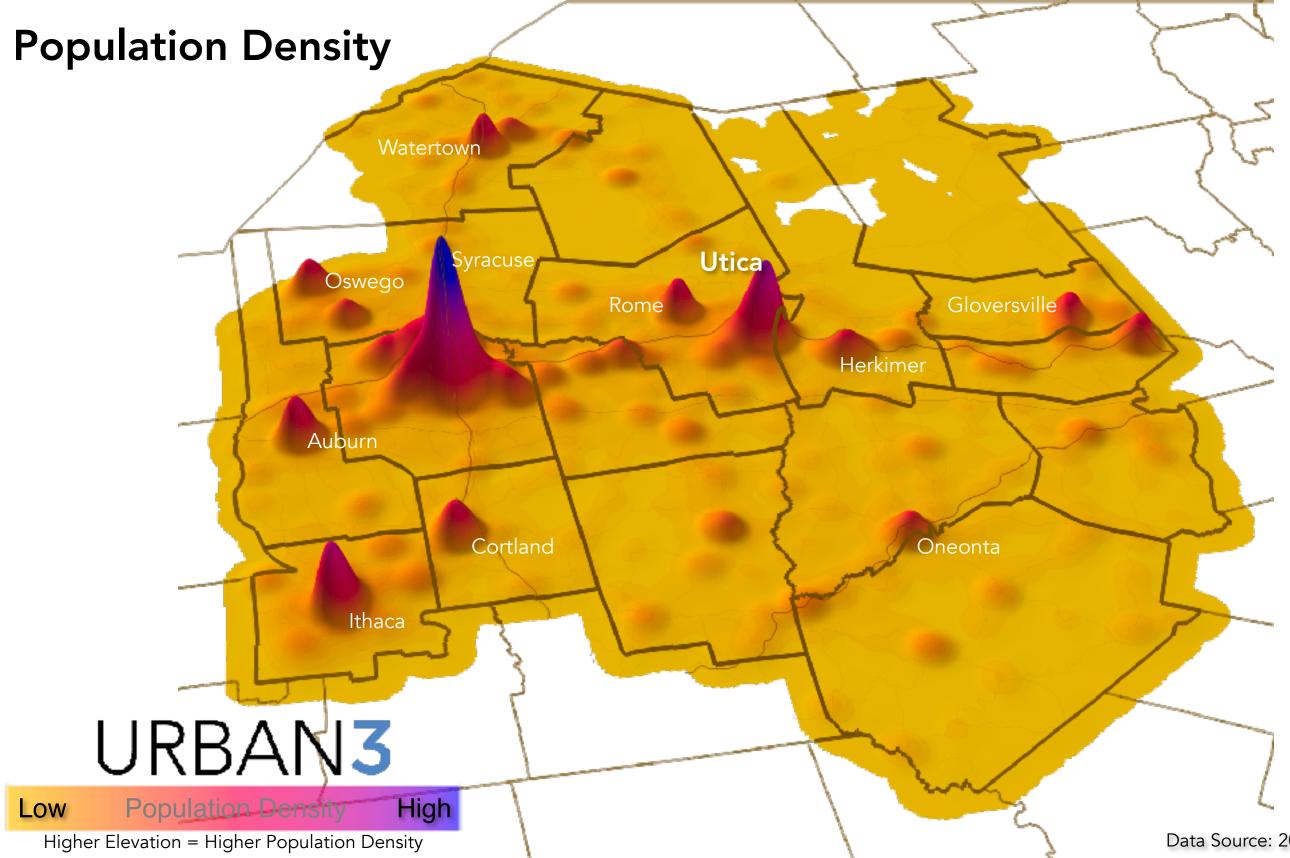
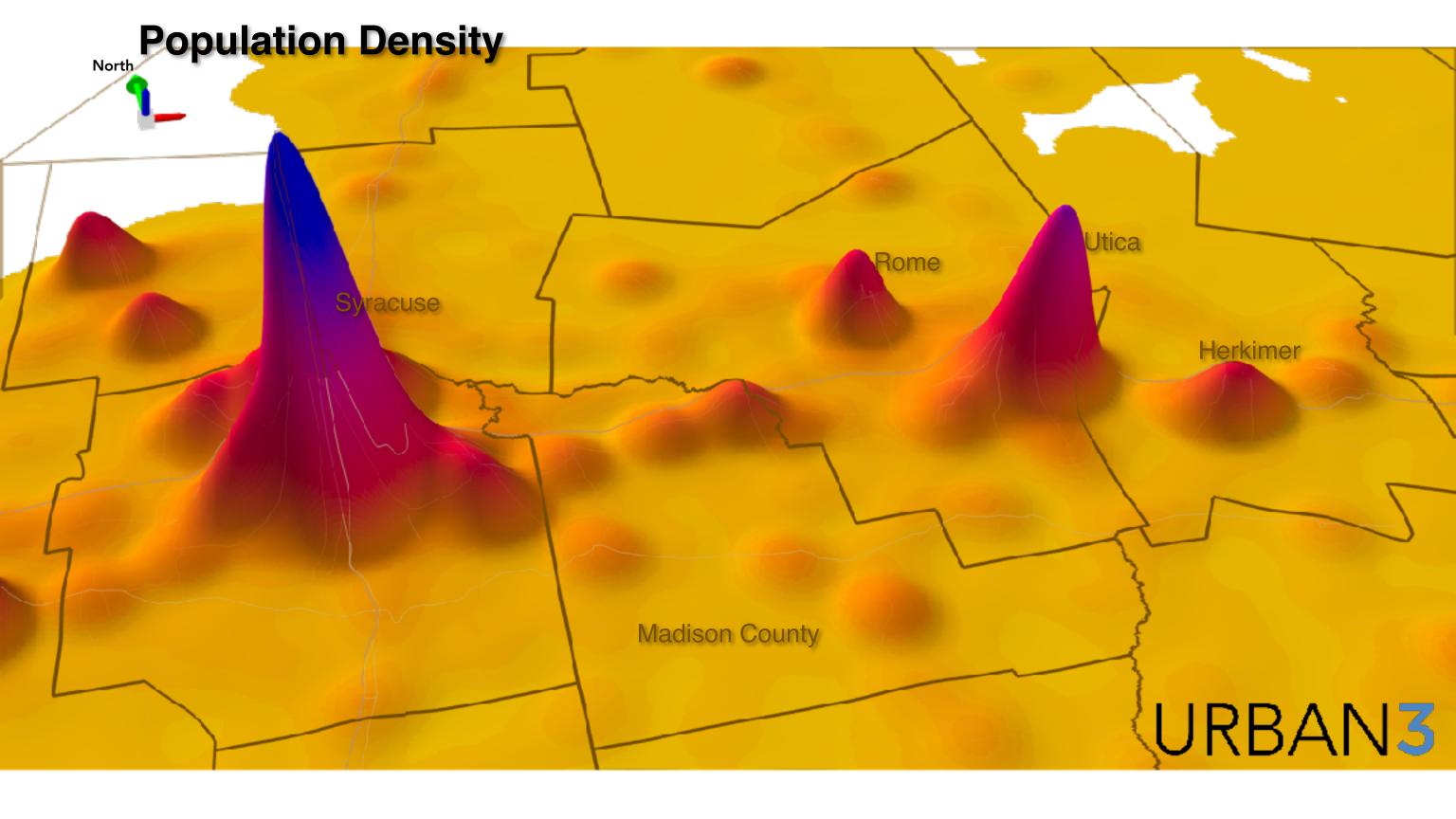
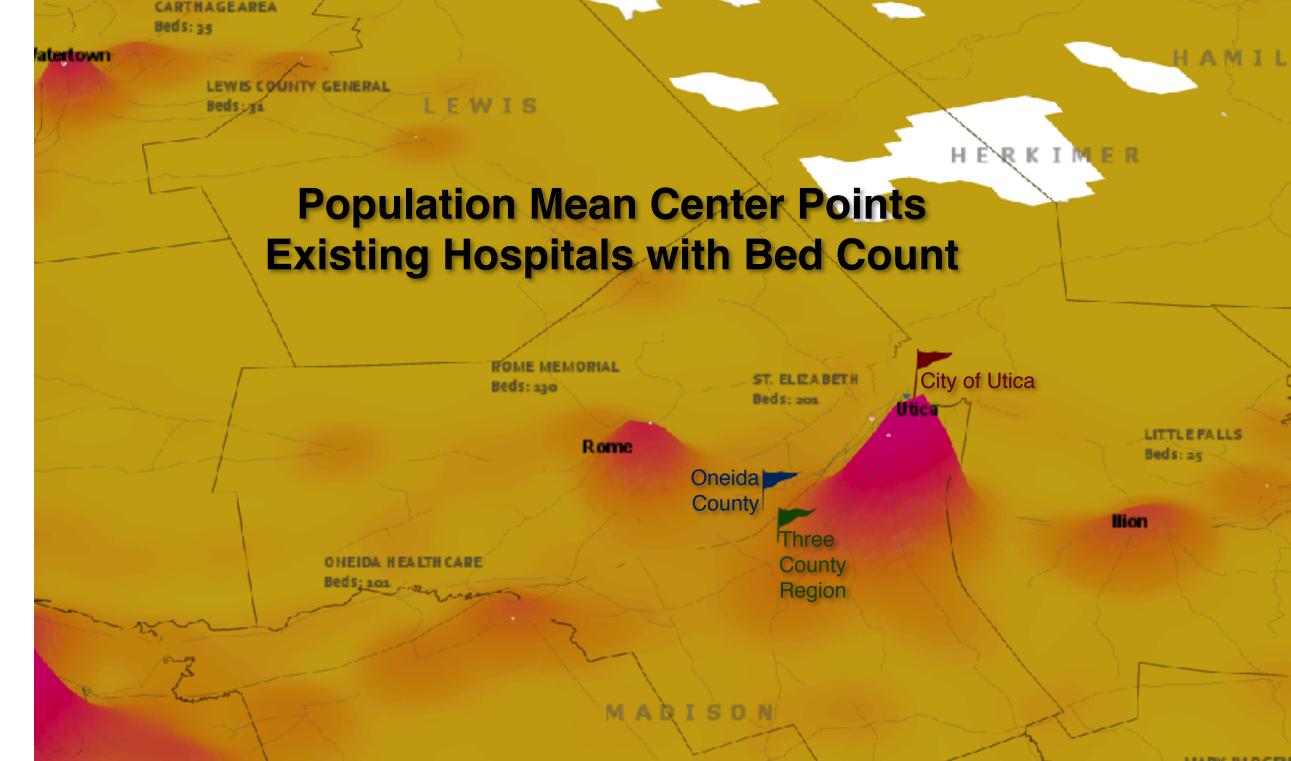
Utica Proposed Hospital Location Versus Population Centers

April 26, 2019 URBAN3









COMMUNITY MEMORIAL Beds: 25 MARY IM OGENE BASSETT HO SPITAL Beds: 100

3 County Region: Population Density and Center Points

Oneida

INCIDA HEALTHCARD Body: 101

Madison

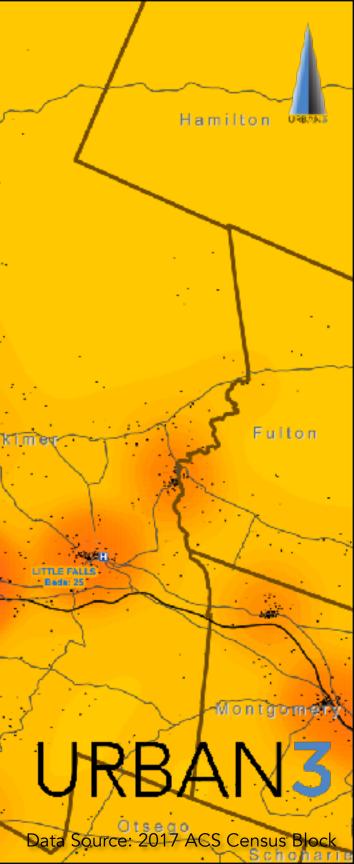
Oneida County Center Point

Three County Center Point

One Dot = 75 People

304

Onondaga 🚽



Oneida County: Population Density and Center Points

Oneida County Center Point

40.0

Three County Center Point

One Dot = 25 People

ladison

Data Source: 2017 ACS Census Block

URBAN3

Herkime

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Utica: Population **Density and Center** COLORY OF **Points**

Yoriville.

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100

Safrada

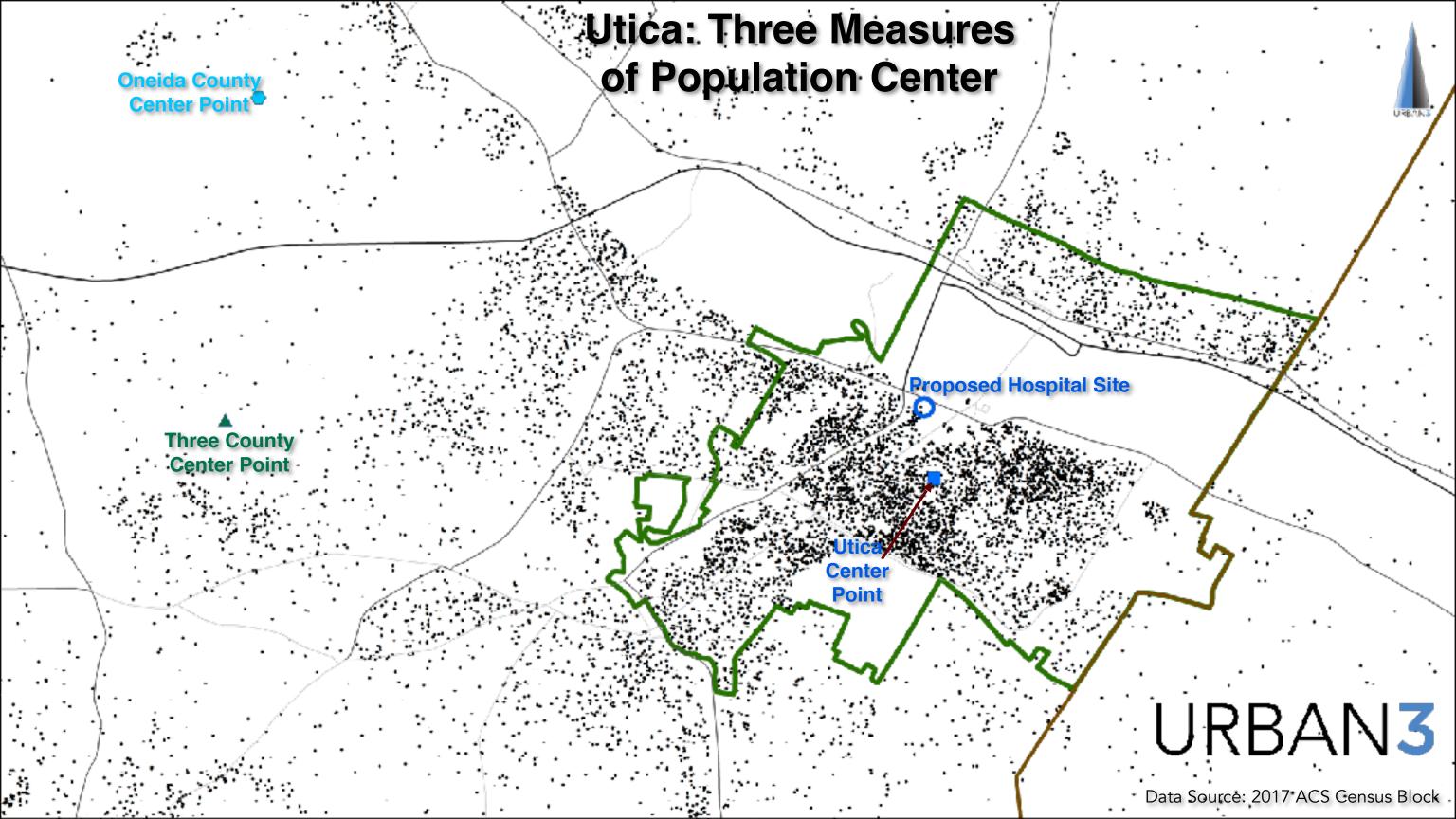
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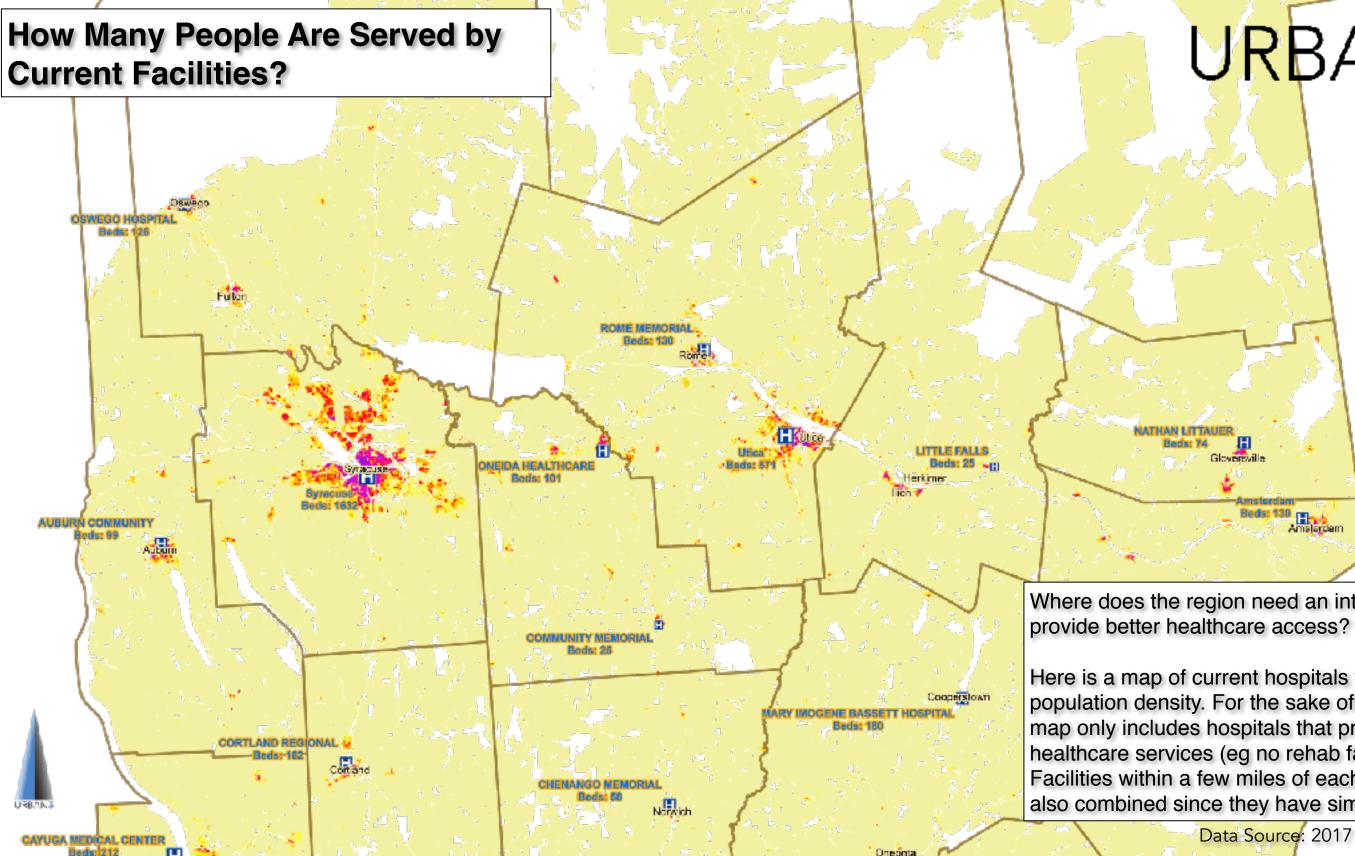
Willing Ville

tica C

One Dot = 15 People







URBA	<u>'</u>	13
251	2017	Pop/Acre
		< 1.000
		1.001 - 2.000
No. AN		2.001 - 3.000
		3.001 - 5.000
The start		5.001 - 7.000
174 📳		7.001 - 10.00
Gloversville		10.01 - 15.00
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		15.01 - 20.00
Beder 130		20.01 - 50.00
Amslandem		50.01 - 100.0
2018-2		100.1 - 2292

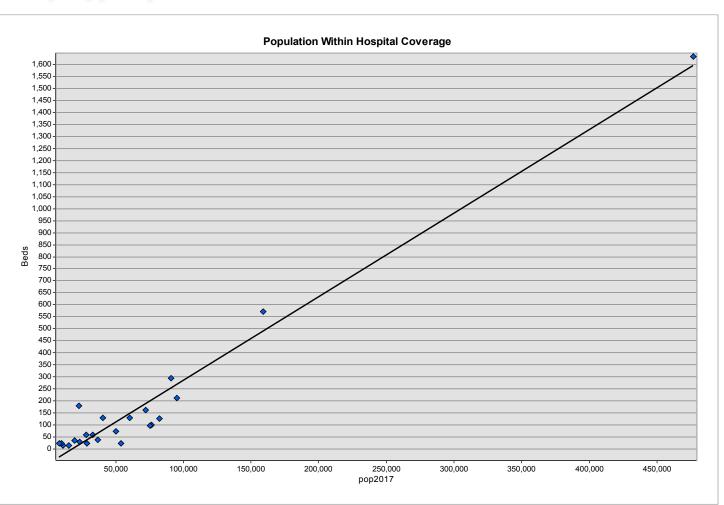
Where does the region need an intervention to

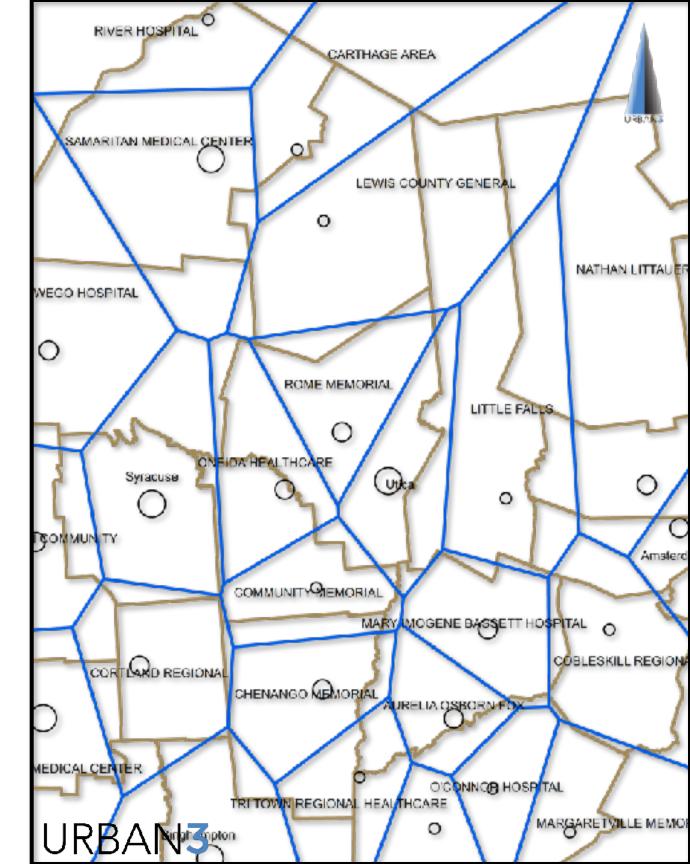
Here is a map of current hospitals versus 2017 population density. For the sake of analysis, this map only includes hospitals that provide general healthcare services (eg no rehab facilities). Facilities within a few miles of each other are also combined since they have similar coverage.

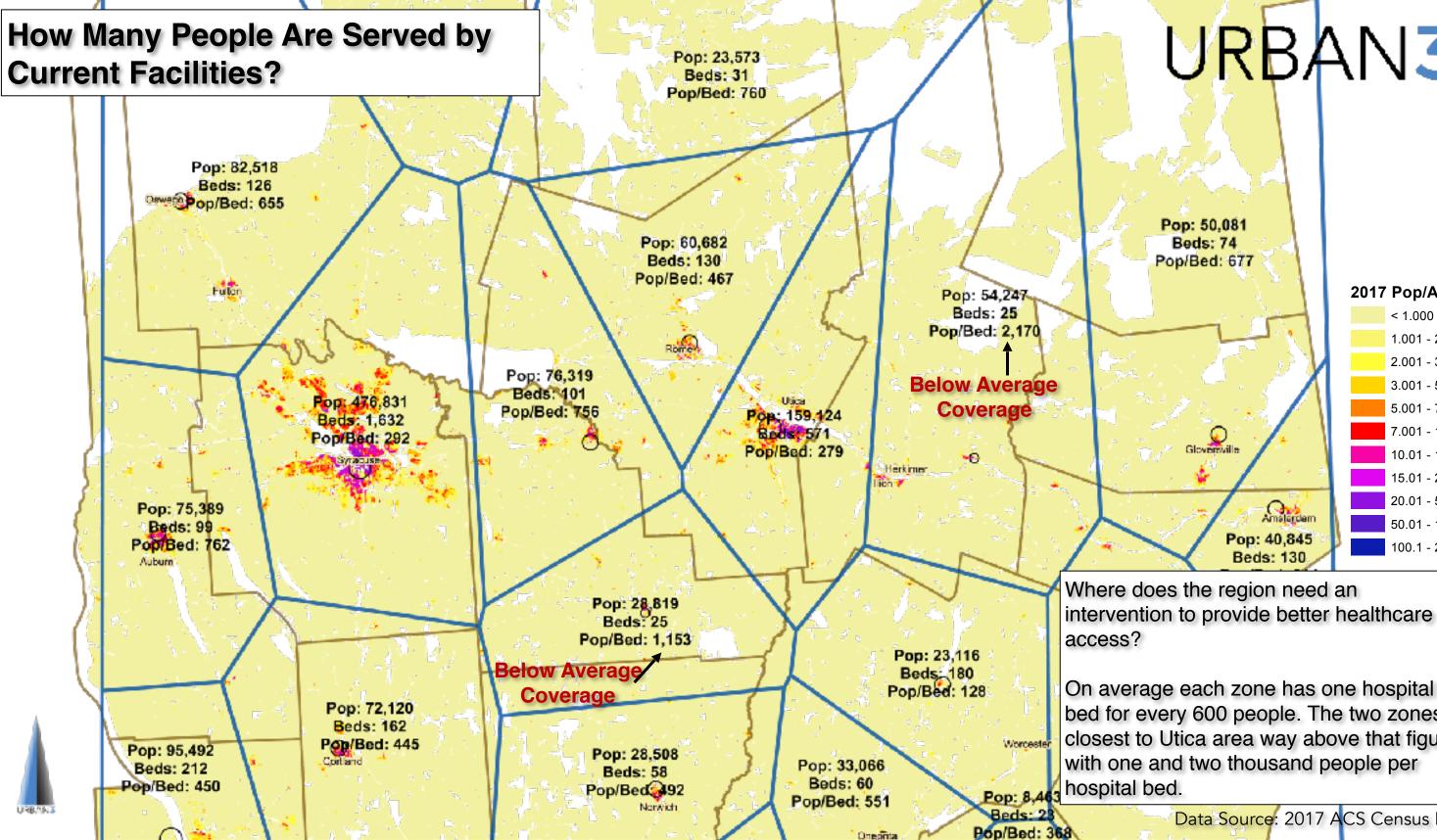
How Many People Are Served by Current Facilities?

Where does the region need an intervention to provide better healthcare access?

To test the distribution of hospital coverage we will look at the middle distance between medical centers in the region. Once we create these zones we can compare the number of hospital beds to the contained population. This should give us a baseline for understanding whether the region has gaps in coverage. This will also help us come up with ideas to decide how we could address possible issues. The efficiency of healthcare provision is at odds with a dispersed development pattern. Economies of scale favor a smaller number of large facilities but this leaves open the possibility that some communities are too far from sufficient coverage. Within each coverage zone some communities have more hospital capacity per capita than others.

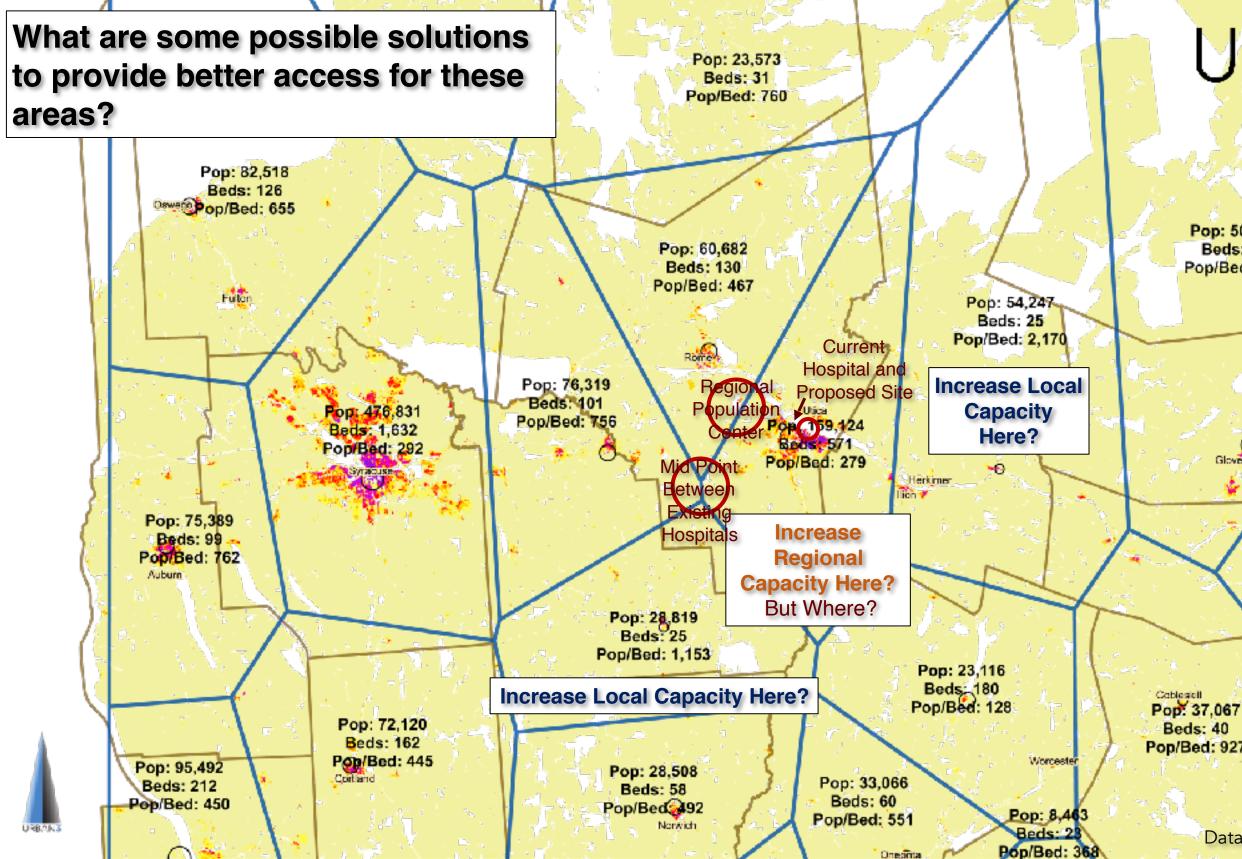






URB/	4N 3
Pop: 50,081 Beds: 74 Pop/Bed: 677	
Gioversville Amalerdem Pop: 40,845	2017 Pop/Acre < 1.000 1.001 - 2.000 2.001 - 3.000 3.001 - 5.000 5.001 - 7.000 7.001 - 10.00 10.01 - 15.00 20.01 - 50.00 50.01 - 100.0 100.1 - 2292
Beds: 130 es the region need	

On average each zone has one hospital bed for every 600 people. The two zones closest to Utica area way above that figure with one and two thousand people per



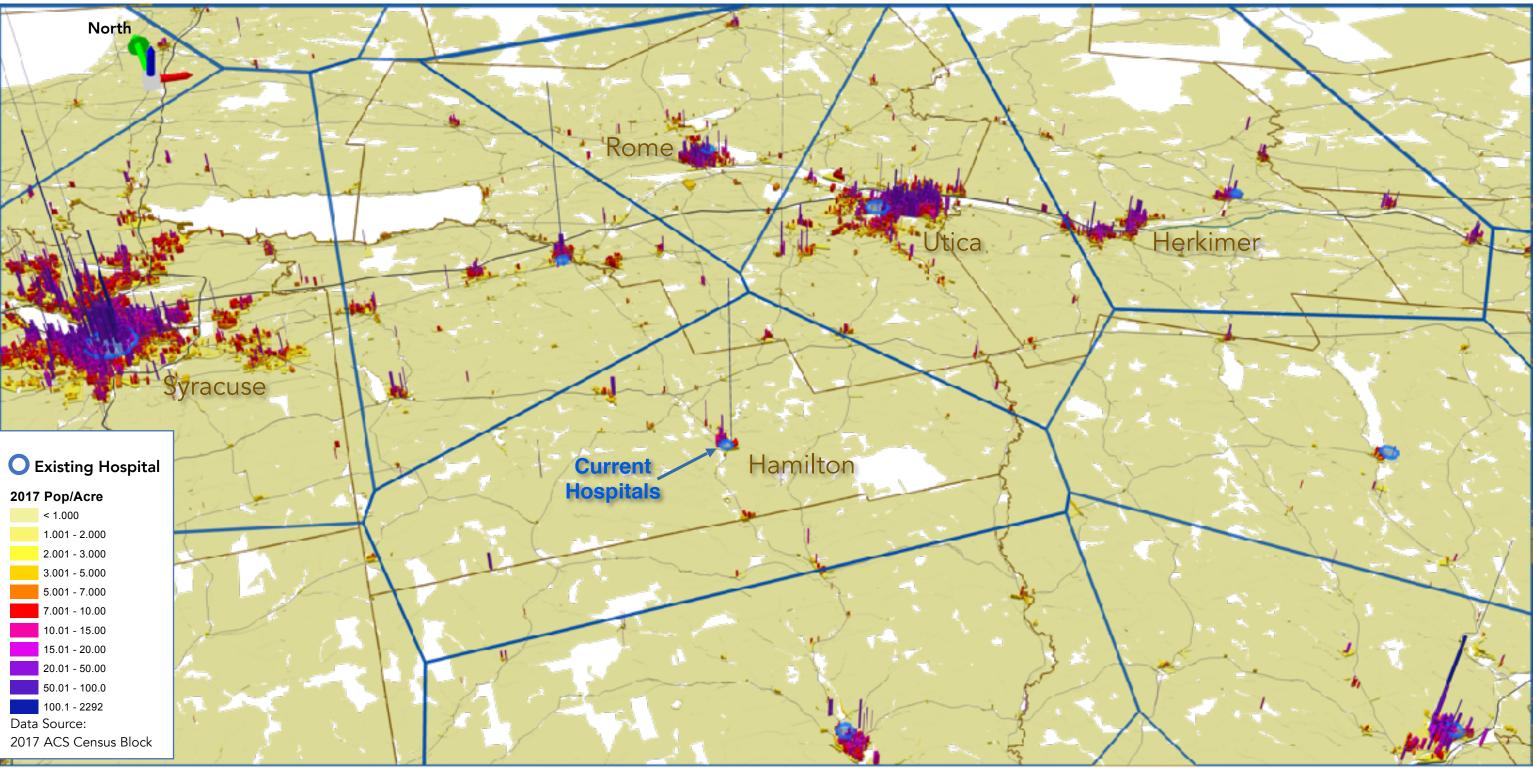
URBAN3

Pop: 50,081 Beds: 74 Pop/Bed: 677 Gloversville Amalardam Pop: 40,845 Beds: 130 2017 Pop/Acre Pop/Bed: 314

Pop/Bed: 927

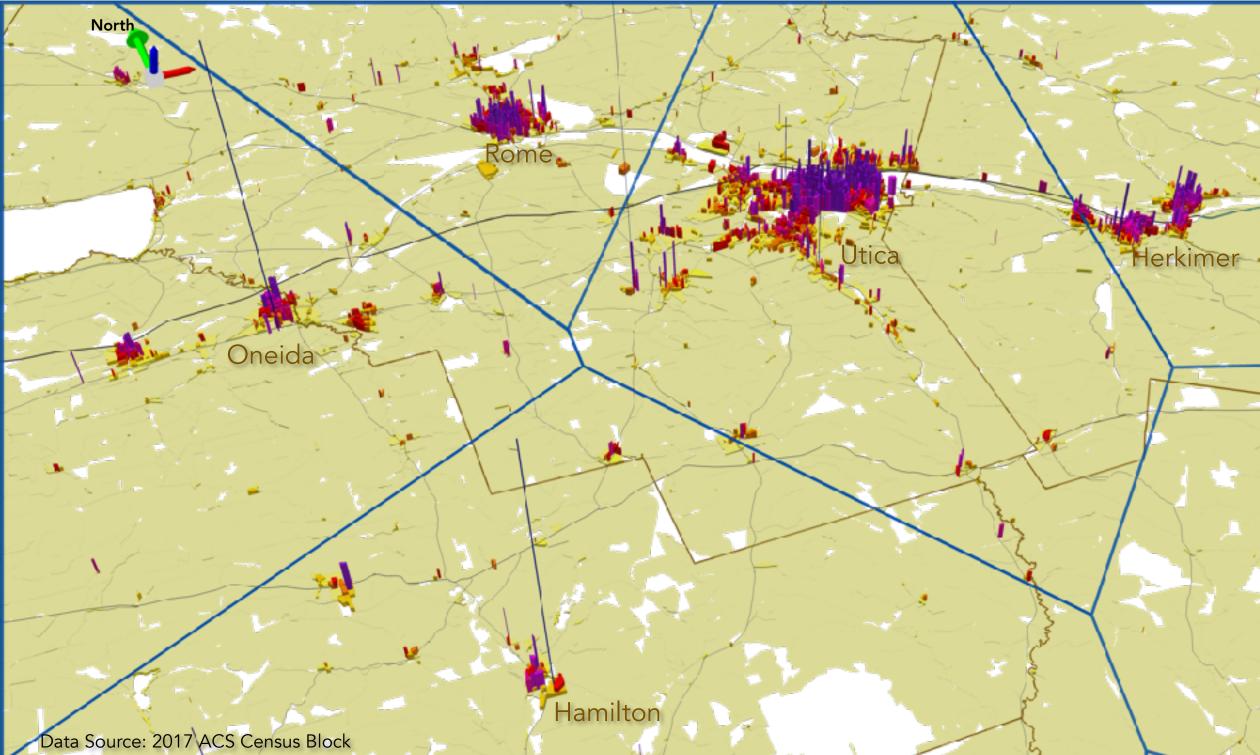
< 1.000 1.001 - 2.000 2.001 - 3.000 3.001 - 5.000 5.001 - 7.000 7.001 - 10.00 10.01 - 15.00 15.01 - 20.00 20.01 - 50.00 50.01 - 100.0 Data Source: 2017 ACS Census Black

Population Within Hospital Areas



URBAN3

Population Within Hospital Areas



URBAN3

2017 Pop/Acre

	< 1.000
	1.001 - 2.000
	2.001 - 3.000
	3.001 - 5.000
Ì	5.001 - 7.000
_	7.001 - 10.00
	10.01 - 15.00
	15.01 - 20.00
	20.01 - 50.00
	50.01 - 100.0
	100.1 - 2292