



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

### MEETING MINUTES

#### Attendance:

In Person- 35

Virtual- 66

Total= 101

#### Full Attendee List is Provided in Appendix A

**Location:** Summit Church Orlando, 735 Herndon Ave, Orlando, FL 32803

**Hosts/Facilitators: Department of Children and Families Office (DCF) of Substance Abuse and Mental Health (SAMH):** Diveka Anderson, Regional Collaboration Coordinator; Morgan Schell, Regional Operations Manager.

**Presenters:** Madeleine Nobles, Chief of Mental Health Facilities, DCF, Mental Health Services  
Alana Christianson, MA, LMHC, CDAC, Orlando Health, Behavioral Health Hospital

#### I. CALL TO ORDER

Diveka Anderson called to order the Quarterly Central Region Behavioral Health Interagency Collaboration meeting at 10:00 am.

---

#### II. WELCOME AND INTRODUCTIONS

Morgan Schell welcomed attendees and introduced Central Region staff, meeting facilitators, and featured presenters. Appreciation was extended to all partners attending both virtually and in person.

Housekeeping reminders were provided for virtual and in-person attendees, including muting microphones except during Q&A and public comment, using the raise-hand feature, stating name/agency when speaking, and entering attendance in the chat. In-person attendees were asked to silence phones, sign in for attendance, and were provided facility directions.

---

#### III. PRESENTATION: DCF FORENSIC BEHAVIORAL HEALTH SYSTEM OVERVIEW

Madeleine Nobles, Chief of Mental Health Facilities, DCF, Mental Health Services



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

Ms. Nobles provided an overview of Florida's state mental health treatment system and forensic continuum of care. Key highlights included:

- DCF operates six state mental health treatment facilities statewide, including forensic and civil beds.
- Current statewide capacity includes approximately 3,139 beds, with 1,325 forensic beds.
- The department admits an average of 60–65 forensic individuals weekly.
- Forensic commitments have increased significantly in recent years without corresponding bed growth.
- Admissions require complete court commitment packets, including judicial orders and forensic evaluations.
- Baker Act civil admissions are coordinated through regional catchment areas with growing flexibility for statewide placement based on bed availability.
- Facilities provide whole-person treatment supports, including education, vocational programming, recreation, and therapeutic services.
- DCF is implementing an artificial intelligence project to improve packet review and processing efficiency.
- Behavioral Health Teaching Hospitals are being developed as alternate long-term placement options to relieve pressure on state facilities.
- Criminal Justice Reinvestment Grant opportunities were discussed as a means for counties to develop local diversion and treatment solutions.
- Broward County's jail-based competency restoration program (RISE) was highlighted as a successful model.
- DCF recently expanded one facility by 93 beds to increase statewide treatment capacity.

#### IV. **PRESENTATION: BAKER ACT / MARCHMAN ACT: CIVIL COMMITMENT AND SYSTEM NAVIGATION**

Alana Christianson, MA, LMHC, CDAC, Orlando Health, Behavioral Health Hospital

Ms. Christianson provided an educational presentation regarding Florida's Baker Act and Marchman Act processes, emphasizing system alignment and appropriate use of involuntary interventions.

Key Topics Included:

- History and intent of the Baker Act as a life-preservation and civil rights protection measure.
- Importance of using the least restrictive interventions whenever clinically appropriate.



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

- Clarification of Baker Act criteria, including mental illness, inability/refusal for voluntary exam, and risk of harm/self-neglect.
- Explanation that mental illness diagnosis alone does not automatically meet Baker Act criteria.
- Common misconceptions surrounding involuntary examinations and 72-hour holds.
- Discussion regarding medical clearance needs prior to psychiatric admission.
- Role of receiving facilities in evaluations, discharge planning, and petitions for continued involuntary placement when warranted.
- Importance of early intervention, crisis response teams, outpatient access, and collaborative prevention efforts.
- Need for compassionate, lawful, and clinically sound decision-making across systems.

### **Update:**

Ms. Christianson announced the upcoming opening of the new Orlando Health Behavioral Health Hospital in Apopka, expanding regional Baker Act receiving capacity from 80 beds to 144 beds while temporarily maintaining South Seminole operations during transition.

## **V. QUESTION AND ANSWER / DISCUSSION**

Attendees participated in a question-and-answer discussion. Questions focused on Baker Act procedures, transportation barriers, system coordination, receiving facility capacity, forensic services, and opportunities to strengthen continuity of care across the Central Region.

- Officer Evonie Harris, Winter Garden Police Department, asked for clarification regarding when the Baker Act 72-hour examination period begins and whether the timeframe pauses when an individual requires medical stabilization prior to transfer to a receiving facility.
  - Alana Christianson explained that the examination period generally begins once the individual arrives at the designated receiving facility. Time spent in a medical emergency department for stabilization may occur prior to admission to the receiving facility.
- Tina Kinney, NAMI Hernando, raised concerns regarding transportation delays and challenges when individuals are medically cleared but remain in emergency departments awaiting transfer to a receiving facility.



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

- Alana Christianson acknowledged that transportation barriers continue to impact timely placement and patient flow. She noted the importance of coordination among hospitals, transportation providers, law enforcement, and receiving facilities to reduce delays.
- Officer Evonie Harris, Winter Garden Police Department, asked how hospitals and law enforcement can better coordinate when individuals repeatedly cycle through crisis systems without long-term stabilization.
  - Alana Christianson emphasized the importance of early intervention, outpatient engagement, discharge planning, and stronger community-based supports to reduce repeat crisis encounters.
  - Michelle Dodson, AdventHealth, shared comments regarding the importance of hospital-community partnerships, continuity of care, and improving coordination following discharge. She highlighted the value of cross-system collaboration to ensure individuals are connected to appropriate behavioral health resources after leaving acute care settings.
- Kadian Parchment, Heartland for Children, asked what occurs when an individual continues to meet Baker Act criteria beyond the 72-hour examination period.
  - Alana Christianson explained that if continued involuntary treatment is clinically warranted, the receiving facility may petition the court for involuntary inpatient placement or explore other lawful treatment options, including voluntary consent when appropriate.
- Maya Namnum, Lotus Behavioral Health, asked virtually via the Q&A feature whether there are different admission criteria for Baker Act cases involving the pediatric population.
  - Alana Christianson explained that minors may be subject to the Baker Act when statutory criteria are met, including the presence of mental illness and risk of harm to self or others or inability to care for self.
- Maya Namnum, Lotus Behavioral Health, asked virtually via the Q&A feature what credentials or training are required for professionals authorized to initiate Baker Act examinations.
  - Alana Christianson responded that only individuals authorized under Florida law, including certain licensed clinicians, physicians, judges, and law enforcement officers, may initiate Baker Act actions within their legal authority.



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

- Maya Namnum, Lotus Behavioral Health, asked virtually via the Q&A feature whether additional receiving facility capacity is expected within the Central Region.
  - Alana Christianson shared that the new Orlando Health Behavioral Health Hospital in Apopka is expected to expand regional psychiatric bed capacity from 80 to 144 beds, improving access and helping meet increasing community demand.
- Maya Namnum, Lotus Behavioral Health, asked virtually via the Q&A feature about safeguards related to the use of artificial intelligence in DCF processes.
  - Madeleine Nobles explained that artificial intelligence tools are being explored to improve administrative efficiency, with human review and oversight maintained throughout decision-making processes.
- Maya Namnum, Lotus Behavioral Health, asked virtually via the Q&A feature about available pediatric forensic or state treatment beds.
  - Madeleine Nobles clarified current state facility structures and discussed the need for continued development of youth behavioral health capacity and community alternatives.
- An attendee asked how local communities can reduce the need for forensic commitments and higher levels of state placement.
  - Madeleine Nobles stated that strengthening diversion programs, community treatment options, competency restoration alternatives, and local stabilization resources can help reduce unnecessary state hospital admissions.
- An attendee asked about opportunities for counties to develop local solutions using available funding sources.
  - Madeleine Nobles discussed Criminal Justice Reinvestment Grant opportunities and encouraged continued local planning and collaboration to identify sustainable solutions.

Ms. Christianson thanked attendees for their thoughtful questions and reiterated the importance of continued collaboration among hospitals, providers, law enforcement, schools, courts, families, and community stakeholders to strengthen behavioral health outcomes across the Central Region.



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

### VI SUCCESS STORIES

Diveka Anderson introduced a success story segment recognizing the Central Region Managing Entities and community partners for their role in coordinating behavioral health services and improving outcomes across the region.

- **Central Florida Behavioral Health Network:** A youth receiving Community Action Team (CAT) services demonstrated improved emotional regulation, family functioning, peer relationships, and successfully transitioned to outpatient care with future educational goals.
- **Central Florida Cares:** Through coordination with justice and treatment partners, an individual successfully completed Aspire Health Partners' Bay House Program, maintained employment, satisfied probation requirements, and transitioned to stable community living.
- **LSF Health Systems:** Persistent outreach supported an older adult experiencing behavioral health and housing instability, resulting in connection to treatment, benefits assistance, family reunification, and improved stability.

Diveka Anderson thanked stakeholders for the strong response of submitted success stories and encouraged continued future submissions for the Central Region success story bank.

### VII. CENTRAL REGION WORKGROUP UPDATES

Morgan Schell introduced the regional workgroup leads and participants to provide updates. She noted that the workgroups were established in response to stakeholder survey priorities, feedback received during the January RBHIC meeting, and ongoing regional system needs. The workgroups were created to promote focused collaboration, identify barriers, and develop actionable recommendations to improve behavioral health services across the Central Region.

- **Peer Supports Workgroup**

**Presenters:** Bri Barbour, Chief Operating Officer, STEPS, Inc.; Tina Kinney, NAMI Hernando

- Multiple meetings have been convened.
- Focused on strengthening peer support services throughout the region.
- Current priorities include:



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

- Increasing awareness of peer support roles.
  - Expanding training and professional development opportunities.
  - Improving utilization of peer specialists across systems.
  - Identifying barriers related to hiring, credentialing, and background screening processes.
- **Accessibility / Expansion of Child & Youth Services Workgroup**
    - Presenter:** Traci Klinkbeil, Department of Children and Families
      - Multiple meetings have been convened.
      - Focused on improving access to behavioral health services for children, youth, and families.
      - Current priorities include:
        - Early intervention services.
        - Family support resources.
        - Youth crisis diversion.
        - Supports for dually served and at-risk youth.
        - Improving coordination among schools, providers, courts, child welfare, and community partners.
  - Stakeholders were encouraged to continue participating in the workgroups and to recommend additional members whose expertise may assist with advancing regional priorities and solutions.

### VII. PUBLIC COMMENT

Diveka Anderson opened the floor for public comment. Due to time constraints, attendees were asked to submit any public comments following the meeting to [diveka.anderson@myflfamilies.com](mailto:diveka.anderson@myflfamilies.com) or [cnr.samh.support@myflfamilies.com](mailto:cnr.samh.support@myflfamilies.com).

### VIII. CLOSING REMARKS / ADJOURN

Diveka Anderson thanked attendees for their engagement and participation and encouraged continued communication for any follow-up questions, feedback, or regional collaboration opportunities. She noted that the next Central Region Behavioral Health Interagency Collaboration Meeting will be held on July 23, 2026, at 10:00 a.m.,



## **Central Regional Behavioral Health Interagency Collaboration**

April 23, 2026, 10:00am-12:00pm EST

Hybrid

---

with a Florida Administrative Register (FAR) notice, registration details, and calendar invitation to follow.

Ms. Anderson reminded participants to complete the post-meeting survey once distributed and encouraged stakeholders to continue submitting presentation topic ideas, agency updates, collaborative success stories, and recommendations for future meetings and workgroup efforts to [Diveka.Anderson@myflfamilies.com](mailto:Diveka.Anderson@myflfamilies.com) or [CNR.SAMH.Support@myflfamilies.com](mailto:CNR.SAMH.Support@myflfamilies.com).

Ms. Anderson and Ms. Schell expressed appreciation for the continued partnership and collaboration of regional stakeholders, emphasizing the importance of ongoing cross-system engagement to strengthen behavioral health services and improve outcomes across the Central Region. Meeting materials and presentations were noted to be distributed in a follow-up recap email.

Diveka Anderson adjourned the Central Region Behavioral Health Interagency Quarterly meeting at 12:02 p.m. on April 23, 2026.

---



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

### Appendix A

Alana	Christianson	Orlando Health, Behavioral Health Hospital
Alison	Fulford	Department of Juvenile Justice
Amanda	Reinick	Family Partnerships of Central Florida
Amelia	Vazquez	Department of Juvenile Justice
Angela	Gambino	Aetna Better Health of Florida
Anna	Kesic	IMPOWER
Anny	Cruz Salcedo	Aspire Health Partners
Anny	Fernandez	Senior Resource Alliance
Anthony	Buffkin	Mount Dora Police Department
April	Busby	Department of Children and Families
Bri	Barbour	STEPS, Inc.
Brittany	Dougherty	Foundations To Freedom
Carlos	Ortiz	Department of Children and Families
Casey	Allen	Department of Health
Christopher	Lohn	VitalCore Health Strategies
Claudia	Hash	Lake Mary Police Department
Courtney	Whitt	USF Florida Center for Behavioral Health Workforce
Cristina	Perez	Department of Children and Families
Diana	Cardona	Department of Children and Families
Diveka	Anderson	Department of Children and Families
Dr. Christine	Cauffield	LSF Health Systems
Dr. Renee	Crooks	Department of Children and Families
Dunnia	Araujo	Catholic Charities
Earl	Hunt	Department of Children and Families
Edward	Adessi	Foundations To Freedom
Emilie	Ellenberg	USF Florida Center for Behavioral Health Workforce
Emily	Tallman	Seminole County
Emily	Garten	Devereux
Evonie	Harris	Winter Garden Police Department



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

George	Margoles	Recovery Connections
Glenn	East	Department of Health
Heather	Gunn	HCA Healthcare
Jacqueline	Roe	Sumter County School District
James	Witherspoon	Seminole County Community Health
Janelle	Adorno	North Tampa Behavioral Health
Jean	Tucker	Department of Children and Families
Jeffrey	Smialek	Department of Juvenile Justice (OHS)
Jennifer	Johnson	Florida Behavioral Health Association
Jill	Kolasa	Hernando School District
Jordan	Glenn	Aspire Health Partners
Joy	Bennink	Department of Juvenile Justice
Julie	Osmanski-Harmon	Sunshine Health
Justin	Bradley	Seminole County Sheriff's Office
Kadian	Parchment	Heartland For Children
Kait	Keller Zumaeta	Hope Florida
Katria	Haynes-Jenkins	Children's Home Society
Keith	Fig	Seminole County Sheriff's Office
Kelly	Welch	Seminole County Board of County Commissioners
Keniesha	Francis	Department of Juvenile Justice
Kent	Runyon	Central Florida Behavioral Health Network Inc.
Kimberly	Stratton	Children's Home Society
Konrad	McDougal	Seminole County Sheriff's Office
LaKeisha	Randolph	Department of Children and Families
Lance	Morgan	Department of Children and Families
Larry	Williams	Peace River Center
Laurinda	Andujar	Department of Children and Families
Lisette	Francis	HCA - UCF Lake Nona Hospital
Luis	Rivas	Central Florida Behavioral Health Network Inc.
Madeleine	Nobles	Department of Children and Families
Marielle	Asencio	HCA Florida Osceola Hospital
Matthew	Lehman	HCA Healthcare
Maya	Namnum	Lotus Behavioral Health
Michelle	Lord	Seminole County Sheriff's Office
Michelle	Norman	Ocoee Police Department



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

Michelle	Dodson	Advent Health
Morgan	Schell	Department of Children and Families
Nancy	Lowtan	Seminole County Sheriff's Office
Nancy	Pierson	HCA Healthcare
Natalia	Molina	Sunshine Health
Natalie	Mullett	Park Place Behavioral Health Care
Nicholas	Eaton	Titusville Police Department
Nicole	Brenenstuhl	Seminole County Sheriff's Office
Nicole	Pontrelli	Agency for Healthcare Administration
Nikaury	Munoz	Central Florida Cares
Patricia	Sierra	Department of Juvenile Justice
Raegan	Waugh	Charlie Health
Raymonde	Louime	HCA Healthcare
Rick	Hankey	LifeStream Behavioral Center
Robert	Roy	Department of Children and Families
Sarah	Tank	HCA Healthcare
Shaina	Joseph	Agency for Health Care Administration
Shane	Stewart	Seminole County Sheriff's Office
Shannon	Fournier	HCA Healthcare
Shayni	Sloan	Recovery Connections
Sherry	Holder	HCA Florida Capital Hosp
Stephanie	Boyd	Department of Children and Families
Tammy	Denson	HCA Healthcare
Taylor	South	Tri County Human Services
Taylor	Coakley	Department of Children and Families
Thomas	Krewson	Titusville Police Department
Timothy	Macsuga	UHS INC
Tina	Kinney	NAMI, Hernando
Tori	Hunter	Cisco Systems
Traci	Klinkbeil	Department of Children and Families
Tyler	Spence	Kelly Education / UCF / American Red Cross (Mid-Florida Chapter)
Valoria	Thomas	Department of Children and Families
Vicki	Griffin	Oviedo Medical Center
Yaberci	Perez-Cubillan	Aspire Health Partners
Zachary	Glenn	Seminole County Sheriff's Office (Multi-Agency Team)



## Central Regional Behavioral Health Interagency Collaboration

April 23, 2026, 10:00am-12:00pm EST

Hybrid

Zachary	Blougouras	Titusville Police Department
Zoha	Khan	Department of Children and Families