



**CITY OF HOLLYWOOD, FLORIDA  
INTER-OFFICE MEMORANDUM  
PLANNING AND DEVELOPMENT SERVICES**

**DATE:** December 13, 2010 **FILE:** 10-T-78

**TO:** Planning and Zoning Board/Local Planning Agency

**VIA:** Jaye M. Epstein, AICP, Director 

**FROM:** Andria Wingett, Planning Manager 

**SUBJECT:** The City of Hollywood requests a Text Amendment to the Zoning and Land Development Regulations to establish distance separation requirements relating to pain management clinics, pharmacies and social service facilities.

**REQUEST:**

A Text Amendment to the Zoning and Land Development Regulations to establish distance separation requirements relating to Pain Management Clinics, Pharmacies and Social Service Facilities.

**RECOMMENDATION:**

Staff recommends the Planning and Zoning Board, acting as the Local Planning Agency, forward this petition (10-T-78) to the City Commission with a recommendation of approval.

**BACKGROUND**

Earlier this year the City adopted regulations relating to Pain Management Clinics, Substance Abuse and Rehabilitation Centers, Community Residential Homes and Assisted Living Facilities. These regulations created definitions, identified specific zoning districts to allow uses, established different standards for some of the uses, and imposed distance separations for Social Services Facilities, Community Residential Homes and Assisted Living Facilities.

While these changes to the Zoning and Land Development Regulations were underway, the State of Florida realized statewide regulations were needed to better manage pain clinics. Subsequently, Senate Bill 2272 (also known as the "Pill Mill Bill") was passed, which provided numerous additional safeguards at a state level. Some of these new laws include clinics being owned by a doctor, limiting the prescriptions to a 72 hours supply and requiring doctors to become pain specialists. While this senate bill hopefully reduces "doctor shopping" and clinics and physicians ability to attempt to push limits on medical practice or violate state and/or local laws, it failed to impose any type of distance separations. Furthermore, start dates for some of the laws have yet to be implemented.

Having a proliferation of pain management clinics and pharmacies locally has given Broward County the nickname "pain clinic capital". In 2009, the top 25 prescribing physicians in the country were located in the tri-county area with Broward County ranking second among certain prescription drug abuse. Additionally, there are organized crime rings where individuals currently drive from other states as far away as Ohio, West Virginia and Kentucky to doctor shop and fill prescriptions, thereby obtaining large amounts of pills. In some instances patrons abuse pills locally while others return home to illegally sell their goods. Having an abundance of these clinics and related uses, such as pharmacies, encourages crime, illegal narcotic activity, overdose related deaths, loitering, and other undesirable and illegal acts within the City. Additionally, abuse of prescription drugs tends to lead to utilization of other illegal drugs, such as cocaine, ecstasy and marijuana.

## **REQUEST**

As a result of deficiencies and lack of oversight and implementation of State and local laws, the City Commission directed staff to expeditiously impose distance separations between Pain Management Clinics and from Pain Management Clinics to Pharmacies. Upon further research staff has also included separating Pain Management Clinics from Social Services (i.e. homeless shelters, free restaurants, half-way housing, substance abuse and rehab centers) as individuals utilizing these services may be more vulnerable, additionally the misuse of Pain Management Clinics can have a negative effect on these uses.

Subsequently, the Police Department has worked closely with the City Attorney and Planning and Development Services Department to modify the current regulations. These changes will:

- Require Pain Management Clinics to provide a minimum distance separation of ½ mile from other preexisting Pain Management Clinics, Pharmacies ≤9,000 sq ft and Social Service Facilities; and
- Preclude Pharmacies ≤9,000 sq ft from locating within ½ mile of preexisting Pain Management Clinics.

Imposing distance separations of ½ mile will aid with keeping these uses on our major corridors and out of neighborhoods and is consistent with other Broward County cities. Furthermore, only including Pharmacies ≤9,000 sq ft would not affect larger Pharmacies commonly found in Target, Publix, Winn-Dixie, Walgreens and CVS which also sell other retail goods. The intent of this text amendment is to ensure there are no further clustering of Pain Management Clinics and related uses, thereby limiting "doctor shopping" and making it inconvenient to fill and abuse the use of prescription drugs. No variances to these distance separations will be allowed.

## **CONSISTENCY WITH THE CITY-WIDE MASTER PLAN AND COMPREHENSIVE PLAN:**

The proposed text amendment is consistent with the following policies:

### **City-Wide Master Plan:**

***Policy CW.19:*** *Protect residential areas from encroaching non-residential uses into residential areas.*

**Policy CW.44:** Foster economic development through creative land use, zoning and development regulations, City services and City policies.

**Policy CW.50:** Identify areas where buffers can be provided between residential and commercial/industrial uses and develop incentives to spur privately financed improvements.

This text amendment will help protect residential areas and encourage appropriate economic development by placing distance between Pain Management Clinics. Additionally, further separation will also be required from Pain Management Clinics, Pharmacies and Social Service Facilities. This should significantly aid in the reduction of doctor shopping and reduce the proliferation of these uses in the City.

### **Comprehensive Plan:**

#### **Land Use Element**

**Goal:** Promote a distribution of land uses that will enhance and improve the residential, business, resort and natural communities while allowing land owners to maximize the use of their property.

**Policy 4.9:** Place a priority on protecting, preserving and enhancing residential neighborhoods while incorporating the unique characteristics of redevelopment areas. (CWMP Policy CW.15)

**Policy 4.11:** Review zoning district standards as they relate to buffering and uses between single-family and more intense uses along the trafficway corridors, to create adequate separations... (CWMP Policy CW.20)

**Policy 4.12:** Where inadequacies exist, revise land development regulations to provide increased buffers between single-family areas and commercial uses. (CWMP Policy 2.21)

The existing local and State laws have allowed Pain Management Clinics and Pharmacies to cluster together creating inadequacies between these uses and traditional office, retail and residential use. Imposing distance separations between these uses (Pain Management Clinics and Pharmacies) will ensure development occurs in a more appropriate manner with adequate buffering. Furthermore, separating Pain Management Clinics from Social Service Facilities will help individuals utilizing these services which may be more vulnerable to the misuse of Pain Management Clinics.

**Analysis of Criteria and Findings for Text Amendments** as stated in the City of Hollywood Zoning and Land Development Regulations section 5.4 (F)(3).

**CRITERIA 1:** The proposed change is consistent with and in furtherance of the goals, objectives and policies of the adopted Comprehensive Plan as amended from time to time.

**ANALYSIS:** The Comprehensive Plan suggests, "Where inadequacies exist, revise land development regulations to provide increased buffers between single-family areas and commercial uses." Creating distance

separations will ensure Pain Management Clinics, Pharmacies and Social Service Facilities are appropriately distanced throughout the City and not clustered together, thereby reducing neighborhood impacts such as crime, illegal narcotic activity, loitering, and other undesirable acts within the City.

**FINDING:** Consistent

**CRITERIA 2:** That conditions have substantially changed from the date the present zoning regulations were established.

**ANALYSIS:** Undoubteldy, conditions have changed since the present zoning regulations were established earlier this year. Changes to State law have helped regulate the proliferatation of pain clinics. However, until these measures are fully enforecable at the State and Federal level the City feels it is necessary to impose distance seperations. This amendment will require Pain Management Clinics to provide a minimum distance separation of ½ mile from other preexisting Pain Management Clinics, Pharmacies ≤9,000 sq ft and Social Service Facilities. Also precluded are pharmacies from locating within ½ mile of preexisting pain clinics.

**FINDING:** Consistent

### **RECOMMENDATION**

Staff finds the proposed text amendment consistent with the Criteria set forth by the Zoning and Land Development Regulations as well as the City-Wide Master Plan. Staff recommends the Planning and Zoning Board, acting as the Local Planning Agency, forward this item to the City Commission with a recommendation of *approval*.

### **ATTACHMENTS**

ATTACHMENT A: Application Package

**ATTACHMENT A**  
Application Package

OFFICE OF PLANNING



File No. (to be filled by the Office of Planning): \_\_\_\_\_

2600 Hollywood Boulevard Room 315  
Hollywood, FL 33022

GENERAL APPLICATION



Tel: (954) 921-3471  
Fax: (954) 921-3347

*This application must be completed in full and submitted with all documents to be placed on a Board or Committee's agenda.*

*The applicant is responsible for obtaining the appropriate checklist for each type of application.*

*Applicant(s) or their authorized legal agent must be present at all Board or Committee meetings.*

*At least one set of the submitted plans for each application must be signed and sealed (i.e. Architect or Engineer).*

*Documents and forms can be accessed on the City's website at [http://www.hollywoodfl.org/comm\\_planning/appforms.htm](http://www.hollywoodfl.org/comm_planning/appforms.htm)*



APPLICATION TYPE (CHECK ONE):

- Development Review Board
- Planning and Zoning Board
- City Commission
- Historic Preservation Board
- Technical Advisory Committee

Date of Application: 12/2/10

Location Address: City Wide

Lot(s): \_\_\_\_\_ Block(s): \_\_\_\_\_ Subdivision: \_\_\_\_\_

Folio Number(s): \_\_\_\_\_

Zoning Classification: \_\_\_\_\_ Land Use Classification: \_\_\_\_\_

Existing Property Use: \_\_\_\_\_ Sq Ft/Number of Units: \_\_\_\_\_

Is the request the result of a violation notice? ( ) Yes ( ) No If yes, attach a copy of violation.

Has this property been presented to the City before? If yes, check all that apply and provide File Number(s) and Resolution(s): \_\_\_\_\_

- Economic Roundtable
- Planning and Zoning Board
- Technical Advisory Committee
- Historic Preservation Board
- Development Review Board
- City Commission

Explanation of Request: Text Amendment to the ZLDR establishing distance separation requirements relating to pain management clinics, pharmacies & social service facilities.

Number of units/rooms: \_\_\_\_\_ Sq Ft: \_\_\_\_\_

Value of Improvement: \_\_\_\_\_ Estimated Date of Completion: \_\_\_\_\_

Will Project be Phased? ( ) Yes ( ) No If Phased, Estimated Completion of Each Phase \_\_\_\_\_

Name of Current Property Owner: City of Hollywood

Address of Property Owner: 2600 Hollywood Blvd. Hollywood, FL 33022

Telephone: 954-921-3471 Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Consultant/Representative/Tenant (circle one): \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_ Is there an option to purchase the Property? Yes ( ) No ( )

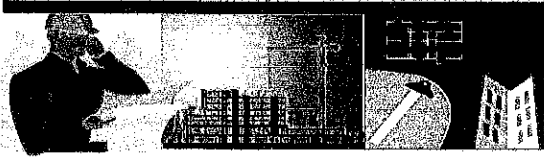
If Yes, Attach Copy of the Contract.

List Anyone Else Who Should Receive Notice of the Hearing: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**OFFICE OF PLANNING**



2600 Hollywood Boulevard Room 315  
Hollywood, FL 33022

**GENERAL APPLICATION**

**CERTIFICATION OF COMPLIANCE WITH APPLICABLE REGULATIONS**

The applicant/owner(s) signature certifies that he/she has been made aware of the criteria, regulations and guidelines applicable to the request. This information can be obtained in Room 315 of City Hall or on our website at [www.hollywoodfl.org](http://www.hollywoodfl.org). The owner(s) further certifies that when required by applicable law, including but not limited to the City's Zoning and Land Development Regulations, they will post the site with a sign provided by the Office of Planning. The owner(s) will photograph the sign the day of posting and submit photographs to the Office of Planning as required by applicable law. Failure to post the sign will result in violation of State and Municipal Notification Requirements and Laws.

(I)(We) certify that (I) (we) understand and will comply with the provisions and regulations of the City's Zoning and Land Development Regulations, Design Guidelines, Design Guidelines for Historic Properties and City's Comprehensive Plan as they apply to this project. (I)(We) further certify that the above statements and drawings made on any paper or plans submitted herewith are true to the best of (my)(our) knowledge. (I)(We) understand that the application and attachments become part of the official public records of the City and are not returnable.

Signature of Current Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
PRINT NAME: Cameron D. Benson *CD Benson* Date: 12/09/14

Signature of Consultant/Representative: \_\_\_\_\_ Date: \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Tenant: \_\_\_\_\_ Date: \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_ Date: \_\_\_\_\_

**CURRENT OWNER POWER OF ATTORNEY**

I am the current owner of the described real property and that I am aware of the nature and effect the request for (project description) \_\_\_\_\_ to my property, which is hereby made by me or I am hereby authorizing (name of the representative) \_\_\_\_\_ to be my legal representative before the \_\_\_\_\_ (Board and/or Committee) relative to all matters concerning this application.

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CURRENT OWNER

\_\_\_\_\_  
Notary Public State of Florida

\_\_\_\_\_  
PRINT NAME

My Commission Expires: \_\_\_\_\_ (Check One) \_\_\_\_\_ Personally known to me; OR \_\_\_\_\_