

# 2018 Regulatory Actions

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## Abortion Clinics

Prepared by the Agency for Health Care Administration  
pursuant to section 390.012(8), Florida Statutes



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## Introduction

In Florida, an abortion may only be performed by a physician in a licensed abortion clinic, licensed hospital, or in a physician's office<sup>1</sup>. All abortions, regardless of facility or procedure type, shall be reported to the Agency for Health Care Administration (Agency)<sup>2</sup>. The Agency is responsible for the regulatory oversight of abortion clinics and hospitals.

The Agency issues an abortion clinic license to applicants meeting the minimum requirements found in Chapter 390, Florida Statutes (F.S.) and Rule 59A-9, Florida Administrative Code (F.A.C.). Abortion clinics are authorized to perform procedures within the first trimester only, unless the additional licensure requirements for second trimester procedures are met. Third trimester abortions may only be performed in a hospital and only if specific requirements are met.

There were 56 licensed abortion clinics located in 17 counties as of December 31, 2018. Of these, 43 clinics were licensed to perform both first and second trimester abortions.

**Table 1 Licensed Abortion Clinics by Population<sup>3</sup> as of December 31, 2018**

County	County Population	City	City Population	1st Trimester Only	1st & 2nd Trimester
MIAMI-DADE	2,779,322	MIAMI	481,333	1	6
		HIALEAH	238,906	1	4
		CORAL GABLES	50,631	1	-
		NORTH MIAMI BEACH	45,612	-	1
BROWARD	1,897,976	FORT LAUDERDALE	182,827	1	2
		PEMBROKE PINES	165,352	1	-
		HOLLYWOOD	149,028	-	1
		MIRAMAR	137,107	-	1
		PLANTATION	89,595	1	-
		TAMARAC	64,663	-	1
PALM BEACH	1,433,417	WEST PALM BEACH	112,906	-	1
		BOCA RATON	93,417	1	-
		WELLINGTON	62,304	-	1
HILLSBOROUGH	1,408,864	TAMPA	378,531	-	6
ORANGE	1,349,597	ORLANDO	285,099	-	2
PINELLAS	970,532	ST PETERSBURG	266,076	-	3
		CLEARWATER	115,589	-	2
DUVAL	952,861	JACKSONVILLE	907,093	1	3
LEE	713,903	FORT MYERS	81,868	1	1
POLK	673,028	LAKELAND	105,586	-	1
SEMINOLE	463,560	ALTAMONTE SPRINGS	44,947	-	1
SARASOTA	417,442	SARASOTA	55,832	1	1
COLLIER	367,347	NAPLES	20,344	-	1
OSCEOLA	352,496	KISSIMMEE	72,369	-	1
ST. LUCIE	302,432	FORT PIERCE	43,326	-	1
LEON	292,332	TALLAHASSEE	192,381	1	1
ALACHUA	263,291	GAINESVILLE	131,217	1	1
MARTIN	155,556	STUART	16,425	1	-
<b>Totals</b>				<b>13</b>	<b>43</b>

<sup>1</sup> S. 797.03, F.S.

<sup>2</sup> S. 390.0112, F.S.

<sup>3</sup> Office of Economic and Demographic Research, "Florida Population Estimates for Counties and Municipalities: April 1, 2018, last accessed November 20, 2018.

## License Activity

### Applications

During the 2018 calendar year, the Agency received 54 abortion clinic applications. Three applications for initial licensure, 23 for license renewal, and 27 to change an existing license. One initial application was withdrawn due to failure to meet all of the licensure requirements, and 12 change applications were withdrawn by the applicant because they were submitted too far in advance of the proposed effective date. No abortion clinic changed ownership. The pending initial application was submitted by a licensee that had let their license lapse and has not yet satisfied all of the requirements to be reinstated.

**Table 2 Abortion Clinic Applications Received During the 2018 Calendar Year**

Application Type	Completed	Pending	Withdrawn
Initial	1	1	1
Renewal	22	1	0
Change	14	2	12
<b>Totals</b>	<b>37</b>	<b>4</b>	<b>13</b>

### Inspections

The Agency conducts an inspection for compliance with Chapter 390, F.S. and Rule 59A-9, F.A.C. prior to initial licensure and annually thereafter. The Agency also investigates complaints against abortion clinics and allegations of unlicensed activity.

The Agency conducted 53 licensure and seven complaint inspections during calendar year 2018. Deficient practice was identified during 14 of the licensure inspections and three of the complaint inspections. One complaint inspection was conducted at an unlicensed facility (medical office). The allegation of unlicensed activity was not substantiated, but the facility was cited for failing to report the termination procedures to the Agency. Refer to Table 3 for a list and frequency of the deficiencies identified during the year.

Upon notification of a deficiency, clinics are provided 10 calendar days to submit an acceptable plan of correction. The Agency reviews each plan to determine if the deficiencies are corrected. An acceptable plan was received timely for each cited deficiency.

**Table 3 Deficient Practice Cited During the 2018 Calendar Year**

Citation ID	Regulatory Reference	Description	Times Cited
A0156	59A-9.0225(7) FAC	Inadequate supplies and equipment maintenance	3
A0250	59A-9.024 FAC	Inadequate medication storage/documentation	3
A0100	59A-9.022 FAC	Handwashing station missing a mixing valve	2
A0300	59A-9.025(1) FAC	Failed to follow medical record policy	2
A0500	59A-9.029 FAC	Failed to submit an incident report	2
A0600	59A-9.031(1) FAC	Failed to maintain a complete medical record	2
Z827	408.812 FS	Failed to immediately cease operations upon license expiration	2
A0150	59A-9.0225(1) FAC	Failed to label emergency drugs with an expiration date	1
A0151	59A-9.0225(2) FAC	Failed to maintain emergency supplies (defibrillator pads)	1
A0153	59A-9.0225(4) FAC	Failed to remove expired drugs from stock	1
A0154	59A-9.0225(5) FAC	Failed to clean and test the autoclave timely	1
A0201	59A-9.023(1-3) FAC	Failed to maintain a complete personnel file	1

**Table 3 Deficient Practice Cited During the 2018 Calendar Year - *continued***

Citation ID	Regulatory Reference	Description	Times Cited
A0202	59A-9.023(4-5) FAC	Failed to ensure all staff received mandatory training	1
A0302	59A-9.025(3) FAC	Failed to maintain separate drugs and specimen storage	1
A0362	390.0111(3)(a) FS	Failed to obtain an appropriate consent form	1
A0400	59A-9.027 FAC	Failed to document recovery area monitoring	1
A0650	390.0112 FS	Failed to report all procedures performed	1
Z824	408.0811 FS	Facility staff were not available at the time of inspection	1

## Required Reporting

### Induced Termination of Pregnancy (ITOP)

All licensed abortion clinics must file a report each month summarizing the number of and reason for abortions performed during the preceding month. Hospitals and physicians must also report any abortions performed in their medical facilities and offices. The Agency posts year-to-date data, including the previous calendar year on the Agency's website. The reports may be viewed at:

[http://ahca.myflorida.com/MCHQ/Central\\_Services/Training\\_Support/Reports.shtml](http://ahca.myflorida.com/MCHQ/Central_Services/Training_Support/Reports.shtml)

### Incident Reports

Abortion clinics licensed to perform second trimester abortions must record any incident resulting in serious injury to a patient or viable fetus. The incident must be reported in writing to the Agency within 10 days of its occurrence. Serious injury is defined as one that creates a serious risk of substantial impairment of a major bodily organ. An abortion clinic must also report a patient's death to the Department of Health not later than the next workday. Two reports of excessive bleeding and one report of poor dilation requiring transfer to a hospital were reported. No patient deaths were reported during calendar year 2018.

## Administrative Actions

The Agency may fine an abortion clinic up to \$1,000 for each violation of chapters 390 or 408, Part II, F.S., or applicable rules, except failing to timely file a monthly ITOP report will result in a \$200 fine. The Agency considers several factors prior to levying a fine, including:

- Severity of the violation (actual or potential harm to a patient);
- Actions taken by the clinic to correct the situation;
- The clinic's history of the same or similar violation;
- The Agency's history of fine amounts for the same or similar violation.

Nineteen administrative actions were initiated during 2018 resulting in \$6,500 in assessed fines. Fifteen of the actions were due to late ITOP submissions. No licensed abortion clinic failed to submit an ITOP report. Four licenses were revoked by final order due to not meeting background screening requirements.