



## Staff Report

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**File #:** LN-579

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### PLANNING AND ZONING BOARD

Meeting Date: MARCH 27, 2024

### AMBULATORY SURGICAL CENTER (ASC) CODE AMENDMENT

**Request:** Special Medical Facilities Text Amendment for Ambulatory Surgical Centers (ASC)  
**P&Z#** 24-81000001  
**Owner:** N/A  
**Project Location:** N/A  
**Folio Number:** N/A  
**Land Use Designation:** N/A  
**Zoning District:** N/A  
**Commission District:** N/A  
**Agent:** Matthew Scott (matthew.scott@gmlaw.com)  
**Project Planner:** Jean Dolan (jean.dolan@copbfl.com / 954-786-4045)

### Summary and Evaluation

The proposed code amendment is a very narrow amendment that will eliminate the 500 foot separation requirement from RS and RD districts for Ambulatory Surgical Centers (ASC) under 5,000 square feet while retaining the unpermitted use status in B-1 and B-2 as well as the Special Exception status in B-3 Zoning Districts.

Medical and Dental offices of the same size are permitted uses in all of the business districts (B-1, B-2 and B-3) and are not subject to any separation requirements until they are over 5,000 square feet.

It is unlikely that ASC's would generate off-site impacts that would be different from any typical medical or dental office and, in fact, are likely to have fewer impacts due to having the capacity for fewer patients per day given the same size facility. The Institute of Traffic Engineers (ITE) does not have a traffic generation category for ASCs so medical/dental office trip generation rates would be used to estimate traffic impacts from such a use thereby supporting the assumptions that these uses are not unique enough to have warranted any specific research by the ITE in regard to traffic impacts.

Back in 2015 when the code amendment was adopted to regulate "Specialty Medical Facilities" which include ASCs, the urgent issue at the time was that 17 substance abuse facilities had located in Pompano between 2011 and 2015 and seven of those were in 2015 alone. That was at the height of the opioid epidemic and the related deaths linked to unethical sober home and rehabilitation facility operators. The State of Florida adopted regulations in late 2015 that began to create a regulatory structure to address the issues of these deadly, fraudulent activities.

## Review Standards for Code Amendments:

### 1. Consistency with the Comprehensive Plan

There are no policies in the Comprehensive Plan that apply to Special Medical Facilities in general or Ambulatory Surgical Centers specifically. General policies that could apply include the following:

#### **Policy 01.03.08**

Establish criteria to protect residential areas and other land uses that are adjacent to industrial and commercial areas from excessive, odors, traffic and parking impacts.

**Response:** As noted above, ITE does not differentiate between types of medical offices in their traffic and parking impact studies so if a traffic/parking impact analysis was prepared for an ASC, medical office rates would apply. The regulations for waste management for an ASC would also be consistent with all other medical waste disposal regulations so no difference in odors is expected from an ASC versus a typical medical/dental office.

#### **Objective 01.04.00 - Major Corridor Land Use**

Support and promote the intermix of residential and commercial uses along major traffic corridors.

**Response:** The major traffic corridors where mixed use is encouraged are predominantly B-3 zoning, particularly east of Dixie Highway and there are many RS and RD zoning districts within 500 feet of B-3 zoning. There are many permitted uses in B-3 (for example the Citi Centre Regional Shopping Center) that could have a greater theoretical impact on adjacent residential uses than a 5,000 SF ASC. Allowing ASCs to be regulated in the same manner as similarly sized medical/dental office is a logical approach in regard to anticipated off-site impacts and development patterns.

#### **Policy 01.04.03**

Except for schools, regional and community facilities shall be located close to major traffic corridors and mass transit routes adequate to carry the volume of traffic generated by such facilities.

**Response:** Most of the traffic corridors and mass transit routes have B-3 zoning and are in close proximity to RS and RD zoning districts. Encouraging the location of regional and community scale facilities on these corridors while strictly regulating ASCs under 5,000 square feet appears out of scale and unrelated to any actual studies related to adverse impacts of these various uses. As previously noted, the ITE has not deemed it necessary to differentiate ASCs from other medical/dental office uses so it is not reasonable to assume that ASCs have a significantly different traffic profile than a typical medical/dental office.

### 2. Does not conflict with any other code provisions.

**Response:** This amendment does not appear to conflict with other code provisions but results in ASCs being regulated in the same fashion as similar size medical and dental offices in regard to separation requirements.

### 3. Required by changed conditions.

**Response:** The 2015 code amendments that resulted in regulations to “Specialty Medical Facilities” was occurring when additional drug abuse related deaths were being attributed to unethical sober home and drug rehab facility operators. Since 2015, State laws and other local requirements (particularly separation requirements and State licensing) have been adopted that have reduced the bad actors in the drug treatment sector. It is appropriate, therefore, to look at the use regulations imposed on the other “Special Medical Facilities” to ensure they are appropriate and factually based.

4. Addresses a demonstrated community need.

**Response:** Affordable health care services are a community need. As baby-boomers age, demand for these type of facilities will continue to increase. ASCs reduce the need to utilize hospitals for treatments that are more safely, efficiently and affordably performed in an outpatient office setting.

5. Is consistent with the purpose and intent of the zoning districts, or would improve compatibility among uses and would ensure efficient development in the City.

**Response:** The B-3 zoning district is intended for office uses including medical office. Having the medical treatments provided by facilities close to residential is convenient for residents and reduces the need to drive to an industrial area for medical care. Industrial uses in Pompano are dominated by semi-truck related warehouse uses which are not compatible with individuals seeking treatment for minor, outpatient medical procedures. Regulating ASCs in the same manner as similar size medical and dental offices, therefore, increases compatibility among uses and results in a reasonable and efficient development pattern.

6. Would result in a logical and orderly development pattern.

**Response:** See response to #5.

7. Would not result in a significantly adverse impact on the natural environment.

**Response:** This proposed code amendment, which allows ASCs to be regulated in the same manner as medical and dental offices of similar size, will not degrade the natural environment. Keeping such uses close to residential areas will reduce trip lengths to get to these facilities compared to requiring them to be located in the industrial sector of Pompano Beach. Reduced trip lengths are associated with fewer environmental impacts.

**Recommendation and Alternative Motions:**

Staff recommends approval of this code amendment and offers the following alternative motions:

**Motion #1:** The Board recommends approval of the code amendment as it finds regulating Ambulatory Surgical Centers of 5,000 SF or less the same as other medical and dental offices of the same size in regard to distance requirements is consistent with the Comprehensive Plan and meets the review standards for publicly initiated code amendments.

**Motion #2:** The Board recommends the item be tabled to give the Applicant time to address any issues raised by the Board, staff or the general public.

Staff recommends Motion #1.

Proposed Code Amendment to Section 155.4209.B. – “Specialty Medical Facility”  
(Proposed Amendment Language is in red and underlined)

**155.4209. INSTITUTIONAL: HEALTH CARE USES**

**B. Specialty Medical Facility**

**1. Districts Where Permitted**

RS-1	RS-2	RS-3	RS-4	RS-L	RD-1	RM-7	RM-12	RM-20	RM-30	RM-45	MH-12	B-1	B-2	B-3	B-4
														S	P

M-1	CR	I-1	I-IX	OIP	M-2	TO	PR	CF	PU	T	BP	RPUD	PCD	PD-TO	LAC	PD-I
		P		P				P					P		P	P

**2. Definition**

A specialty medical facility is a facility, regardless of size, offering specialized treatment and services including, but not limited to, ambulatory surgical facilities, dialysis centers, substance abuse treatment facilities, outpatient rehabilitation facilities, birthing facilities, and urgent care facilities (not including a 24-hour urgent care facility). This use also includes medical or dental offices which are larger than 5,000 sq ft gfa.

**3. Standards**

A specialty medical facility shall comply with the following standards:

- Separation from Residential Uses. The facility, other than an ambulatory surgical facility less than 5,000 sq ft gfa, shall be at least 500 feet from a Single Family (RS) or Two-Family (RD) Zoning District.
- Overnight Treatment. Overnight treatment is prohibited.
- Hours of Operations. The facility shall not offer treatment or similar services between the hours of 10:00 p.m. and 7:00 a.m.

## 155.4209. INSTITUTIONAL: HEALTH CARE USES

### A. Medical Office

#### I. Districts Where Permitted

RS-1	RS-2	RS-3	RS-4	RS-L	RD-1	RM-7	RM-12	RM-20	RM-30	RM-45	MH-12	B-1	B-2	B-3	B-4
												P	P	P	P

M-1	CR	I-1	I-IX	OIP	M-2	TO	PR	CF	PU	T	BP	RPUD	PCD	PD-TO	LAC	PD-I
		P		P		P		P					P	P	P	P

#### 2. Definition

A medical office is a small-scale office providing medical or dental treatment. A small-scale office shall mean a maximum gross floor area of 5,000 sq ft. This use shall not include any uses specified as a specialty medical facility. An office which is greater than 5,000 sq gfa shall be considered a specialty medical facility.

#### 3. Standards

A medical office shall comply with the following standards:

- Separation from Residential Uses. A medical office is not required to be separated from residential uses.
- Overnight Treatment. Overnight treatment is prohibited.
- Hours of Operations.
  - Medical offices shall not offer treatment or similar services between the hours of 10:00 p.m. and 7:00 a.m.
  - Medical offices within 500 feet of a Single Family (RS) or Two-Family (RD) Zoning District shall not offer treatment or similar services between the hours of 7:00 p.m. and 7:00 a.m.