



HOUSE BILL 945

CHILDREN'S COORDINATED SYSTEM OF CARE PLAN

CENTRAL REGION: CIRCUITS 9 & 18

2025-2028

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SECTION 1: EXECUTIVE PLANNING SUMMARY

In July 2020, House Bill 945- Children's Mental Health went into effect requiring Managing Entities lead the development of a plan promoting the development of a coordinated system of care which (1) integrates services provided through providers funded by the state's child-serving systems and (2) facilitates access by children and adolescents, as resources permit, to needed mental health treatment and services at any point of entry regardless of the time of year, intensity, or complexity of the need, and other systems with which such children and adolescents are involved, as well as treatment and services available through other systems for which they would qualify.

The planning process shall include, but is not limited to, examining children and adolescents with behavioral health needs and their families; behavioral health service providers; law enforcement agencies; school districts or superintendents; the multiagency network for students with emotional or behavioral disabilities; the department; and representatives of the child welfare and juvenile justice systems, early learning coalitions, the Agency for Health Care Administration, Medicaid managed medical assistance plans, the Agency for Persons with Disabilities, the Department of Juvenile Justice, and other community partners. An organization receiving state funding must participate in the planning process if requested by the managing entity. State agencies shall provide reasonable staff support to the planning process if requested by the managing entity.

The planning process shall take into consideration the geographical distribution of the population, needs, and resources, and create separate plans on an individual county or multi-county basis, as needed, to maximize collaboration and communication at the local level.

On January 1, 2023, the entities involved in the HB945 planning process implemented the coordinated system of care specified in the plan. The managing entity and collaborating organizations shall review and update the plans, as necessary, at least every 3 years thereafter.

SECTION 2: PLANNING PROCESS FOR A COORDINATED SYSTEM OF CARE

DEFINITIONS

The Managing Entities agree with the definitions in House Bill 945 will help to ensure consistent planning and implementation across the state. Below is a list of key terms and definitions related to children services:

Key Term	Proposed, Shared Definition
Mobile Response Team	Contacting mobile response team (MRT) either by 2-1-1 or direct call. The MRT will triage the request and, provide an in-person response, as necessary at the location where the crisis is occurring
Providers funded by the state's child-serving systems	Any behavioral health provider organization receiving funding by any of the child-serving systems (as defined below).

Child-serving systems	<p>Early Learning Coalitions Healthy Start Coalitions Public and Charter School systems Community-Based Care Department of Children and Families Managed Entities Department of Juvenile Justice Agency for Persons with Disabilities Agency for Healthcare Administration Medicaid Managed Medical Assistance Plans</p>
High utilizers of crisis stabilization services “funded through the department”	Crisis stabilization services funded by the Managing Entities for individuals (up to age 25 years old) identified as person who has had three or more crisis placements
High utilizers	Youth/young adults up to 25 years old. With three (3) or more acute care admissions within 180 days; or with an acute care admission that lasts sixteen (16) days or longer.
Care Coordination	As per Guidance Document 4 to “mean the implementation of deliberate and planned organizational relationships and service procedures that improve the effectiveness and efficiency of the behavioral health system by engaging in purposeful interactions with individuals who are not yet effectively connected with services to ensure service linkage. Examples of care coordination activities include development of referral agreements, shared protocols, and information exchange procedures....”
The multiagency network for students with emotional or behavioral disabilities	Also known as SEDNET, which creates and facilitates a network of key stakeholders committed to assisting in the provision of a quality system of care for students with or at-risk of emotional and/or behavioral challenges.

GEOGRAPHICAL CONSIDERATIONS

Central Florida Cares Health System (CFCHS) is one of seven Managing Entities in the State of Florida who oversee the state-funded mental health and substance use treatment services through a network of local service providers in Orange, Osceola, Seminole and Brevard counties.

To facilitate communication and collaboration at the regional level. CFCHS will produce one regional plan that identifies and incorporates county and circuit needs in the plan. Each county’s behavioral health resources and needs for children and adolescents were considered and incorporated into this plan, as indicated.

PLANNING STRATEGY

CFCHS led discussions to review and update children’s coordinated system of care plan at community meetings such as the children’s alliance and other advisory meetings. Contributions to the updated plan were made by key partners through a behavioral health needs assessment questionnaire. Their input assisted in identifying service needs and opportunities for improvement.

Community Stakeholders	
2nd Mountain Transitional Homes	Full Circle Florida, Inc.
Anthropos FL	Guardian Ad Litem
Aspire Health Partners	Health Connect America
BAYS	Healthy Start Coalition of Osceola County
Bethel Seventh-Day Adventist Church	Healthy Start T.E.A.M. Dad
Brevard County Public Schools	Hispanic Family Counseling
Camelot Community Care	Kids House of Seminole, Inc
Children’s Home Society	Kinder Konsulting & Parents Too
Circles of Care	Melbourne Police Department
City of Orlando Law Enforcement	Orlando Police Department
CJA Behavioral Services	Orange County Government
Coastal Behavioral Therapy, Inc.	Orange County Head Start
Community Coordinated Care for Children	Orange County Library System
Community Members	Orlando Health Inc./The Healing Tree
Community Wellness & Health Cooperative, LLC	Palm Bay Police Department
Florida Department of Children and Families	School District of Osceola County
Florida Department of Health	SEDNET
Florida Department of Health-- Healthy Start	Seminole County Government
Florida Department of Health Orange County, Bureau of Violence and Injury Prevention	Seminole County Public Schools
Florida Department of Juvenile Justice	Seminole County Sheriff's Office
Early Learning Coalition (Orange 7 Seminole)	St. Cloud Police Department
Eatonville Police Department	The Howard Phillips Center, OH Arnold Palmer Hospital
Eckerd Connects	Week of the Family Foundation
Family Partnership of Central Florida	West Melbourne Police Department
Florida Diagnostic and Learning Resources System (FDLRS)	Youth and Family Services

SECTION 3: INTEGRATION WITH LOCAL PLAN(S)

Current existing community-based plans and behavioral health needs assessments are reviewed to gather information on current initiatives and identify gaps in behavioral health services.

COMMUNITY LOCAL PLANS

School District Mental Health Assistance Allocation Plans	https://cims2.floridacims.org/public_access
Florida Health Community Health Improvement Plans	http://www.floridahealth.gov/provider-and-partner-resources/community-partnerships/floridamapp/state-and-community-reports/
Behavioral Health Transportation Plan	https://centralfloridacares.org/transportation-plans/

BEHAVIORAL HEALTH NEEDS ASSESSMENT

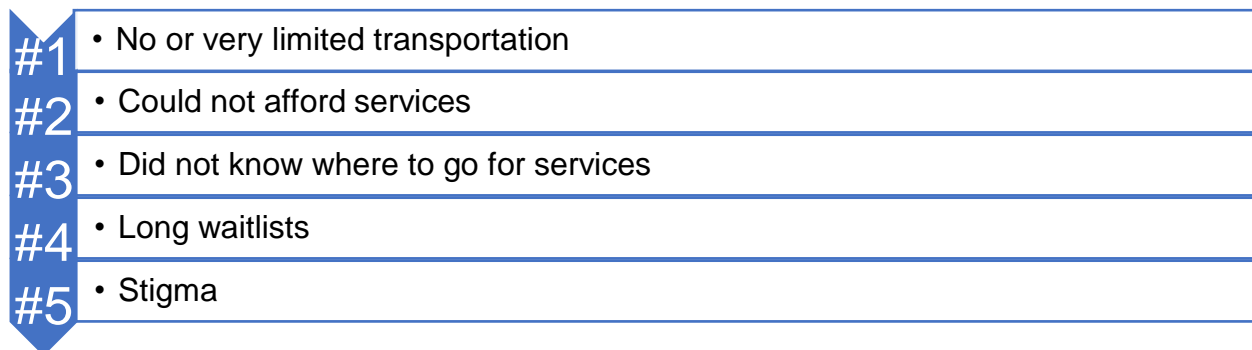
2022 CFCHS Behavioral Needs Assessment

CFCHS contracted with the Health Council of East Central Florida, Inc. to conduct the 2022 behavioral health needs assessment. CFCHS facilitates behavioral health needs assessment every 3 years. The needs assessment is a process of assessing the physical, social and environmental health of a population to identify key health needs and assets within a community. The last assessment completed in 2022 engaged 508 individuals served and community stakeholders through a survey.

The assessment identified the following top 5 service needs (opportunities):



The top 5 barriers to accessing needed services:



Source: <https://centralfloridacares.org/behavioral-needs-assessment/>

The 2022 Community Health Needs Assessment conducted by the Florida Department of Health in each county is a systematic, data-driven approach to determining the health status, behaviors, and needs of its residents. Areas for improvement based on the findings for each county:

Orange County	Osceola County
<p>1. Increase system capacity</p> <ul style="list-style-type: none"> • Access to free or low-cost health care services for all residents • Recruitment and retention of culturally diverse and informed providers who demographically reflect the community • Health care services in lower-income and priority communities • Greater access to primary care services in non-urban areas • Training for providers caring for members of priority communities <p>2. Enhance Mental Health (including Substance Use Disorder) outreach and treatment</p> <ul style="list-style-type: none"> • Mental health outpatient services capacity • Mental health crisis services and community awareness of available resources • Youth mental health services • Behavioral health outpatient services for children <p>3. Streamline access to care</p> <ul style="list-style-type: none"> • Case managers, Community Health Workers and similarly licensed professionals supporting patients with complex needs <p>4. Refine primary care and specialized medical care (e.g., chronic conditions) services</p> <ul style="list-style-type: none"> • Chronic disease early intervention and care • Maternal & infant care <p>5. Housing and other social determinants</p> <ul style="list-style-type: none"> • Support additional affordable, quality housing 	<p>1. Increase system capacity</p> <ul style="list-style-type: none"> • Recruitment and retention of culturally diverse and informed providers who demographically reflect the community <p>2. Enhance Mental Health (including substance use disorder) outreach and treatment</p> <ul style="list-style-type: none"> • Mental health outpatient services capacity • Mental health inpatient bed capacity • Youth mental health services <p>3. Streamline access to care</p> <ul style="list-style-type: none"> • Case managers, Community Health Workers and similarly credentialed professionals to guide high-need patients • Childcare services, especially for children with special needs • Adaptive equipment for people living with long-term disabilities • Access to care for seniors (e.g., transportation) • Co-located case managers and behavioral health providers at community-based primary care sites • Benefits and financial support for young families with children <p>4. Refine primary care and specialized medical care (e.g., chronic conditions) service</p> <ul style="list-style-type: none"> • Specialty outpatient diabetes care <p>5. Housing and other social determinants</p> <ul style="list-style-type: none"> • Affordable, quality housing • Employment opportunities & equal wages

<ul style="list-style-type: none"> • Access to healthy, affordable foods • Integrated case management and multiple health-related services under one roof for people experiencing homelessness 	<ul style="list-style-type: none"> • Greater access to primary care services in non-urban parts of Lake, Orange Osceola and Seminole Counties • Integrated case management and multiple health-related services “under one roof” for people experiencing homelessness
Seminole County	Brevard County
<ol style="list-style-type: none"> 1. Increase system capacity <ul style="list-style-type: none"> • Mental health outpatient services capacity • Mental health inpatient bed capacity 2. Enhance Mental Health (including substance use disorder) outreach and treatment <ul style="list-style-type: none"> • Mental health crisis services and community awareness of available resources • Behavioral health outpatient services for children • Youth mental health services • Suicide prevention • Mental health and substance use disorder transition care for inmates being released from jail 3. Streamline access to care <ul style="list-style-type: none"> • Access to free or low-cost health care services for all residents 4. Refine primary care and specialized medical care (e.g., chronic conditions) services <ul style="list-style-type: none"> • Information sharing among providers • Case managers, Community Health Workers and similarly credentialed professionals to guide high-need patients • Mental health stigma reduction • Co-located case managers and behavioral health providers at community-based primary care sites • Integrated community collaborations (e.g., schools, Criminal Justice System, 	<ol style="list-style-type: none"> 1. Behavior Healthcare Services: <ul style="list-style-type: none"> • Improve access to mental healthcare services including substance misuse treatment for drugs and alcohol. • Promote mental wellness and prevention services. 2. Access to Healthcare Services: <ul style="list-style-type: none"> • Improve Access to Quality Health Care Services. • Improve Health Literacy. • Advocate for Enhanced Access to Healthcare. 3. Access to Oral Healthcare and Preventive Services <ul style="list-style-type: none"> • Improve access to primary dental care services and oral health. 4. Address Social and Economic Condition Impacting Health <ul style="list-style-type: none"> • Improve understanding of Social Determinants of Health • Implement Health Equity Plan.

health care providers and Public Health Departments) to share information and ultimately identify and more efficiently serve high-need community members

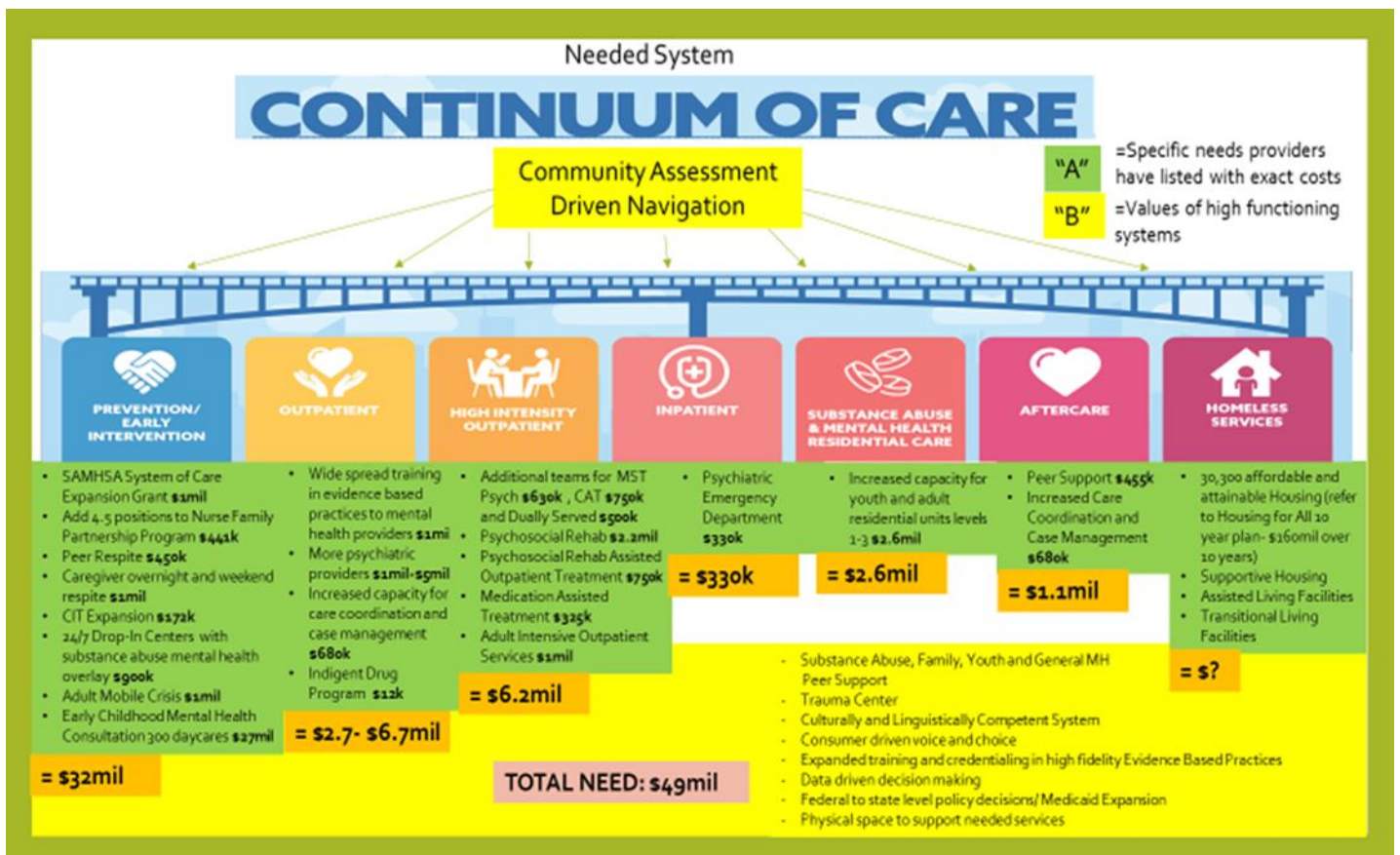
5. Address housing and other social determinants

- Support for additional affordable, quality housing – affects recruitment and retention of culturally diverse and informed providers, as well as access to free or low-cost health care for families
- Access to healthy food

Source: <https://www.floridahealth.gov/provider-and-partner-resources/community-partnerships/floridamapp/state-and-community-reports/index.html>

Orange County Behavioral Health System Gaps

Orange County Government- Mental Health & Homeless Division conducted a comprehensive analysis with community partners to review the current behavioral health system and identify needed support and treatment services for full continuum of care. The final report was presented at the Orange County Mental and Behavioral Health System Stakeholders Meeting on May 10, 2021, presided by Mayor Jerry L. Demings.



SERVICE ARRAY

The Youth and Family Behavioral Health System of Care illustrates from least restrictive to most restrictive services and supports in the Children’s System of Care. The children’s system of care is guided by the principles of being community-based, family-driven and youth-guided, culturally, and linguistically competent and trauma informed. 2-1-1 is a readily available resource to provide access to mobile response teams and information on available community services for food and housing assistance, behavioral health services, family support, health, and wellness.

Circuits 9 & 18

Youth and Family Behavioral Health System of Care



Information and Referral		
Service Provider	County	Website
United Way of Florida United	Orange	https://www.hfuw.org/gethelp/
	Osceola	
	Seminole	
2-1-1 Brevard County	Brevard	https://211brevard.org/

COMPREHENSIVE COORDINATED CARE

The No Wrong Door Approach

The No Wrong Door (NWD) framework is an approach that supports streamlined access to services and supports for substance use and mental health recovery. Section 394.4573(1)(d), F.S., defines the “no-wrong-door” model as:

A model for the delivery of acute care services to persons who have mental health or substance use disorders, or both, which optimizes access to care, regardless of the entry point to the behavioral health care system.

CFCHS’ Network Service Providers (NSP) for acute care services have adopted the No Wrong Door. The NSPs offer an array of services within their continuum of care to individuals suffering from mental health and/or substance use disorder. They also partner through agreements/contracts with county government, law enforcement, hospitals, managed care plans, and other community stakeholders to ensure individuals can access services such as assessment, treatment, referrals and linkage to community resources.

Welcoming, Engaging, and Culturally and Linguistically Appropriate Care

CFCHS strives to ensure accessibility for any person with a disability, including physical disabilities; mobility difficulties; visual, hearing and language impairments; developmental and intellectual disabilities; mental illness; and addictive disease. Furthermore, CFCHS commits to providing accessibility without regard to race, color, national origin, disability, age, gender, religious preference, marital status, physical appearance, sex, or sexual orientation. CFCHS encourages organizations understand and respond appropriately to the cultural needs of their clients.

Communication, Collaboration, and Community Education

It is important for Network Service Providers to address the provision of services and supports from a comprehensive recovery-oriented approach, which includes coordination with other key system of care entities providing services and supports individuals in need of behavioral health services. In collaboration with and based on the preferences of the individual receiving services and their parent/legal guardian (if applicable). Network Service Providers should identify and coordinate efforts with other key community stakeholders

Care Coordination

Care Coordination serves to assist individuals to connect with treatment services and supports they need to transition successfully from higher levels of care to effective community-based care. This includes services and supports that affect a person’s overall well-being, such as primary physical health care, housing, and social connectedness.

Goals of implementing Care Coordination are to:

- Improve transitions from acute and restrictive to less restrictive community-based levels of care;
- Decrease avoidable hospitalizations, inpatient care, incarcerations, and homelessness; and
- Focus on an individual’s wellness and community integration.

PREVENTION

Substance Abuse Prevention benefits the health and safety of Florida's citizens by affecting long-lasting, positive change among youth and adults at risk for use, abuse, misuse and addiction. Strategies focus on increasing public awareness and education, community-based processes, and incorporating evidence-based practices.

CFCHS works collaboratively alongside network service providers and drug free coalitions in each county throughout the Central Region to deliver quality community-based processes, environmental strategies, and information dissemination regarding maintaining health and wellness. These efforts are made through campaigns, social marketing, resource sharing, education, and school prevention programs.

Prevention Coalitions	Website
Orange County Drug-Free Coalition	https://www.orangecountyfl.net/FamiliesHealthSocialSvcs/DrugFreeCoalition.aspx
Seminole Prevention Coalition	http://www.seminolepreventioncoalition.org/
Brevard Prevention Coalition	https://www.brevardprevention.org/

School- Based Prevention		
Service Provider	County	Website
Aspire Health Partners	Orange Seminole	https://aspirehealthpartners.com/programs-and-services/program-details/26/New-Horizons/
Informed Families	Orange	https://www.informedfamilies.org/
IMPOWER	Seminole	https://www.impowerfl.org/programs-and-services/prevention-programs/
Eckerd Connects	Brevard	https://eckerd.org/family-children-services/prevention-services/brevard-prevention-counseling/

MOBILE RESPONSE TEAMS (MRT)

Mobile Response Teams (MRT) provide on-demand crisis intervention services to individuals who are 24 and younger in any setting in which a behavioral health crisis is occurring, including homes, schools and emergency departments. Mobile response services are available 24/7 by a team of professionals and paraprofessionals, who are trained in crisis intervention skills to ensure timely access to supports and services.

MRT Services include evaluation and assessment, development of safety or crisis plans, providing or facilitating stabilization services, supportive crisis counseling, education, development of coping skills, linkage to appropriate resource and connecting individuals who need more intensive behavioral health services to the needed level of care.

Supporting the “no wrong door” model, MRTs provide warm hand-offs and referrals to other services in the community to meet the ongoing needs of the individual and will follow-up to determine that the appropriate linkage is made. When the situation warrants, MRTs will assist with the individual being received by a designated receiving facility or a licensed substance abuse provider for further evaluation. Peer support services can be an effective way to connect individuals and families experiencing behavioral health crises with resources, ensure they engage in services, and assist them to navigate the system.

- The goals for the MRTs include:
- Provide immediate intervention in attempt to stabilize the individual’s condition safely in situations that do not require an immediate public safety response.
- Divert individuals from restrictive care settings such as emergency departments, psychiatric hospitalization or juvenile justice involvement/arrest.
- Increase community awareness of behavioral health needs by providing prevention and treatment-oriented education and outreach to families, schools and communities.

Service Provider	County	Phone Number	Website
Devereux	Orange Osceola Seminole	Call 2-1-1, press 1 for the crisis help line Dial 407-839-HELP Text 898-211, your zip code and type “requesting mobile crisis” Chat at www.HFUW.org	https://www.devereux.org/site/SPageNavigator/fl_mobile_crisis_services.html
C.A.R.E.S. Division of Family Partnerships of Central Florida	Brevard	(321) 213-0315	https://brevardcares.org/mobile-response-team/
Aspire Health Partners *Serving young adults 18+	Orange Seminole	(407) 667-1600	https://aspirehealthpartners.com/
Park Place Behavioral Health	Osceola	(407) 846-0023 ext. 1017	<u>Crisis Services - Park Place Behavioral Health Center</u>

CHILDREN'S CRISIS STABILIZATION UNITS

Children's Crisis Stabilization Units (CCSUs) provide short-term psychiatric stabilization for individuals under 18 years-old experiencing an acute mental health crisis. Individuals referred to a CCSU receive diagnostic evaluation by a treatment team composed of a physician, registered nurse, and professional counselor. If it is determined treatment is needed, an individual can be admitted to the CCSU, either voluntary or involuntary. If it is determined admission to the CCSU is not appropriate, an individual is referred to the appropriate level of care (for example, to an acute care facility for medical intervention, private provider or to an outpatient program).

Service Provider	County	Phone Number	Website
Central Florida Behavioral Hospital	Orange	(407) 370-0111	https://centralfloridabehavioral.com
University Behavioral Center	Orange	(407) 281-7000	https://universitybehavioral.com/
Orlando Health-South Seminole Hospital	Seminole	(407) 767-1200	https://www.orlandohealth.com/facilities/south-seminole-hospital
Park Place Behavioral Health Care	Osceola	(407) 846-0023	https://www.ppbh.org/
Circles of Care	Brevard	(321) 722-5200	www.circlesofcare.org
Palm Point Behavioral Health	Brevard	(321) 603-6550	https://palmpointbehavioral.com/
Advent Health	Orange	(407) 303-5600	<u>AdventHealth A Leader in Whole-Person Health Care</u>

For a complete list of Baker Act Receiving Facilities please visit [Baker Act Receiving Facilities.pdf](#)

COMMUNITY ACTION TREATMENT (CAT) TEAMS

Community Action Treatment (CAT) Team is a multi-disciplinary clinical team that provides comprehensive, intensive community-based treatment to families with youth and young adults, ages 11 up to 21, who are at risk of out-of-home placement due to a mental health or co-occurring disorder and related complex issues for whom traditional services are not/have not been adequate. The CAT Team utilizes a team of individuals including a Licensed Team Leader, Mental Health Clinicians, Psychiatrist or ARNP, Nurse, Case Managers, Therapeutic Mentors and other Support Staff. CAT members work collaboratively to deliver the majority of behavioral health services, coordinate with other service providers when necessary, and assist the family in developing or strengthening their natural support system.

To be eligible for services, individuals aged 11 to 21 must have a mental health diagnosis or co-occurring substance abuse diagnosis with one or more of the following accompanying characteristics:

- The individual is at-risk for out-of-home placement as demonstrated by repeated failures at less intensive levels of care;
- The individual has had two or more periods of hospitalization or repeated failures;
- The individual has had involvement with the Department of Juvenile Justice or multiple episodes involving law enforcement; or
- The individual has poor academic performance or suspensions.

** Children younger than 11 with a mental health diagnosis or co-occurring substance abuse diagnosis may be candidates if they meet two or more of the above characteristics.

The goals of the CAT program are to:

- Strengthen the family and support systems for youth and young adults to assist them to live successfully in the community;
- Improve school related outcomes such as attendance, grades, and graduation rates;
- Decrease out-of-home placements;
- Improve family and youth functioning;
- Decrease substance use and abuse;
- Decrease psychiatric hospitalizations;
- Transition into age-appropriate services; and
- Increase health and wellness.

Service Provider	County	Phone Number	Website
Aspire Health Partners	Orange	(407) 875-6020	https://aspirehealthpartners.com
	Osceola	(407) 875-3700 x4546	
	Seminole	(407) 875-3700 x1213	
Circles of Care	Brevard	(321) 722-5200	www.circlesofcare.org

FIRST EPISODE PSYCHOSIS (FEP)

NAVIGATE is a comprehensive program designed to provide early and effective treatment to individuals who have experienced a first episode of psychosis. NAVIGATE is a team-based, multi-component treatment program designed to be implemented in routine mental health treatment settings and aimed at guiding people and their families towards psychological and functional health. The core services provided in the NAVIGATE program include the Family Education Program, Individual Resiliency Training, Supported Employment and Education, and Individualized Medication Treatment. NAVIGATE embraces a shared decision-making approach with a focus on

strengths and resiliency, and collaboration with clients and family members in treatment planning and reviews.

Service Provider	County	Phone Number	Website
Aspire Health Partners Program Name: <i>Individuals Navigating Psychosis Through Empowerment (INPSYTE)</i>	Orange	(407) 875-3700 x6759	https://aspirehealthpartners.com

FAMILY SERVICES PLANNING TEAM (FSPT)

Family Services Planning Team (FSPT) are multi-disciplinary planning teams that are family-focused and community-based with the purpose of identifying supports and service planning for families with a child needing behavioral health services. The team will have a case manager assigned to coordinate services for the child across different agencies.

Service Provider	County	Phone Number	Website
Children’s Home Society	Orange	(407) 896-2323 x224	https://chsfl.org
	Osceola		
	Seminole		
	Brevard	(321) 343-1836	

BEHAVIORAL HEALTH NETWORK (BNET)

The Behavioral Health Network (BNet) is a Florida Kidcare program developed in partnership with the Department of Health and the Department of Children and Families. The BNet program is available to children enrolled in the Children’s Medical Services Health Plan, ages 5 through 18 who have mental health or substance use concerns. The BNet program is also available to subsidized Florida Healthy Kids Members. The BNet Program treats the entire spectrum of behavioral health disorders.

BNet Mental Health Services are customized to the needs of each child and includes:

- In-home and outpatient individual and family counseling.
- Targeted case management.
- Psychiatry services and medication management including direct access to network, service providers pharmacy with no co-payments.
- Advocacy and provision for wrap-around services to meet each child’s social, educational, nutritional, and physical activity needs.

Service Provider	County	Phone Number	Website
Devereux	Orange	(321) 441-8643	https://devereux.org
	Osceola		
	Seminole		
	Brevard		

RESIDENTIAL TREATMENT CENTERS

Residential Treatment Center (RTC) means a 24-hour residential program that provides 24-hour inpatient and highly structured level of care. RTC is used to stabilize a severely emotionally disturbed and/or psychiatrically unstable child in a short period, generally 3-6 months, within a restrictive and highly structured environment. This setting is appropriate only when least restrictive services have been attempted and have been unsuccessful.

Specialized Therapeutic Group Home (STGH) is an intensive, community-based, psychiatric, residential treatment service designed for children and adolescents with moderate-to-severe emotional disturbances. STGH is designed for youth who are ready for a step-down from a RTC or to avoid placement into a RTC.

Mental Health Residential Treatment			
Provider	Phone Number	Service(s)	Website
Devereux	800-338-3738	Residential	www.devereux.org
Lakeview Center	850-469-3549	Residential	www.lakeviewcenter.org
Daniel Memorial	904-296-1055	Residential	www.danielkids.org
Palm Shores	941-782-1752	Residential	www.palmshoresbhc.com
Citrus	954-518-4367	Residential	www.citrushealth.org
Sandy Pines	561-744-0211	Residential	www.sandypineshospital.com
Florida Palms Academy	954-963-0991	Residential	www.floridapalmsacademy.com

Baycare	727-834-3965	Residential	www.baycare.org
Brooksville Youth Academy	352-799-5654	Residential	https://youthopportunity.com/
Suncoast Behavioral Center	941-251-5000	Residential	https://suncoastbhc.com/
Devereux	321-775-4938	Specialized Therapeutic Group Home	www.devereux.org
LifeStream Turning Point Ranch	352-771-8996	Specialized Therapeutic Group Home	www.lsbc.net
SAYS	904-829-1770	Specialized Therapeutic Group Home	www.sayskids.org
Alternative Family Care	954-252-3089	Specialized Therapeutic Group Home	www.fgulfoastjewishfamilyandcommunityservices.org
Residing Hope	386-668-4774	Specialized Therapeutic Group Home	https://residinghope.org/

Substance Use Residential Treatment

Provider	Phone Number	Service(s)	Website
Aspire Health Partners	407-875-3700 x4256	Residential	https://aspirehealthpartners.com/programs-and-services/
IMPOWER- The Grove	321-639-1224 Option 2	Residential	https://www.impowerfl.org/programs-and-services/the-grove/
Lotus Behavioral Health	933-995-6887	Residential	https://www.lotusbh.org/

OUTPATIENT/IN-HOME/TELEHEALTH SERVICES

Outpatient Treatment is available to assist children/adolescents learn to cope with stressors and manage their symptoms of mental health and/or substance use disorders. Services can include individual therapy, family therapy group therapy, and psychiatry. The treatment may be provided in an office, clinical setting, in- home or through telehealth.

Service Provider	County	Phone Number	Website
IMPOWER	All Counties	(321) 639-1224-option2	https://www.impowerfl.org/programs-and-services/outpatient/
Aspire Health Partners	All Counties	(407) 875-3700 x6126	https://aspirehealthpartners.com
BAYS	Orlando Osceola Brevard	(813) 372-0235	https://www.bayskids.org/our-services/bays-family-connections
Devereux	Orange Osceola Seminole	(321) 207-8307	https://www.devereux.org/site/SPageServer/?pagename=fl_outpatient
Park Place Behavioral Health Care	Osceola	(407) 846-0023	https://www.ppbh.org/
Children’s Home Society	Orange Osceola Seminole	(407) 896-2323 x224	https://chsfl.org
Orlando Health-The Healing Tree **Victims of Child Abuse Only**	Orange	(407) 317-7430	https://www.arnoldpalmerhospital.com/facilities/the-howard-phillips-center-for-children-and-families/the-healing-tree
Circles of Care	Brevard	(321) 722-5200	www.circlesofcare.org

SECTION 5: INTEGRATED SERVICE DELIVERY APPROACHES

YOUTH SERVED BY MULTIPLE SYSTEMS

CFCHS collaborates with community partners in all four counties through local review teams conferences, crossover staffings, youth at risk staffings and interagency staffings which help identify high risk youth. CFCHS provides technical assistance on available community resources to divert the high-risk youth served by multiple systems in deeper end systems of care.

CFCHS facilitates Children Specific Staffing Team (CSST) staffings with the Managed Medicare Care Plans and other community stakeholders. The purpose of these staffings is to review information for high risk, non-child welfare youth who have been referred to Statewide Inpatient Psychiatric Program (SIPP) or Specialized Therapeutic Group Homes (STGH). Parties discuss the needs of the youth to ensure the appropriate treatment is sought and necessary referrals are made.

Dually Served Crossover Youth

Through interagency agreements between Department of Children and Families, Department of Juvenile Justice (DJJ), Agency for Persons with Disabilities (APD), Agency for Health Care Administration (AHCA), Department of Health- Children’s Medical Services (DOH-CMS), Embrace Families, Brevard Family Partnership and CFCHS, Circuits 9 & 18 developed a systems approach to coordinate local services for youth served by multiple agencies. During youth at risk staffings, children specific staffing teams, local review team staffings, and other interagency staffings, a youth may be identified as a “crossover” youth. The agencies involved participate in a Local Review Team

(LRT) staffings to identify resources, solutions for barriers, and additional supports to divert children from higher levels of care.

The Purpose of the Local Review Team is to resolve issues related, but not limited to:

- Notification and coordination between agencies for children referred for competency evaluations.
- Identification and review of placement for children waiting for services from any of the agencies listed.
- Review of resource capacity of local systems of care and joint interagency efforts that may be necessary for the development of needed local resources.
- Review of local policies, procedures, practices and opportunities to enhance the delivery of services to children.
- Review the possibility of the involvement of contracted providers in the problem resolution process
- Review of specific children in an effort to resolve any placement disputes when staff are not able to come to a settlement. The team shall review issues in the delivery of services and identify policies that may hinder coordination.

MEDICAID MANAGED CARE PLANS

CFCHS coordinates with Medicaid Managed Care Plans during the CFCHS Children Specific Staffing Team Process for the continued referral process for non-child welfare youth to the statewide inpatient psychiatric programs and therapeutic group homes. CFCHS adheres to this coordination through Children Specific Staffing Team (CSST) staffings with the Medicaid Managed Care Plans and continued notification of interagency staffings to the Medicaid Managed Care Plans involving high-risk youth when applicable. For general information on the different Managed Care Plans, please visit <https://www.flmedicaidmanagedcare.com/health/comparehealthplans>

Sunshine Health Plan

In Florida, most Medicaid recipients are enrolled in the Statewide Medicaid Managed Care program (SMMC). The program includes multiple Managed Medical Assistance (MMA) Managed Care Health Plans in the Agency for Health Care Administration (AHCA) regions throughout the state. These SMMC Health Plans provide Medicaid covered medical services, which include behavioral health, pharmacy, and transportation services. Sunshine Health operates both MMA Plans and other Managed Medicaid programs through specialty plans that serve unique populations. Sunshine Health is the Serious Mental Illness (SMI) Specialty Plan, the Child Welfare (CW) Specialty Plan, the Long-Term Care Plan, and the Children’s Medical Services (CMS) Plan in our region. In addition to covering basic Medicaid state plan services, the SMMC Health Plans and Specialty Plans also cover alternative In Lieu of Services (ILOS) that allow for behavioral health continuum of care services and all Sunshine Health Plans offer an array of Expanded Benefits. Furthermore, the Specialty Plans offer specialized programs, supports, Case Management, and Care Coordination services. For more information, visit <https://www.sunshinehealth.com/>

Aetna Better Health of Florida

Aetna Better Health of Florida is a Managed Care Plan operating in the Orange, Osceola, Seminole, and Brevard Counties. Aetna manages all state contractually required behavioral health services.

Through our integrated care model, we support care coordination with community resources, providers, non-governmental organizations, and not-for-profit organizations in delivering care and wrap around services to our members needing behavioral and physical health care. Our network of behavioral health providers supports our efforts to get Aetna members the behavioral health care they need in the most appropriate and expeditious manner possible to include utilization of in lieu of services and expanded behavioral health benefits. In collaboration with the respective managing entities, in the areas in which we serve, we are able to support the members and their families with an array of services with the goal of providing the right care at the right time. For more information, visit <https://www.aetnabetterhealth.com/florida/>

Humana Healthy Horizons

The Humana Healthy Horizons™ in Florida Medical Plan includes medical, pharmacy, vision, and hearing coverage, as well as coverage related to COVID-19 and telehealth services. Please see link for additional information <https://www.humana.com/medicaid/florida-medicaid>

Community Care Plan

Community Care Plan serves the health of the community through access to a high standard of health care and community resources. This health plan covers a wide range of local medical services, offering an excellent choice of physicians and benefits that help members get and stay healthy. Please see link for additional information <https://www.ccpcares.org/>

Simply Healthcare

As a Florida licensed health maintenance organization (HMO), Simply Healthcare offers health plans for people enrolled in Medicaid and/or Medicare programs. These plans are designed around meeting the unique health needs of members and includes many specialty plans. For more information, visit <https://www.simplyhealthcareplans.com/florida-medicaid/home.html>

HEALTHY START COALITIONS

Healthy Start oversees a centralized intake and referral process called Connect. One referral to Healthy Start can connect pregnant women and parents with a child three years or younger to a free home-visiting program. Services are designed to provide education and support to improve pregnancy and child health and developmental outcomes and include care coordination, prenatal and parenting education, education on health before, during and after pregnancy, stress management, a variety of screenings and linkage to resources.

Healthy Start Coalitions	Phone Number	Website
Orange County	(407) 228-1478	https://www.healthystartorange.org/
Seminole County	(321) 363-3024	https://www.healthystartseminole.org/
Osceola County	(407) 343-2100	http://osceola.floridahealth.gov/programs-and-services/wellness-programs/healthy-start/index.html

Brevard County	(321) 634-6101	https://www.healthystartbrevard.com/
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EARLY LEARNING COALITION

Early Learning Coalitions are dedicated to preparing children for success in school through high-quality school readiness, voluntary pre-kindergarten and after school programs. Coalitions connect families to educational, childcare, and mental health supports.

Early Learning Coalitions	Phone Number	Website
Orange County	(407) 841-6607	https://elcoforangecounty.org/
Seminole County	(407) 960-2460	https://www.seminoleearlylearning.org/
Osceola County	(321) 219-6300	https://elcosceola.org/
Brevard County	(321) 637-1800	https://www.elcbrevard.org/

DEPARTMENT OF JUVENILE JUSTICE

The mission of the Florida Department of Juvenile Justice (DJJ) is “to increase public safety by reducing juvenile delinquency through effective prevention, intervention and treatment services that strengthen families and turn around the lives of troubled youth”. Services provided through DJJ include crime prevention programs, medical/behavioral health services to youth adjudicated delinquent, detention/residential services, juvenile education programs, probation & community intervention. For additional information on DJJ services, please visit <https://www.djj.state.fl.us/>

Juvenile Incompetent to Proceed Program

Florida's Juvenile Incompetent to Proceed (JITP) Program provides competency restoration services to juveniles who have been charged with a felony prior to their 18th birthday and do not have the ability to participate in legal proceedings due to their mental illness, intellectual disability, or autism. The goal is to provide assessment, evaluation, and intensive competency restoration services to allow the juvenile to return to court and proceed with their court proceedings. Competency restoration services are provided by Twin Oaks Juvenile Development, Inc. and are available in both the community and in a secure residential setting.

AGENCY FOR PERSONS WITH DISABILITIES

The Agency for Persons with Disabilities (APD) serves the needs of Floridians with developmental disabilities. CFCHS collaborates with APD on any high-risk youth identified during the youth at risk staffings, children specific staffing team staffings, and other interagency staffings involving the managing entity that would require the assistance of possible APD services to discuss possible community resources and continuation of collaborative communication strategies. For additional

UNIVERSITY OF CENTRAL FLORIDA-CENTER FOR AUTISM AND RELATED DISABILITIES

The Center for Autism and Related Disabilities (CARD) at the University of Central Florida is available for training and technical assistance to any partner agency on issues related to autism spectrum disorders as a comorbid condition affecting individuals under their care or coordination. The CARD program is funded by the legislature to provide no-cost support to the community and its agencies, with the purpose of building capacity of natural supports to enhance the education, employment, functioning and quality of life of individuals in Seminole, Orange, Osceola, Lake, Brevard, Volusia and Sumter County who have been diagnosed with an autism spectrum disorder. The program is consultative and non-residential and cannot supplant the role of another state agency; however, the staff expertise in ASD may be of assistance to other partner agencies as they provide treatment, prepare for discharge, and transition the individual back to the community. The primary services available are training for professionals, parents and adults with autism spectrum disorders, technical assistance to agencies and employers, and individual consultation. For additional information on supports and resources, please visit <https://cfl.ucf-card.org/>

CHILD WELFARE INTEGRATION

CFCHS has signed a partnership agreement with the community-based care agency in Circuits 9 & 18- Family Partnership of Central Florida. The agreement addresses the needs of families involved in the child welfare system by providing integrated community support and services and outline a framework for communication and resolution of barriers.

SHARED VALUES

- Understanding and collaboration is essential to the effective integration of child welfare and substance abuse/mental health services.
- Timely response to mental health and substance abuse treatment needs is critical to achieving positive outcomes for children and families.
- Incorporate Recovery Oriented System of Care (ROSC) core guiding principles within the service delivery:
 - Strength-based approaches that promote hope
 - Anchored in the community
 - Person- and family-directed
 - Supportive of multiple pathways toward recovery
 - Based on family inclusion and peer culture, support, and leadership
 - Individualized approaches that are holistic, culturally competent, and trauma informed
 - Focused on the needs, safety, and resilience of children and adolescents
 - Approaches that encourage choice
 - Grounded in partnership and transparency
 - Focused on supporting people with creating a meaningful, fulfilling life in their community.

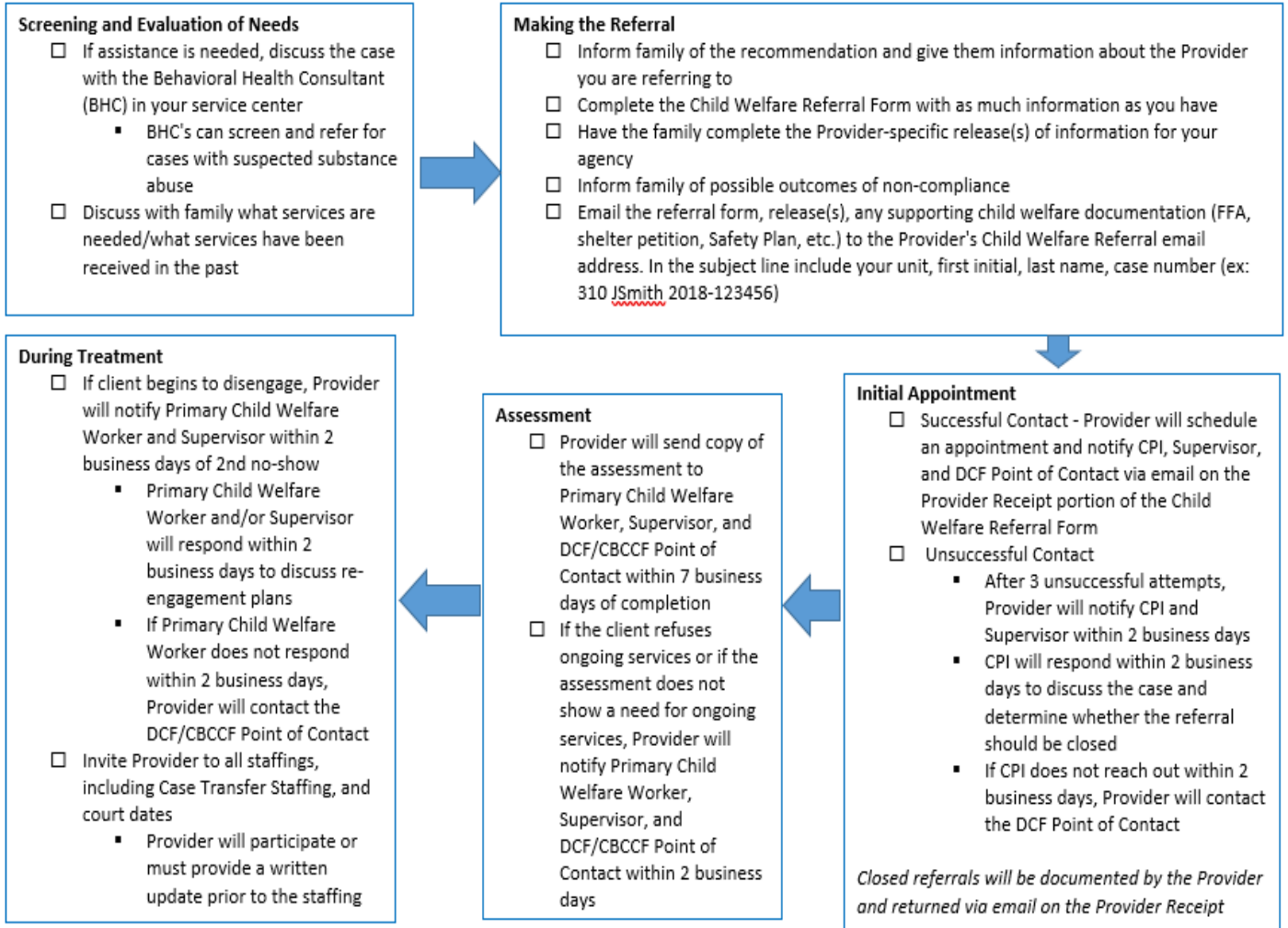
- Coordinated case planning is the primary mechanism for integrating the provision of services.
- Prevention strategies serve as viable means to strengthen families and reduce the need for mental health and substance abuse treatment.
- Services shall be based on Evidence Based Practices and should be accessible, flexible, consumer focused, family centered, culturally and linguistically competent, gender responsive, trauma-informed, and address co-occurring disorders.

In coordination with the Florida Department of Children and Families (Department), CFCHS, and Family Partnership of Central Florida work together to:

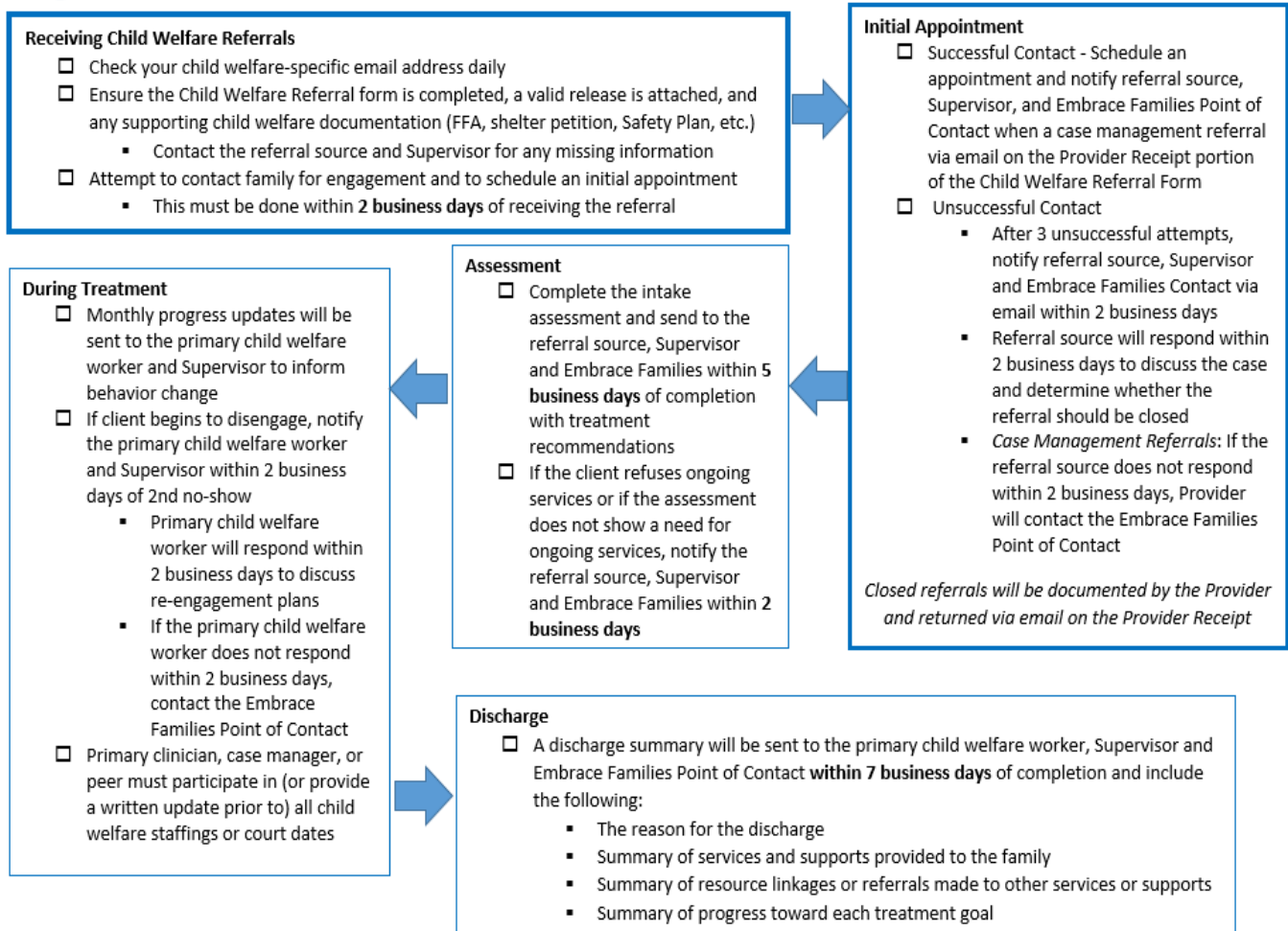
- Assess the current array of services available to families involved in the child welfare system, identify community needs, and realign services and funding to address gaps within available resources.
- Develop and maintain a referral and behavioral assessment process that addresses the needs of child welfare. This process will include:
 - A centralized referral route and point of contact,
 - A process to obtain required releases of information,
 - Information to be shared with the behavioral health providers at time of referral
 - Established timeframes for assessments to be shared with child welfare
- Develop and maintain a communication protocol to facilitate timely information sharing and concurrent planning between all parties involved in the family's care.
- Service delivery practices that ensure the coordination of care among child welfare, behavioral health providers and other stakeholders in the case.
- A plan to develop and implement child welfare preferred providers with Child Welfare Divisions that are established to focus on behavioral health services for families in the child welfare system. The preferred providers will complete assessment, outreach, engagement, integrated parenting interventions and maximize retention in treatment.
- A plan to ensure continuity of care in the community following child welfare involvement.
- A process to share data, measure mutual outcomes and mechanisms to track referrals to services, entry to services, length of stay and completion outcomes for families.

In addition to the partnership agreement, a child welfare referral protocol was established that outlines expectations of all involved parties from completion of a referral form to admission of a parent/caregiver into treatment. The referral protocol was developed based on different county processes. Below are a basic outline of the child welfare referral process:

▲ Child Welfare Integration-CPI Referral Protocol



Integration Protocol for Providers



SECTION 6: REGIONAL, EVIDENCE-INFORMED, INNOVATIONS FOR YOUTH AND ADULTS

RECOVERY ORIENTED SYSTEM OF CARE (ROSC)

Recovery Oriented System of Care (ROSC) is a network of clinical and nonclinical services and supports sustaining long-term, community-based recovery. As local entities, ROSCs implement the guiding principles of recovery orientation while reflecting the unique variations in each community's vision, institutions, resources, and priorities. Behavioral health systems and communities form ROSCs to¹:

- Promote good quality of life, community health, and wellness for all.
- Prevent the development of behavioral health conditions.
- Intervene earlier in the progression of illnesses.
- Reduce the harm caused by substance use disorders and mental health conditions on individuals, families, and communities; and
- Provide the resources to assist people with behavioral health conditions to achieve and sustain their wellness and build meaningful lives for themselves in their communities.

¹ Source: <https://www.myflfamilies.com/service-programs/samh/rosch/index.shtml/>

CFCHS supports and promotes the State’s initiative of transforming behavioral health services to a recovery-oriented system. In partnership with the DCF Recovery Oriented Quality Improvement Specialists (ROQIS), CFCHS will continue to provide education on the ROSC framework and expand recovery support services incorporating the State’s priority areas²:

- **Collaborative Service Relationship** indicated by a mutual service relationship between the provider and the service recipient that shift from a hierarchy model to the shared decision-making process and best practices that support the service recipients.
- **Cross-system Partnerships** indicated by strategically leveraging resources and working across sectors to achieve common goals.
- **Community Integration** indicated by assertively connecting service recipients to natural community-based resources to promote development of interest, skills, and supportive relationships.
- **Community Health and Wellness** indicated by a focus on prevention, early intervention, wellness and increased recovery capital through targeted community education, strategic partnership development, and improved connections between system and local communities.
- **Peer-based Recovery Support** indicated by increasing access to peer-based recovery support services.

HIGH FIDELITY WRAPAROUND

High Fidelity Wraparound is an evidence-based, strength-based, team-supported planning process to help achieve a highly individualized plan to address an individual’s complex emotional and behavioral needs. Wraparound works with the individual to build a team of natural and formal supports to help them reach their goals and vision to have a better life. Wraparound is built on the following key system of care values:

- Individualized
- Strengths-Based
- Voice & Choice
- Culturally Competent
- Natural Supports
- Community Based
- Collaboration & Integration
- Unconditional Care
- Team Based
- Outcome Base

The Wraparound process aims to achieve positive outcomes by providing a structured, creative and individualized team planning process that, compared to traditional service planning, results in plans that are more effective and more relevant to the individual. Plans are individualized based on persons unique culture and include non-traditional interventions and supports (i.e., recreational activities, faith-based supports, peer support, etc.). There are four phases in Wraparound – Engagement, Planning, Implementation and Transition. Each phase includes significant activities and events focused on a goal towards purposeful transition.

- Engagement- During Engagement a key activity is the Wraparound assessment which focuses on evaluating the individual and families’ strengths, needs, vision, and culture discovery.

² DCF Guidance 35-Recovery Management Practices

- Planning- When a Wraparound plan is developed, the individual and family’s voice and decisions are integral in what is created. Plans fail, people don’t, so when goals are not being achieved, teams reconvene to modify the plan.
- Implementation- Crisis planning is done proactively with individuals/families input and with a goal to help the individual become aware as to what happens before a crisis and to learn to manage their own crises over time with appropriate supports.
- Transition- Ultimately, the team plans a purposeful transition out of formal services in a way that is consistent with Wraparound principles, and that supports the individual and family in maintaining the positive outcomes achieved.

SECTION 7: DATA SYSTEMS AND EVALUATION

CONTINUOUS QUALITY IMPROVEMENT

The mission of CFCHS is to manage a quality behavioral health system of care that brings help and hope to individuals and families. Continuous quality improvement is an important component of the mission of the Network and helps to ensure the quality and consistency of the array of behavioral health services offered by community stake holders. One strategy utilized to focus on continuous quality improvement is through data surveillance and evaluation. Common reporting errors are addressed through communications with impacted providers or the network, as appropriate, with recommended approaches for improvements. Exception reports are developed to address ongoing reporting of situations that are potentially incorrect, such as conflicting employment information. Data collection for programs reported via supplemental reporting processes are revised as needs evolve.

SECTION 8: COORDINATED SYSTEM OF CARE PLAN

The purpose of the HB945 Managing Entity Plan is to serve as the foundation for addressing the key children’s behavioral health gaps as defined by community stakeholders, provider partners, individuals with lived experience/caregivers and CFCHS staff. The plan will help inform, enhance, and drive children’s system of care efforts for each child in need of behavioral health services.

PRIORITIES

In collaboration with key community partners, CFCHS developed and distributed a behavioral health needs assessment questionnaire to assist in identifying gaps in children services and areas for improvement. Based on 145 responses received, the top mental health and substance use needs by county are:

ORANGE COUNTY	
Mental Health	Substance Use

<ul style="list-style-type: none"> • Crisis Intervention/Crisis Stabilization Services • In-Home Treatment Services • Prevention Programs- Mental Health • Support Services (i.e. tutoring, mentoring) • Wraparound Services 	<ul style="list-style-type: none"> • Prevention Programs • Detoxification Services • In-Home Treatment Services • Wraparound Services • Residential Treatment
OSCEOLA COUNTY	
Mental Health	Substance Use
<ul style="list-style-type: none"> • Crisis intervention/crisis stabilization services • In-Home Treatment Services • Prevention Programs- Mental Health • Support Services (i.e. tutoring, mentoring) • School-Based Mental Health Services 	<ul style="list-style-type: none"> • Prevention Programs • In-Home Treatment Services • Detoxification Services • Support Services (i.e. tutoring, mentoring) • Residential Treatment
SEMINOLE COUNTY	
Mental Health	Substance Use
<ul style="list-style-type: none"> • Crisis intervention/crisis stabilization services • Support Services (i.e. tutoring, mentoring) • Wraparound Services • In-Home Treatment Services • School-Based Mental Health Services 	<ul style="list-style-type: none"> • Prevention Programs • In-Home Treatment Services • Wraparound Services • Detoxification Services • Support Services (i.e. tutoring, mentoring)
BREVARD COUNTY	
Mental Health	Substance Use
<ul style="list-style-type: none"> • Prevention Programs- Mental Health • Crisis intervention/crisis stabilization services • School-Based Mental Health Services • In-Home Treatment Services • Support Services (i.e. tutoring, mentoring) 	<ul style="list-style-type: none"> • Prevention Programs • Wraparound Services • Public Awareness/Education • Detoxification Services • Support Services (i.e. tutoring, mentoring)

OPPORTUNITIES FOR IMPROVEMENTS

The top five barriers to accessing behavioral health services identified:

- Limited funding/capacity for needed treatment
- Availability of services needed in each county
- Cost of mental health/substance abuse treatment
- Lack of knowledge about available resources
- Availability of evening/weekend appointments

Additional feedback for improvements:

- Services need to be offered to children under the age of five, rather than dismissing mental health concerns as "parenting deficiencies".
- Access to in-person services for children and adolescents.
- Specialized outpatient services for problematic sexual behavior.
- Increase availability of resources to young adults that have a developmental delay or disability.
- No wrong door process in government centers for ease of access to various resources.
- Decrease in waitlists for services.
- Emphasizing the importance of mentoring a child while they are young to provide them with the tools to navigate decision making.
- Increase in school mental health services for youths addressing bullying/peer pressure in schools.
- More in home substance awareness program offered by license/certified substance abuse professionals
- Mental health service in schools other than a video to watch such as wellness-recovery, coping techniques, and build resiliency. The service should be provided by mental health providers, not teachers.
- More programs with a group therapy component that allows youth or families to meet with other youth and families to strengthen their natural support systems beyond service providers and allow for more peer correction for youth and parents, not just professionals giving them new perspectives or tips all of the time
- Increased funding to allow for fair pay for mental health service providers and increased programming in communities.
- Additional resources that will support the family whether its food, housing, or financial need.
- Implementation of more therapeutical groups and therapy in the school system. Students that need assistance are in the younger grades where the behaviors start.
- additional funding for housing for youth 21-24, and additional funding for therapy that is not covered by Medicaid.
- Better resources for coordination of care.
- Community Outreach- Weekends to better connect with parents / guardians who may be unavailable Monday-Friday 8am-5pm.
- Increase of funding for prevention services
- Increase parenting education
- Utilization of alternative transportation to receiving centers for involuntary examinations for non-violent patients. Transportation should be handled by family members or ambulances like any other health care crisis/emergency.

- Combined approach to support the family as well as the child/adolescent in question. Needs to be a whole approach as it is difficult for the child to succeed if the support only comes from the school.
- Respite care for children with mental health
- Additional funding for victims of Human Trafficking (HT) Safe House placement for community children.
- Early Childhood Consultation Services in Childcare Facilities. Additional affordable childcare.
- Collaboration with Insurance companies to increase the diversity of services and evidence-based practices in early childcare settings such as Infant and Early Childhood Mental Health Consultation.

SUMMARY AND NEXT STEPS

- CFCHS will collaborate with community partners in reviewing current funding resources to realign or expand services in addressing the opportunities for improvement outlined in this plan.
- CFCHS will submit to an enhancement plan to the department by September 1 of each year that includes a description of strategies for enhancing services and addressing the top priorities needs identified in this plan
- CFCHS and community partners will review and update this plan at least every 3 years.