

The Florida Mental Health Act
(The Baker Act)

2003 Annual Report

Prepared for the Florida Agency for Health Care Administration

By the

Louis de la Parte Florida Mental Health Institute
Department of Mental Health Law & Policy
Policy and Services Research Data Center
Annette Christy, Ph.D.
Paul G. Stiles, J.D., Ph.D.

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For Information Contact:

Dr. Annette Christy, Research Assistant Professor
Department of Mental Health Law & Policy
Louis de la Parte Florida Mental Health Institute
University of South Florida
13301 Bruce B. Downs Blvd., MHC 2620
Tampa, Florida 33612-3807
(813) 974-7419
achristy@fmhi.usf.edu

For additional copies, go to <http://bakeract.fmhi.usf.edu>

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Report Highlights

- The Baker Act Reporting Center at the Louis de la Parte Florida Mental Health Institute received and entered data from forms documenting 109,682 involuntary examinations initiated in calendar year 2003. Data were analyzed from 104,600 forms for exams in 2003 after the removal of duplicate forms from the analysis.
- The number of initiations has increased each year, from 69,235 in 1997 to 109,682 in 2003. This is an increase of 58% over this period. During this same time period, estimates based on U.S. Census data indicate that the Florida population has increased 17%.
- There were at least 75,521 people with Baker Act exams initiated in 2003.
- Eighteen percent of these people had more than one Baker Act initiation in 2003 (range 2 to 50 exams).
- The majority of Baker Act initiations were completed by mental health professionals (51%), followed by law enforcement officials (45%) and judges (4%).
- The most common evidence type indicated was “harm only” (72% of those with harm as an evidence type), followed by “neglect only” (17%), and “both neglect and harm” (6%).
- The median age of individuals subject to Baker Act initiation was 37 years, with almost 16% of initiations for individuals 17 years and younger and slightly over 9% of initiations for individuals 65 years and older.
- Gender was almost equally divided, with 52% of examinations for males and 48% for females.
- The majority of individuals were White (73%), with the remaining individuals being Black/African-American (18%), Hispanic (7%), Asian (<1%) and other (1%).

INTRODUCTION

In 1971, the Florida Legislature enacted the Florida Mental Health Act, a comprehensive revision of the state's mental health commitment laws. The law has been referred to widely as the "Baker Act" in honor of Maxine Baker, the former state representative from Miami who sponsored the Act. Since the Baker Act became effective in 1972, multiple legislative amendments have been enacted to protect individuals' civil and due process rights.

A substantial reform of the law occurred in the 1996 Florida legislative session. The 1996 reforms included greater protection for persons on voluntary and involuntary status, strengthening of informed consent and guardian advocacy provisions, and expanded notice requirements and provisions for suspension and withdrawal of receiving and treatment facility designations. The substantial protection provided by the Baker Act helps to ensure that such intrusive and restrictive treatment is used appropriately to promote positive outcomes.

One provision in the revised law requires all receiving facilities to send a copy of every involuntary examination initiation form (*i.e.*, reports of law enforcement officers, certificates of mental health professionals and court issued ex-parte orders) to the Florida Agency for Health Care Administration (AHCA) on the next working day after the person arrived at the facility (Section 394.463 F.S.). The Policy and Services Research Data Center at the Louis de la Parte Florida Mental Health Institute has agreed to serve as the repository of these forms, and to carry out the data entry and analytic functions for the AHCA.

Section 394.463 F.S. also requires AHCA to submit an annual report to the Department of Children and Families, the President of the Senate, the Speaker of the House of Representatives, and the minority leaders of the Senate and House of Representatives. This is the seventh Annual Report under the revised provisions and addresses initiation forms for examinations initiated from January 1, 2003 through December 31, 2003, with some additional analyses of data received from January 1, 2000 through December 31, 2003.

Understanding what the data are not is as important as understanding what they are as they relate to policy decisions made from these data. The data analyzed for this report are from initiation forms received. However, a certain percentage of individuals for whom forms were received were never admitted to the Baker Act receiving facilities because, for example, they were not found to meet criteria. The data also do not allow for a determination of what occurred after the initial examination. The data cannot tell us how long individuals stayed at the facility and if so whether they continued on a voluntary or involuntary basis. Also, the Baker Act Reporting Center does not receive data on involuntary placement. Involuntary placements can be up to six months in length per order. (Due to statutory changes that took effect in January 2005 the BA Reporting Center is currently receiving involuntary inpatient and involuntary outpatient placement orders on behalf of the AHCA). Therefore, the data in this report do NOT speak to involuntary placement – only examination. Finally, there is anecdotal evidence to suggest that some people who have a Baker Act initiation spend some or all of the up to 72 hours of their Baker Act initiation at non-receiving facilities subsequent to being medically cleared. The Baker Act Reporting Center does not receive forms for these initiations of individuals who are never transferred to a Baker Act receiving facility after being medically cleared because only receiving facilities are required to submit forms.

Data for calendar year 2003 were analyzed at the state, county and facility levels, and are presented in this report. For additional information about the Baker Act and the Reporting Center, please visit the FMHI website at <http://bakeract.fmhi.usf.edu>.

TECHNICAL NOTES ABOUT DATA ANALYSES

Forms were received to document **109,682** involuntary examinations conducted in calendar year 2003. Less than one percent of forms received in calendar year 2003 were missing the date of examination initiation (n = 778). Data from these forms were not included in the analyses because the year of exam could not be determined. However, the small percentage they represent of the total means that this does not impact the results.

Duplicate forms were defined as any forms with the same social security number on cover sheets attached to initiation forms dated on the same day or within three (3) days of each other. Given that the Baker Act allows for a maximum of 72-hours to conduct the involuntary examination, forms initiated within three days of each other are likely to be for the same initiation or episode of care. Five percent (n = 5,082) of forms for exams initiated in 2003 were identified as duplicates and taken out of the analyses.

There were data for **104,600** examinations initiated in 2003 analyzed for this report (after taking out data for forms that were missing the date of initiation and/or were identified as duplicates).

Some percentages may not sum to 100% due to rounding.

There are also technical nuances to variables having to do with counties, which are important to consider when interpreting the analyses presented in this report. There are three county data elements in the Baker Act Data:

1. County of Initiation

The county in which the Baker Act examination was initiated, which may be different from the county of the Baker Act receiving facility at which the individual is examined.

2. County of Facility

The county in which the Baker Act receiving facility is located.

3. County Residence of the Individual Examined

The county in which the person who is examined lives (from the cover sheet).

In many cases the county of initiation is the same as the county of the facility, which is the same as the county of residence for the person being examined. Our experience is that for many analyses the county used for purposes of categorization does not affect the results significantly. However, there may be circumstances in which the county of analysis used makes a difference in the results. For example, there are situations where facilities are located close to county lines, making it more likely that out of county individuals will have examinations at these facilities. There are some arrangements within Department of Children and Families Districts and even across districts that relate to the movement of individuals within the system that can affect how information is interpreted.

While law enforcement and the forms from judges designate the county, the mental health professional form does NOT ask the individual completing the form to indicate the county in which the initiation takes place.¹ Therefore, in some prior analyses we have used the county of the facility as a proxy for the county of initiation for mental health professional forms. This means that in these analyses counties that do not have a Baker Act receiving facility will not show any mental health professional initiated examinations, although some may actually be initiated by mental health professionals in that county. This is, in part, an artifact of the lack of a field to indicate county on the mental health professional form (so that mental health professionals who initiate an examination in a county with no facility will have the county designated as the county of the facility – not the actual county of initiation). Such nuances need to be considered when making statements about trends in the data and policy decisions based upon the data.

Also, the county of residence of the individual examined is missing for a small percentage of records. This is because a small number of forms are sent in with no cover sheet, while others do not provide this information.

In sum, careful attention should be paid to these nuances when policy decisions or policy statements are being based on the information in this report or prior reports. There are additional nuances to the data that are beyond the scope of this report, but that may be relevant to certain uses of the information in the report. This is especially true if the issue focuses on a specific locality. Staff at the Baker Act Reporting Center are available to discuss these issues for those in need of additional consultation.

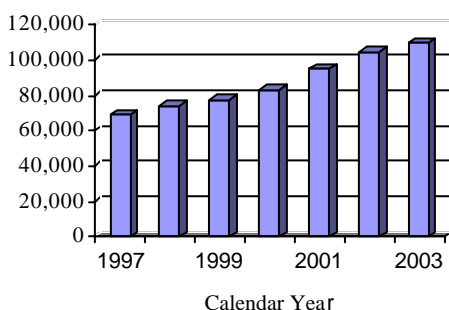
Unlike prior annual reports, the county of residence of the person examined was used for all analyses that required categorization according to county

¹ This has been addressed with a form change that will take effect in 2005 that has added this variable to the mental health professional initiation (BA52) form.

STATE LEVEL ANALYSES

The number of forms received at the BA Reporting Center has increased each year, with a 58% increase in the number of forms (i.e., examinations) from 1997 to 2003.

Figure 1: Count of Involuntary Initiation Forms Received - 1997 to 2003²



Count of Initiations by Calendar Year

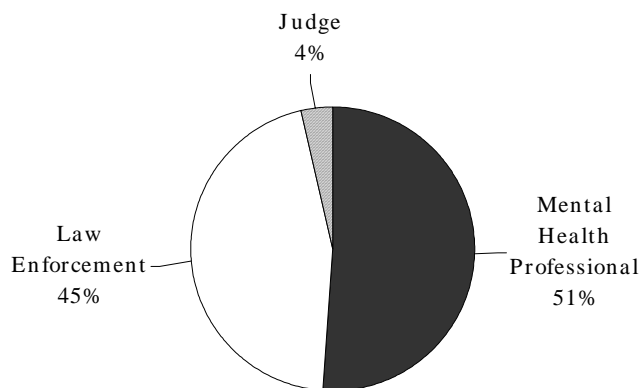
2003: 109,682 **1999:** 77,159
2002: 104,564 **1998:** 73,900
2001: 94,784 **1997:** 69,235
2000: 83,285

These increases may indicate an increase in involuntary examinations overall, could reflect better reporting by receiving facilities, or a combination of these two factors.

As discussed in the Technical Section, analyses were conducted on the **104,600** unduplicated forms received from identified Baker Act Receiving Facilities.

Initiation can be done by authorized mental health professionals, law enforcement officers, or by a circuit judge. The majority of initiation forms were completed by mental health professionals (53,412 or 51%), followed by law enforcement officials (47,471 or 45%), and judges (3,713 or 4%), as presented in Figure 2. These are identical percentages to year 2002 data and similar to analyses of data from prior years.

Figure 2: Type of Initiator



The majority of mental health professional initiations were by physicians (86%), followed by licensed clinical social workers (8%), psychologists (3%), and psychiatric nurses (2%).

² These numbers are slightly different from those in reports from prior years because in the past we have reported the number of forms received per year as opposed to the number of forms for examinations in each year. These counts are very close in number. The negative of using the number of forms received in a year is that in each year a small percentage of forms for the prior year are received. The negative of using the number of forms for examinations actually conducted each year is that a small percentage of forms are missing this date (so are not counted). However, these are very fine points related to the data that do not change the overall pattern as can be seen in the number in forms received in each year compared to the numbers in Figure 1.

The Baker Act form required the initiator to check boxes indicating at least one of the following reasons as evidence justifying the examination.

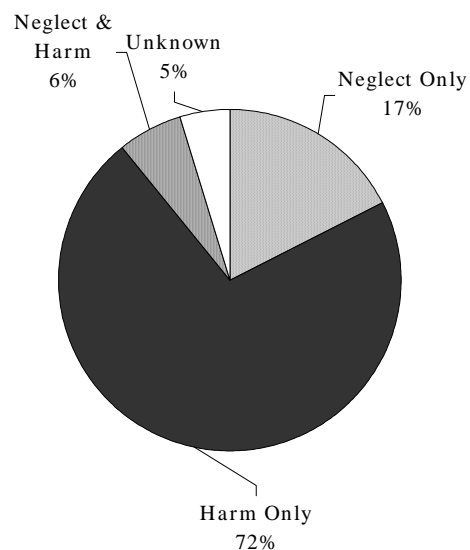
- without care, the person is likely to suffer from neglect resulting in real and present threat of substantial harm that cannot be avoided through the help of others; or
- there is substantial likelihood that without care and treatment the person will cause serious bodily harm to self or others in the future, as evidenced by recent behavior.

One of the following was then recorded in the database.

- “neglect”
- “harm”
- both neglect and harm (both categories checked)
- neither neglect nor harm (neither category checked)

Statewide, “neglect only” was indicated on 17% (n = 18,181) and “harm only” was checked on 72% (n = 75,204) of forms. Both “neglect combined with harm” was indicated on 6% (n = 6,444) of the Baker Act forms. Evidence type information was missing from 5% (n = 4,771) of the forms.³ Figure 3 shows the distribution of evidence type.

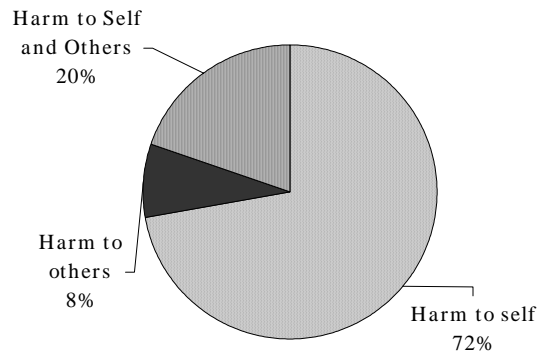
Figure 3: Distribution of Evidence Type



³ The “Unknown” evidence type indicates that the boxes on the forms meant to indicate the evidence type were left blank. Although forms also contain written information documenting the evidence type, the volume of data received and the ambiguity of some information on the forms means that in the absence of a checked evidence type, written information is not interpreted to determine the evidence type.

Figure 4 presents the distribution of harm type. “Harm to self only” was the most frequently indicated type (51,781 or 72% of forms for which harm type was known), followed by “harm to both self and others” (14,275 or 20%) and harm to others only (5,804 or 8%) on forms indicating harm as an evidence type.

Figure 4: Distribution of Harm Type



Statewide Demographic Analyses

The summary of the demographic background of those individuals subject to involuntary examination in Florida is available from information collected on the cover sheet completed by Baker Act receiving facility staff. A total of 97,509 forms (93%) were received with social security numbers representing data from **75,521** individuals. Seventeen percent of people experienced more than one initiation in calendar year 2003, ranging from 2 to 50 Baker Act initiations.

Table 1: Count of Baker Act Initiations within Calendar Year 2003 by Number of Exams per Person

Number of Exams	Number of People	Number of Exams	Number of People
1	62543	12	15
2	8454	13	8
3	2536	14	5
4	968	15	2
5	459	16	4
6	235	17	1
7	144	18	1
8	67	19	1
9	45	22	1
10	19	23	1
11	10	27	1
		50	1

Age

Date of birth information necessary to compute age was complete on 101,463 or 97% of forms. The median age from these 95,487 initiations was 37 years (*mean* or average = 38; *SD* = 18.30).

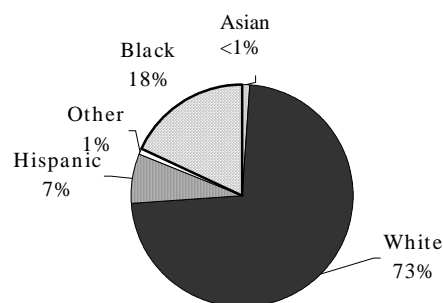
Gender

Five percent of the forms for examinations in 2003 did not contain information on gender (n = 4,941). Of the remaining forms, 52% were for males (n = 51,365) and 48% were for females.

Race/Ethnicity⁴

The individual completing the cover sheet is asked to write in the race of the client in a blank labeled “race.” Forms with Black, African-American or abbreviations of these (such as “AA” and “B”) were coded as Black. Forms with White, Caucasian or abbreviations of these (“C”, “CA”, and “W”) were coded as White. Forms with Hispanic or abbreviations of this term (“H” or “Hisp”) were coded as Hispanic. The information written in this field tells us the perception of the individual completing the form. As presented in Figure 5 there were 94,662 forms (90%) indicating a race/ethnicity. The majority of the initiations were for White individuals (73%), followed by Black (18%), Hispanic (7%), Other (1%), and Asian (<1%).

Figure 5: Race/Ethnicity of Individual’s Examined



COUNTY LEVEL ANALYSES

Table 27 presents the number of Baker Act examinations by the **county of residence** of the person examined based on the county of residence as provided on the cover sheet completed at receiving facilities. These numbers differ somewhat from those reported in prior reports because the county of examination initiation was used to categorize county in prior reports. Information is reported for years 2000 through 2003. Data from prior years (1997 through 1999) are not reported because the cover sheet from which the county of residence is obtained was not put into effect until 1998.

The AHCA Area, Department of Children and Families District and the Judicial Circuit associated with each count are included in the table. This will allow the reader to aggregate information based on these geographic distinctions.

It is important to keep in mind the nuances related to county variables (see pages 5-6 of this report) when interpreting the information in this section of the report. Some counts may reflect artifacts of the data submission, such as completion of the county of residence variable on the cover sheet.

⁴ The term “race/ethnicity” is used because race terms (e.g., White, Black) and ethnicity terms (Hispanic) were written on the form in a blank marked “race.” A more accurate approach is to determine the race of the individual and then ask whether he/she is of Hispanic origin. The current cover sheet does not require this distinction. However, this issue has been addressed with a form change that will take effect in 2005 that has added check boxes to the cover sheet to indicate both race and ethnicity.

ANALYSES BY FLORIDA COUNTIES

The count of forms received by county of residence for data received in calendar years 1999 through 2003 are presented in Table 2. Populations statistics are provided to put these results in context.

Table 2: Baker Act Initiations by County of Residence of Person Examined

County of Residence	2004 Estimated Population ⁵	% of Total Exams Statewide	AHCA Region	DCF District/Region	Judicial Circuit	2000		2001		2002		2003	
						#	%	#	%	#	%	#	%
Statewide ⁶	17,514,157					80,226		90,368		99,772		104,600	
“Homeless” ⁷						981	1.22	1,069	1.18	1,755	1.76	1,945	1.86
Missing						10,685	13.32	10,937	12.10	10,994	11.02	10,352	9.90
Alachua	235,756	1.37	03	03	08	596	0.74	707	0.78	757	0.76	802	0.77
Baker	23,785	.14	04	04	08	63	0.08	100	0.11	58	0.06	81	0.078
Bay	157,507	.91	02	02	14	649	0.81	960	1.06	1,001	1.00	959	0.92
Bradford	27,507	.16	03	03	08	68	0.08	86	0.095	81	0.08	77	0.07
Brevard	519,972	3.0	07	07	18	2,955	3.68	3,555	3.93	4,140	4.15	4,377	4.18
Broward	1,739,962	10.0	10	10	17	6,145	7.66	7,147	7.91	7,953	7.97	8,004	7.65
Calhoun	13,673	.08	02	02	14	49	0.06	74	0.081	73	0.073	45	0.04
Charlotte	156,325	0.9	08	08	20	539	0.67	538	0.60	544	0.55	592	0.57
Citrus	129,046	.74	03	13	05	592	0.74	623	0.69	704	0.71	582	0.56
Clay	161,898	0.9	04	04	04	263	0.33	288	0.32	607	0.61	625	0.60
Collier	308,232	1.7	08	08	20	611	0.76	644	0.71	748	0.75	728	0.70
Columbia	61,097	.35	03	03	03	162	0.20	179	0.20	190	0.19	253	0.24
Dade	2,388,528	14	11	11	11	7,133	8.89	8,797	9.73	10,391	10.41	10,940	10.46
DeSoto	34,676	.20	08	Suncoast	12	141	0.18	136	0.15	117	0.12	139	0.13
Dixie	15,217	.09	03	03	03	50	0.06	59	0.07	65	0.07	62	0.060
Duval	842,822	4.9	04	04	04	3,042	3.79	3,665	4.06	3,673	3.68	4,443	4.23
Escambia	307,246	1.8	01	01	01	1,570	1.96	1,628	1.80	1,745	1.75	1,873	1.79
Flagler	65,719	.34	04	12	07	221	0.28	192	0.21	234	0.23	299	0.29
Franklin	10,648	.06	02	02	02	64	0.08	49	0.05	61	0.06	73	0.07
Gadsden	46,928	.28	02	02	02	196	0.24	204	0.23	224	0.22	215	0.21
Gilchrist	16,136	.09	03	03	08	34	0.04	43	0.05	63	0.06	55	0.05
Glades	10,930	.06	08	08	20	28	0.03	31	0.03	18	0.02	13	0.01
Gulf	15,910	.09	02	02	14	42	0.05	57	0.06	74	0.07	61	0.06
Hamilton	14,084	.08	03	03	03	26	0.03	40	0.04	27	0.03	42	0.04
Hardee	27,702	.16	06	14	10	72	0.09	69	0.08	88	0.09	95	0.09
Hendry	38,040	.22	08	08	20	67	0.08	60	0.07	110	0.11	132	0.13
Hernando	144,755	.82	03	13	05	829	1.03	919	1.02	948	0.95	997	0.95
Highlands	92,342	.53	06	14	10	433	0.54	463	0.51	471	0.47	509	0.49

⁵ Source of population statistics: Florida Department of Health Office of Planning, Evaluation & Data Analysis; <http://www.floridacharts.com/charts/chart.aspx>

⁶ These total counts by year are slightly lower than the counts by year in Figure 1 because duplicates have been identified and taken out of analyses for number presented in this table (this typically represents about 5% of the forms received annually)

⁷ This is the count of forms with cover sheets in which the word “homeless” was written in the county of residence space. This is NOT an accurate reflection of the true number/percentage of people who are homeless who experience an examination as many of them may have had a county of residence recorded or may be included in the group with no county of residence recorded. Changes in the cover sheet that take effect in 2005 have been made to try to more accurately collect information on this variable.

Table 2: Baker Act Initiations by County of Residence of Person Examined (continued)

County of Residence	2004 Estimated Population	% of Total Exams Statewide	AHCA Region	DCF District/Region	Judicial Circuit	2000		2001		2002		2003	
						#	%	#	%	#	%	#	%
Hillsborough	1,107,418	6.3	06	Suncoast	13	3,728	4.65	4,975	5.51	4,823	4.83	5,155	4.93
Holmes	19,131	.11	02	02	14	55	0.07	64	0.07	88	0.09	92	0.09
Indian River	124,589	.71	09	15	19	555	0.69	590	0.65	588	0.59	577	0.55
Jackson	49,851	.29	02	02	14	148	0.18	215	0.24	219	0.22	202	0.19
Jefferson	13,853	.08	02	02	02	62	0.077	71	0.08	78	0.08	83	0.08
Lafayette	7,570	.04	03	03	03	15	0.018	19	0.02	20	0.02	27	0.03
Lake	251,091	1.4	03	13	05	755	0.94	1,190	1.32	1,227	1.23	1,323	1.26
Lee	514,379	2.8	08	08	20	1,545	1.93	1,594	1.76	1,699	1.70	2,161	2.07
Leon	261,230	1.5	02	02	02	1,086	1.35	1,011	1.12	1,129	1.13	1,059	1.01
Levy	37,707	.22	03	03	08	116	0.15	142	0.16	138	0.13	155	0.15
Liberty	7,333	.04	02	02	02	58	0.07	55	0.06	24	0.02	35	0.03
Madison	19,323	.11	02	02	03	78	0.10	66	0.07	80	0.08	87	0.08
Manatee	295,708	1.7	06	Suncoast	12	1,378	1.72	1,354	1.50	1,419	1.42	1,379	1.32
Marion	291,923	1.6	03	13	05	1,261	1.57	1,597	1.77	1,644	1.65	1,722	1.65
Martin	138,194	0.8	09	15	19	254	0.32	744	0.82	742	0.74	765	0.73
Monroe	80,531	0.5	11	11	16	449	0.56	455	0.50	406	0.41	518	0.50
Nassau	65,271	.37	04	04	04	185	0.23	165	0.18	157	0.16	231	0.22
Okaloosa	185,315	1.1	01	01	01	1,016	1.27	861	0.95	762	0.76	1,159	1.11
Okeechobee	37,832	.22	09	15	19	150	0.19	220	0.24	271	0.27	256	0.24
Orange	1,017,037	5.7	07	07	09	4,194	5.23	4,221	4.67	4,613	4.62	4,969	4.75
Osceola	223,847	1.2	07	07	09	644	0.80	604	0.67	651	0.65	813	0.78
Palm Beach	1,246,677	7.1	09	09	15	5,339	6.65	5,605	6.20	7,134	7.15	7,319	7.00
Pasco	386,994	2.2	05	Suncoast	06	2,496	3.11	2,780	3.08	3,037	3.04	3,384	3.24
Pinellas	948,027	5.6	05	Suncoast	06	5,779	7.20	6,584	7.29	7,802	7.82	7,961	7.61
Polk	523,305	3.0	06	14	10	2,622	3.27	2,794	3.09	2,883	2.89	3,068	2.93
Putnam	72,641	.43	03	03	07	249	0.31	198	0.22	239	0.24	296	0.28
Santa Rosa	146,334	.75	01	01	01	522	0.65	557	0.62	586	0.59	646	0.62
Sarasota	219,161	2.0	08	Suncoast	12	1,671	2.08	1,947	2.15	2,076	2.08	2,150	2.06
Seminole	133,564	2.3	07	07	18	1,142	1.42	1,246	1.38	1,571	1.57	1,613	1.54
St. John	357,129	0.8	04	04	07	164	0.20	159	0.18	159	0.16	230	0.22
St. Lucie	405,722	1.2	09	15	19	969	1.21	1,396	1.54	1,770	1.77	1,757	1.70
Sumter	65,941	0.4	03	13	05	152	0.19	218	0.24	247	0.25	189	0.18
Suwanee	38,351	0.2	03	03	03	136	0.17	157	0.17	178	0.18	154	0.15
Taylor	21,178	0.1	02	02	03	94	0.12	79	0.09	111	0.11	116	0.11
Union	14,277	.08	03	03	08	25	0.03	27	0.03	30	0.03	41	0.04
Volusia	481,784	2.8	04	12	07	2,440	3.04	2,735	3.03	2,891	2.90	3,121	2.98
Wakulla	26,010	.15	02	02	02	130	0.16	106	0.12	96	0.10	104	0.10
Walton	49,171	.27	01	01	01	172	0.21	134	0.15	164	0.16	221	0.21
Washington	22,315	.13	02	02	14	86	0.11	114	0.13	106	0.11	92	0.09

FACILITY LEVEL ANALYSES

The number of examination forms received in calendar year 2003 for each Baker Act receiving facility is presented in Table 3. Public receiving facilities are those that receive funds from the Florida Department of Children and Family Services for Baker Act services.

Table 3: Information Presented at the Facility Level

Facilities marked with an asterisk () were undesignated as receiving facilities at some point during the four years, accounting for the pattern of form submission (such as no or low form submission for certain years).*

FMHI Code	County	Private/ Public	Facility Name	Year of Examination			
				00	01	02	03
999	Unknown	Unknown	Missing (facility could not be determined)	1	0	15	2
888	Unknown	Unknown	Non Receiving Facility	124	98	51	3
2	Volusia	Public	ACT Corporation CSU & SRT	1,294	1,374	1,503	1,939
4/42	Leon	Public/ Private	Apalachee Center for Human Service/ Eastside Psychiatric Hospital ⁸	1,142	1,091	1,203	1,181
36	Broward	Private	Atlantic Shores Hospital	108	106	249	364
3	Dade	Private	Aventura Hospital and Medical Center	92	49	74	171
5	Escambia	Private	Baptist Hospital - Pensacola	1,184	1,140	1,091	1,139
6	Duval	Private	Baptist Medical Center - Jacksonville	612	689	732	816
110	Bay	Private	Bay Medical Behavioral Healthcare	638	1,247	1,329	1,171
7	Bay	Private	Bay Medical Center*	117	9	0	0
9	Sarasota	Private	Bayside Center for Behavioral Health	641	804	779	956
10	Dade	Public	Bayview Center for Mental Health, Inc.	283	277	303	415
157	Duval		Behavioral Services Management ⁹	68	70	900	565
12	Sarasota	Private	Bon Secours - Venice Hospital Psychiatric Institute	351	595	533	15 ¹⁰
13	Okaloosa	Public	Bridgeway Center, Inc.	335	426	525	631
16	Broward	Public	Broward General Medical Center	1,258	1,432	1,468	1,197
156	Baker	Public	Building 57 at Northeast Florida State Hospital		31	5 ¹¹	27
17	Dade	Private	Cedars Medical Center	369	333	425	388
20	Charlotte	Public	Charlotte Community Mental Health Services	360	356	341	430
27	Hillsborough	Private	Charter Behavioral Health Systems of Tampa Bay at Tampa*	151	0	0	0
24/155	Lee	Private/Public	Charter Glades Behavioral Health System*	531	0	0	0
29	Marion	Private	Charter Springs Hospital*	136	0	0	0
30/153	Brevard	Public/Public	Circles of Care - Adult Psychiatric Unit & Children's CSU ¹²	2,801	3,045	3,479	3,595
103	Dade	Public	Citrus Health Network CSU	0	1899	1724	1597

⁸ Eastside Psychiatric Hospital is a public receiving facility that is affiliated with Apalachee Center for Human Services. The count of exams for Eastside is included in the Apalachee count because forms from both facilities are submitted to the Baker Act Receiving Facility with the facility indicated at Apalachee Center for Human Services.

⁹ Behavioral Services Management is an administrative entity related to several receiving facilities in Duval County. Forms in this row of the table were received from Behavioral Services Management with no indication of the facility.

¹⁰ This number is low because Bon Secours was undesignated as a receiving facility in 2004.

¹¹ This number is known to under-represent the number of exams at this facility due to reporting issues. These have been addressed by this facility.

¹² Circles of Care has two designated receiving facilities, one of which is specifically for children. However, because this distinction cannot typically be made with the forms received at the Baker Act Reporting Center (i.e., those from the children's unit versus those from the adult unit) counts for these facilities are grouped together.

FMHI Code	County	Private/ Public	Facility Name	Year of Examination			
				00	01	02	03
32	Sarasota	Public	Coastal Behavioral Healthcare, Inc.	1,180	1,156	835	1,099
65	Palm Beach	Private	Columbia Hospital	1,863	2,110	2,446	2,867
75	St. Lucie	Private	Columbia Lawnwood Regional Medical Center	464	500	725	858
58	Pasco	Private	Community Hospital of New Port Richey	601	937	979	1164
33	Dade	Public	Community Mental Health of South Dade, Inc.	369	423	431	413
40	Collier	Public	David Lawrence Mental Health Center, Inc.	647	853	832	764
164	Pasco	Private	East Pasco Medical Center				82
43	Palm Beach	Private	Fair Oaks Pavilion of Delray Medical Center	475	564	808	783
44	St. John's	Private	Flagler Hospital	405	683	691	694
46	Orange	Private	Florida Hospital – Orlando	955	1,193	1,338	1,527
69	Highlands	Private	Florida Hospital Heartland Medical Center – Lake Placid	208	260	225	237
49	Broward	Private	Florida Medical Center ¹³	761	1,124	1,311	739
38	Broward	Private	Fort Lauderdale Hospital	128	238	650	932
50	Okaloosa	Private	Fort Walton Beach Medical Center	746	376	215	738
52	Monroe	Public	Guidance Clinic of the Middle Keys	190	274	255	268
54	Volusia	Public	Halifax Behavioral Services	52	29	46	17
55	Volusia	Private	Halifax Medical Center	1,475	1,675	1,712	1,606
147	Palm Beach	Public	Healthy Solutions Resource Center Glades CSU	126	175	243	247
104	Polk	Private	Heart of Florida Behavioral Center*	2	0	0	0
15	Broward	Public	Henderson Mental Health Center 19 th Street CSU	887	849	1,236	1,465
62	Broward	Private	Hollywood Pavilion Hospital	38	69	62	18
66	Broward	Private	Imperial Point Hospital	590	655	613	533
18	Indian River	Private	Indian River Memorial Hospital Center for Emotional & Behavioral Health	447	490	405	398
128	Palm Beach	Private	Institute for Mental Health at St. Mary's Hospital	482	837	1,011	1,379
67	Dade	Public	Jackson Memorial Hospital	1444	2,460	3,138	3,883
79	Dade	Public	Jackson North CMH	95	125	216	285
41	Dade	Private	Jackson South	661	654	729	741
68	Columbia	Private	Lake City Medical Center*	0	48	5	0
70	Polk	Private	Lakeland Regional Medical Center	998	1,199	1,075	1,033
71	Orange	Public	Lakeside Alternatives, Inc.	3,068	2,736	3,100	3,440
72	Escambia	Public	Lakeview CSU	657	829	768	648
73	Dade	Private	Larkin Community Hospital	125	157	182	283
77	Bay	Public	Life Management Center of Northwest Florida, Inc.	393	371	394	398
78	Lake	Public	Life Stream Behavioral Center CSU	969	1576	1,754	1,762
45	Monroe	Private	Lower Keys Medical Center	304	297	269	337
80	Manatee	Public	Manatee Glens-Glen Oaks CSU	990	1,027	1,212	1,193
81	Manatee	Private	Manatee Memorial Hospital	536	550	672	588
82	Marion	Public	Marion-Citrus Mental Health Center CSU	1,209	1,666	1,783	1,759
84	Hillsborough	Private	Memorial Hospital of Tampa	87	308	364	784
85	Broward	Public	Memorial Regional Hospital	3,164	1,671	1,808	2,213

¹³ Florida Medical Center has over time had a designated adult psychiatric unit and a unit for children and adolescents. These have been designated as two separate receiving facilities. However, because forms received in the Baker Act Reporting Center do not distinguish between these units this distinction is not made in the data.

FMHI Code	County	Private/ Public	Facility Name	Year of Examination			
				00	01	02	03
87	Hillsborough	Public	Mental Health Care, Inc.	2,614	4,355	4,966	4,930
88	Duval	Public	Mental Health Center of Jacksonville CSU	1,863	1,490	979	661
89	Duval	Public	Mental Health Resource Center	1,999	2,887	3,150	3,015
92	Dade	Private	Mercy Hospital, Inc.	1	94	235	245
91	Alachua	Public	Meridian Behavioral Health Care, Inc. – Gainesville	755	975	1052	880
158	Columbia	Public	Meridian Behavioral Health Care, Inc. – Lake City	218	336	412	444
161	Dade	Public	Miami Behavioral Health Center	323	416	579	463
93	Dade	Private	Miami Children’s Hospital	76	125	125	199
95	Pinellas	Private	Morton F. Plant Hospital	1,614	2,149	2,862	2,892
96	Dade	Private	Mount Sinai Medical Center	84	121	98	124
98	Dade	Public	New Horizons Community Mental Health Center	131	171	186	134
99	St. Lucie	Public	New Horizons of the Treasure Coast, Inc.	982	1033	897	758
102	Dade	Private	North Shore Medical Center	231	213	250	269
1	Palm Beach	Public	Oakwood Center of the Palm Beaches	1,034	912	985	1,205
64	Clay	Private	Orange Park Medical Center	145	1	421	547
120	Seminole	Private	Orlando Regional South Seminole Hospital	1,596	1,723	2,083	2,497
105	Dade	Private	Palmetto General Hospital	349	730	978	1211
90	Osceola	Public	Park Place Behavioral Health	560	483	447	618
106	Dade	Private	Parkway Regional Medical Center	389	507	578	625
107	Polk	Public	Peace River Center for Personal Development CSU	1,654	1,756	1,925	2,272
108	Pinellas	Public	Personal Enrichment Through Mental Health Services, Inc.	2,687	2,691	3,042	3,242
159	Charlotte	Private	Riverside Behavioral Center	338	320	156	353
76	Lee	Public	Ruth Cooper Center, Inc.	1,019	1,297	2,103	2,516
113	St. Lucie	Private	Savannas Hospital	88	1,234	1,616	1,729
114	Seminole	Public	Seminole Community Mental Health Center	620	748	547	627
115	Citrus	Private	Seven Rivers Community Hospital*	386	0	0	0
116	Alachua	Private	Shands at Vista	618	782	764	866
117	Alachua	Private	Shands Hospital	112	166	220	220
140	Duval	Private	Shands Medical Center	74	0	0	269
118	Palm Beach	Public	South County Mental Health Center	1,961	1,212	1,960	1,249
121	Dade	Private	South Shore Hospital and Medical Center	106	128	134	158
122	Dade	Private	Southern Winds Hospital	384	409	449	430
51	Hernando	Private	Springbrook Hospital	778	1,239	1,132	1,115
123	Pinellas	Private	St. Anthony's Hospital, Inc.	815	797	952	992
127	Hillsborough	Private	St. Joseph Hospital	1,063	1,173	1,259	1,594
129	Duval	Private	St. Vincent’s Medical Center*	147	356	0	0
130	Pinellas	Private	Sun Coast Hospital	626	817	989	1,089
137	Broward	Private	Sunrise Regional Medical Center*	423	586	66	0
131	Leon	Private	Tallahassee Memorial Behavioral Health Center	856	997	1,025	970
132	Hillsborough	Private	Tampa General Hospital	380	612	642	517
125	Duval	Private	Ten Broeck Hospital	983	1,082	1,004	1,146
135	Pasco	Public	The Harbor Behavioral Health Care Institute	2,383	2,124	2,169	2,454
141	Broward	Private	University Pavilion Hospital	1,058	1,233	1,182	1,047
8	Pinellas	Private	Veteran's Administration Hospital - Bay Pines	312	300	220	278

FMHI Code	County	Private/ Public	Facility Name	Year of Examination			
				00	01	02	03
144	Alachua	Private	Veteran's Administration Hospital – Gainesville	2	0	0	0
143	Hillsborough	Private	Veteran's Administration Hospital – Tampa	286	329	153	0
162	Palm Beach	Private	Veteran's Administration Hospital - West Palm Beach	37	94	97	55
145	Santa Rosa	Public	West Florida Community Care Center	216	206	250	220
146	Escambia	Private	West Florida Regional Medical Center	293	336	561	731
160	Dade	Private	Westchester General Hospital	74	66	47	84
56	Dade	Private	Windmoor Healthcare of Miami*	658	367	0	0
63	Pinellas	Private	Windmoor Hospital of Clearwater	573	455	439	273
148	Polk	Private	Winter Haven Hospital Center for Psychiatry	471	507	672	648
149/150	Orange	Private	Winter Park Pavilion /Winter Park Memorial Hospital*	319	430	384	0
151	Brevard	Private	Wuesthoff Memorial Hospital	291	583	792	961

Appendix: Department of Children and Families District Map (with county names)

