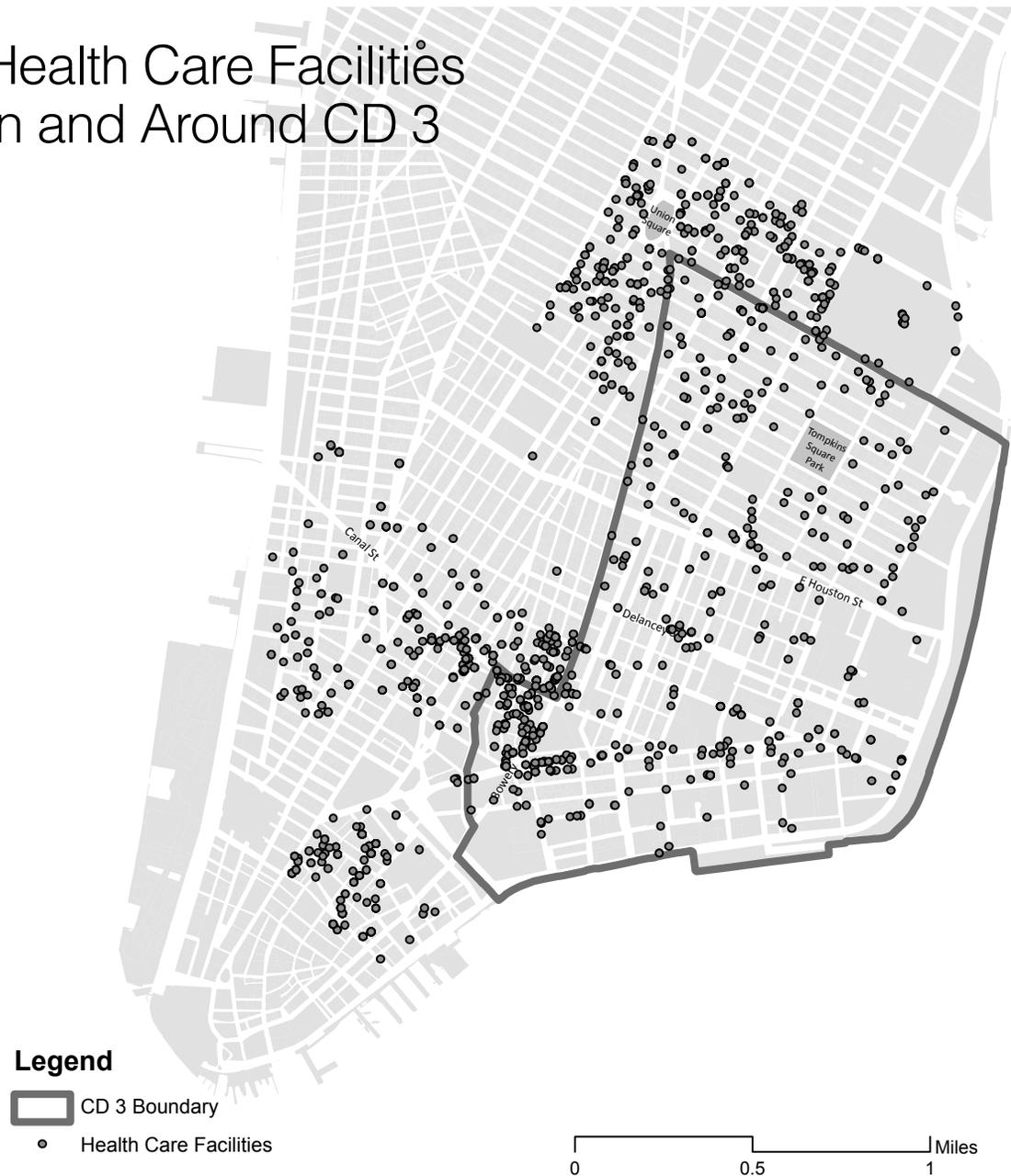
HOSPITAL

DIAGNOSTIC AND TREATMENT CENTER

HOSPITAL EXTENSION CLINIC

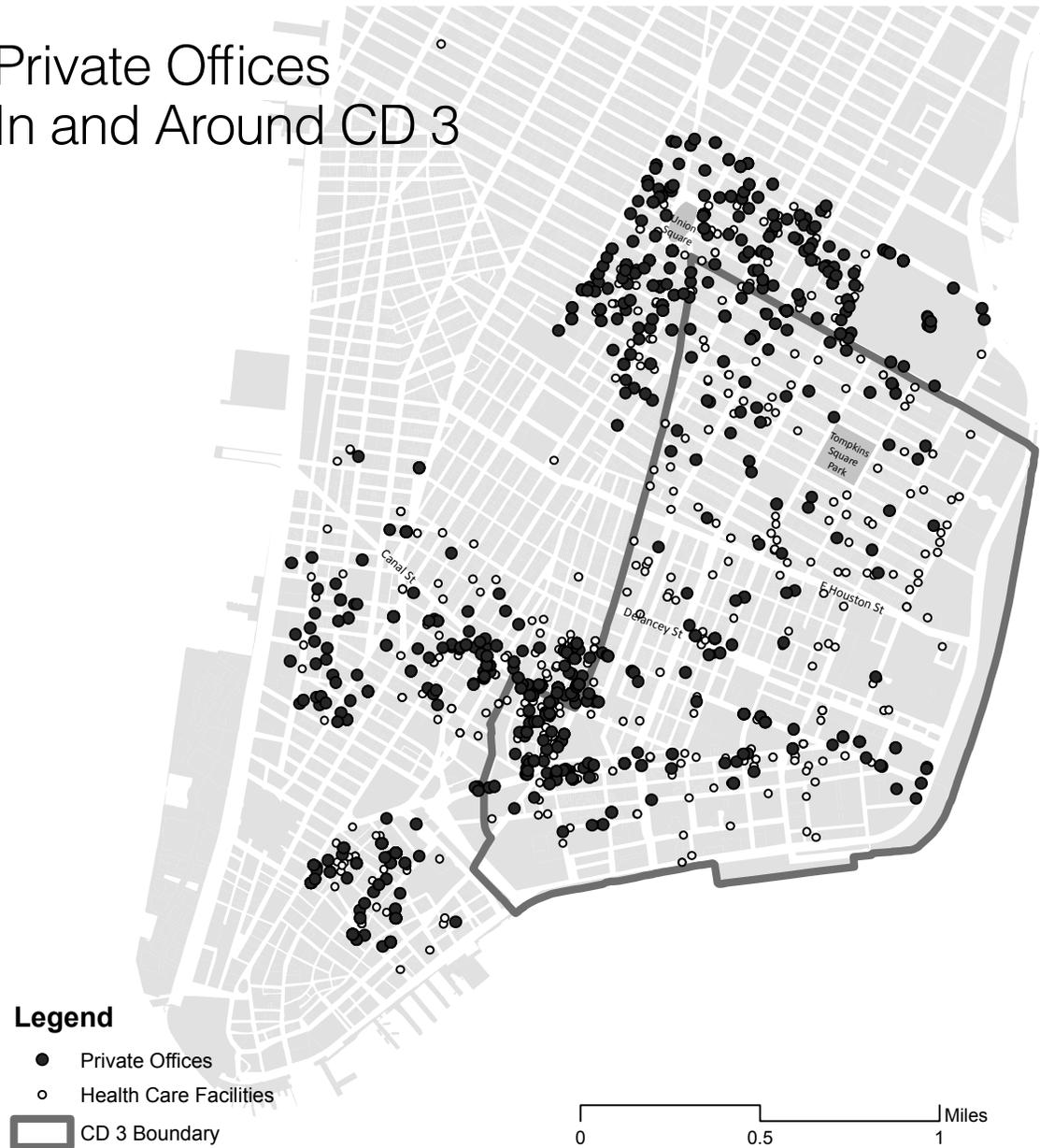
Initial Analysis

Health Care Facilities In and Around CD 3



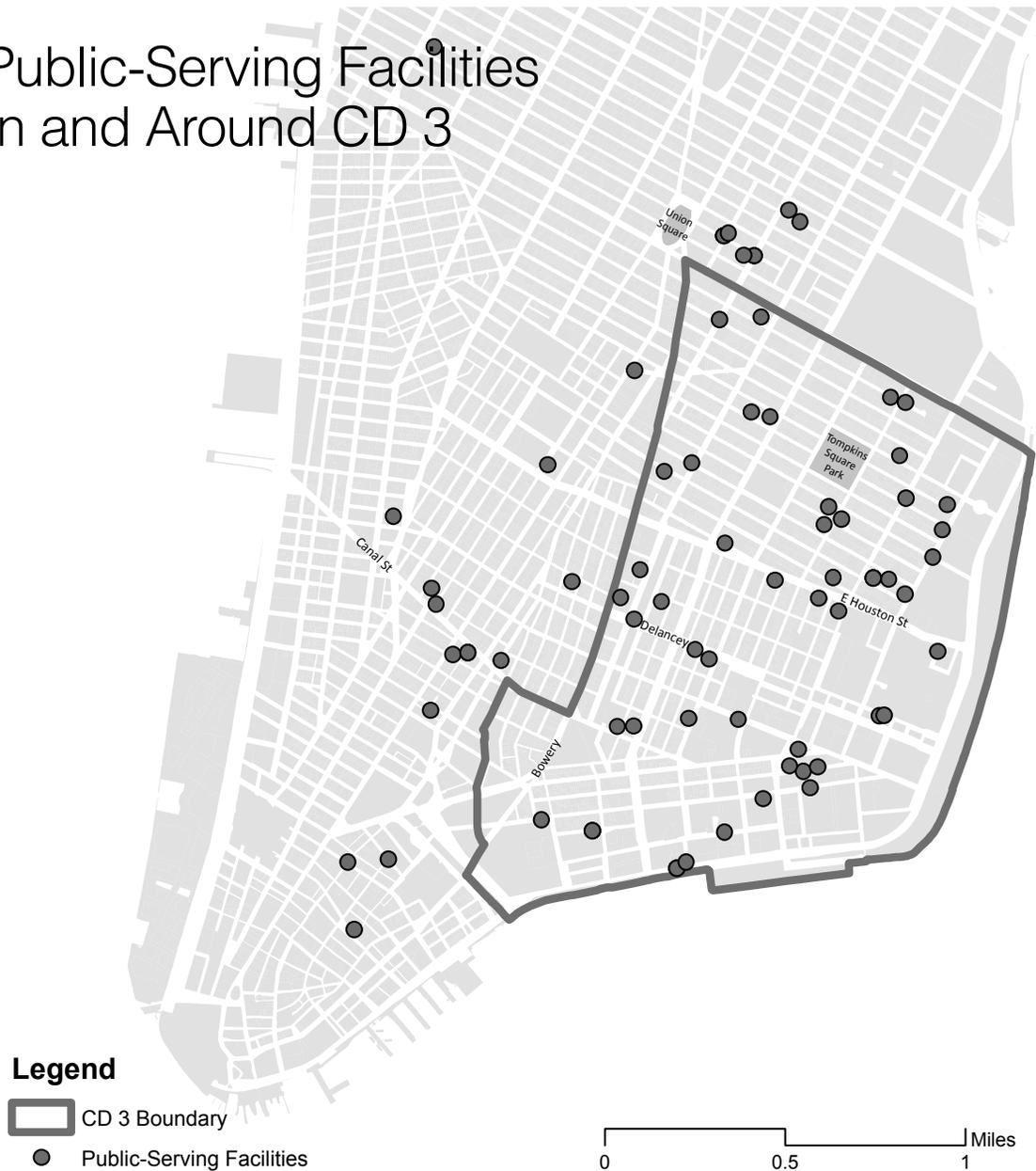
Initial Analysis

Private Offices
In and Around CD 3



Initial Analysis

Public-Serving Facilities In and Around CD 3



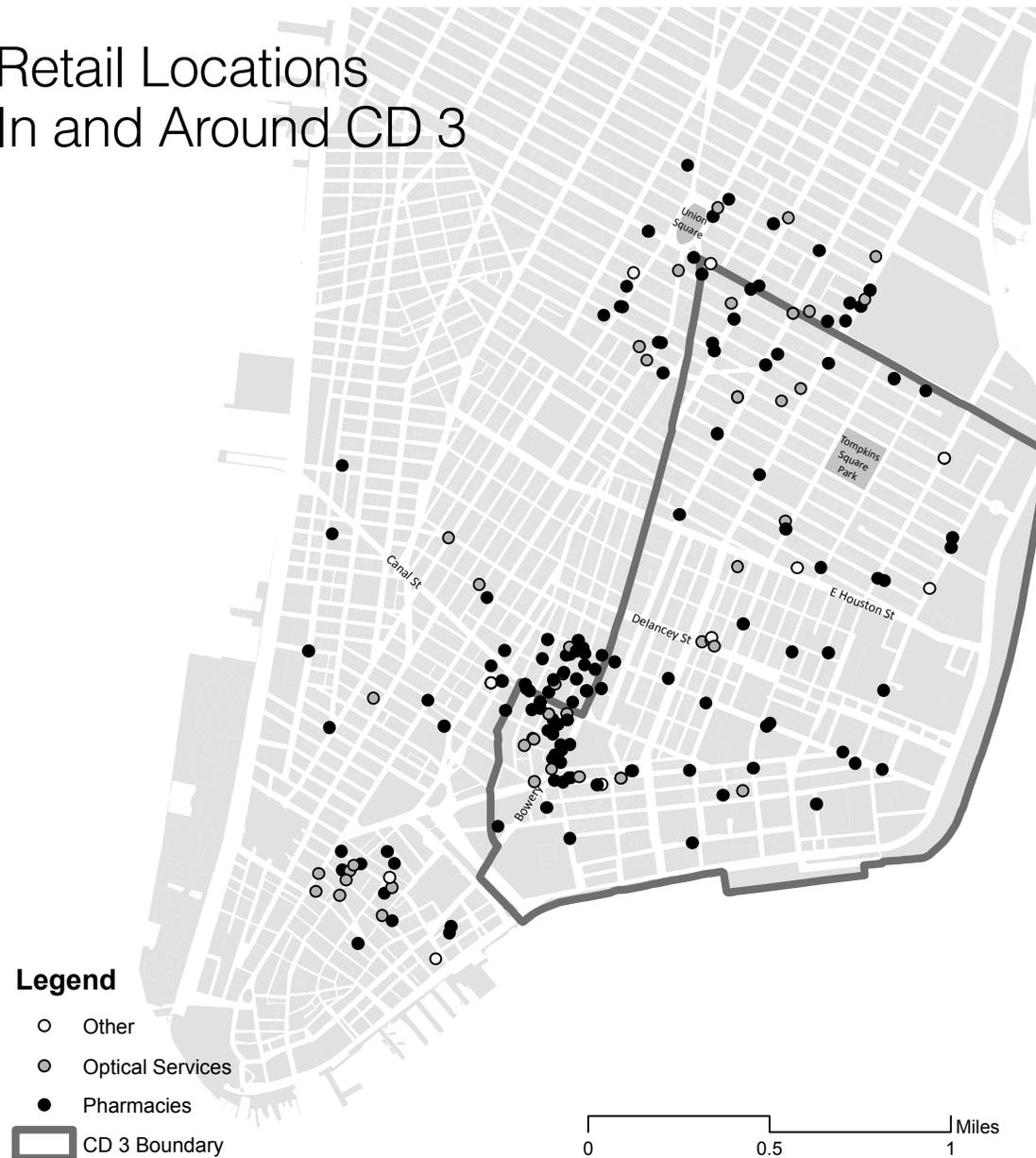
Initial Analysis

Alternative Medicine Locations In and Around CD 3



Initial Analysis

Retail Locations In and Around CD 3



PHASE ONE: ASSESS HEALTH CARE NEEDS

1. Chinatown/Two Bridges: low-income, low-education, high poverty, high percentage of Chinese population, older population

Care for elderly

Affordable care

Disability accessibility

TB care and education

Care for Chinese speakers

Mental health care

2. East side: high percentage of Hispanic population, low income

STD care and education

Binge drinking initiatives

Care for Spanish speakers

3. Union Square: most affluent area, with pockets of affluence in the middle and northwest, high educational attainment, high percentage of White population, younger population

Disability accessibility

Binge drinking initiatives

PHASE TWO: BUILD THE INVENTORY + CONDUCT INITIAL ANALYSIS

- 1. Facilities clustered in Union Square and Chinatown**
- 2. High proportion of small practices; mostly acupuncture in Chinatown**
- 3. Pharmacies scattered throughout the District; sometimes reaching places that do not have any other health care resources**
- 4. Public-Serving Facilities are scattered evenly throughout the District**

PHASE THREE: MAKE [POLICY] RECOMMENDATIONS

- 1. Investigate medical facilities as retail (may provide alternate insight into hospital closings/mergers and the increase of luxury construction in their places)**
- 2. Push for more city-wide research at the community district level**
- 3. Continuing pursuing research on health care behavior to further assess adequacy of resources - personal health care geography survey**