

TO: Regional Operations Managers

Deputy Regional Operations Managers

Ron DeSantis Governor

APD Residential Monitoring and Licensing Supervisors APD Residential Monitoring and Licensing Specialists

Robert Asztalos Director

Sean Buchanan, Assistant Director of Quality and FROM:

Accountability Sean Buchanan

State Office

DATE: September 9, 2025

4030 Esplanade Way Tallahassee Florida 32399-0950

SUBJECT: Monitoring Frequency for APD Licensed Homes

(850) 488-4257 Fax: (850) 922-6456

Toll Free: (866) APD-CARES (866-273-2273)

To better focus APD Licensed Facility monitors on homes that need greater oversight, effective October 1, 2025, all APD standard licensed group/foster homes will transition from a monthly monitoring schedule to a quarterly monitoring schedule. Additionally, Agency staff will conduct monthly monitoring for APD licensed intensive behavior, enhanced intensive behavior, behavior focus, special medical group homes, and any facility designated as an "Increased Oversight Facility." Also, all facilities will continue to receive a monitoring visit as part of licensure renewal.

Facilities will be designated as an "Increased Oversight Facility" if the monitor identifies a citation listed in Appendix A. The home will receive monthly visits until the citation is corrected by the facility and cleared by the monitor.

These citations are minimum standards and monitors can conduct more frequent inspections if warranted. By scaling back time inspecting homes with a record of compliance, the Agency believes this policy will allow our monitors to focus greater expertise and resources on licensees requiring additional guidance and oversight.

Thank you for your continued cooperations and diligence with this process. questions, Kirkley lf you have please contact Meghan meghan.kirkley@apdcares.org.

cc: Lynne Daw, Bureau Chief, Quality and Program Effectiveness Meghan Torres, Assistant Bureau Chief



Appendix A Increased Oversight Facility citations

- 1. Newly licensed standard homes: Newly licensed standard homes will receive an initial monitoring visit following the admission of the first client into the facility, within 30 days after admission. Monthly residential monitoring visits will continue for the next two consecutive months. At the conclusion of the three visits, if there are no identified Appendix A citations, the facility may begin quarterly visits.
- 2. Abuse, Neglect, or Exploitation: If the Residential Monitor observes evidence of abuse, neglect, or exploitation during a monitoring visit, or there are verified findings of abuse, a wellness visit will be conducted per the APD OP 3-0006 Incident Reporting for Clients Living in the Community. If the alleged perpetrator is known, the facility will remove them from direct client contact. Once the alleged perpetrator has been removed from direct client contact and there are no identified Appendix A citations, the Agency may resume quarterly visits. If an alleged perpetrator is not identified, the monitor will discuss the need for increased oversight with the APD licensing supervisor. Consideration will be given to the circumstances of the initial allegation(s) and the actions the provider has taken pending the outcome of the Department of Children and Families (DCF) investigation.

3. Relating to 65G-2.007 General Facility Standards:

- **65G-2.007(2)** Broken ramps, holes in decking or walkways that create tripping hazards.
- 65G-2.007(4) An inoperable stove/oven or refrigerator.
- 65G-2.007(5) No privacy in the bedroom or bathroom including missing doors, no bed, or inadequate bedding.



- 65G-2.007(6) Indoor plumbing issues in the bathroom including broken toilet or bathtub/shower and no alternative means of toileting and or cleansing are available. *
- 65G-2.007(7) Broken washer or dryer and no alternate means of ensuring clean laundry is provided.
- **65G-2.007(8)** The HVAC is broken or not working properly and not within the range of 68-80 degrees as appropriate to the climate. *
- **65G-2.007(11)** There is an inadequate amount of food within the home; at least 2 days of fresh food supplies and 5 days of staple food and drinking water sufficient for all household members.
- 65G-2.007(12) If there are violations relating to the safety requirements for the water temperature exceeding 120 degrees, until the temperature has been tested and is maintained below 120 degrees during documented/submitted water temperature test results for a minimum of 3 days submitted to the agency by the licensee.
- 65G-2.010(2) Reports from the local Fire Marshal (FM) that the home may be unsafe to occupy and must be evacuated; the home has safety violations, but evacuation is not mandatory; or the Fire Inspection report is found to be falsified, the provider/licensee is required to immediately activate their CEMP. Prior to the clients returning home, the FM must provide verification that the deficiencies have been remediated. *
- 65G-2.017(3) The home has a pest/vermin infestation, creating an unsanitary living condition for the residents or the home is unsanitary including extreme odors, large accumulation of trash and refuse.

If these citations are identified during the onsite visit, the facility must take immediate action to remediate the violation. Once remediation has occurred the facility will notify APD, and a follow-up visit will occur within



one week of being notified to verify remediation. Once verified, the facility may resume quarterly visits.

- 4. More frequent than quarterly visits may also be required after consultation with the Licensing Supervisor in the following situations:
 - 65G-2.007(18) Following notification of either a foreclosure (if the property is owned by the licensee) or eviction: The monitor will communicate with the State Office Monitoring and Licensing Supervisor for a determination of whether more frequent visits are necessary if there are concerns relating to the licensee's ability to meet all the needs of the consumers.
 - **65G-2.008(1)** The facility is found to have inadequate staffing based on the consumer's residential habilitation level.
 - 65G-2.009(1) The facility has failed to ensure that appropriate
 action is taken for a resident's essential care following a medical,
 dental or therapy or other health related appointments. The facility
 has failed to ensure that appropriate action is taken for a resident's
 essential care following a medical, dental, therapy or other healthrelated appointments.
 - 65G-2.009(12) Medication errors resulting in a direct, negative impact to the health and safety of the individuals, or those that present an imminent danger to the individual(s): If medications for which there is a current order to administer are not present in the facility or there are medication errors identified as part of the monitoring visit, the monitor will provide documentation to the State Office Monitoring and Licensing Supervisor for determination of more frequent visits.

Once the identified citations have been verified as corrected by APD, the facility may resume quarterly visits.