Bridging IDD-Mental Health Gaps

Lessons from RMHS' Denver START

Presented by

Mariam Alami
LSW Associate Director, Denver START
Rocky Mountain Human Services

Michaela Hennig
IDDEAS Program Manager
Denver Human Services

RMHS
Rocky Mountain Human Services

Presented by

Mariam Alami

LSW, Associate Director, Denver START
Rocky Mountain Human Services

Michaela Hennig

MSW, IDDEAS Program Manager
Denver Human Services

Why People with I/DD and Mental Health Needs Fall Through the Cracks

- Inadequate behavioral health services
- Systemic level challenges
- Gaps in crisis response
- Stigma, bias & compounding barriers for vulnerable communities

Why This Matters

People with I/DD and mental health needs often encounter systems that are not designed to support both.

- People with I/DD experience mental health conditions at significant rates—yet their symptoms are often misunderstood or missed
- Diagnostic overshadowing
- Limited provider expertise within intersection of IDD and MH
- Systemic support often becomes crisis-driven rather than preventive care

The Result:
preventable crises, repeated emergency-system involvement, and families left without a coordinated path forward.

What is START?

START = Systemic, Therapeutic, Assessment, Resources, and Treatment

A nationally recognized, evidence-informed model for people with I/DD and mental health needs.

START does not replace existing systems, it strengthens existing support systems through:

24/7 crisis prevention and intervention	Bio/psycho/social conceptualization, evidenced informed assessments, and clinical consultation	Cross-system coordination	Community capacity-building and training
Therapeutic coaching	Strength-based interventions	Advisory Council	Linkage Agreements

The Goal:

- Decrease crises
- Strengthen local capacity
- Help people remain successfully supported in their communities.

The Beginnings of Denver START

Denver Human Services IDDEAS Program

- Developed in 2018 to identify community informed investments and address gaps in services for Denver's I/DD community

Stakeholder voice

- 2018 IDDEAS needs assessment - lack of adequate mental health services a "big problem" (65% of respondents)
- 2019 IDDEAS Advisory Council recommendation – explore mental health services through the START model

DHS vision for Denver START – Anticipated Benefits

- Reduce unnecessary emergency services
- Increase community expertise in I/DD and mental health
- Create a better-connected ecosystem of support
- Increased wellbeing for people with I/DD and their caregivers

2013–2014 JFK Partners dual diagnosis study

Access to mental health services for individual with I/DD and mental health needs requires

- Trained multidisciplinary providers
- Cross system collaboration
- Person-centered individualized plans

Building Denver START

DENVER
HUMAN SERVICES

NATIONAL CENTER
for START SERVICES®
Institute on Disability
University of New Hampshire

RMHS
Rocky Mountain Human Services

Building Denver START

Winter 2019–2020

DHS investigates START model efficacy

March 2020

Public meeting on START model

January–August 2021

NCSS consultation for RFP to select local provider

September 2021–June 2025

DHS Contracts with:

1. RMHS to pilot Denver START
2. NCSS for training/consultation

January 2025

Denver START receives certification

July 2025

DHS executes new sole start contract with RMHS for Denver START

How START Works Across Crisis Continuum

PREVENT
Plan and coordinate

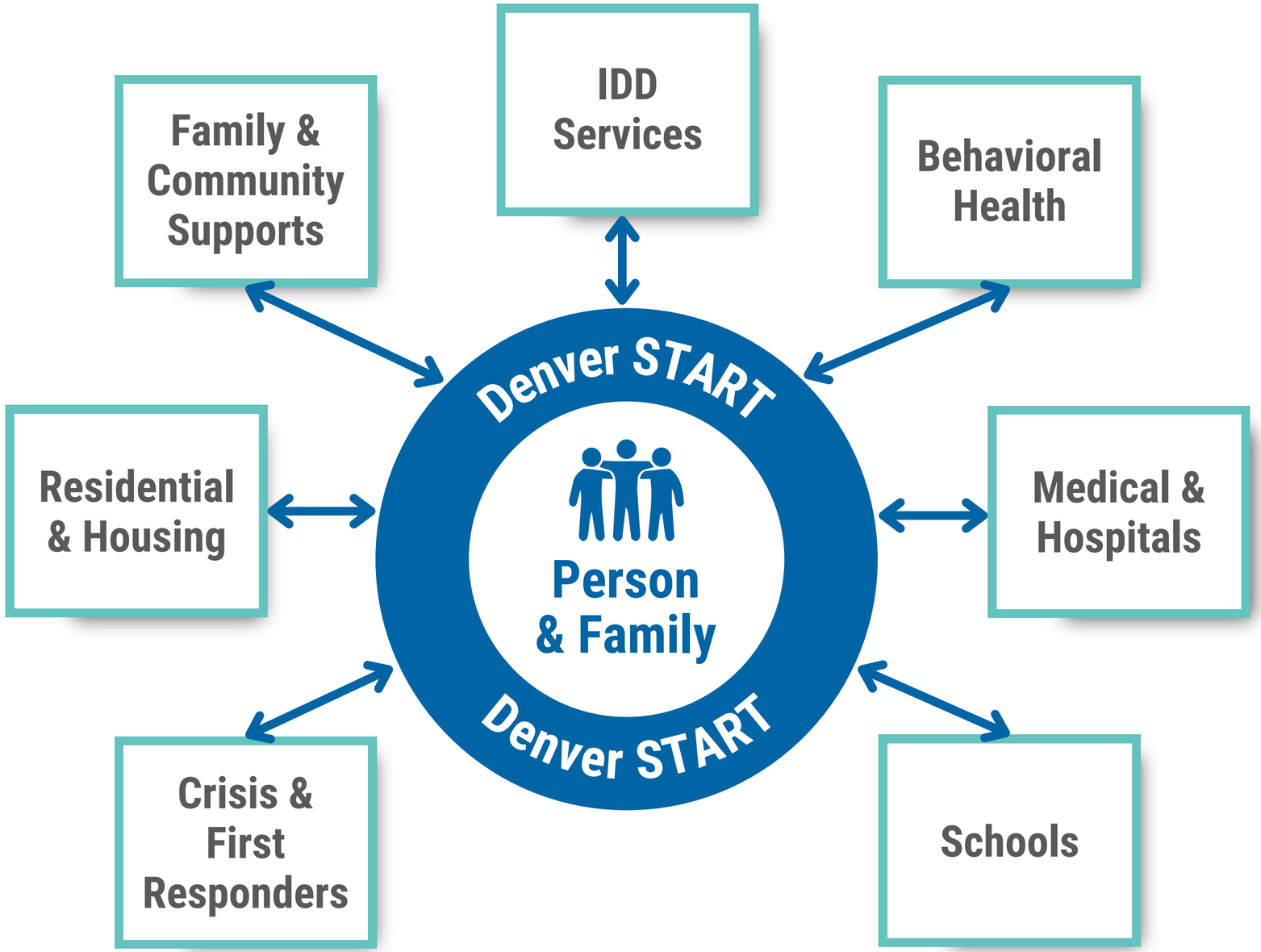
RESPOND
24/7 crisis support

The Person, Family & Support System

STRENGTHEN
Learn and build capacity

STABILIZE
Restore safety and connection

Cross-System Collaboration



ECOMAP KEY

Flow of resources

⟷ Two-way

Case Example: From Crisis to Stability

Ricky* | Adult with autism and mental health vulnerabilities

Before START

- Unstable residential placements
- Frequent 911 calls and emergency-department visits
- Gaps In systemic support contributing to aggression

Denver START Intervention

- Identification and connection to appropriate services
- Regular System meetings and coordinated crisis planning
- Therapeutic coaching to strengthen communication strategies

Stability

- Stable residential setting
- Crisis calls reserved for medical emergencies
- Greater connection with family and community
- Member of the Denver START Advisory Council

Denver START Program Outcomes

Denver START achieved National Certification In January 2025

312 clients have been served

171 received a form of therapeutic coaching

58

Of those, 58 exited the program due to stability.

229 Of the 321 clients served, 229 were BIPOC.

START served people communicating in **9** languages.

488 of 547 crisis contacts resulted In the person supported maintaining community setting.

39

community linkages have been established.

133

specialized community trainings have been provided.

Building Community Capacity

START strengthens the community's ability to prevent and respond to crises - not only support one person or on crisis.

Lessons Learned

• Utilize a biopsychosocial to understand the person beyond “behavior”	• Formal linkages, and use expertise of individuals, families create coordinated action	• Crisis patterns are recognizable, but prevention and response must remain individualized
• Meaningful systemic change requires flexibility, persistence, and repeated education	• Use data to inform programmatic decisions and strategic partnerships	• Community interest in IDD and mental health is strong; specialized training, consultation, and clear pathways turn interest into capacity

People do not choose to live in crisis. When support is individualized, coordinated, strength-based, and connected to what matters to the person, their motivation and capacity for change can become visible.

What Communities Without START Can Do

Understand the person:
Consider strengths, vulnerabilities, communication, and environmental factors.

Recognize patterns early:
Identify the person's baseline, stages of dysregulation, and helpful interventions at each stage.

Create multidisciplinary consultation:
Establish regular consultation across the interdisciplinary team to refine clinical hypotheses.

Strengthen crisis planning:
Include the person, family, informal supports, schools, medical providers, and involved systems in a shared crisis plan.

Build routines for coordination and learning:
Use regular team touchpoints, triage when needed, and post-crisis follow-up to improve future responses.

Ways to interface with Denver START:

- Participate in Denver START Clinical Education Team meetings
- Access specialized resources through NCSS and NADD
- Join Denver START Advisory Council

One Final Takeaway

People with I/DD and mental health needs fall through gaps created by fragmented systems– not because their needs are impossible to understand.

Sustainable crisis prevention requires lasting partnerships and shared commitment.

What role could your organization play in sustaining and expanding this work?

RMHS
Rocky Mountain Human Services

NATIONAL CENTER FOR START SERVICES®

DENVER
HUMAN SERVICES

Questions?

RMHS
Rocky Mountain Human Services

NATIONAL CENTER FOR START SERVICES®

DENVER
HUMAN SERVICES

Help Shape What Comes Next

Your feedback will help inform Denver START's future training, partnerships, and community engagement efforts.

SCAN HERE!

Thank You!