OSCEOLA COUNTY
TRANSPORTATION PLAN
IN ACCORDANCE WITH

FLORIDA MENTAL HEALTH ACT
(BAKER ACT)
FLORIDA STATUTE 394.462(3)
& CS/SB 12: MENTAL HEALTH AND SUBSTANCE ABUSE

ACUTE CARE
TRANSPORTATION PLAN

FIVE-YEARS
2025-2030
SUBMITTED TO:

FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES (DCF) CIRCUIT 9
SUBSTANCE ABUSE AND MENTAL HEALTH PROGRAM
OFFICE
FOR APPROVAL BY:
Taylor Hatch
Secretary
Department of Children and Families

DEPARTMENT OF CHILDREN AND FAMILES
SUBSTANCE ABUSE AND MENTAL HEALTH
OSCEOLA COUNTY ACUTE CARE

-TRANSPORTATION PLAN-

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Florida Mental Health Act ("Baker Act")
Florida Statute 394.462 (3)

Osceola County Transportation Plan

ACUTE CARE PLAN
2025-2030

In accordance with the requirements outlined in CS/SB 12: Mental Health and Substance Abuse and Chapter Florida Statute 394.462 (3), Florida Mental Health Act, commonly referred to as the "Baker Act", the Department of Children and Families (DCF) Osceola County is requesting from the Secretary of DCF authorization to continue the operation of the centralized receiving system single point of entry and transportation plan for Osceola County. Specifically, Osceola County is requesting the renewal of the Osceola County Transportation Plan which has been in place since February 10, 2015 and renewed in 2020 for a second five-year period. The subsequent plans of 2015 and 2020 provide for an "Exception" to FS 394.462 that requires transporting persons in need of mental health care to the nearest receiving facility.

The current and updated transportation plan is congruent with the conditions of CS/SB 12: Mental Health and Substance Abuse and Chapter 394.462 Florida Statues in order specifically:

1. An arrangement centralizing and improving the provisions of services within a district, which may include an exception to the requirement for transportation to the nearest receiving facility;
2. An arrangement by which a facility may provide, in addition to required psychiatric services, an environment and services which are uniquely tailored to the need of an identified group of persons with special needs, such as persons with hearing impairments or visual impairments, or elderly persons with physical frailties; or
3. A specialized transportation system that provides an efficient and humane method of transporting patients to receiving facilities and treatment facilities.

BACKGROUND: COMMUNITY PARTNERSHIP & PROBLEM SOLVING

In January 2008 Osceola County received a Reinvestment Planning grant to develop a plan to more appropriately provide treatment for individuals which would reduce the impact on the criminal justice system in Osceola County. The Planning Committee was Chaired by Commissioner Paul Owen.

In January 2009 the plan was placed under the oversight of the Public Safety Coordinating Council for Osceola County, Chaired by the Honorable Judge Belvin Perry.

One of the key goals of the plan was to create a Central Receiving facility in Osceola County to provide timely access to appropriate services.

On February 10, 2015, William S.D'Aiuto, DCF Regional Managing Director-Central Region acting on behalf of Mike Carroll, Secretary of the Department of Children and Families, authorized a transportation exception pursuant to s.395.462(4), F.S., for Osceola County as described in the 2014-2019 submitted. Park Place Behavioral Health Care was identified as the central intake receiving facility under the plan. This plan was in effect for a five-year period ending in 2020 and then renewed again for an additional five year period ending in 2025.

In 2016, Osceola Mental Health, Inc. d.b.a. Park Place Behavioral Health Care received designation as the single point of entry for the Osceola County Central Receiving System of Care as described in CS/SB 12: Mental Health and Substance Abuse. Park Place has been operating as the single point of entry to the Central Receiving System of Care, and as such, is responsible for meeting the following outcomes and measurements which are reported to the Public Safety Coordinating Council and to Central Florida Cares Health System on a quarterly basis.

OUTCOMES:

To serve as a single point of entry in to the coordinated system of care as defined in CS/SB 12: Mental Health and Substance Abuse, and is responsible for assessment and evaluation, both voluntary and involuntary, and treatment or triage of patients who have a mental health or substance use disorder, or co-occurring disorders.

MEASUREMENTS AND OUTCOMES:

- To reduce drop-off processing time by law enforcement officers for admission to crisis services.
    - The average drop off time for law enforcement of twelve minutes was reduced to an average drop off time of 5.2 minutes for those brought to the Central Receiving System of care.
- To reduce the number of individuals admitted to a forensic state mental health treatment facility through coordinated care and diversion activities.
    - Forensic State Hospital admissions have increased slightly since the beginning of the Central Receiving System of care was assigned. This is due in part to an increase in acuity of those identified and served.
- As of July 1, 2025, this measure has been updated to read: Annually fewer than 5 percent of all individuals enrolled will be admitted to a State Mental Health Treatment Facility.
    - Based on fiscal 2024-2025 data, for those entering crisis services, 1.4% were admitted to State Hospital.
- To increase participation and engagement in community-based behavioral health services after referral.
    - Over ninety-seven percent of the individuals brought by law enforcement to Park Place receive care immediately upon referral, while the others receive a referral for medical clearance, are referred to outside community agencies, or are referred for outpatient services. Approximately one percent refuse services at the door.
- To divert from jail those defined as the target population.

- Park Place participates in Community Intervention Training for those in law enforcement and related filed in order to aid officers in dealing with those with mental health and substance use disorders. The transportation plan allows officers to bring individuals with mental health and substance use disorders to a single point of access to aid in the determination of their needs.

- To see an increase in the number of "days in the community" for the target population between crisis and emergency room admissions.
  - Over 90% of those referred to Park Place for services and who accept care coordination, experience an increase in days in community between high end services. During this fiscal year, nearly 97% experience more days in community.
- To see an increase in number of days between arrests for the target population.
  - Individuals who have a history of arrest and are referred for mental health or substance use disorder treatment, experience more days in community between arrests. If the individual participates in care coordination services, 95% experience greater than 65% more days in community between arrests with most 98% not re-entering corrections.
- Another new outcome beginning July 1, 2025 will be to report re-admission rates. Annually fewer than twenty-five percent of all individuals served will be re-admitted to a Baker Act Receiving Facility or Inpatient Detoxification Unit within the Central Receiving System.
  - Based on our annual data for 2024-2025 fiscal year, our current re-admission rate is 20 %.

PERFORMANCE MEASURES AS OF JULY 1, 2025

1. Reduce drop-off processing time by law enforcement officers for admission to crisis services; ***until they are maintained at less than 10 minutes***,
2. Increase participant access to community-based behavioral health services after referral,
3. ***Annually fewer than 25 percent of all individuals*** served will be re-admitted to a Baker Act Receiving Facility or Inpatient Detoxification Unit within the Central Receiving System.
4. ***Annually fewer than 5 percent of all individuals*** enrolled will be admitted to a State Mental Health Treatment Facility.

GOVERNANCE

The Public Safety Coordinating Council serves as the Governing Board for the Osceola County Central Receiving System of Care.

The Central Receiving System Governing Board supports the key principles and elements of a Central Receiving System of Care. They support a central receiving system has a designated central receiving facility that serves as a single entry point for persons with mental health or substance use disorders, or co-occurring disorders. The single point of entry maximizes existing

resources, reduces and/or eliminates duplication of services, and ensures a seamless system of care for the individual in crisis and their families.

The Central Receiving Facility serves as a central point for assessment services for individuals who are presented by law enforcement, and ensures that law enforcement officers have a more appropriate location to take individuals with mental health and/or substance use disorders for assessment.

In effort to improve the condition and integration of mental health and substance abuse treatment in Osceola County, the Central Receiving System Governing Board actively examines how the system as a whole can better deliver services to persons with dual disorders. The goal is to properly assess the person at the "front door" of the system and engage them in treatment appropriate to identify needs. The Central Receiving Center Governing Board monitors the implementation and coordination of the 13 elements of a Central Receiving System as identified in CS/SB 12: Mental Health and Substance Abuse among providers and across the community. Having a transportation plan in place is one element in a successful Central Receiving System of Care.

The single point of entry Central Receiving model adopted by Osceola County has proven to return law enforcement officers back to the street in a matter of minutes, increasing public safety. The average length of time for officers during drop off who have completed their paperwork prior to arrival is 5.2 minutes.

OBJECTIVES:

1. Improve the centralized system of transportation, intake, comprehensive assessment and provide immediate access to emergency behavioral healthcare services for adult citizens of Osceola County.

2. Provide an efficient and effective use of existing resources.

3. Reduce/eliminate duplication of services.

4. Reduce the burden on the Central Booking Unit of the Osceola County Jail by diverting individuals charged with minor offenses and who have been identified with substance use and/or mental health disorders.

5. Reduce the over-population crisis in community emergency rooms by diverting individuals with psychiatric conditions from hospital emergency rooms and update medical screening policies as necessary.

6. Provide a range of acute care services that would treat persons in the least restrictive setting in the community.

7. Enhance the system to serve persons with co-occurring mental health and substance use disorders.

8. Provide specialized services to adult and elderly that are homeless and may have misdemeanor charges.

9. Expedite the assessment and medical screening process to allow law enforcement to return more quickly to the road thereby increasing public safety.

10. Provide a dignified, humane and streamlined method of transportation to and among acute care facilities, and reduce the demand on law enforcement for Baker Act transports.

11. Reduce the liability for law enforcement officers making decisions regarding treatment needs through enhanced and expanded Crisis Intervention Team (CIT) training. This training ensures that law enforcement officers are able to appropriately handle the large number of persons they encounter with mental health issues and/or substance use disorders and assist them in making appropriate decisions while in the field.

IMPLEMENTATION OF THE PLAN:

The Central Receiving System concept is an integrated system-of-care involving the jail system, court system, law enforcement, hospitals, emergency rooms, and mental health and substance abuse providers that will provide immediate access to emergency behavioral health services and reduce the strain on limited and extremely valuable community resources.

By maintaining the Coordinated Centralized Receiving System, our community utilizes effective and efficiently very limited but valuable resources.

Park Place Behavioral Health Care continues to be designated as the Single Point of Entry to the Coordinated Centralized Receiving System of Care for Osceola County.

CRC and LAW ENFORCEMENT OFFICERS (LEO):

The Central Receiving Facility serves as a central point for assessment services for adult citizens of Osceola County who are presented by law enforcement on Baker Act, Marchman Act, Exparte, and/or Voluntary Status. The Central Receiving Facility is located at 206 Park Place Blvd., Kissimmee, FL 34741 under the license and receiving facility designation of Park Place Behavioral Health Care. This facility currently has a forty (40) bed Crisis Stabilization unit for adults, a twenty (20) bed crisis stabilization unit for children, a 12 bed withdrawal management/detoxification unit for adults, a ten (10) bed Addiction Receiving Facility for adults and a three (3) bed withdrawal management/detoxification unit for children.

If there is a medical condition requiring immediate medical care, individuals are transported directly to the nearest hospital emergency room where the person will be treated and assessed for further disposition. Although the plan is designed for enhanced medical triage and evaluation, this facility will not replace treatment of emergency rooms or be licensed as a general hospital.

If an individual exhibits signs of a behavioral health crisis but demonstrates good family or community support, and does not require an involuntary admission to participate in services, Mobile Crisis may be called to serve the individual, by law enforcement in lieu of transporting the individual to the Central Receiving Facility. Devereux Advanced Behavioral Health responds to Mobile Crisis Calls for individuals from birth to 24 years of age, and Park Place Behavioral Health Mobile Crisis responds to those 25 and older but is available to respond to individuals of all ages.

A staff of trained clinicians in the mental health and substance abuse field conduct all assessments for the Central Receiving Facility. These professionals play an essential role in coordinating services and make appropriate referrals to the proper treatment facility that is capable of serving the needs of the individual. The Central Receiving Facility staff take into consideration individual choice, and least restrictive level of care, when making a determination of which facility to refer.

***WALK-INS AND PHONE TRIAGE*:**

As a Designated Receiving Facility, walk-ins, are accepted at the Access Center which is co-located adjacent to the Central Receiving Facility however, the Central Receiving Facility is prioritizes the use of law enforcement. The establishment of the Central Receiving Facility has impacted the overall volume of Baker Act, Marchman Act, and Voluntary persons brought by Law Enforcement as Law Enforcement uses this option in lieu of arrests.

ANCILLARY SERVICES:

Coordination of Care connects individuals to other services within the Coordinate Centralized System of Care. They work to ensure persons with multiple admissions to high end services, emergency departments, crisis services, detoxification services, or corrections are supported in order to improve the number of days the individual is able to be successful in the community.

Outpatient and aftercare services are available to work with individuals with substance use disorders, mental health disorders, as well as co-occurring disorders. The co-location of these ancillary services at Park Place's main campus and its' offsite campus serves to further expand the continuum of care. A program that addresses the various disorders and integrates the system of care has been a proven model with this population.

Targeted and Intensive Case Management can positively impact recurrence of decompensation and return to jail, inpatient care, or other high end services.

Psychotropic Medication and Medication Assisted Treatment for both substance use disorders and mental health disorders have been enhanced at this location. There is a need to ensure medication clinics are available to encourage compliance with medication and improve personal functioning in order to reduce recidivism to jail and/or to other more intensive high-end treatments.

Supportive and affordable housing is another component that is very important to the recovery phase of the disorders being treated. The homeless population represents a large percentage of the indigent population struggling with mental health, substance abuse, and co-occurring disorders. Limited transitional housing is available at Park Place and throughout the central region. PATH case managers are assigned to those who are homeless when they are brought to the Central Receiving Facility for support. For those with a serious mental illness and/or co-occurring substance use disorder, who are able to live independently with limited support, Park Place operates a 30 unit apartment building offering permanent, supported, affordable housing.

ACCOUNTABILITY:

The ultimate accountability lies statutorily with the **State of Florida Department of Children and Families Circuit 9 Program offices as the State "Substance Abuse and Mental Health Authority." The State of Florida Mental Health and Substance Abuse System is a community-based system and most direct services are contracted with providers through a managing entity. The DCF/SAMH Office, along with Central Florida Cares Health System, are responsible for:**

- Continuing system oversight and contract management
- Monitoring and identifying needs and gaps in services for the Coordinated Central Receiving System
- Monitoring the Transportation Plan in accordance with the Baker Act and CS/SB 12: Mental Health and Substance Abuse
- Safeguarding that individuals' rights are protected under contract
- Recommending and Monitoring of the Designation of Public and Private Baker Act Receiving Facilities
- **DCF/SAMH** annual evaluation of the quality of services through contract review
- Participate in the Governing Board of the Coordinated Central Receiving System
- Coordinate with Osceola County Government:
    - Resolving issues related to operation of the facility
    - Assist with resolving disputes and grievances
    - Support for the monitoring of the system of care

OVERSIGHT:

Osceola County Government designated Park Place Behavioral Health Care as the single point of entry to the Central Receiving System. The contract in place holds Park Place Behavioral Health

Care accountable to the mission and Florida State Statutes regarding Baker Act Receiving Facility, Marchman Act Procedures and CS/SB12.

Osceola County Government along with the Central Receiving System Board will ensure measurable and meaningful outcomes to verify the efficiency of the Central Receiving Facility.

The County has appointed the Public Safety Coordinating Council as the Governing Board for the Central Receiving System.

***UTILIZATION MANAGEMENT*:**

The publicly funded Baker Act system is targeted towards indigent persons who are in need of emergency care and ongoing treatment. Approximately 27% of Park Place's Crisis Stabilization beds are funded by the State for those who are indigent. Individuals with commercial insurance plans or managed care coverage are admitted only to Park Place's non-funded beds, and the funded beds are reserved for the indigent persons only.

If a person presents himself/herself to the Central Receiving Facility or is brought by law enforcement, and it is clear that a particular hospital or facility is the individual's provider or preferred health insurance provider, then the person will be referred to and transportation arranged to that facility for treatment.

Persons who have Medicare are considered to be insured/funded when they present for Baker Act services, and will generally be referred to a Private Receiving Facility for continued care. This is done to ensure that Medicare recipients are accessing treatment in a setting covered by their plans, and are not utilizing limited bed capacity. However, as specified under Florida Administrative Code and in Florida State Contract with the Public Receiving Facility, those persons with Medicaid [who are indigent] may use publicly funded beds in order to ensure timely access to treatment and quality care if necessary.

TRANSPORTATION SERVICES: SINGLE POINT OF ACCESS TO THE CENTRALIZED SYSTEM

The Osceola Transportation Plan specifically requests authority to continue to transport persons in need of mental health services under the Baker Act to a centralized assessment location rather than the "nearest receiving facility". In Osceola County, the Central Receiving Facility, located at 206 Park Place Blvd, Kissimmee, FL 34741 is the identified single point of entry to the system of care. This location is easily accessible by law enforcement, emergency medical transportation services, and the public.

Involuntary referrals and admissions under the Baker Act or Marchman Act are transported directly to the Central Receiving Facility rather than to a hospital emergency room or other Baker Act receiving facility for evaluation unless medical necessity dictates differently. This reduces the time law enforcement personnel have to spend to get someone to appropriate acute

care and enables law enforcement and first responders to return to the community. It should be noted that although there is a single point of access to the Centralized Receiving Center, there are multiple "points of entry" into the system, such as outpatient and provider based settings, mobile crisis, human service agencies, other community agencies and groups, as well as self-referrals.

TRANSPORTATION SYSTEM:

Central Receiving System has transportation services readily available pursuant to Florida State Statute 394.462(1). Osceola County Government has identified Osceola County Sheriff department for responsibility for transporting persons under an Ex-Parte or Marchman Act court order to the identified point of entry to the Central Receiving System.

Law enforcement will remain responsible for all involuntary transports to the Central Receiving Facility; however, upon arrival at the Central Receiving Facility, Park Place Behavioral Health Care will provide further transfer for continued care needs.

Osceola County Government contracts with Park Place Behavioral Health Care which serves as the Community Mental Health Center and the publicly funded Single Point of Entry to the Central Receiving System. Park Place Behavioral Health Care is responsible for transportation services from the Central Receiving Facility to other identified treatment facilities should a different facility be identified as needed, or requested by the individual, as they have the means and ability to provide dignified and safe transportation to persons experiencing a crisis in their lives; that may be a "danger to themselves or others" or are "self-neglectful".

Park Place Behavioral Health Care, will transport from the Central Receiving Center to the treatment facility designated by the Central Receiving Center for continued care, and may transport to the nearest area hospital when there is evidence that medical care is necessary. Ambulances should still be used for urgent or emergent care, as necessary.

MEDICAL CLEARANCE:

There are "Community Standards for Medical Clearance." These community guidelines are used among psychiatrists, mental health professionals, and emergency room physicians. It is an essential part of the day-to-day operations in the Baker Act system to ensure that persons who are assessed to need medical care are treated for high-risk physical health care conditions either at an emergency department or health care facility. Once a person is "medically cleared" it is understood and acknowledged that the person will be transferred to the Central Receiving Facility. In the event a person arrives at an emergency room, it is still the expectation that the hospital will abide by Federal Medicare Guidelines Section 1867, (COBRA) Examination and Treatment for Emergency Medical Conditions (and women in labor-EMTALA) to screen, examine, stabilize, treat and transfer individuals appropriately. Peer Recovery Workers from Park Place may be called to aid the Emergency Departments with engaging and connecting the individual in seeking appropriate behavioral health services after stabilization in the emergency

room. In addition, the Crisis Stabilization Unit (CSU) works with the emergency room to ensure coordination of the ongoing care of the individual, whether it is an outpatient discharge, referral to outside services, or inpatient treatment. This system has worked well and a significant amount of trust between mental health providers and hospitals has been built in order to provide access to care for persons in need of crisis stabilization or health related symptom reduction.

INDIVIDUAL AND/OR FAMILY CHOICE:

The publicly funded Baker Act system is targeted towards persons who are in need of emergency care and ongoing treatment.

Mental Health professionals in Osceola County are sensitive to individual or family provider choices. If a person presents himself or herself to the Central Receiving Facility, or law enforcement and it is clear that a particular hospital or facility is the individual's preferred provider, the person may be transported directly to that facility under this plan. Obviously, clinical and public safety circumstances must be assessed in the process.

After a person is assessed at the Central Receiving Facility and deemed to be in need of inpatient psychiatric care at another facility, he or she is usually directed and referred to the hospital facility where their insurance benefits will cover the cost of care. The Central Receiving Facility provides the transportation to that needed level of inpatient care.

The Central Receiving Facility personnel interface with all Osceola County law enforcement agencies in the coordination of assessments and transportation to the Central Receiving Center, Federal Law Enforcement Agencies, and Florida Highway Patrol. These relationships are an important element in the support of the Centralized System of Care. Mutual trust and respect for each other and the relationships built have proven to be important for Osceola County's natural disaster preparedness and crisis planning.

MEDICAID/MEDICARE RECIPIENTS:

Persons who are eligible for Medicaid and Medicare are considered funded persons when they present themselves for Baker Act Services. With the exception of Medicaid recipients who have both, Medicaid and Medicare, most eligible Medicaid recipients receive their mental health benefits on a fee for service basis from a Health Maintenance Organization (HMO). Per Baker Act statute, an accepting provider is responsible for transportation to an appropriate facility if the person has a funding source.

CRISIS INTERVENTION TRAINING (CIT):

The Central Receiving Facility Team in collaboration with the Osceola County Sheriff's Office, the City Police Departments, Community Partners, persons, and families receiving services has implemented a Crisis Intervention Team involving multiple law enforcement agencies in Osceola

County. Besides advanced training on the Baker Act, Marchman Act, and how to intervene with persons with mental illness and substance use disorders, law enforcement personnel receive continuing education on the Transportation Plan.

CO-OCCURRING DISORDERS: MENTAL ILLNESS AND SUBSTANCE RELATED DISORDERS:

In an effort to improve the coordination and integration of mental health and substance abuse treatment in Osceola County several committees are examining how the system as a whole can better deliver services to persons with dual disorders. Professional judgments are used everyday on whether these persons fall under the Baker Act (Mental Health) or Marchman Act (Substance Abuse). The goal is to appropriately assess the person at the "front door" of the system and engage them in treatment. Providers work together to meet the needs of these individuals. The community has achieved consensus to implement co-occurring services across the county. Crisis Stabilization services and detoxification services play essential roles in coordinating and ensuring that persons are transported to an appropriate facility that is capable of serving persons with co-occurring disorders.

DOMAINS OF PERFORMANCE AFFECTED:

The Public Safety Coordinating Council, in its effort to continually improve the system, has identified several areas of performance that are applicable to delivering acute care services in Osceola County. The goal of "taking the system to a new level" is directly related to improving the quality of care for those persons served. The following domains of performance are driving factors and community standards in achieving excellence.

- Immediate access and availability for psychiatric acute care services
- Improvement of clinical assessments at the "front door"
- Linking and providing timely aftercare services (case management)
- Monitoring appropriate lengths of stay relative to the needs of the individual
- Reviewing Medical Clearance Policies with emergency rooms and hospitals
- Assessing the need for current and future treatment capacity
- Development of pre/post booking jail diversions
- Contractual accountability with state and county government
- Demonstrated cost savings to the community, hospitals and law enforcement
- Enhancing community partnerships

SYSTEM CAPACITY:

The Central Receiving System of Care is designed to include a full array to acute care services that are flexible enough to change with new statutes, rules, financing options and, most importantly, individual needs and rights. The Central Receiving Facility is a combination of

crisis services for adults who meet the Baker Act and Marchman Act, Children who meet the Baker Act, Public and Private Baker Act Receiving Facilities (beds), medical screening and triage services, behavioral assessment and evaluation, continuing behavioral health care services, and transportation. The following resources are available to this system of care:

Central Receiving Facility- These are non-residential acute care services available 24 hours a day and seven days a week to intervene in a crisis or provide emergency care, assessment, and referral.

40 Bed Adult Crisis Stabilization Unit (CSU) operated by Park Place Behavioral Health Care at 206 Park Place Blvd., Kissimmee, FL 34741: A state licensed, publicly funded, designated receiving facility providing secure residential acute care 24 hours-a-day and seven days-a-week to provide brief, intensive mental health stabilization services. These services meet the needs of individuals, 18 years-of-age and above, who are experiencing an acute crisis and who, in the absence of a suitable alternative would require hospitalization.
20 Bed Children's Crisis Stabilization Unit (CCSU) operated by Park Place Behavioral Health Care at 206 Park Place Blvd., Kissimmee, FL 34741: A state licensed, publicly funded, designated receiving facility providing secure residential acute care 24 hours-a-day and seven days-a-week to provide brief, intensive mental health stabilization services. These services meet the needs of individuals, 17 years-of-age and below, who are experiencing an acute crisis and who, in the absence of a suitable alternative, would require hospitalization. Co-located on this unit are two additional programs, a three (3) bed Short Term Residential Facility for Adolescents, and a three (3) bed withdrawal management/detoxification unit for Adolescents.

10 Bed Adult Detoxification Unit and 10 Bed Addiction Receiving Facility Serving Marchman Acts: operated by Park Place Behavioral Health Care at 206 Park Place Blvd., Kissimmee, FL 34741: Provides withdrawal management services and referral for those 18 and older who are at risk of physical withdrawal from the abuse of a psychoactive substance. Detoxification Program utilizing medical and clinical procedures to assist adults with substance abuse problems in their effort to withdraw from the psychological and psychological effects of substance use or abuse. Although substance abuse services are part of the Marchman Act (FS Statute 396), they are an important part of the larger Baker Act system that addresses persons with co-occurring disorders and coordination of care for persons who need detoxification and aftercare for substance use or abuse.

3 Bed Adolescent Withdrawal Management Unit, co-located within our Children's Crisis Stabilization unit. This unit ensures that youth experiencing the psychological and possible physiological effects of substances are supported as they address their substance use. Our treatment team works together to ensure any co-occurring disorders are addressed. We work closely with community residential providers to ensure those teens in need of residential services can access the care needed to successfully address their use.

18 Bed Adult Short Residential Substance Use Disorder Program (Level 1) located at 206 Park Place Blvd, Kissimmee, FL, 34741: This program provides services for individuals who

are at risk of relapse or a return to substance use without the structured support of a 24 hour a day program.

18 Bed Adult Long Term Substance Use Disorder Residential Program (Level IV) located at 511 Dillingham Avenue, Kissimmee, FL. 34741: This program provides individuals in early recovery from a substance use disorder with a place to live, therapeutic and structured support while they re-engage in the community. This is an opportunity to learn life skills, return to work or school, re-engage with family, and strengthen their recovery.

16 bed Residential Level II program located at 208 Park Place Blvd., Kissimmee, FL 34741: Provides individuals with a serious mental illness and/or co-occurring substance use disorder with an opportunity to regain the living skills necessary to live independently in the community.

30 Unit Permanent Affordable Housing located at 501 N. Dillingham Avenue, Kissimmee, FL. 34741: Supported Housing for persons with a diagnosed serious mental illness who isready for independent living. Supportive Housing staff are available Monday through Friday and by appointment for those who reside at our James Allen Shanks, Dillingham Apartment Complex.

Care Coordination Care Coordinators located in 200 Park Place Blvd, Kissimmee, FL 34741 provide services for those who are brought to the Central Receiving Facility and are at risk for re-admission to high end services. The goal of care coordination is to provide support and engagement in the services needed for individuals to maintain the highest level of functioning in community.

Integrated Primary Care: The Central Receiving Facility in partnership with the FQHC in the region, provides access to primary care services for those with mental health and substance use issues. The program targets those who are insured, underinsured, or insured but lack engagement with a primary care physician and therefore utilize high end services such as emergency departments.

Case Management: Case Management services are available for those who need support in navigating the various systems of care in Osceola County, are facing homelessness, or are being released from State Hospitalization and returning to community.

Peer Recovery Support: Peer Recovery Specialist are individuals with lived experience who provide support, guidance, and mentoring to those with whom they interact to instill hope, helping the person achieve and maintain recovery. Park Place provides peer support services for those in our residential program and works with Recovery Connections of Central Florida, the Recovery Community Organization, to ensure ongoing support for those in the community.

Coordinated Opioid Recovery, CORe: Park Place Behavioral Health Care is the coordinating agency for Osceola County CORe program. Park Place will work through partnerships with local hospitals, EMS, Treatment Agencies, and Recovery Connections of Central Florida to ensure that CORe services are available.

SUMMARY:

The Central Receiving Facility offers **our county** a seamless system of care, for individuals who come in contact with law enforcement that could better be served in a treatment milieu rather than through county corrections. In one location, services needed are offered to individuals with substance use and mental health disorders. **The partners of the State Department of Children and Families, Circuit Nine,** Osceola County Government, members of the Public Safety Coordinating Council, such as, Park Place Behavioral Health Care, Homeless Services Network, Law Enforcement, and many others came together to make the Central Receiving System of care with a single point of entry a reality. In the end, the Central Receiving System saves Osceola County Corrections costs for individuals with behavioral health issues are no longer re-entering their system, easier decision making for Law Enforcement, less defensive medicine practice in the emergency departments of local hospitals, easing the costs of medical care for these individuals, and improves continuity of care in the community. Other changes will continue to improve the system of care as we build on the successes that we have had over the past five years. We hope to see continued changes in legislation making it easier for blended funding, an integrated crisis stabilization unit for co-occurring disorders, and a specialized adolescent unit for law enforcement to divert youth from arrest who exhibit substance use or mental health disorders. The expansion and use of mobile crisis to serve and the increased diversion from State Hospital will allow more individuals to remain safely within their families and communities.

ATTACHMENTS

ATTACHMENTS A: LETTERS OF SUPPORT

VALENCIA COLLEGE

Taylor Hatch
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Tallahassee, FL 32303-4190

Dear Ms. Hatch:

I strongly encourage the Department of Children and Families (DCF) Circuit 9 Substance Abuse and Mental Health Program Office to accept the Osceola County Transportation Plan. The Transportation plan is an update to the plan submitted and approved for the period from February 20, 2020- 2025. In 2016, Osceola Mental Health Inc., d.b.a. Park Place Behavioral Health Care was identified as the single point of entry to the Central Receiving System (CRS) of Care for Osceola County. Park Place Behavioral Health Care is the only designated Baker Act Receiving facility in the County, and is the primary community mental health program in Osceola. We are also the designated lead for the Osceola County Coordinated Opioid Recovery (CORe) network. Park Place has been providing high quality behavioral health care in the region for 50 years.

Under the current transportation plan, Park Place has reduced law Enforcement drop off time form an average of 8-11 minutes to an average drop off time of 4.8 minutes or less for our officers. First responders no longer have to determine where an individual should be taken to have their mental health crisis needs met, but can rely on the expertise of the staff at Park Place in identifying, along with the individual, the services and agencies that will best meet their needs. In addition, Park Place provides mobile response team services for those identified in the community by law enforcement as experiencing a behavioral health crisis, diverting individuals when possible from emergency rooms and expensive inpatient services.

The Public Safety Coordinating Council serves as the oversight committee for the Central Receiving System of Care and ensures that Park Place meets or exceeds the expectations established under the transportation plan and outlined in their operation as the single point of entry to the CRS. Membership and shared commitment to the community of this Council enable the CRS to thrive.

Sincerely,

Alina Siddiqui

Alina Siddiqui
Faculty Counselor
asiddiqui6@valenciacollege.edu

CITY OF KISSIMMEE POLICE DEPARTMENT
8 NORTH STEWART AVENUE - KISSIMMEE, FLORIDA 34741 - 407.847.0176

Taylor Hatch
Secretary
2415 North Monroe Street
Suite 400
Tallahassee, FL 32303-4190

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Sincerely,

Charles Broadway

Charles "Chuck" Broadway
Chief of Police

OSCEOLA COUNTY

Chief E. Keith Neely
Osceola County Corrections Department
402 Simpson Road
Kissimmee, FL 34744

June 12, 2026

Taylor Hatch
Secretary
2415 North Monroe Street
Suite 400
Tallahassee, FL 32303-4190

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Sincerely,

E. Keith Neely, Chief
Osceola County
Corrections Department

be first to what's next.

Thomas N. Tompkins

1627 E. Vine St. Suite 200
Kissimmee, Fl 324744

Taylor Hatch
Secretary
2415 North Monroe Street
Suite 400
Tallahassee, FL 32303-4190

June 12, 2026

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Respectfully,

Thomas N. Tompkins

ATTACHMENT B: ANNUAL REPORT FOR THE CENTRAL RECEIVING SYSTEM OF CARE 2024-2025

Osceola County
Central Receiving System (CRS)
2024-2025

Senate Bill 12: Mental Health and Substance Abuse Omnibus Legislation. SB 12 requires a Central Receiving System for the care of individuals with mental health and substance use disorders.

1. First, the bill creates a No Wrong Door system which allows services to be provided no matter what point of entry a person came into the system for care.
    a. Osceola County has elected to have a single point of entry for the Central Receiving System with the Public Safety Coordinating Council as the Board of Directors. Osceola Mental Health, Inc., d/b/a Park Place Behavioral Health Care was chosen as the single point of entry to the CRS.

2. Second is the vital role of coordination of care which will avoid duplicate services and prevent a person from falling through the cracks during that critical time in need.
    a. Park Place provides care coordination through Central Florida Cares Health System for the past year. For persons who are indigent and receiving care utilizing Substance Abuse Mental Health Services funding, Central Florida Cares Health System works to track those individuals and helps to identify for Care Coordination those with multiple, high end services admissions. Individuals are assigned to an agency for Care Coordination to ensure that they are tracked and served for a period of 6 months in order to reduce inpatient admissions and agency hopping for high-end services that have no coordination.

A Central Receiving System is comprised of 13 Essential Elements:

1. Community interventions, such as prevention, primary care for behavioral health needs, therapeutic and supportive services, crisis response services, and diversion programs.
    a. Park Place has been involved in school based prevention and intervention services since school year 2014-15.
    b. We have partnered with Osceola Community Health Services, the local Federally Qualified Health Center, (FQHC), to provide an integrated primary care model for individuals with behavioral health disorders. OCHS enables us to serve as the Health Care Home for those in our care. OCHS provides medical care two days per week at our Kissimmee location and throughout the County.
    c. Our Adult and Children's Crisis Stabilization Units and are able to treat 40 adults and 20 children. We refer individuals to private receiving facilities when it is in their preference or meets requirements of their insurance. HCA Osceola Hospital has a program for individuals who have Medicare or can be served in a slightly lower level of care than Crisis Services.
    d. The Mobile Crisis Response Team: There are two Mobile Crisis Teams who service Osceola County. Devereux utilizes 211 in the Central Region and

provides assessment and support for individuals age birth to 24 who are experiencing a mental health or substance use crisis. Park Place works closely with Devereux's Mobile Response Team ensuring that individuals who are unable to remain in community during a crisis are accepted, and that families of those who have been referred to the Children's Crisis Unit are aware of 211 as a resource for Mobile Crisis upon discharge. Park Place Mobile response is two-fold, we provide a co-responder model with local law enforcement dispatched by 911, and provide direct mobile crisis support for individuals served by local agencies or in the community who connect with the team directly.

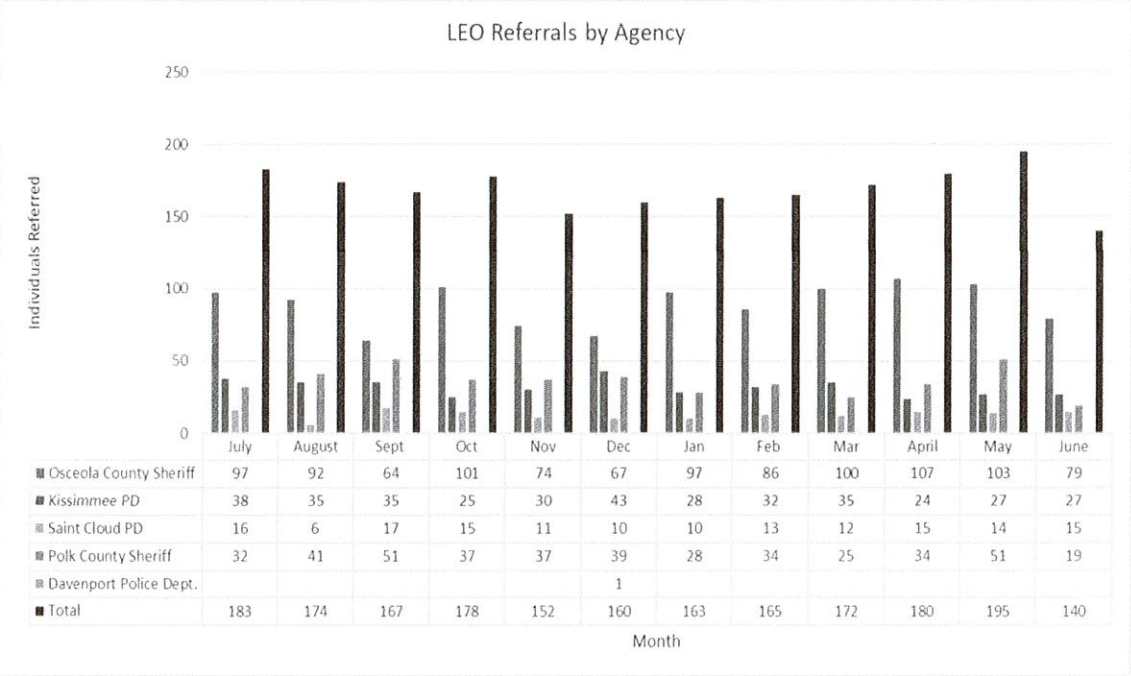
e. Park Place, Aspire, and Turning Point all work with specialty courts to accept treatment referrals. Park Place employs a case manager for Drug Court and Mental Health Court.

2. A designated receiving system:
    a. Park Place, is the designated Central Receiving System single point of entry and is responsible for assessment and evaluation, both voluntary and involuntary, and treatment or triage of patients who have a mental health or substance use disorder, or co-occurring disorders.
    b. We are able to accept involuntary individuals through both the Baker Act and Marchman Acts.

3. Transportation in accordance with a plan developed.

a. Osceola's plan was adopted on 2/10/2015. One of the primary goals established by Senate Bill 12 was to provide a transportation plan which allowed Law Enforcement and other emergency responders to return to their communities quickly when working with individuals in a behavioral health crisis. Our average drop off time for law enforcement is 5.2 minutes. We are required to aid officers in returning to their positions under 10 minutes. Exceptions to the 10 minute turn around occur when law enforcement has not completed their paperwork until post arrival, when a parent must come to the facility for a minor child (often 40 or more minutes) or when officers are aiding staff to manage a very aggressive person (Averaging 30 minutes). Most of the time, 97% the delay in return over 10 minutes is due to the officer's need to complete their paperwork for the transfer (average 15 minutes). The total average drop off time was 7.9 minutes in 2018-2019 and reported drop off time was 5.16 minutes for 2019-2020. We have instances where the paperwork is completed and the drop off is less than 1 minute.

The graph below demonstrates the number of drop-offs conducted by Law Enforcement during the 2024-2025 fiscal year. Law Enforcement drop offs account for 50% of those seeking CRS services and evaluation.



	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Osceola County Sheriff	97	92	64	101	74	67	97	86	100	107	103	79
Kissimmee PD	38	35	35	25	30	43	28	32	35	24	27	27
Saint Cloud PD	16	6	17	15	11	10	10	13	12	15	14	15
Polk County Sheriff	32	41	51	37	37	39	28	34	25	34	51	19
Davenport Police Dept.						1						
Total	183	174	167	178	152	160	163	165	172	180	195	140

4. Crisis services, including mobile response teams, crisis stabilization units, addiction receiving facilities, and detoxification facilities.
    a. Park Place provides both inpatient/residential beds (15), of those, three serve children in our Crisis Stabilization Unit for children, and outpatient withdrawal management services, and Residential level 1 (18), a 40 bed adult Crisis Stabilization Unit and 20 bed children's Crisis Stabilization Unit, and three bed short term residential unit. Mobile Crisis Teams are becoming increasingly integral to the system of care, as we work to allow individuals in crisis to be served, when possible, in the community.

5. Case management.
    a. There are multiple case management agencies who serve individuals from Osceola County and the surrounding area. PPBH provides Targeted Case Management for adults and children, PATH Case Managers (for those who are homeless), Forensic Case Management, Drug Court Case Management, and Care Coordinators.

6. Care coordination that involves coordination with other local systems and entities, public and private, such as primary care, child welfare, behavioral health care, and criminal and juvenile justice organizations.

    a. Park Place care coordinators work with individuals who are high end users of behavioral health, emergency medical and legal systems. Care coordinators work

with those with identified serious mental illness or substance use disorders. Park Place Peer Recovery Support Specialists model through their personal lived experience, how to navigate the system of care, build a support group, and develop self-management of the recovery process.

7. Outpatient services.
    a. PPBH provides substance use disorder services and mental health outpatient therapy and outpatient psychiatric medication management services. There are multiple providers of outpatient services throughout the county with whom we refer individuals to and coordinate care.

8. Residential services.
    a. PPBH provides short and long-term residential substance use disorder services. Residential level 2 mental health services for those with serious mental illness who need support. Residential level 2 includes five diversion from state hospital beds. Transition House, House of Freedom, HOME, and Blackberry Center are other in county residential providers with whom we coordinate care.

9. Hospital inpatient care.
    a. PPBH coordinates care with Advent Health Hospital and is contracted to provide two adult or children's crisis beds to serve those being referred from the hospital who are underinsured or uninsured. We provide Peer Recovery Support staff for both the Kissimmee and Celebration locations of Advent Health to provide services in their emergency departments. These peers engage individuals in behavioral health services from the Emergency Department, acting as the bridge between the hospital and needed behavioral health services. PPBH coordinates care with the Behavioral Health Team of HCA Osceola Regional to ensure we have open communication with regard to referrals and to strengthen our relationship.

10. Aftercare and other post-discharge services.
    a. PPBH provides aftercare and follow up services for those whom we treat in our inpatient and residential programs. We accept referrals, when able from the other inpatient units from the area. Individuals brought by law enforcement are served by a number of programs and agencies throughout the region. Individuals referred by law enforcement were referred to the following Park Place programs, many participate in more than one program.
        i. ACCESS Inpatient
        ii. ACCESS Outpatient
        iii. Outpatient Medical (Psychiatric Medication Management)
        iv. Outpatient Therapy (Mental Health)

v. Adult Substance Intervention Drug Court
vi. Case Management
vii. Case Management
viii. Crisis Stabilization
ix. Detox-Withdrawal Management
x. Primary Care
xi. Medication Assisted Treatment (MAT)
xii. Psychosocial Rehabilitation
xiii. Peer Recovery Support
xiv. Residential Level II (Mental Health Long Term Support)
xv. Substance Use Disorder Residential Level I (short term)
xvi. Substance Use Disorder Residential Level IV (long term)
xvii. Substance Use Disorder Intensive Outpatient Therapy
xviii. Substance Use Disorder Outpatient Therapy
xix. Substance Use Disorder Partial Hospital Program

11. Medication-assisted treatment and medication management.
    a. PPBH provides Vivitrol (Medication Assisted Treatment for those who are addicted to opioids or alcohol) and Brixadi (Injectable Buprenorphine). We provide Vivitrol to persons who were being held by County Corrections prior to their discharge from the facility and are working with County Corrections to expand services to include Buprenorphine. We continue to work with corrections to ensure that individuals interested in services can receive them upon discharge.

12. Recovery support, including, but not limited to, support for competitive employment, educational attainment, independent living skills wellness management and self-care, and assistance in obtaining housing that meets the individual's needs.
    a. Through our relationship with Recovery Connections of Central Florida and our own Peer Recovery Support Specialists, Case Managers, and Care coordinators, PPBH is position to provide support and referral for the services listed above.

13. Care plans with individuals identified to support the individuals ability to comply with their care and housing plan and ensure housing that meets their identified needs.
    a. All individuals are provided with care plans to support their successful integration in to the community. PPBH participates on the Homeless Services boards serving the county. As you know Homelessness and housing are issues that must be address at a level beyond that of the agency. Park Place utilizes limited incidental funding to provide short-term rental support for those in need. In 2024, Park Place opened a 30 unit permanent supported housing program for individuals with a Serious Mental Illness.

Sample Central Receiving System of Care Outcomes Report to Central Florida Cares Health System for 2024-2025

Park Place Behavioral Health Care
Central Receiving System Report

April - June 2025
Quarter 4 Report

Performance Measures:

Measure Description	Subcontractor Target	Outcome	Met or unmet
a. Reduce drop off time by law enforcement officers for admission to crisis services	***85% of all drop offs will be conducted in less than 10 minutes***	1,025 individuals came to the inpatient ACCESS center during this quarter. Of those, 609 were brought for CRS services by law enforcement or other emergency responder; 521 by LEO and 108 by ambulance. For those brought by LEO 90.5% were dropped off in under 10 minutes, with the average drop off being 6.2 minutes. There were three instances where law enforcement was helping us with individuals who were unmanageable spending an average 18 minutes with us providing support. In 37 instances officers were completing their BA52 paperwork, making report, or talking with the individual, which took an average of 15.2 minutes to complete. In 3 instances LEO had to wait upon the arrival of guardians when dropping off a child which resulted in an average wait time of 41 minutes. Of those brought by law enforcement, 64 or	Met: n=472individuals 90.5% of whom were dropped off under 10 minutes. Our drop off average for the quarter was 6.2 minutes.

		12% were brought voluntarily, 9% or 49 individuals who were brought to the CRS by LEO left with a referral to a lower level of care. 416 individuals were considered self-referred for Crisis Assessment. (Those referred by family, friends, school or other agency and not brought by law enforcement or ambulance.) Additionally, 1% (13) individuals were sent for medical clearance, 5 of those were brought by LEO. Of the 1,025 individuals seeking services, 15% (157) entered a lower level of care; 18% (182) entered detoxification, 35% (360) Adult Crisis Stabilization, 16.4% (169)Child Crisis Stabilization, < 1% (2) Adol. Detox. Six (6)) individuals were transferred to other crisis units at Central Florida Behavioral (2), University Behavioral (2) and Osceola Regional (2). Additionally, 148 of 150 individuals seen by Park Place mobile crisis team were diverted from high end care.	
b. ***Increase participant access to community based behavioral health services after referral***	***60% of individuals that have had 2 or more admissions in the past 6 months will be connected with community based services within 30 days post discharge from the CRS***	Of the 139 individuals identified that had more than two admissions in 6 months, 5 are still in the high end care unit, 29 are pending a first appointment. Of the 110 individuals who were scheduled for services, 75 (68.1%) of those scheduled with an appointment attended within 30 days of discharge,	Met: 68.1% of those with two or more admissions had a community appointment within 30 days.

		35 (31.9%) have failed to follow through with their scheduled follow up appointment.	
c. ***Reduce number of individuals admitted to a forensic state mental health treatment facility***	***Maintain forensic mental health treatment facility admission at target of = or < 5 annually.***	For this quarter, our forensic case manager reported the following forensic state hospital admissions: April: 0 May: 2 June: 3	Unmet: n=19 year to date. The threshold is 5 admissions annually.
d. ***Increase days in community between arrests***	***60% increase in number of days in the community between arrests for individuals referred by county corrections to CRS***	We followed 18 individuals referred by County Corrections to Park Place CRS. Of those referred during the past six months none experienced a readmission with corrections. All of those followed experienced 60% increase in the days in community with none of the 18 experiencing a re-entering of corrections.	Met n=18 of 18 or 100% experienced greater than 60% more days in community since none re-entered corrections.
e. ***Increase days in community between crisis or emergency room admissions***	***60% increase in the number of days in community for individuals enrolled in care coordination during the 6 months follow-up period post discharge from last crisis admission***	Of the 43 individuals who have been enrolled in Care Coordination and are being followed for 6 months, 97.6% had a more than 60% increase in days in community. Three individuals re-entered a high end service during the quarter, of those, • 2 had 63% more time between admissions for crisis services, • 1 was incarcerated during this reporting period	Met n=42 of 43 97.6% experienced 60% more time between admissions. Most of whom were not readmitted during this quarter for any high end service.

OSCEOLA COUNTY, FLORIDA

PUBLIC SAFETY COORDINATING COUNCIL

Plan Title: Osceola County Acute Care Transportation Plan 2025-2030
Statutory Authority: Section 394.462, Florida Statutes
County: Osceola County, Florida
Effective Date: _____
Plan Review Date: October 15, 2026
Managing Entity: Central Florida Cares

APPROVAL

The Osceola County Public Safety Coordinating Council ("PSCC"), having reviewed the **Osceola County Baker Act Transportation Plan** ("Plan"), hereby approves and endorses the Plan for implementation and recommends its adoption and continued implementation by the appropriate County authority, in accordance with **Section 394.462, Florida Statutes**, and all other applicable provisions of Florida law.

The Plan is intended to establish and document the methods and responsibilities for the safe, secure, timely, and dignified transportation of persons subject to involuntary examination pursuant to section 394.463, Florida Statutes, and, as applicable, persons subject to involuntary admission under the provisions identified in section 394.462, Florida Statutes.

The PSCC acknowledges that the Plan shall be implemented in coordination with the applicable designated receiving system and managing entity and shall be administered consistent with:

- Section 394.462, Florida Statutes, governing transportation under the Baker Act;
- Section 394.463, Florida Statutes, governing involuntary examination;
- Applicable provisions of Chapter 394, Florida Statutes;
- Applicable requirements governing designated receiving facilities and treatment facilities;
- Applicable county policies, agreements, contracts, and memoranda of understanding; and
- All applicable rules, policies, and procedures of the Florida Department of Children and Families and other responsible governmental entities.

The PSCC further acknowledges that implementation of the Plan is subject to the authority and responsibilities assigned by Florida law to the Osceola County Board of County Commissioners, the designated law-enforcement agency or agencies, the managing entity, receiving and treatment facilities, and authorized transportation providers.

PSCC ACTION

At a duly noticed meeting of the Osceola County Public Safety Coordinating Council, the Council took the following action regarding the Plan:

☑ **APPROVED AND ENDORSED**

☐ **APPROVED AND ENDORSED WITH CONDITIONS/AMENDMENTS:**

_____

_____

☐ **OTHER ACTION:**

_____

_____

Date of PSCC Action: 10/15/2026

CERTIFICATION AND SIGNATURE

I hereby certify that the foregoing action accurately reflects the action taken by the **Osceola County Public Safety Coordinating Council** concerning the Osceola County Baker Act Transportation Plan.

I further certify that I am authorized to execute this approval on behalf of the Osceola County Public Safety Coordinating Council.

OSCEOLA COUNTY PUBLIC SAFETY COORDINATING COUNCIL

By: _____

Chair, Osceola County Public Safety Coordinating Council

Printed Name: Judge Lisa T. Munyon

Date: 10/15/2026

ATTEST / ACKNOWLEDGMENT

Attested by:

PSCC Facilitator

Printed Name: Catherine Z. Smith

Signature: Catherine Z Smith

Date: 10/15/2024

MANAGING ENTITY ACKNOWLEDGMENT

The undersigned acknowledges receipt of the PSCC-approved Plan and recognizes the PSCC action described above for purposes of coordinating implementation of the Plan.

Authorized Managing Entity Representative

Printed Name: Maria Bledsoe

Signature: _____

Title: Chief Executive Officer, Central Florida Cares

Date: _____