

Memorandum



Agenda Item No. 14(B)(1)

Date: May 19, 2026

June 16, 2026

To: Honorable Chairman Anthony Rodriguez
and Members, Board of County Commissioners

From: Daniella Levine Cava *Daniella Levine Cava*
Mayor

Subject: Report on the Agreement with South Florida Behavioral Health Network, Inc. D/B/A Thriving Mind South Florida, for the Provision of Behavioral Health Services through the Miami-Dade County Central Receiving Facility

This report is in response to Resolution No. R-95-24, sponsored by Senator Rene Garcia and adopted by the Board of County Commissioners (Board) on February 6, 2024. The resolution authorized an Agreement with South Florida Behavioral Health Network, Inc. D/B/A Thriving Mind South Florida (Thriving Mind) for the provision of behavioral health services through the Miami-Dade County Central Receiving Facility (CRF), located at 3800 West Flagler Street, Miami, Florida, and operated by Banyan Community Health Center, Inc. (Banyan). The resolution also requested the report to include an analysis of the use of the \$1.0 million in annual funding, the number of individuals served, and the impact on the residents of Miami-Dade County.

Executive Summary

This report summarizes the Central Receiving Facility Program's (Program) performance, as detailed in the attached exhibits. To date, this Program has continued to work effectively, providing services to over 5,000 uninsured individuals throughout Miami-Dade County with mental health and substance use disorders. expanding the footprint of viable options for mental health services.

Background

Under Chapter 2016-241, Laws of Florida (Senate Bill 12, F.S.), the Florida Legislature required counties to develop and implement plans for designated receiving systems and the transportation of individuals requiring substance abuse and/or mental health treatment in accordance with the Baker Act and Marchman Act. In response to this statutory requirement, the Board adopted Resolution No. R-782-17, establishing the County's designated receiving system and transportation plan. The resolution also authorized a multiyear agreement with Thriving Mind to serve as the managing entity responsible for administering \$1.0 million in County funds annually to expand mental health and substance use disorder services for uninsured residents of the County.

Pursuant to this authorization, Thriving Mind entered into an agreement with Banyan Banyan to serve as the County's designated receiving facility under the Program. In this capacity, Banyan, under the oversight of Thriving Mind, became the sole recipient of the \$1.0 million in County funding to operate the designated receiving facility and provide mental health and substance use disorder services to uninsured individuals within the County. Additionally, on July 19, 2022, the Board adopted Resolution No. R-688-22, which authorized use of this funding to leverage an additional \$500,000 in Medicaid matching funds in support of the Program from the Florida Agency for Health Care Administration in an amount not to exceed \$500,000 annually.

Upon expiration of the initial authorizing resolution and agreement with Thriving Mind, the Board approved Resolution No. R-95-24 to continue the services provided under the Program. Through this action, Thriving Mind was awarded an agreement in the amount of \$1,000,000 annually on February 26, 2024, for year one of the Program retroactive to Fiscal Year (FY) 2022–2023, with up to four one-year options to renew.

MDC001

Report

This report summarizes the Program’s performance for FY 2022–23, FY 2023–24, and FY 2024–25, as detailed in Exhibits A, B, and C, respectively.

Performance Summary				
Performance Measure	Contract Deliverable	FY 2022–23	FY 2023–24	FY 2024–25
Individuals Served	N/A	1,628	2,068	1,973
Intake/Assessment Compliance	100%	100%	100%	100%
Outpatient Appointment (≤ 10 days)	100%	96%	95.92%	90.68%
Follow-Up Calls (≤ 72 hours)	100%	94.2%	100%	99%
Alternative Appointment Secured	85%	96.42%	98.25%	100%
CSU Readmission Rate	14.5%	10.8%	7%	6.29%
Detox Readmission Rate	15%	3.25%	0.75%	3%

Across all three fiscal years, the Central Receiving Facility achieved full compliance with contractual requirements related to intake, assessment, admission, and transportation. Service volume increased in FY 2023–24 and remained strong in FY 2024–25, reflecting sustained community demand and stable system capacity. Funds provided under this agreement are budgeted to provide crisis support services with \$1.0 million allocated in each budget cycle.

Timely access to outpatient services remained consistently high, exceeding 90 percent in each year under review. While a modest decline in appointment timeliness occurred in FY 2024–25, follow-up calls and the securing of alternative appointments improved during the same period. Additionally, readmission rates for both Crisis Stabilization Unit (CSU) and detoxification services remained well below contractual benchmarks throughout the reporting period.

This report will be placed on the next available Board Agenda pursuant to Rule 5.06(j). Should you require additional information, please contact Daniel T. Wall, Assistant Director, Office of Management and Budget at 305-375-5143.

Attachments

- c: Honorable Juan Fernandez-Barquin, Clerk of the Court and Comptroller
- Geri Bonzon-Keenan, County Attorney
- Jess McCarty, First Assistant County Attorney
- Office of the Mayor Senior Staff
- Ray Baker, Director, Office of Management and Budget
- Daniel T. Wall, Assistant Director, OMB- Grants Coordination
- Christina M. Cicilia, Director, Office of Policy and Budgetary Affairs
- Yinka Majekodunmi, Commission Auditor
- Eugene Love, Agenda Coordinator

Central Receiving Facility Social and Cost Avoidance Impact Report for Fiscal Year 2022-2023**Contractor: Thriving Mind South Florida****Subcontractor: Banyan Community Health Center****I. General Information**Funders: Thriving Mind South Florida and Miami Dade CountyProvider: Banyan Community Health Center, Inc.Project Name: Centralized Receiving FacilityReporting Period: October 1st, 2022, through September 30th, 2023

II. Brief Project Description

Target Population:

- Adults
- Children
- At-Risk
- Mental Health only
- Substance Use only.
- Co-Occurring Disorders
- Criminal/Juvenile Justice
- Child Welfare
- Homeless
- Veterans
- Other (provide details): All individuals presenting for involuntary and voluntary examination to include Baker Act and Marchman Act.

Length of Services (if using an average, please note so):

Clients' length of services at the Centralized Receiving Facility (CRF) vary depending on the appropriate least restrictive level of care, however, at minimum a 30-minute behavioral health screening will be offered in addition to 10-minute intake process. The CRF aims to stabilize and refer within 23 hours of person served at CRF.

Description of Services Offered:

Banyan Community Health Center's Mission is to be the leading integrated community healthcare organization that provides all people –especially the most vulnerable– with accessible, quality, and compassionate primary and behavioral care in order to live their best lives and build stronger communities.

Banyan Community Health Center is an innovative not-for-profit healthcare system that brings integrated primary and behavioral healthcare to the South Florida community. Our experienced team of doctors, clinicians, and healthcare advocates use patient-centered and evidence-based methods to provide high-quality primary and pediatric care, mental health treatment, and substance abuse services. We are dedicated to supporting individuals and families with education and resources that empower them to live happier, healthier lives.

The Centralized Receiving Facility (CRF) at Banyan Community Health Center functions as a no wrong door model. Clients have access to 24/7 evaluations by a qualified assessor and/or mental health professional to determine the appropriate least restrictive level of care. Services include a behavioral health screening utilizing evidenced based

Central Receiving Facility Social and Cost Avoidance Impact Report for Fiscal Year 2022-2023

Contractor: Thriving Mind South Florida

Subcontractor: Banyan Community Health Center

tools, a comprehensive biopsychosocial assessment, a psychiatric evaluation, and medication management. In addition, referrals are made to medically assisted treatment (MAT), case management, psychosocial rehabilitation (PSR), and residential recovery services based on assessed needs.

Location of Service Provision (i.e., office, school, home, jail, etc.):

All services offered by the Centralized Receiving Facility (CRF) are provided on site.

III. Project Goal(s):

The primary goals of the CRF are to:

1. Provide a central receiving system, as defined in 394.4573 (2)(b), F.S. serving individuals in need of behavioral health services.
2. Provide the array of services specified in Section VII, Scope of the Activities and Services.
3. Provide opportunities for jail diversion, offering a more suitable and less costly alternative to incarceration.
4. Reduce the utilization of emergency rooms for individuals in a behavioral health crisis.
5. Increase the quality and quantity of services through care coordination and recovery support services.
6. Implement standardized assessment tools and procedures for services.
7. Improve access to services and reduce processing time for law enforcement officials transporting individuals needing behavioral health services.
8. Facilitate a telehealth evaluation or timely transfers from hospital emergency departments for medically cleared individuals to conduct an initial screening to determine if the criterion for an involuntary examination is met regardless of bed capacity. When the CRF lacks capacity or the capability to service the person, the CRF shall facilitate a transfer to another facility.
9. Provide assessments, triage, care coordination, referral, and linkage to appropriate level of care and related services.
10. Increase the quality and quantity of services through coordination of care and recovery support services.

IV. Outputs and Outcomes

Contractual Performance Measures for this project:

1. 100% of persons who walk into the CRF requesting services must be assessed on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act will be admitted for evaluation. Appropriate transfer to other CSU's/inpatient facilities will be secured by the network provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility will be arranged by the network provider.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment order will be admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider will be secured by the Network Provider staff in the CRF. Transportation to the referral facility will be arranged by the Network Provider.
4. 100% of persons determined by the assessment process to need outpatient services must secure an appointment to an appropriate treatment provider within ten (10) business days of the assessment
5. 100% of persons referred to outpatient services will receive a follow-up call by CRF staff within seventy-two (72) hours after scheduled appointment to determine if the person(s) made it to their scheduled appointment.
6. 85% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 14.5% CSU admissions within thirty (30) calendar days for individuals referred internally for post-

Central Receiving Facility Social and Cost Avoidance Impact Report for Fiscal Year 2022-2023

Contractor: Thriving Mind South Florida

Subcontractor: Banyan Community Health Center

CSU discharge services.

8. No more than 15.0% Detoxification readmissions within thirty (3) calendar days for individuals referred internally for post-detoxification discharge services

Actual Performance Outcomes (i.e., improvement in functioning, decrease in substance use, increase in employment, or school attendance, increase in recovery capital, etc.): -

The actual number of individuals served for reporting period: **1628**.

1. 100% of persons who walked into the CRF requesting screening services were screened on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act were admitted for evaluation. Appropriate transfer to other CSU's/Inpatient were secured by the Network Provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility was arranged by the Network Provider when necessary.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment were admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider was secured by the Network Provider staff in the CRF when necessary. Transportation to the referral facility will be arranged by the Network Provider when necessary.
4. 96% of persons determined by the assessment process to need outpatient services were secured an appointment to an appropriate treatment provider within ten (10) business days of the assessment.
5. 94.2% of persons referred to outpatient services received a follow-up call by CRF staff within seventy-two (72) hours of scheduled appointment to determine if the person(s) made it to the scheduled appointment.
6. 96.42% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 10.8% were CSU readmissions within thirty (30) calendar days for individuals referred internally to post-CSU discharge services.
8. No more than 3.25% were Detoxification readmissions within thirty (30) calendar days for individuals referred internally for post-detoxification discharge services were noted for this period.

V. Success Story:

Gratitude letter #1 from Family member received 3/10/23:

To Whom This May Concern,

I would like to take the time out to personally convey my most earnest appreciation to the staff at Banyan Health Systems located at 3800 West Flagler Street Miami, FL 33134. I will start by highlighting how professional, respectful, and helpful Mr. Oresta Garcia was through one of the most vulnerable times in my family member's life. He effortlessly exemplified Banyan Health System's mission, vision and values by providing accessibility, quality, and compassion to us. I would also like to mention how thorough, caring, and safe Monica Gutierrez made us feel while she conducted the intake/evaluation. The level of professionalism and compassion that she displayed directly reflects her commitment to all of the individuals that she encounters. Jessica Sanford and Roberto Martinez went above and beyond to ensure that all of our questions were answered, our needs were met, and we were comfortable while waiting to be assisted. Hands down, this is a superb staff all around. I would recommend this entire team and facility to any family who wants to be treated with dignity and respect while getting help during a vulnerable time. Thank you all for making this difficult situation manageable.

Respectfully, [REDACTED]

Gratitude letter #2 from Family member received 11/15/22:

Central Receiving Facility Social and Cost Avoidance Impact Report for Fiscal Year 2022-2023

Contractor: Thriving Mind South Florida

Subcontractor: Banyan Community Health Center

Best regards and a pleasure to greet you.

My name is [REDACTED], a survivor of Substance Abuse, specifically Alcohol, with diagnosed depression and anxiety.

I write this little note as a thank you to the great team at Banyan; its nurses, its therapists, its psychiatric staff, doctors, psychologists; to the case managers and directors who do so much with the thousands and thousands of patients/clients who suffer from this type of disease. I arrived at the Banyan detox on March 7 of this year. My daughter brought me after being lost in the streets of Miami in a mad state of depression, anxiety and totally drunk.

I always thought I was sick and my daughter, already tired of my situation, told me I can only take you to Therapy, It was my last chance and it really was. When I arrived at the clinic, this entire team immediately began to work on my recovery. With professionalism and a feeling of empathy, understanding, affection and love for each particular case. My first days were the worst facing those panic attacks that I had given up alcohol and just clearing my mind I remember that Dr. Moraima Trujillo; She went through each room at 5 am giving us words of encouragement; She always gave us peace, tranquility and told us that everything was going to be fine and that we should follow the treatment that she and the team were going to help us with, that we could get out of my condition and learn to live with this disease. I was in a detox and managed to get over the bitterness of the first days. And the doctor told me we are going to send you to another program, we are not going to leave you like this and she calmed my fears and everyone's. Always with sanity and professionalism, with that charisma of putting himself in our shoes; his patients and friends forever. The time came to leave, still terrified; God is so great, and this valuable team helped me find a bed at the Banyan House. Here began my 2nd step of this new life; My therapist Jackneri "Jaki" as they call her with great affection and respect, My case manager Barbara Truccolo made me understand that this disease could be treated and I could rebuild my life; They helped me take the first steps in my new life. IT'S INCREDIBLE HOW MUCH THEY DO WITH SO LITTLE RESOURCES!!!

They are magic because what they do has no other phrase than a work of God! Here I am still clean for 8 months, still in Banyan attending my therapies, weekly in sessions with my new therapist. Following the treatment of Vivitrol and other medications with my psychiatrist. Attending my Alcoholics Anonymous meetings every day. Being helped every week to get my life back on track. I have an excellent job, I have already managed to recover my family little by little. I have been able to help others from every point of view. Forgive me for these words but I am a living example that these programs work and here I will continue giving my best every day! Thank you thank you thank you. Moraima, Yake, Barbara, Miss Rodriguez and all those who help us, their patients and friends, so much in these terrible diseases.

Thank you! [REDACTED]

General Information

ME: Thriving Minds and County

Provider: Banyan Health Systems Project Name: Centralized Receiving Facility

Reporting Period: October 1st, 2023, through September 30th, 2024

Brief Project Description

Target Population: (check all that apply):

- Adults
- Children
- At-Risk
- Mental Health only
- Substance Use only.
- Co-Occurring Disorders
- Criminal/Juvenile Justice
- Child Welfare
- Homeless
- Veterans
- Other (provide details): All individuals presenting for involuntary and voluntary examination to include Baker Act and Marchman Act.

Length of Services (if using an average, please note so):

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Description of Services Offered:

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The Centralized Receiving Facility (CRF) at Banyan Health Systems functions as a no wrong door model. Clients have access to 24/7 evaluations by a qualified assessor and/or mental health professional to determine the appropriate least restrictive level of care. Services include a behavioral health screening utilizing evidenced based tools, a comprehensive biopsychosocial assessment, a psychiatric evaluation, and medication management. In addition, referrals are made to medically assisted treatment (MAT), case management, psychosocial rehabilitation (PSR), and residential recovery services based on assessed needs.

Location of Service Provision (i.e., office, school, home, jail, etc.):

All services offered by the Centralized Receiving Facility (CRF) are provided on site.

Project Goal(s) as stated on the Local Funding Initiative Request:

The primary goals of the CRF are to:

1. Provide a central receiving system, as defined in 394.4573 (2)(b), F.S. serving individuals in need of behavioral health services.
2. Provide the array of services specified in Section VII, Scope of the Activities and Services.
3. Provide opportunities for jail diversion, offering a more suitable and less costly alternative to incarceration.
4. Reduce the utilization of emergency rooms for individuals in a behavioral health crisis.
5. Increase the quality and quantity of services through care coordination and recovery support services.
6. Implement standardized assessment tools and procedures for services.
7. Improve access to services and reduce processing time for law enforcement officials transporting individuals needing behavioral health services.
8. Facilitate a telehealth evaluation or timely transfers from hospital emergency departments for medically cleared individuals to conduct an initial screening to determine if the criterion for an involuntary examination is met regardless of bed capacity. When the CRF lacks capacity or the capability to service the person, the CRF shall facilitate a transfer to another facility.
9. Provide assessments, triage, care coordination, referral, and linkage to appropriate level of care and related services.
10. Increase the quality and quantity of services through coordination of care and recovery support services.

Outputs and Outcomes

Contractual Performance Measures for this project:

1. 100% of persons who walk into the CRF requesting services must be assessed on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act will be admitted for evaluation. Appropriate transfer to other CSU's/inpatient facilities will be secured by the network provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility will be arranged by the network provider.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment order will be admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider will be secured by the Network Provider staff in the CRF. Transportation to the referral facility will be arranged by the Network Provider.
4. 100% of persons determined by the assessment process to need outpatient services must secure an appointment to an appropriate treatment provider within ten (10) business days of the assessment
5. 100% of persons referred to outpatient services will receive a follow-up call by CRF staff within seventy-two (72) hours after scheduled appointment to determine if the person(s) made it to their scheduled appointment.
6. 85% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 14.5% CSU admissions within thirty (30) calendar days for individuals referred internally for post-CSU discharge services.
8. No more than 15.0% Detoxification readmissions within thirty (3) calendar days for individuals referred internally for post-detoxification discharge services

Actual Performance Outcomes (*i.e., improvement in functioning, decrease in substance use, increase in employment, or school attendance, increase in recovery capital, etc.*): For the period requested._

The actual number of individuals served for reporting period: **2068**.

1. 100% of persons who walked into the CRF requesting screening services were screened on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act were admitted for evaluation. Appropriate transfer to other CSU's/Inpatient were secured by the Network Provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility was arranged by the Network Provider when necessary.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment were admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider was secured by the Network Provider staff in the CRF when necessary. Transportation to the referral facility will be arranged by the Network Provider when necessary.

4. 95.92% of persons determined by the assessment process to need outpatient services were secured an appointment to an appropriate treatment provider within ten (10) business days of the assessment.
5. 100% of persons referred to outpatient services received a follow-up call by CRF staff within seventy-two (72) hours of scheduled appointment to determine if the person(s) made it to the scheduled appointment.
6. 98.25% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 7% were CSU readmissions within thirty (30) calendar days for individuals referred internally to post-CSU discharge services.
8. No more than 0.75% were Detoxification readmissions within thirty (30) calendar days for individuals referred internally for post-detoxification discharge services were noted for this period.

If applicable, describe a success story:

Miami Beach Police Department's Homeless Liaison Specialist, Borinquen "Bo" Hall, CIT, CRPS-A reported that one of their city's long times mentally and physically and chronically ill homeless individual voluntarily requested detox. During the collaboration, an inpatient program to address alcohol & substance abuse needs was generated with the placement assistance of Central Intake. As a result of a heartfelt engagement, the client was admitted into detox and Banyan was thanked for their collaborative efforts in serving and supporting the communities most vulnerable. Due to CRF, Miami Beach, Central Intake and Detoxification unit inter agency cooperation, client was a successful discharge after completing their program. Client was placed in contact with their family members who assisted in providing shelter and support. The result being is no longer homeless and in need of constant recurring services.

General Information

ME: Thriving Minds and County

Provider: Banyan Health Systems Project Name: Centralized Receiving Facility

Reporting Period: October 1st, 2024, through September 30th, 2025

Brief Project Description

Target Population: (check all that apply):

- Adults
- Children
- At-Risk
- Mental Health only
- Substance Use only.
- Co-Occurring Disorders
- Criminal/Juvenile Justice
- Child Welfare
- Homeless
- Veterans
- Other (provide details): All individuals presenting for involuntary and voluntary examination to include Baker Act and Marchman Act.

Length of Services (if using an average, please note so):

Clients' length of services at the Centralized Receiving Facility (CRF) vary depending on the appropriate least restrictive level of care, however, at minimum a 30-minute behavioral health screening will be offered in addition to 10-minute intake process. The CRF aims to stabilize and refer within 23 hours of person served at CRF.

Description of Services Offered:

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Banyan Community Health is an innovative not-for-profit healthcare system that brings integrated primary and behavioral healthcare to the South Florida community. Our experienced team of doctors, clinicians, and healthcare advocates use patient-centered and evidence-based methods to provide high-quality primary and pediatric care, mental health treatment, and substance abuse services. We are dedicated to supporting individuals and families with education and resources that empower them to live happier, healthier lives.

The Centralized Receiving Facility (CRF) at Banyan Health Systems functions as a no wrong door model. Clients have access to 24/7 evaluations by a qualified assessor and/or mental health professional to determine the appropriate least restrictive level of care. Services include a behavioral health screening utilizing evidenced based tools, a comprehensive biopsychosocial assessment, a psychiatric evaluation, and medication management. In addition, referrals are made to medically assisted treatment (MAT), case management, psychosocial rehabilitation (PSR), and residential recovery services based on assessed needs.

Location of Service Provision (i.e., office, school, home, jail, etc.):

All services offered by the Centralized Receiving Facility (CRF) are provided on site.

Project Goal(s) as stated on the Local Funding Initiative Request:

The primary goals of the CRF are to:

1. Provide a central receiving system, as defined in 394.4573 (2)(b), F.S. serving individuals in need of behavioral health services.
2. Provide the array of services specified in Section VII, Scope of the Activities and Services.
3. Provide opportunities for jail diversion, offering a more suitable and less costly alternative to incarceration.
4. Reduce the utilization of emergency rooms for individuals in a behavioral health crisis.
5. Increase the quality and quantity of services through care coordination and recovery support services.
6. Implement standardized assessment tools and procedures for services.
7. Improve access to services and reduce processing time for law enforcement officials transporting individuals needing behavioral health services.
8. Facilitate a telehealth evaluation or timely transfers from hospital emergency departments for medically cleared individuals to conduct an initial screening to determine if the criterion for an involuntary examination is met regardless of bed capacity. When the CRF lacks capacity or the capability to service the person, the CRF shall facilitate a transfer to another facility.
9. Provide assessments, triage, care coordination, referral, and linkage to appropriate level of care and related services.
10. Increase the quality and quantity of services through coordination of care and recovery support services.

Outputs and Outcomes

Contractual Performance Measures for this project:

1. 100% of persons who walk into the CRF requesting services must be assessed on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act will be admitted for evaluation. Appropriate transfer to other CSU's/inpatient facilities will be secured by the network provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility will be arranged by the network provider.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment order will be admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider will be secured by the Network Provider staff in the CRF. Transportation to the referral facility will be arranged by the Network Provider.
4. 100% of persons determined by the assessment process to need outpatient services must secure an appointment to an appropriate treatment provider within ten (10) business days of the assessment
5. 100% of persons referred to outpatient services will receive a follow-up call by CRF staff within seventy-two (72) hours after scheduled appointment to determine if the person(s) made it to their scheduled appointment.
6. 85% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 14.5% CSU admissions within thirty (30) calendar days for individuals referred internally for post-CSU discharge services.
8. No more than 15.0% Detoxification readmissions within thirty (3) calendar days for individuals referred internally for post-detoxification discharge services

Actual Performance Outcomes (*i.e., improvement in functioning, decrease in substance use, increase in employment, or school attendance, increase in recovery capital, etc.*): For the period requested.

The actual number of individuals served for reporting period: **1973**.

1. 100% of persons who walked into the CRF requesting screening services were screened on the same day.
2. 100% of persons brought in involuntarily by law enforcement under the Baker Act were admitted for evaluation. Appropriate transfer to other CSU's/Inpatient were secured by the Network Provider staff in the CRF upon evaluation and determination that continued admission is medically required. Transportation to the referral facility was arranged by the Network Provider when necessary.
3. 100% of persons transported by law enforcement under involuntary Marchman Act Treatment were admitted for examination and stabilization prior to placement into the appropriate Residential Level II. Transfer to the identified treatment provider was secured by the Network Provider staff in the CRF when necessary. Transportation to the referral facility will be arranged by the Network Provider when necessary.

4. 90.68% of persons determined by the assessment process to need outpatient services were secured an appointment to an appropriate treatment provider within ten (10) business days of the assessment.
5. 99% of persons referred to outpatient services received a follow-up call by CRF staff within seventy-two (72) hours of scheduled appointment to determine if the person(s) made it to the scheduled appointment.
6. 100% of the persons contacted for follow-up who did not make their initial appointment will have an alternate appointment secured for outpatient services within ten (10) business days of the follow-up call from the CRF staff.
7. No more than 6.29% were CSU readmissions within thirty (30) calendar days for individuals referred internally to post-CSU discharge services.
8. No more than 3% were Detoxification readmissions within thirty (30) calendar days for individuals referred internally for post-detoxification discharge services were noted for this period.

If applicable, describe a success story:

A.

Greetings everyone,

I have just been informed that [REDACTED] (vulnerable elderly female patient) has been relocated from Camilus House to an assisted living facility.

I want to express my sincere gratitude for the continued collaboration between Banyan Health and Homeless Outreach (771 17th street).

I am deeply thankful for the dedication, professionalism, and compassion your teams consistently demonstrates.

Collaborations like ours are essential in ensuring individuals like [REDACTED] are not overlooked and receive the care they deserve.

Thank you again for your partnership and for the meaningful impact you all continue to make.

Melissa Rosa, Homeless Resource Officer

Crisis Negotiator | C.I.T

1100 Washington Avenue, Miami Beach, FL 33139

Tel: 305.673.7776 | Cell: 786-856-0633 | yourMBPD.com

Mission: Through dedicated service and a shared commitment to protecting our community, we strive to uphold a legacy of Excellence

Vision: A safe and welcoming environment for everyone.

Values: Community, Legacy, Protection, Service

Our Daily Goals: Use innovative approaches to address crime, maintain and enhance a professional and well-trained workforce, and enhance the public's perception of the Miami Beach Police Department.

B.

Miami Beach Police Department's Homeless Liaison Specialist, Borinquen "Bo" Hall, CIT, CRPS-A reported that one of their city's long times mentally and physically ill homeless individual voluntarily requested detox. During the collaboration, an inpatient program to address alcohol & substance abuse needs was generated with the placement assistance of Central Intake. As a result of a heartfelt engagement, client was admitted into detox and Banyan was thanked for their collaborative efforts in serving and supporting the communities most vulnerable. Due to CRF, Miami Beach, Central Intake and Detoxification unit inter agency cooperation, client was a successful discharge after completing their program. Client was placed in contact with their family members who assisted in providing shelter and support. The result being is no longer homeless and in need of constant recurring services.

Borinquen "Bo" Hall, CIT, CRPS-A

Homeless Liaison Specialist

Miami Beach Police Department

C.

Please see letter below from a Served Individual and their mother:

"I Person Served feel so grateful for the team at CRF. I feel their exceptional work should be recognized." Patient mother added on letter " I am very proud of this team and their professionalism. This is the care patient families need. It has made the treatment for my son's chronic sickness easier and more accommodating. Thank you."

D.

Attached is a letter of appreciation regarding the service provided:

"I hope this note finds you well. I wanted to take a moment to express my heartfelt gratitude for the profound impact you've had on me. Watching you work with such elegance and unwavering dedication has been truly inspiring.

Your ability to notice even the smallest details about your patients—things others might overlook—reflects an extraordinary level of care and attentiveness. It's a reminder that true understanding often lies in the finer details, and it's a skill I deeply admire.

Thank you for showing me how compassion and precision can coexist in such a beautiful way. You've set a standard I hope to emulate in my own path.

With sincere appreciation,"

E.

Good afternoon Amaris -

During this morning's Unified Outreach Collaboration with our City Of Miami Beach's Community Outreach colleagues.

We encountered one of our cities long time chronically homeless individuals [REDACTED], who was heavily inebriated from consuming a bottle of vodka.

As a result of our heartfelt engagement and words of encouragement. [REDACTED] voluntarily requested detox and an inpatient alcohol & substance abuse treatment program.

Both my teammate MBPD's HRO Merida and myself, transported him to the Banyan Assessment Center for Detox & Crisis Services, where he was successfully admitted.

Amaris, your information was once again provided and we will like for [REDACTED] to be placed into one of our treatment beds upon discharge.

[REDACTED] has been struggling with an addiction to alcohol for many years, receiving many services from our Community Outreach Team and being arrested many of times for misdemeanor alcohol related offenses on Miami Beach.

We extend our sincere appreciation to Dr. Trujillo, Mr. Garcia (Copied) and the entire Banyan Health Team, for their continued support & service to our most vulnerable, Thank You!!!

Respectfully,

Bo

Borinquen "Bo" Hall, CIT, CRPS-A

Homeless Liaison Specialist

Miami Beach Police Department