

## Connecticut's Abortion Clinics

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August 28, 2018 | 2018-R-0209

### Issue

This report answers several questions on the licensing, inspection, services, and procedures of Connecticut's family planning clinics. It updates OLR Report [2014-R-0026](#).

### Abortion Clinics

#### *Does Connecticut License Abortion Clinics? How Many Clinics Currently Exist?*

Yes. The Department of Public Health (DPH) licenses abortion clinics, which are generally referred to as family planning clinics. According to DPH, there are currently 18 licensed family planning clinics in Connecticut, although the number of clinics fluctuates as they voluntarily open or close.

#### *What Level of Service Do the Clinics Provide?*

Of the 18 family planning clinics, all offer medication abortion services (an abortion pill), and five offer both medication and in-clinic surgical abortion services. Table 1 shows the state's 18 clinics, their location, and the services they provide.

**Table 1: Services Provided By Connecticut's Family Planning Clinics**

<i>Facility</i>	<i>City</i>	<i>Abortion Referral</i>	<i>Medical Abortion</i>	<i>In-Clinic Abortion</i>
Hartford GYN Center	Hartford	X	X	X
Planned Parenthood	Bridgeport	X	X	
Planned Parenthood	Bridgeport	X	X	
Planned Parenthood	Danbury	X	X	
Planned Parenthood	Danielson	X	X	
Planned Parenthood	Enfield	X	X	
Planned Parenthood	Hartford	X	X	
Planned Parenthood	Manchester	X	X	
Planned Parenthood	Meriden	X	X	
Planned Parenthood	New Haven	X	X	X
Planned Parenthood	New London	X	X	
Planned Parenthood	Norwich	X	X	X
Planned Parenthood	Old Saybrook	X	X	
Planned Parenthood	Stamford	X	X	X
Planned Parenthood	Torrington	X	X	
Planned Parenthood	Waterbury	X	X	
Planned Parenthood	West Hartford	X	X	X
Planned Parenthood	Willimantic	X	X	

Source: DPH data provided via email

### ***Are There State Sanitation Requirements For Abortion Clinics?***

Abortion clinics must comply with DPH's regulations for outpatient clinics. Consequently, a clinic's management, operation, personnel, equipment, facilities, sanitation, and maintenance must assure patients' health, comfort, and safety at all times. In addition, DPH regulations for abortion clinics specifically require a clinic's facilities, equipment, and care to be consistent with American College of Obstetrics and Gynecology standards (Conn. Agency Regs. §§ 19a-116- 1(a) & 19-13-D52).

### ***Does the State Inspect Abortion Clinics? Are Clinics Notified of the Inspection in Advance?***

DPH considers all family planning clinics to be "outpatient clinics" and inspects them (1) once every three years as part of the clinic's re-licensure and (2) when it receives a complaint or is monitoring a clinic's compliance with a corrective action plan (see below). All inspections are unannounced and conducted by a registered nurse consultant who ensures the clinic is in compliance with all applicable laws and regulations ([CGS § 19a-491\(e\)](#) and Conn. Agency Regs. § 19a-13-D53).

According to Planned Parenthood of Southern New England, there is a difference in the scope of inspections based on the level of service a clinic provides. For example, inspections at facilities providing surgical abortion are more in-depth and cover a wider range of criteria than at other facilities.

Additionally, there is a separate inspection procedure required to open a new facility.

### ***If DPH Finds a Violation During an Inspection of an Abortion Clinic, What Steps Must the Clinic Take To Correct the Violation?***

If DPH finds a violation during an inspection, it sends the abortion clinic a violation letter, which requires the clinic to respond with a written corrective action plan within two weeks. Once DPH receives the corrective action plan, it then conducts an unannounced, on-site inspection to verify the clinic's compliance with the plan.

### ***Are Abortion Clinics Held to the Same Inspection and Physical Plant Requirements as Hospital Operating Rooms or Independent Ambulatory Surgical Centers?***

Yes. DPH uses the same inspection procedures for all its licensed health care facilities, including abortion clinics. The procedures include (1) a facility tour, (2) review of patient records, (3) staff and patient interviews, and (4) observations of care practices. Physical plant standards vary based on the facility type, but all must comply with basic healthcare, fire safety, sanitation, and utility standards. Abortion clinics must maintain a "standard operating room," which requires utilization of the same types of equipment and facilities as hospital operating rooms or surgical centers (Conn. Agency Regs. § 19- 13-D54).

Although the procedures are the same, hospitals and some other facilities are inspected every two years ([CGS §19a-491](#)).

### ***Are Abortion Clinics Subject to Federal Health Regulations or Inspections?***

According to DPH, family planning clinics are not subject to federal health regulations or inspections.

***Have There Been Any Cases of Deaths Attributable to Abortion Clinics in Connecticut Since the State Began Regulating These Clinics?***

DPH, which began regulating abortion clinics in 1974, is unaware of any deaths related to abortion in licensed Connecticut clinics. If DPH was ever notified of such a death, staff would immediately conduct an on-site investigation of the clinic.

***Have Any Abortion Clinics In Connecticut Been Closed, Either Temporarily or Permanently, Due to a Violation of State Regulations? Have Any Been Cited for Infractions or Compliance in the Past 10 Years?***

According to DPH, no abortion clinic has ever had its license revoked. However, five clinics have voluntarily closed over the last ten years: (1) Medical Options in Danbury in 2008, (2) Cornell Scott-Hill Health in New Haven in 2009, (3) Summit Women's Center in Hartford in 2012, (4) Planned Parenthood of New England in Shelton in 2013, and (5) Summit Women's Center in Bridgeport in 2015.

According to DPH, since 1999 no family planning clinics have been cited for compliance issues associated with a regulatory consent order, which apply to a higher level of violation. However, clinics have been cited for certain lower level compliance issues related to the Public Health Code through licensure inspections or investigations. In these cases, the clinic submits a corrective action plan to the department and the department verifies the plan's implementation during a subsequent site visit.

***What Records Are Abortion Clinics Required to Maintain?***

Abortion clinics must maintain confidential patient records for at least five years after a patient's discharge. In addition, the DPH commissioner maintains confidential records of abortions for statistical purposes only. These reports do not contain patient-identifiable information and include only the (1) date and location of the abortion, (2) woman's age and town and state of residence, (3) pregnancy's approximate duration, (4) abortion method and an explanation of any complications, and (5) physician's name and address. These records are destroyed within two years after date of receipt. A fetal death certificate or a fetal birth certificate may also be filed (Conn. Agency Reg. §§ 19-13-D49 & 19-13-D54).

## **ABORTION PROCEDURES**

### ***What Term of Pregnancy Qualifies for an Abortion in Connecticut?***

Under Connecticut law, an abortion can only be performed on a pregnant woman before the fetus attains viability (i.e., can live outside the mother's womb), unless it is necessary to preserve the mother's life or health ([CGS § 19a-602](#) and Conn. Agencies Regs. § 19-13-54(h)).

### ***Are Abortions Treated Differently Based on the Term?***

Yes. DPH regulations allow first and second trimester abortions to take place in licensed family planning outpatient clinics. However, third trimester abortions can only be performed in a licensed hospital with anesthesiology and obstetrics and gynecology departments (Conn. Agencies Regs. § 19-13-54(c)).

### ***What are the Licensure Requirements to Perform or Assist in an Abortion Procedure?***

An abortion can only be performed by a physician licensed to practice medicine and surgery in the state (Conn. Agency Reg. § 19-13-D54). In Connecticut, a certified registered nurse anesthetist (CRNA) is also present during every procedure. (A CRNA is a DPH-licensed advanced practice registered nurse who is board-certified to prescribe and administer anesthetics during surgery under a physician's direct supervision.)

According to DPH, while additional support staff may assist the physician, under his or her supervision, generally only the physician and CRNA are necessary to complete the procedure.

### ***What Are the Licensure Requirements For Staff Employees?***

Staff employees must complete formal coursework or in-service training in social work, psychology, counseling, nursing, or ministry. Employees who do not have a graduate degree in any of these fields must be supervised by a person with such a degree (Conn. Agency Reg. § 19a-116-1(d)).

***Are There Patient Follow-Up Procedures and if so, Are They Practiced?***

Patient follow-up procedures include consulting on follow-up care, providing information on family planning, furnishing a written discharge summary with a discharge plan (signed by the patient and a licensed or certified health care provider), and providing information regarding access to her medical record (Conn. Agency Reg. § 19a-116-1). According to DPH, all follow-up procedures are practiced.

***Are Patients Advised Before the Abortion About the Risks and Alternatives?***

Yes. Any woman seeking an abortion (1) receives verification of the diagnosis and duration of the pregnancy, including preoperative history and physical examination; (2) information on and an explanation of the procedure; (3) counseling about her decision; (4) lab tests; (5) preventative therapy if she is at risk for Rh sensitization (a pregnancy complication); and (6) examination of tissue by a pathologist. After receiving consent for an abortion, the counselor must offer to answer any questions the patient may have concerning the procedure. The counselor or physician must also provide a thorough explanation of the procedures to be performed along with a full description of the discomforts and risks that may accompany or follow the procedure (Conn. Agency Reg. § 19a-116-1).

***Are There Emergency Procedures in Place in Case There Are Complications During Surgery?***

Yes. All DPH-licensed health care facilities must have an emergency plan which includes procedures for clinical, weather, fire, and other types of events. The plan must also include a transfer agreement with a local hospital in case emergency medical care is required (Conn. Agency Reg. § 19a-116-1).

***Do Connecticut Regulations Address an Abortion Procedure Where the Baby is “Born Alive”? What is the Abortion Clinic’s Responsibility in This Situation?***

Yes. If a newborn shows signs of life following an abortion, DPH regulations require the abortion clinic to employ the same life-supporting measures used for premature infants (Conn. Agency Reg. § 19a-13-D54(g)).

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