



Bridging the Gap: Supporting Students with Mental Health Needs and Developmental Disabilities in the Special Education System.

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Supporting Students with Mental Health Needs and Developmental Disabilities in the Special Education System.

SUBTITLE

Michelle Tregembo

Michelle Tregembo is a retired educator who served in many positions over 25 years including special education teacher, Peer Assistance and Review Teacher, Administrator, and more. She stood up the Office of Special Education Ombud in 2021, and has built a team of family advocates who offer free services to students and families struggling to navigate the special education system in New Mexico



- National Board Certified Exceptional Needs Specialist, Educational Leadership MA, K-12 Special Education BS, K-8 General Education BS.
- Developmental Disabilities Council, Office of Special Education Ombud

Felicia Nevarez

Felicia Nevarez, M.Ed. Prior to joining NMSTART at the CDD, Felicia was an Educational Consultant who provided technical assistance to education teams across the state of NM. In addition, Felicia has spent time supporting individuals with communication and behavioral needs while receiving treatment through in-patient medical settings.



- Education and Outreach Manager and the Therapeutic Coaching Lead with NM START

Objectives

1. **Share free services offered to families in NM from OSEO and UNM-CDD NM START program.**
1. **Share collaboration techniques and behavior interventions offered to schools in a variety of meetings.**
1. **Highlight the importance of collaboration between educators, mental health professionals, and families to create a comprehensive support system.**

What is OSEO?

- ★ Office of Special Education Ombud offers free family services for children and their families who are struggling to navigate the special education system.
- ★ Ombuds work with the student and family to create an Advocacy Plan.
- ★ We support families before, during and after school based meetings. (IEPs, FBAs, BIPs, SAT, and 504s)
- ★ OSEO collaborates with families, schools and districts to find positive supports for students which break down barriers and increase opportunities.
- ★ OSEO identifies and makes recommendations about systemic special education issues.

What is NM START?

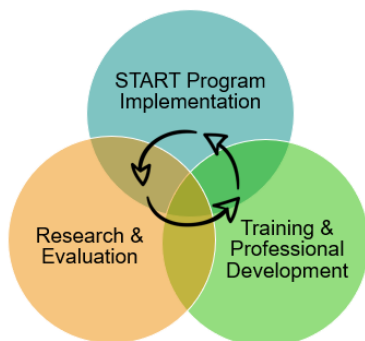
NM START is an evidence-based, community crisis prevention and intervention service model for individuals aged 6 and older with Autism Spectrum Disorder or Intellectual Disability and other mental health needs. The START model is person-centered and solutions-focused, based in positive psychology approaches.



VIA Classification of Character Strengths



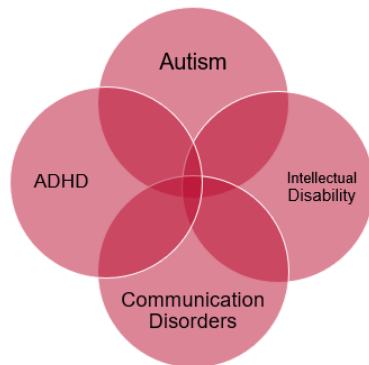
Goal of NM START Services



The **GOAL** of the NM START program is to build capacity through relationships across service systems to help people remain in their homes and communities and enhance the ability of the community to best support them. NM START teams base their work and approaches on recognized best practices.

Mental Health and Developmental Disabilities

- ★ Individuals with IDD are known to experience higher rates of mental health conditions than those without IDD.
- ★ Limited specialty providers that are able to support individuals with IDD and MH concerns.
 - Aggressive behaviors
 - Inability to be seen in-person
- ★ Communication barriers



(Fletcher et al. 2017)

The Broader Impact

Biological	Psychological	Social
<ul style="list-style-type: none"> • Insomnia • Restricted diets/ poor nutrition/ GI issues • Seasonal allergies/ asthma • Genetic conditions • Seizure Disorders • Pain sensitivity or hyposensitivity • Medication side effects/ polypharm 	<ul style="list-style-type: none"> • Anxiety • Depression and other mood disorders • Complex family mental health • Suicidal Ideation • obsessive-compulsive disorder • Psychosis/ schizophrenia • Trauma 	<ul style="list-style-type: none"> • Less access to social and employment opportunities • Disrupted family systems • Increase social stress • Higher levels of social ostracism and bullying • Less access to positive life experiences (e.g., think about the things that make you happy).

What does this
look like in a
school setting?



- ★ Interventions offered in schools
- ★ Working as a team
- ★ Scenario: School Communication



What interventions are offered to schools?

- ★ OSEO offers individual consultations with school and district staff
- ★ OSEO offers family presentations for schools and districts
- ★ OSEO presents at a variety of conferences around the state:
 - Special Education Director's Academy
 - NMTAP
 - Transition and College Fairs
 - Albuquerque Career Connections opportunities (United Way Middle School Initiative)
- ★ Collaboration with PED compliance officer and PED Educational Assistant
- ★ Customized trainings for teachers and staff

Effective Ways to Work as a Team

- ★ Meet with all members of the team to discuss focus of advocacy and who will complete each role:
 - Student,
 - Parent/Guardian,
 - START member,
 - OSEO member
- ★ Decide next steps together after each meeting
- ★ Reply all to most communication



Can classroom teachers and mental health professionals work together?

Consent from guardians is required

- ★ Communication
 - Involve the school nurse
 - Involve the school social worker
- ★ Share factual information about what classroom staff are observing
- ★ Have data (frequency/intensity) ready to share the mental health professional
- ★ Share what classroom/IEP goals are to
 - Reduce aggression
 - Increase Attendance- Increase time spent at school



What roles can guardians/families play within this process?

- ★ Continue the communication between **ALL** teams
 - Sign ROIs for all entities
 - Sharing updates about critical moments
 - Adding missing individuals to email chains
 - Updates from medical or therapeutic appointments
- ★ Sharing concerns/thoughts about what is happening through this process
 - Sometimes the path is what we are looking for
 - Sometimes the path is not what we want to see
- ★ Ask questions, any question!



Example of
what could be
provided to
educational
staff

At Home Plan At-A-Glance Crisis Prevention & Intervention Plan

This plan is for:	
Name:	
Diagnoses:	Language
Prevention Needs	In order to prevent crisis from occurring: - Provide space

Level	What we might see	How to respond
1	Starts to pace Attempts to get item that was denied	Speak calmly. Use short phrases. Provide appropriate choices. Offer calming choices. Listen to his requests.
2	Yelling / Screaming (high pitched scream) Will use vulgar and explicit language towards others Will go to room and slam the door	Offer coping strategies: - Time alone in room - Taking a break - Engaging in a different activity - Talking with a trusted adult
3	Will start to punch, kick, and spit at person who denied access Tries to run away.	Clear space and maintain a safe distance Retreat to different area to provide break Limit verbal conversation.

Example of an Advocacy Plan

https://docs.google.com/document/d/1UlwAQucY2kOMbMmGSxZ-ctH2e_SzLMGot7kjHtINKY/edit?tab=t.0



FY25 Advocacy Action Plan

Name of Client:	Name of Child/Student:	Date of initial Contact:
Parent Email:	Parent Phone Number:	Ombud Assigned:
Eligibility:	Advocacy Plan Completed:	IEP Date:

Check all areas that the issue relates to:

- ☐ Communication with school
- ☐ IEP not being followed
- ☐ Placement/program concerns
- ☐ Evaluation/timeline
- ☐ Misunderstanding of disability

Scenario: School Communication



Gabe was attending his local high school. It was indicated that he had a “crush” on his teacher. The school team decided to move him to another classroom with a new teacher, although this transition was not communicated to his guardian. At the end of the first week in his new classroom, there was an incident with teaching staff where Gabe made SI/HI statements. The police were called and Gabe was detained by the Police until his mother arrived. The entire situation was a major stressor for Gabe and his family, after this situation his Mom could not get Gabe to return to school. Gabe was at home with his parents with minimal school interventions.

- ★ Resulted in an Inpatient stay at Children's Psychiatric Hospital
- ★ Interruption of school/educational services
- ★ Support of OSEO OMBUDS Office

School Communication

- ★ A IEP needed to be held to assist in facilitating a transition back into the school setting.
 - The first IEP did not go well. Gabe's mental health needs were not adequately addressed, it was stressed that he return to school full day- Guardian had many concerns with this and felt as though it was setting him up for failure.
 - Guardian shared Gabes fear to return to school as the last time he was there he was detained by police.
 - Guardian expressed concern about the setting in which Gabe was returning to and asked if she could meet the teacher and tour the classroom. IEP team informed her she would be able to do this **after** Gabe returned to school.
 - Guardian expressed that she felt that she was not being heard and had concerns about Gabe returning to this school.
 - IEP Meeting with tabled and we reached out to the OSEO OMBUDS.

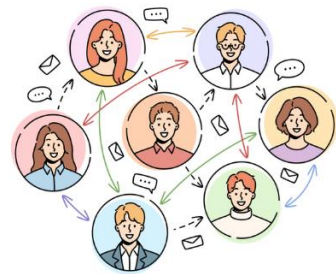


School Communication

- ★ Guardian had already spoke to Gabe's Psychiatrist, informing them about the transition back into school services. Gabes psychiatrist worked with his mom to schedule out his medication to assist in the transition.
- ★ During the IEP, school team members took time to ask Gabes mom what his mental health symptoms looked like and how she responded to them, and when additional medical help should be called.
- ★ IEP team agreed a modified day would be best and outlined the plan of when and how to add additional time to Gabes school day.
- ★ Guardian set up a meeting with the nursing staff to discuss his medication. What his mental health symptoms looked like and how she responded to them at home. Mom also shared if particular behaviors were seen, she would like to be called immediately.

School Communication

- ★ Classroom teacher and guardian continue to share daily communication
- ★ Classroom teacher has reached out to his care team asking additional questions or looking for updates as needed
- ★ Gabe was able to finish the school year and plans to return to full day next school year.



OSEO Intake Process

- ★ Email: OSEO.intake@ddc.nm.gov or call (505)-841-4565
- ★ Complete the
 - Release of Information Document
 - Service Agreement
- ★ Complete the Google Form
- ★ Discuss situation with Clara Gallegos our Intake Coordinator
- ★ The team meets every Monday to assign cases based on a variety of points

How to make a
referral to
Office of
Special
Education

OMBUDS

Email: oseo.intake@ddc.nm.gov

Call: 505(841-4565)



When to make a referral to NM START

- ★ Is currently at or has been to a psychiatric hospital within the past 24 months
- ★ Has been referred for additional staffing or has been receiving enhanced (one-to-one or more) staffing for an extended period
- ★ Has a history of multiple community placements over the past 12 months due to challenging behavioral presentation
- ★ Has complex mental health needs that have required crisis intervention, calls to 911, and/or frequent medication changes within the last 12 months
- ★ Has an unclear diagnosis and treatment formulation
- ★ Is at risk of losing their work, home, community services due to behavioral presentation or unmet mental health needs
- ★ Is presenting with complex behavioral, medical, and/or trauma-related issues

How to make a referral to NM START



CENTER FOR
DEVELOPMENT
& DISABILITY



NATIONAL CENTER FOR
START SERVICES

New Mexico START Program

Email: [CDD-
NMSTART@salud.unm.edu](mailto:CDD-NMSTART@salud.unm.edu)

Call: 505-272-1062
(NM START General Line)

References

Fletcher, R. J., Barnhill, J., & Cooper, S. (2017). Diagnostic Manual- -Intellectual Disability 2 (DM-ID): A Textbook of Diagnosis of Mental Disorders in Persons with Intellectual Disability. NADD Press.