

GEOMAPPING SCHOOL CLINICS: ARE WE MEETING THE NEEDS OF OUR POPULATION?

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Background: Children who are medically underserved are more likely to receive care that is fragmented and only acute-illness focused. Fayette County, KY, has several census tracts that are designated by the Secretary of the Department of Health and Human Services as medically underserved areas (MUA). The Good Samaritan Nursing Center (GSNC) aims to address the special needs of medically underserved children in Fayette County by providing health services in three public school health clinics to students without medical insurance.

Purpose: The purpose of this study is to evaluate if the GSNC school-based clinics serve children who are medically underserved, thereby validating the need for school-based clinics. The GSNC services will be evaluated by (1) determining the percentage of students seen in the school clinics that live in underserved areas using geomapping software, and (2) investigate why students who do not live in the MUA still use the school clinics.

Methods: The ArcView© Geographic Information System (GIS) is a computer mapping system that links locations to information about them so you can display and analyze that information. Using this geomapping software, the addresses of students seen in the GSNC school clinics were plotted in the county census tracts. Census tracts highlighting the medically underserved areas of Fayette County, as designated by HRSA were also designated on the student address map.

Results: For the three schools that have GSNC clinics, 35% of the population lives in the MUA of Fayette County, ranging from 12% to 80% of individual school populations. While one of the schools does not appear close to the MUA, the school population is comprised of a majority of children (56%) on the free lunch program (meaning individually they are underserved). The other two schools also have a large proportion of students on the free lunch program (60% and 80% at these schools).

Conclusions: There are children in the school primary care clinics who come from areas of the county where there are no other services available to them. There are children who live in parts of the county that have health care services that are not available to the children seen in the school clinics because the children themselves live in poverty and are considered medically indigent. The school clinics serve not only as a safety net to children who have no other regular source of healthcare, but also as an entryway into the healthcare system for students through referrals to other healthcare agencies.