**State Performance Plan / Annual Performance Report: Part B**

**for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act**

**For reporting on
FFY 2020**

**Nevada**



**PART B DUE February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State’s systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State’s General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

## Intro - Indicator Data

**Executive Summary**

In Nevada's FFY 2020 SPP/APR, the Nevada Department of Education (NDE) reports on the extent to which the state met its targets for 17 indicators in 18 local education agencies (LEAs) related to the performance of students with disabilities and the LEAs' level of compliance with IDEA and the Nevada Administrative Code.

The FFY 2020 SPP/APR reports performance data for Indicator 1 (regular diploma graduation percentage), Indicator 2 (dropout percentage), Indicator 3 (participation and performance in statewide assessments), Indicator 4 (suspension/expulsion rate), Indicator 5 (placement for students ages 5-K through 21), Indicator 6 (placement for students ages 3 through pre-k-5), Indicator 7 (preschool outcomes), Indicator 8 (parent involvement), Indicator 14 (post-school outcomes), Indicator 15 (resolution agreement success rate), Indicator 16 (mediation agreement rate), and Indicator 17 (state systemic improvement plan). Compliance data are reported for Indicator 4B (suspension/expulsion rates that are the result of noncompliance), Indicator 9 (disproportionate representation that is the result of inappropriate identification), Indicator 10 (disproportionate representation within disability categories that is the result of inappropriate identification), Indicator 11 (initial evaluation timeline), Indicator 12 (IEP by third birthday for Part C transfer students), and Indicator 13 (secondary transition IEP requirements).

In addition, the FFY 2020 SPP/APR reports on the extensive work by NDE, along with its partners and stakeholders, to review historical data for each Indicator, establish baseline data, and set new six-year performance targets for FFY 2020 through FFY 2025 for "performance" indicators. Targets for "compliance" indicators are established by OSEP at 0% (Indicators 4B, 9, 10) and 100% (Indicators 11, 12, 13).

**Additional information related to data collection and reporting**

COVID-19 continued to have an impact on data collection and reporting, in particular regarding statewide assessments using the Smarter Balanced Consortium Assessments (SBAC) at grades 3, 4 and 8 and the ACT Assessment at grade 11.

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since participant rates in the SBAC and the ACT assessments ranged from 54% to 92% (see Indicator 3A), the performance data (see Indicators 3B and 3C) and performance gap data (see Indicator 3D) are incomplete and are not likely to be representative of the make-up of the State population. In addition, because the participation rate for SBAC assessments of third-grade students with disabilities in Clark County School District schools participating in the APT project was approximately 54%, the performance data used to measure the SiMR under Indicator 17 are not likely to be representative of the make-up of the CCSD population assessed for Indicator 17.

**Number of Districts in your State/Territory during reporting year**

18

**General Supervision System:**

**The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.**

GENERAL SUPERVISION SYSTEM
The NDE Office of Inclusive Education (OIE) is committed to ensuring that all exiting students in Nevada are college- and career-ready. To accomplish this, the OIE, through its Director and six Education Program Professionals, strives to build and improve on collaborative efforts with state partners and education stakeholders statewide. It is the NDE's goal to promote educational success for Nevada’s students through increased academic rigor; use of evidenced-based practices; providing sustained professional development for administrators, teachers, and staff; providing technical assistance in data-based decision making; and building meaningful partnerships with districts, schools, and parents. The OIE website is located at http://www.doe.nv.gov/Inclusive\_Education/. The website provides access to numerous resources and reports, each designed to provide information and technical assistance to LEAs, parents, critical partners, and other stakeholders in the community.

Following is a description of the NDE's systems for:
-- Monitoring
-- Data Management and Reporting
-- Fiscal Management
-- Dispute Resolution
-- Policies, Procedures, and Effective Implementation

MONITORING SYSTEM
Nevada's monitoring system is described below.

The NDE conducts policy/procedure/form review for procedural compliance. The NDE conducts a comprehensive record review in each of the 18 LEAs in the state (17 school districts, and the state charter school authority) at least once every four years. A 91-item checklist is used to monitor each student record selected for monitoring.

Nevada implements a 100% compliance criterion. Noncompliance findings are corrected within one year of identification. In FFY 2020 the NDE did not make any prefindings of noncompliance that were corrected before the state issued a finding.

A stratified sampling is used to ensure a representative group of LEAs in each of the four years of the cycle. The 17 school districts have been assigned status as either "urban" (4 districts), "medium rural" (5 districts), or "small rural" (8 districts) depending on the relative size of the LEA and the relative urbanicity of the county seat. The state charter school authority, which includes charter schools statewide, has been assigned status as a "medium" LEA. In each of the four years in the monitoring cycle, the LEAs selected for monitoring include one "urban" LEA, one "medium rural" LEA, and two "small rural" LEAs. Because there are 6 LEAs in the "medium/medium rural" subgroup, there are two years in the four-year cycle that include 2 of these LEAs. Because there are 8 LEAs in the "small/small rural" subgroup, there is one year in the four-cycle that includes 2 of these LEAs, and two years in the four-year-cycle that include 3 of these LEAs. (Note: This monitoring approach was approved by OSEP in April 2008 as part of the Indicator 8 sampling description. See pp. 33-35 in the February 2010 SPP.)

All schools in the LEA have records selected for review (except Washoe County School District [WCSD] and Clark County School District [CCSD] where size dictates selection); in WCSD and CCSD, schools are selected to ensure a representative sample among elementary, middle, and high schools. Record selection is stratified to ensure representation among race/ethnicity, disability, and placement categories in proportion to the LEA's total child count.

A Corrective Action Plan (CAP) is required to address noncompliance found through review of records and policies/procedures/forms. CAPs are designed collaboratively between LEAs and the NDE. CAPs include procedures for review and revision, if necessary, of policies and procedures, and the provision of training to ensure that systemic noncompliance is corrected within one year. LEAs submit verification that CAP activities have been implemented as approved, and provide record review documentation to demonstrate correction of individual and systemic noncompliance within one year.

DATA MANAGEMENT AND REPORTING
The NDE annually collects data from Nevada's LEAs. Child count and placement data are collected electronically on October 1, and software tools are used to search for duplicates, perform error checks, and prepare data for submission to EDFacts. The data are uploaded to a central NDE database, where the data are formatted for timely submissions. Assessment data are prepared by the NDE and formatted for reports for timely submissions to EDFacts. Electronic data are provided by LEAs for exiting, discipline, personnel, dispute resolution, and MOE/CEIS data; the data are cleaned and prepared for submission to EDFacts or to EMAPS.

FISCAL MANAGEMENT
The NDE implements the following steps to ensure proper fiscal management in accordance with federal law.

The NDE annually submits SEA eligibility documents to OSEP, including required assurances, descriptions of use of funds, and documentation of public participation. These materials are posted on the NDE website as required through the application development and finalization process.

The LEAs annually submit LEA eligibility documents to the NDE, including required assurances, budgets for anticipated use of funds, excess cost calculations (maintained at local level), data regarding the voluntary use of federal funds for CEIS and data describing LEA compliance with the requirements for proportionate share funding to private school students (and according to Nevada law, students who are homeschooled).

The NDE performs annual calculations of LEA subgrant base amounts, and population and poverty allocations, as part of entitlement funding. The NDE ensures annual distribution of LEA subgrant awards.

The NDE conducts analyses of identification, placement, and discipline data to identify significant disproportionality. Annual reviews/audits are conducted of LEA subgrant award calculation, distribution, expenditures, maintenance of effort, including the requirements of the Single Audit Act. Funds are timely liquidated at state and local levels.

DISPUTE RESOLUTION
The NDE ensures establishment, maintenance and ongoing evaluation of the due process hearing system, including: adherence to timelines established in the IDEA; data demonstrating the extent to which resolution sessions result in written settlement agreements; technical assistance material available to the public on the NDE website; training offered to LEAs, parents, advocates, and others regarding NDE's due process hearing procedures; ongoing training of hearing and review officers (specific guidance is given for requiring correction of noncompliance within one year). Ongoing system technical assistance and evaluation is provided by an independent contractor, including evaluation surveys from system users.

The NDE ensures establishment, maintenance, and evaluation of a state mediation system, including collecting evaluation surveys from system users, and analyzing data regarding mediation agreements. Periodic training of mediators is provided regarding IDEA and Nevada law, and mediation techniques.

The NDE ensures establishment, maintenance, and evaluation of a state complaint investigation system, including evaluation of timeliness. NDE analyzes findings to identify LEA training and technical assistance needs.

POLICIES, PROCEDURES AND EFFECTIVE IMPLEMENTATION
The NDE's policies and procedures are established primarily in the Nevada Administrative Code, available on the NDE website. Effective implementation of the NAC and IDEA is ensured through the general supervision system, in particular the monitoring and dispute resolution systems. Also, LEAs provide annual assurances regarding policies, procedures, and implementation of IDEA and NAC requirements.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.**

Technical Assistance (TA) System
The NDE implements a comprehensive TA system that maximizes opportunities for face-to-face interactions and leverages technology to sustain the delivery of ongoing technical assistance and support. Intentional engagement occurs with special education leaders as well as with other district leaders who have a role to play in the performance of students with disabilities including superintendents, as well as directors of assessment/accountability, curriculum and instruction, career and technical education, and information technology.

Bi-monthly, NDE leaders plan agendas, coordinate learning opportunities, and facilitate meetings that are routinely attended by the special education directors from each Nevada LEA. These meetings are designed to engage district leaders in learning about evidence-based practices for results (e.g., multi-tiered systems of support, formative assessment practices, universal design for learning, and others) as well as requirements for general supervision (e.g., fiscal issues, grant planning and administration, monitoring and compliance indicators, and so forth). In between these meetings, calls are routinely held and emails are exchanged among NDE and LEA personnel to address individualized TA needs.

Monthly meetings are held with the superintendents from each LEA and attended by the State Superintendent and the Deputy Superintendent for Student Achievement. At these meetings, dialogue occurs regarding student performance, including practices that the state and districts are implementing to support improved results in their schools. The performance of students with disabilities, and the evidence-based practices that LEAs are employing with regard to instruction, assessment, accountability, identification, and educator expectations and support are focused subjects of conversation during several meetings across the year. Meetings are also regularly scheduled to occur quarterly and in some cases, semi-annually, among district leaders across various programs such as assessment, accountability, curriculum and instruction, career and technical education, special education, Title I, and Title III. Issues associated with results for special education students are addressed in these meetings, often as part of the LEAs’ larger efforts to close achievement gaps for low-performing students.

The Department also employs routine systems of information dissemination. The OIE Director transmits memos and email correspondence as needed to share information about legal requirements and best practices, including guiding LEA personnel to engage in webinars offered by the OSEP TA&D Network. State special education leaders are also engaged in cross-team efforts to build and sustain statewide systems that promote the implementation of evidence-based practices as part of the state’s comprehensive approach to school and district improvement, under the Nevada School Performance Framework (NSPF) and the aligned expectations of Nevada’s ESSA Flexibility Waiver. Finally, the state utilizes meetings of the Special Education Advisory Committee (SEAC) as part of the TA system. The SEAC meets quarterly and the meetings are designed to provide opportunities for sharing of information, exchange of ideas, and to make requests of SEAC members to communicate with and share perspectives of the constituencies whom they represent.

**Professional Development System:**

**The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.**

PROFESSIONAL DEVELOPMENT SYSTEM
Nevada maintains a comprehensive scheme of licensure, established by state law, designed to prepare teachers to meet the unique needs of students with various disabilities. See http://www.leg.state.nv.us/NAC/NAC-391.html for licenses and endorsements for teaching exceptional pupils.

The Nevada State Board of Education has adopted regulations that set forth the expectations which teachers and administrators are required to meet under the Nevada Educator Performance Framework (NEPF). Teachers are expected to: Connect the prior learning and experience of students to (1) guide current learning; (2) assign tasks based upon the appropriate cognitive demands for students with diverse abilities; (3) require students to engage in learning through discourse and other strategies; (4) require students to engage in metacognitive activity; and (5) integrate assessment into instruction.

In order to support effective teaching and learning that results in positive student performance, school administrators are expected to create and sustain: (1) a focus on learning at the school; (2) a school culture of striving for continuous improvement; (3) productive relationships; and (4) structures to support an effective school.

For both teachers and administrators, robust sets of indicators specify the measurable behaviors that exemplify these standards in practice. Significant resources have been invested to ensure that all teachers have the skills and knowledge to provide instruction, and all administrators have the instructional leadership capacity aligned to these standards and indicators, to create teaching and learning parameters that result in high achievement for all students. Nevada's system of Regional Professional Development Programs — a regional configuration of training entities — has been charged with providing opportunities for educators to learn the standards themselves, and to deepen their capacity to engage in practices that exemplify these standards. Trainings are provided at the school, district, regional, and statewide level, in partnership with LEAs. An aligned system of observation and other data collection mechanisms is in place to check for educator understanding and mastery of content. Systems of educator preparation and teacher and administrator licensure are being aligned to the standards to ensure that coherence across the state’s systems of personnel development, accreditation, and professional development.

Additionally, at the systems level, the NDE annually hosts the Mega Conference, a statewide conference that draws hundreds of educators to gather for 2½ days of learning about long-standing practices as well as emerging strategies for successful teaching and learning. Every year, explicit attention is paid to ensuring that evidence-based practices associated with teaching and learning for students with disabilities are substantially represented during the conference. NDE staff members also collaborate with the Nevada Association of School Administrators to provide training during functions offered across the state, three times per year.

Specifically targeted for special education leaders, the NDE also coordinates a three-day workshop each summer, where experts present on practices associated with standards, assessment, accountability, instruction, and educator development. Special education directors and their senior staff members listen, learn, exchange ideas, and deepen professional connections. They engage in action planning to develop strategies for implementing evidence-based practices in their home districts, which are then revisited in conversations with NDE staff across the year informally, and during specified opportunities in the bi-monthly meetings described under the state’s TA approach, described above.

**Broad Stakeholder Input:**

**The mechanisms for soliciting broad stakeholder input on the State’s targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State’s Systemic Improvement Plan (SSIP).**

In October 2020, the NDE OIE began the Part B FFY 2020–2025 State Performance Plan/Annual Performance Report (SPP/APR) project to establish baselines and targets for the new six-year package. OIE embraced this project as an opportunity for new stakeholder engagements, new opportunities for program growth, and to set new expectations for ensuring improved outcomes for students with disabilities in Nevada. This project also provided NDE OIE veteran and onboarding staff an opportunity to sharpen collaborative work tools, exercise leadership skills and highlight OIE programs to new communities.

Staff reviewed OSEP provided materials on the new SPP/APR requirements, participated in numerous technical assistance trainings provided by OSEP TA Centers, and developed a stakeholder engagement plan appropriate for Nevada. Guidance materials were created, and training was provided by the NDE OIE Part B Data Manager to ensure consistency across workgroups including a PowerPoint, Staff and Stakeholder Participant Roles, Sample Stakeholder Recruitment Emails, Stakeholder Recruitment Forms, Workgroup Meeting Agenda/Minutes Forms, and Data Story Tracking Forms.

Indicators were grouped together to form the following five Workgroups: Equity (Indicators 4, 9, 10), Dispute Resolution (Indicators 15, 16), College and Career Ready (Indicators 1, 2, 13, 14), Strong Start (Indicators 6, 7, 11, 12), and Continuous Growth (Indicators 3, 5, 8). Roles were assigned to all NDE OIE staff ranging from Workgroup Leads to Logistics Coordinators to Data Support. All 10 staff members of NDE OIE participated in this momentous opportunity. The Stakeholder Workgroup for Indicator 17 was the already-existing Assess-Plan-Teach (APT) Leadership Team that has been working for the last several years on Nevada’s Indicator 17 project (APT). Details about the Indicator 17 APT Leadership Team Stakeholder Workgroup are described in Indicator 17, under the heading "Description of Stakeholder Input."

Meaningful, person to person stakeholder recruitment commenced in May of 2021. Workgroup Teams first began by using guiding questions and materials developed by the IDEA Data Center. Teams brainstormed types of State Staff that would need to be involved in their Workgroups; identified names of people and groups to connect with; considered various methods for increasing diverse stakeholders; determined processes for documenting stakeholder involvement; and kept track of stakeholders and stakeholder groups that were contacted and agreed to participate. Workgroup Teams connected with known content experts, colleagues, Committees and Boards, and recruited directly from the state Special Educational District Administrators (SEDA) and the Special Education Advisory Committee (SEAC). Direct recruitment also occurred when the SPP/APR target-setting process was explained and participation was requested in meetings of various external leadership teams where OIE staff participate, including the Governor’s Council on Developmental Disabilities and the Governor’s Assistive Technology Council. Stakeholders who were contacted were then also asked to bring a friend to the meetings and recommend other stakeholders that could be invited by OIE to participate.

This network of stakeholders created rich diversity amongst all the Indicator Stakeholder Workgroups. Each Stakeholder Workgroup contained members from northern, southern, and rural Nevada and included community advocates, parents (individual parents as well as Nevada Parent Training and Information Center staff), and State Department staff including those from the Nevada Center for Excellence in Disabilities, the Nevada Governor’s Council on Developmental Disabilities, Vocational Rehabilitation Regional Centers and Nevada System for Higher Education. Participating LEA staff included teachers, Transition Specialists, Principals and District Administrators. Despite the continuous impact of the COVID-19 pandemic on our educational leaders, LEAs requested and supplied representation on all Indicator Workgroups, emphasizing their commitment to partner with the SEA and parents in pursuit of ongoing continuous improvements for Nevada's students with disabilities.

Each Indicator Workgroup established communal meeting times best fit for participating stakeholders and utilized Nevada Department of Education’s Microsoft Office 365 collaboration tools. Team Channels were established for each Workgroup and provided the virtual space for meeting as well as a communal space to house all meeting materials including presentations, support and background information and meeting recordings which are available to all Workgroup participants as well as members of the public. Participating stakeholders were added to the appropriate Team Channels and received needed technical assistance for participating in the virtual meetings. Meeting links and materials were sent to stakeholders in advance to the meeting date and time. These meeting invites were encouraged to be shared with others, as any member of the public could join if they have the meeting link. Workgroups met virtually via Teams for 90-120 minutes serval times from June through November of 2021. Each Workgroup had the task of understanding the group’s Indicators; analyzing and discussing historical data; brainstorming improvement strategies; determining best practices for evaluating progress and made recommendations for baseline and targets.

In early December 2021, target, and baseline recommendations from each of the Workgroups were then put forth to the public via an open meeting of the Special Education Advisory Committee as well an electronic survey. Workgroup members agreed that an electronic survey via Google Forms would be best for Nevada and a reliable way to reach diverse stakeholders across the State. The survey link was emailed, included in group newsletters, and even posted on Facebook pages of some of Nevada’s parent advocates. Opened from mid-December to late January 2022 the survey link was sent several times to well over 1000 NDE contacts that included teachers, Principals, District Superintendents, NDE ESSA Advisory Group members, members of the Press, SPP/APR Indicator Stakeholder Workgroup members, State Departments and Councils, SEDA, SEAC, Nevada PEP and all NDE staff.

As with the rich diversity of stakeholders engaged in the Indicator Stakeholder Workgroups, survey responses included representation from northern, southern, and rural Nevada. Several survey responders identified as a parent of a student with a disability. Responders also included classroom teachers, School and District Administrators, members of Local or State Board Advisory Committees, related service providers, students, community members and advocates.

In preparation of submission of the SPP/APR, OIE reviewed and collectively discussed all information collected during the stakeholder process. Survey results were analyzed, giving particular attention to results submitted by parents, and Indicator Workgroup materials and results were weighed against any new information including FFY 2020 results that may not have been available during the time stakeholders made recommendations on targets and baselines. Nevada stakeholders developed the thoughtful, thorough, rigorous yet achievable baselines, targets, improvement strategies and evaluation processes set forth in the FFY 2020 SPP/APR.

The specific baseline and target decisions are described more fully within each Indicator section of this SPP/APR.

**Apply stakeholder involvement from introduction to all Part B results indicators (y/n)**

NO

**Number of Parent Members:**

50

**Parent Members Engagement:**

**Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

Note that the “number of parent members” reported above as "50" is not an unduplicated count, since parents could respond anonymously to the public input survey. In addition, many individuals who are in leadership positions in LEAs and other state and local agencies are also parents of students with disabilities. Those individuals were not counted as “parents” since they had another primary role in the Stakeholder Workgroups, but a without doubt their dual perspectives contribute in positive ways to their analyses and recommendations.

The NDE ensured that parent members of the State Advisory Panel (2 parents); Nevada PEP, the state’s parent training and information center (2 parents); parents from local and statewide advocacy and advisory committees (2 parents), and individual parents (8 parents) were well represented in each of the five Stakeholder Workgroups described above. It should be noted that many parents, although only counted once in the parenthetical tallies, have multiple roles in the parent leadership groups in Nevada. For example, the Executive Director of Nevada PEP is also a member of the State Special Education Advisory Committee (SEAC), and the parent of a person with a disability, but she has been counted only once as a member of Nevada PEP. In addition, some parents in key leadership roles in the state (e.g., Nevada PEP) served on more than one Stakeholder Workgroup.

As integral members of the Stakeholder Workgroups, these parents were involved in every step of the processes described above. They reviewed current and historical data (often recalculated to align with revised indicator measurement requirements) to evaluate progress, provided input regarding the selection of baseline years, formulated options for targets, made recommendations for program improvements, and made recommendations to the NDE for six-year targets. The recommendations of the Stakeholder Workgroups were critical in the NDE’s final target-setting decisions.

**Activities to Improve Outcomes for Children with Disabilities:**

**The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.**

The NDE has focused on the implementation of the Assess-Plan-Teach (APT) project described in Indicator 17 to increase the capacity of diverse groups of parents to support development of implementation activities designed to improve outcomes for children with disabilities.

An integral member of the APT Leadership Team is Robin Kincaid, the Educational Services Director for Nevada PEP, Nevada’s federally funded parent training and information center. Robin has been a member of the APT Leadership Team since the Team was formed in 2015. As a partner in the APT project, Nevada PEP has worked within the project to implement a number of activities designed to help parents improve the outcomes for their children with disabilities. Nevada PEP provides services and resources statewide to diverse families in all regions of the state. See https://nvpep.org/services/. But Nevada PEP also provides focused training and technical assistance to the parents of students at the APT schools who participate in the project.

One example is that the APT Leadership Team, with Robin's guidance, has created a one-page brochure describing the APT project for staff at the APT schools to use in Parent Teacher Conferences. The APT Parent Brochure is titled “Helping Children to Become Better Readers: Assess-Plan-Teach.” The brochure contains a list of resources for parents, a description of the APT project and a contact number for questions or further information, an explanation of the basic components of reading instruction in school, and family tips for reading with children at home.

Another example is that when the APT Leadership Team convenes annual meetings of the administrators for APT schools, a separate item is agendized for Nevada PEP to lead a discussion about the trainings and supports that Nevada PEP can provide directly in the APT schools to support both parents and staff. The following prompts guide the discussions with administrators:

1. How do you get engagement from your parents of students in special education classrooms?
2. What "literacy-inspired" activities do you do that involve parents?
3. What other ideas do you have to get more parents of students in special education classrooms engaged with the school and literacy?

Following that discussion, each school brainstorms specific strategies to increase parent engagement through collaboration with Nevada PEP, and specific plans are made with Nevada PEP to implement those strategies.

One strategy of the APT project is hosting “Literacy Night” in connection with fall open houses at schools. Nevada PEP provides a table where parents can access materials on reading (fluency, comprehension, and phonics) and staff are available to answer questions and encourage families to work with the school to understand their children’s progress. “Literacy Night” events were held at APT schools before the pandemic, and will be scheduled again when pandemic restrictions ease.

Another of these strategies is the “Literacy in the Library” initiative. “Literacy in the Library” is an opportunity for parents to ride the field trip bus from their child's school to the local library. Once the students and parents arrive at the Library, the librarian provides a room to talk with the students about the library services. The parents are also given a room to meet with Nevada PEP staff to discuss some of the key steps necessary to learn to read, such as letter to sound identification, vocabulary development, fluency and comprehension. Strategies are discussed for how to increase reading practice and encourage students to experience reading for enjoyment. Information on the APT project, Nevada PEP services, and community resource lists are given to the parents to help them learn about the work the school is doing and become aware of additional community services. Parents are encouraged to ask questions and Spanish translation is available. More “Literacy in the Library” events will be planned once COVID-19 restrictions ease.

APT implementation is also a standing topic at the meetings of Nevada PEP. Nevada PEP leaders regularly discuss APT implementation with staff members who work throughout Clark County School District and beyond. These discussions keep Nevada PEP staff informed about the project so that they can answer questions and voice support for the project. These discussions provide feedback to the APT Leadership Team as well. For example, after we first implemented the “Literacy in the Library” initiative in the spring of 2018, there were concerns about the level of participation of students and parents. Robin Kincaid encouraged the team not to abandon the initiative, but rather to do some analysis about the barriers faced by families in participation, including transportation, child care, and other challenges. Led by Robin, other members of the APT Leadership Team also identified challenges that school principals faced in trying to coordinate the events from their perspective. As a result of Robin’s insights and perseverance, we continued the “Literacy in the Library” events into the 2018-19 and 2019-20 school years and have addressed barriers to participation.

**Soliciting Public Input:**

**The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

As described above, in early December 2021, target and baseline recommendations from each of the Stakeholder Workgroups were then put forth to the public via an open meeting of the Special Education Advisory Committee as well an electronic survey. Workgroup members agreed that an electronic survey via Google Forms would be best for Nevada and a reliable way to reach diverse stakeholders across the State. The survey link was emailed, included in group newsletters, and even posted on Facebook pages of some of Nevada’s parent advocates. Opened from mid-December to late January 2022, the survey link was sent several times to more than 1,100 NDE contacts that included teachers, Principals, District Superintendents, NDE ESSA Advisory Group members, members of the Press, SPP/APR Indicator Stakeholder Workgroup members, SEDA, SEAC, Nevada PEP, all NDE staff, and participant lists from NDE-sponsored conferences, including students who were Young Adult Facilitators for Nevada’s Secondary Transition Summit.

The survey was also sent to other Nevada state programs, including Nevada Early Intervention Services (the Part C agency), Vocational Rehabilitation, the Nevada Volunteer Council, Nevada Tribal contacts, and the Nevada System of Higher Education.

The survey was also sent to several Governor’s Councils: Commission on Autism Spectrum Disorders; Assistive Technology Council; Commission on Services for Persons with Disabilities; Statewide Independent Living Council; Commission for Persons Who Are Deaf, Hard of Hearing or Speech Impaired; and the Council on Developmental Disabilities.

As with the rich diversity of stakeholders engaged in the Indicator Workgroups, survey responses included representation from northern, southern, and rural Nevada. Several survey responders identified as parents. Responders also included classroom teachers, School and District Administrators, school board members, related service providers, students, community members and advocates.

The NDE carefully considered the public survey responses along with the Stakeholder Workgroup recommendations when selecting the baseline years and six-year targets for the FFY 2000-2005 SPP/APR. The specific baseline and target decisions are described more fully within each Indicator section of this SPP/APR.

**Making Results Available to the Public:**

**The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.**

The results of Nevada’s work on the FFY 2020-2025 SPP/APR are contained in this document, and this document will be posted on the NDE website as soon as the FFY 2020 submission is approved by OSEP. The document will be found on the NDE website at: http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

In addition to posting the FFY 2020-2025 SPP/APR on the NDE website, presentations on the approved six-year package and FFY 2020 results will be provided to SEAC and SEDA. Additionally, Indicator Stakeholder Workgroups will reconvene by late summer 2022 to review results and discuss implementation of proposed improvement strategies. Announcements of Indicator Stakeholder Workgroup meetings will be publicized, encouraging new stakeholders to participate.

**Reporting to the Public**

**How and where the State reported to the public on the FFY 2019 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2019 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.**

The NDE reports annually on the performance of each LEA located in the State on the targets in the SPP/APR no later than May, at the following website: http://www.doe.nv.gov/Inclusive\_Education/SE\_Annual\_Performance\_Reports/. For the FFY2019 LEA performance reports, see the section with the header "2019-2020 (May 2021)."

Nevada's current State Performance Plan (SPP) and Annual Performance Report (APP) is available on the NDE website at: http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/. This webpage contains a link to the Part B State SPP/APR Data Displays contained on GRADS360. When a member of the public clicks on the link to OSEP's Ed.gov website IDEA SPP/APR Letter Page (https://sites.ed.gov/idea/spp-apr-letters), the public can access a word version of Nevada's current SPP/APR by scrolling down to the Nevada section, and clicking the "2021 SPP/APR and State Determination Letters PART B – Nevada" link.

## Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

**Response to actions required in FFY 2019 SPP/APR**

In June 2021, for FFY 2019, Nevada’s RDA Percentage was 78.75%. OSEP encouraged the NDE to access technical assistance related to those results elements and compliance indicators for which the state received a score of zero. There were two results elements where the state received a score of zero: (1) percentage of 8th grade children with disabilities scoring at basic or above on the NAEP reading assessment; and (2) percentage of 8th grade children with disabilities scoring at basic or above on the NAEP math assessment. NDE received assistance from several technical assistance centers. Work supported by each TA center is discussed separately below.

National Center for Systemic Improvement (NCSI)
NDE Office of Inclusive Education (OIE) has had a long and valuable relationship with the NCSI. NDE continues to work with NCSI on several key projects related to enhancing and improving NDE’s General Supervision System, including work to support: (1) ACCESS Nevada, (2) OSEP’s Differentiated Monitoring System, and (3) NDE guidance for students with disabilities who are emergent bilingual, and (4) leadership skills for Nevada’s new director.

(1) ACCESS Nevada
NDE started working in 2019 with NCSI to review and revise the policies and procedures related to the general supervision system. This work has been instrumental in developing ACCESS Nevada, a new data collection reporting system that will be launched in spring 2022. The NDE staff meet quarterly with NCSI to review progress and new resources related to the project.

(2) OSEP Differentiated Monitoring System (DMS)—Cohort 1
NDE has participated in NCSI monthly TA calls related to the DMS. NDE worked with NCSI to review OSEP protocols and give feedback on the DMS process. Being part of the process helped NDE staff gain a deeper understanding to the tools available and the information OSEP is seeking for review. NCSI reviewed and provided feedback on the initial fiscal protocol submission.

(3) Technical Assistance and Guidance Document Development for Students with Disabilities who are Emergent Bilingual
In the Summer of 2021 NDE partnered again with NCSI to provide guidance and facilitation across multiple NDE offices and statewide stakeholders to review and revise EL and special education guidance documents.

(4) Special Education Administrators Leadership Collaborative (SEAL)
NDE OIE director participates in monthly meetings with other State Education Agency Leaders to review federal requirements and share experiences with other state leaders to enhance skills.

National Technical Assistance Center on Transition: The Collaborative (NTACT:C)
NDE continues receive assistance from NTACT:C in providing connections to other states for resource sharing/capacity building (e.g., opportunity to learn from states who require all transition components to begin at age 14 and who go beyond minimum compliance in transition efforts) and in utilizing materials (toolkits, case studies, checklists, models, evidence-based practices, predictors of post-school success, etc.) while providing training to LEA staff. NDE OIE staff regularly participate in professional learning opportunities offered by NTACT:C including the Indicator B14 Community of Practice (CoP), Indicators 1, 2, 13, and 14 Huddles, Career and Technical Education/Special Education/Vocational Rehabilitation (CTE/SpEd/VR) Network, and the Alternate Diploma Discussion. NDE OIE staff worked closely with Charlotte Alverson outside of the regularly scheduled Indicator B14 CoP for the 2020-2025 SPP/APR submission to OSEP.

Early Childhood Technical Assistance (ECTA)
NDE has built on the technical assistance received from ECTA. NDE produced and disseminated a tool to assist with the quality of the Indicator 7 data collection ("Outcomes Decision Tree"). Following school building closures due to COVID-19, Nevada participated in regular calls on these topics: (1) supporting districts during remote instruction, (2) equity, and (3) inclusion. NDE also received technical assistance regarding target setting guidelines and stakeholder engagement for the 2020-2025 SPP/APR submission to OSEP.

Early Childhood Inclusion Community of Practice
NDE participates regularly in the Early Childhood Inclusion Community of Practice. NDE participates in regular conference calls on topics including inclusion, transition, suspension/expulsion, social/emotional skill development, and improved behavioral outcomes. The community focuses on the elements of high quality-inclusion.

IDEA Center for Early Childhood Data Systems (DaSy)
NDE participates in TA offered by the DaSy. In addition, NDE participates in various webinars on topics regarding collection and reporting of data including Identifying What You Really Need: Data System Features and Functions for Improvement. Nevada continues to explore options related to increasing practices related to data quality including offering professional development on processes to collect and report. DaSy provides NDE with individual technical assistance and cross-state collaboration to enhance data system development.

National Center for Pyramid Model Innovations (NCPMI)
NDE is a member of the Nevada Pyramid Model Partnership State Leadership Team (previously TACSEI) and staff attend monthly meetings. Information and training from NCPMI using the Pyramid Model has been disseminated to the LEAs through the Nevada Early Childhood annual fall meeting and more broadly to stakeholders through meetings of the Special Education Advisory Committee. Recently, the state leadership team is addressing suspension/expulsion and social emotional learning for toddlers. These strategies support effective instruction and behavioral outcomes, which in turn support inclusive placements.

IDEA Data Center (IDC)
NDE has participated in several IDC webinar trainings, Peer-To-Peer groups, one-to-one support opportunities, as well as attending the Spring 2021 IDC Institute and Significant Disproportionally Summit. NDE utilizes several tools and resources produced by IDC including IDEA EDFacts Data Checker and resources developed to support target setting and stakeholder engagement in the FFY2020-2025 SPP/APR. Work with IDC has led to strengthening cross-office collaboration for timely and accurate State reported IDEA data. Additionally, NDE OIE has emphasized collaboration and communication with LEAs for professional development on data quality and timely reporting from LEAs. NDE holds regular webinar meetings with LEAs on IDEA data collections and elements and provided detailed Guidance documents on annual data collections as well as one-to-one technical assistance.

Center for Integration of IDEA Data (CIID)
NDE continues to work with CIID on the NV Generate project to produce timely and accurate IDEA EdFacts files. Cross-Office NDE teams meet bi-monthly with CIID for technical assistance with the implementation of Generate in NV.

National Trainings and Support on Data Management
NDE participates in monthly meetings and routinely receives technical assistance from NASDSE Special Education Data Manager Affinity Group (SEDMAG). NDE attended 2021 OSEP Leadership and Project Directors Conference, 2021 NCES STATS-DC Data Conference, as well as the 2021 NASDSE Conference.

The Center for Technical Assistance for Excellence in Special Education (TAESE)
NDE OIE director participates in monthly regional director’s meetings to support understanding of federal requirements and to learn from other state directors. NDE OIE director and staff participate in conferences and professional learning opportunities supported by TAESE.

Center for Appropriate Dispute Resolution in Special Education’s (CADRE)
NDE participates in on-line state discussions related to dispute resolution and uses resources made available through the center.

## Intro - OSEP Response

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

## Intro - Required Actions

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

**Measurement**

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

**Instructions**

*Sampling is not allowed.*

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target. Provide the actual numbers used in the calculation.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

## 1 - Indicator Data

**Historical Data[[1]](#footnote-2)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 72.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 90.37% | 97.00% | 100.00% | 100.00% | 100.00% |
| Data | 28.97% | 29.29% | 64.73% | 65.96% | 67.2%[[2]](#footnote-3) |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 72.72% | 74.00% | 75.00% | 76.00% | 77.00% | 78.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 1
COLLEGE AND CAREER READY (CCR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 12
Parents: 3
Local Education Agencies: 3
State Agencies: 3
State Education Agency (NDE): 3

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The College and Career Ready (CCR) Stakeholder Workgroup was formed to address Indicators 1, 2, 13, and 14. Twelve (12) stakeholders were selected to participate in the CCR Stakeholder Workgroup. There were three representatives in each of four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), and the three representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, Doodle Polls were sent to workgroup members to determine mutually agreeable meeting dates/times in June, July, and August of 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in June laid the foundation for the work ahead and focused on Indicators 1 and 2. Following the meeting, the Part B Data Manager and Workgroup Lead turned the June meeting Indicators 1 and 2 conversation/consensus into 3 proposed targets for each from which the workgroup ultimately made recommendations. The second meeting in July focused on Indicator 13 and finalizing the recommendations for Indicators 1 and 2. The final meeting in August focused on Indicator 14, Measures A, B, and C, and reviewing the finalized baseline and target recommendations for Indicators 1, 2, and 13.

The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, and 14 were included in a survey developed by the Part B Data Manager and moved forward for public input in December of 2021. The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, 13, and 14 along with the public input from the survey were reviewed and considered by NDE OIE in addition to the FFY 2020 data that became available following the summer 2021 meetings to ultimately set Nevada’s baselines and six-year targets for Indicators 1, 2, 13, and 14.

Information Specific to Indicator 1
• In the previous SPP/APR cycle, Nevada used the four-year cohort graduation data used for ESEA accountability as required by the U.S. Department of Education
• Indicator 1 must now be measured by the number of youth with IEPs graduating with a regular diploma, expressed as a percentage of youth exiting special education services in a given year
• The NDE presented the CCR Stakeholder Workgroup with historical targets and actual data from FFY 2011 forward
• The NDE also presented the CCR Stakeholder Workgroup with a recalculation of graduation percentages from FFY 2016 through FFY 2019 according to the new measurement requirements, to provide relevant trend data
• In June and July, the CCR Stakeholder Workgroup formulated three options for preliminary recommendations based on their analysis and discussion of historical data in light of new measurement requirements
• In August, the CCR Stakeholder Workgroup narrowed the recommendation to one option for baseline and three options for targets, which were proposed for input in the public survey
• The CCR Stakeholder Workgroup also recommended an improvement strategy for increased training for data entry personnel to ensure that all exit data are entered accurately and consistently
• The CCR Stakeholder Workgroup also recommended that the NDE leave open an option for target review and adjustment as the state moves beyond the COVID-19 impact on data
• Following the review of all input, the NDE selected the baseline and targets recommended by the CCR Stakeholder Workgroup, and selected by the majority of respondents on the public survey

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,450 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 13 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 269 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 103 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 534 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,450 | 3,369 | 67.2%[[3]](#footnote-4) | 72.72% | 72.72% | N/A | N/A |

**Graduation Conditions**

**Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma.**

Receipt of a regular (standard) diploma in Nevada during 2019-2020 required a student to (1) earn a minimum of 22.5 credits, and (2) participate the ACT Plus Writing for college and career readiness assessment. No difference existed between the conditions required of a youth with an IEP and a youth without to earn a regular (standard) diploma in Nevada.

**Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)**

NO

**Provide additional information about this indicator (optional)**

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

OPTION 1:

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

OPTION 2 (For FFY 2020 ONLY):

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Measurement**

OPTION 1:

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

OPTION 2 (For FFY 2020 ONLY):

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Instructions**

*Sampling is not allowed.*

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target.

With the FFY 2020 SPP/APR, due February 1, 2022, States may use either option 1 or 2. States using Option 2 must provide the actual numbers used in the calculation.

OPTION 1:

**Use 618 exiting data** for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved, but are known to be continuing in an educational program.

OPTION 2:

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023**, States must report data using Option 1 (i.e., the same data as used for reporting to the Department under section 618 of the IDEA). Option 2 will not be available beginning with the FFY 2021 SPP/APR.

## 2 - Indicator Data

**Historical Data[[4]](#footnote-5)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 15.85% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 5.30% | 5.20% | 5.10% | 5.00% | 5.00% |
| Data | 4.42% | 5.25% | 5.28% | 4.41% | 3.44% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 15.85% | 15.00% | 14.00% | 13.00% | 12.00% | 11.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 2
COLLEGE AND CAREER READY (CCR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 12
Parents: 3
Local Education Agencies: 3
State Agencies: 3
State Education Agency (NDE): 3

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The College and Career Ready (CCR) Stakeholder Workgroup was formed to address Indicators 1, 2, 13, and 14. Twelve (12) stakeholders were selected to participate in the CCR Stakeholder Workgroup. There were three representatives in each of four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), and the three representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, Doodle Polls were sent to workgroup members to determine mutually agreeable meeting dates/times in June, July, and August of 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in June laid the foundation for the work ahead and focused on Indicators 1 and 2. Following the meeting, the Part B Data Manager and Workgroup Lead turned the June meeting Indicators 1 and 2 conversation/consensus into 3 proposed targets for each from which the workgroup ultimately made recommendations. The second meeting in July focused on Indicator 13 and finalizing the recommendations for Indicators 1 and 2. The final meeting in August focused on Indicator 14, Measures A, B, and C, and reviewing the finalized baseline and target recommendations for Indicators 1, 2, and 13.

The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, and 14 were included in a survey developed by the Part B Data Manager and moved forward for public input in December of 2021. The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, 13, and 14 along with the public input from the survey were reviewed and considered by NDE OIE in addition to the FFY 2020 data that became available following the summer 2021 meetings to ultimately set Nevada’s baselines and six-year targets for Indicators 1, 2, 13, and 14.

Information Specific to Indicator 2
• In the previous SPP/APR cycle, Nevada used an adjusted cohort dropout rate
• Although Nevada could continue to use the adjusted cohort dropout rate for FFY 2020, by FFY 2021, Indicator 2 must be measured by the number of youth with IEPs who dropped out of school, expressed as a percentage of youth exiting special education services in a given year
• Rather than wait another year, Nevada decided to move forward with the new calculation in FFY 2020
• The NDE presented the CCR Stakeholder Workgroup with historical targets and actual data from FFY 2011 forward
• The NDE also presented the CCR Stakeholder Workgroup with a recalculation of dropout percentages from FFY 2016 through FFY 2019 according to the new measurement requirements, to provide relevant trend data
• In July, the CCR Stakeholder Workgroup formulated three options for preliminary recommendations based on their analysis and discussion of historical data in light of new measurement requirements
• In August, the CCR Stakeholder Workgroup narrowed the recommendation to one option for baseline and targets, which was proposed for input in the public survey
• The CCR Stakeholder Workgroup also recommended an improvement strategy for increased training for data entry personnel to ensure that all exit data are entered accurately and consistently
• The CCR Stakeholder Workgroup also recommended that the NDE leave open an option for target review and adjustment as the state moves beyond the COVID-19 impact on data
• Following the review of all input, the NDE selected the baseline and targets recommended by the CCR Stakeholder Workgroup, and supported by the public survey

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,450 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 13 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 269 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 103 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 534 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 534 | 3,369 | 3.44% | 15.85% | 15.85% | N/A | N/A |

**Provide a narrative that describes what counts as dropping out for all youth**

Dropouts are determined by the student’s withdrawal code. The following reasons for withdrawal qualify as a dropout.

W3(a)i -- Credit deficiency;
W3(a)ii -- Pregnancy;
W3(a)iii -- Marriage;
W3(a)iv -- Employment;
W3(a)v -- Student has long term medical condition, or in drug treatment or a rehabilitative setting that prevents them from receiving services (NRS 392.050);
W3(a)vi -- Authorization by juvenile division for the district court pursuant to NRS 392.090;
W3(a)vii -- Self-supported or parental support in accordance with NRS 392.100;
W3(a)viii -- Apprenticeship in accordance with NRS 392.110; or
W3(a)ix -- Any other reason not specified in paragraphs 3(a)i through 3(a)viii, inclusive.

W3(b) -- Student withdrawn because age exceeds age restrictions.

W3(c)i -- Permanent expulsion;
W3(c)ii -- Disciplinary or other eligibility reasons; or
W3(c)iii -- Incarceration.

W3(d)i -- Student withdrawn to GED program; or
W3(d)ii -- Student withdrawn to adult vocational/technical program.

W3(e)i -- Absence of the student for 10 consecutive days and whose whereabouts are unknown;
W3(e)ii -- Absence of the student for the entire month with no expected date of return; or
W3(e)iii -- Unexplained absence as set forth in NAC 387.220.

W3(g) -- Attendance excused for distance residence from nearest school (NRS 392.080).

**Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)**

NO

**If yes, explain the difference in what counts as dropping out for youth with IEPs.**

**Provide additional information about this indicator (optional)**

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

**Measurement**

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 94.90% |
| Reading | B | Grade 8 | 2018 | 94.30% |
| Reading | C | Grade HS | 2018 | 93.31% |
| Math | A | Grade 4 | 2018 | 94.79% |
| Math | B | Grade 8 | 2018 | 93.98% |
| Math | C | Grade HS | 2018 | 97.24% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 95.00% | 95.00%  | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 3
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, a Doodle Poll was sent to workgroup members to determine three (3) mutually agreeable meeting dates/times in September 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in October laid the foundation for the work ahead and focused on Indicator 8. Following the meeting, the Part B Data Manager and Workgroup Lead created a Microsoft Teams Channel and granted access to all stakeholders. The Part B Data Manager and Workgroup lead provided the stakeholder group with additional information and resources surrounding Indicator 8 that was requested by the group. The Microsoft Teams Channel was utilized throughout the remainder of CG workgroup meetings to share supporting resources for Indicators 3 and 5. The second meeting in October kicked off with a follow-up discussion surrounding Indicator 8 before finalizing the group’s recommendations. Next the stakeholder group proceeded to review data, engage in robust conversation, and lay out several recommendations for measurement of Indicator 5. Finally, the third meeting in November focused on Indicator 3, where the CG workgroup was able to suggest multiple recommendations for measures 3A, 3B, 3C, and 3D.

Information Specific to Indicator 3
• The measurements for Indicator 3 have changed in the FFY 2020-2025 SPP/APR
• Measure 3C from FFY 2019 has now been separated into two sub-indicators, 3B (proficiency rate for children with IEPs against grade level academic achievement), and 3C (proficiency rate for children with IEPs against alternate academic achievement standards)
• Measure 3D (gap in proficiency rates for children with IEPs when compared to all students against grade level academic achievement standards) is new to FFY 2020-2025
• Measure 3A (participation rate for children with IEPs) remains the same from FFY2019 to FFY 2020-2025, although participation rates are now measured for grades 4, 8, and high school
• The NDE reviewed the new and existing sub-indicators for Indicator 3 and recalculated actual data from FFY 2016 forward, so that trend data aligned to the new measurement requirements could be reviewed by the CG Stakeholder Workgroup
• In November, the CG Stakeholder Workgroup formulated options for preliminary recommendations based on their analysis and discussion of historical data in light of new measurement requirements, and these recommendations were proposed for input in the public survey
• Stakeholders expressed concerns about determining appropriate targets given that 2019-2020 assessment data were unavailable due to the COVID-19 pandemic and because the U.S. Department of Education granted a waiver to Nevada for administering these assessments
• Stakeholders noted a desire to reconvene as a group and reexamine all sub-indicators for Indicator 3 in one year to determine if any adjustments should be made to the baseline and/or targets
• The proposal to set the baseline and targets for 3A at 95% to align with ESEA requirements was proposed for input in the public survey
• The baseline and options for targets for 3B and 3C (with annual increases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• The baseline and options for targets for 3D (with annual decreases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• Following the review of all input from the CG Stakeholder Workgroup, including the public survey input, the NDE selected the following baselines and targets by combining multiple recommendations
• The NDE selected the recalculated FFY 2018 data (from the spring 2019 assessments) as the baseline for Indicators 3A, 3B, and 3C; the NDE selected FFY 2020 actual data as the baseline for Indicator 3D
• The NDE selected 95% as the participation rate target for Indicator 3A
• The NDE selected performance targets for Indicator 3B that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected performance targets for Indicator 3C that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected gap reduction targets for Indicator 3D that remained stable for the first three years, decreased by 0.5% in the fourth year, and decreased by 1.0% in the fifth and sixth years

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 4,944 | 4,721 | 3,164 |
| b. Children with IEPs in regular assessment with no accommodations | 3,422 | 2,518 | 1,364 |
| c. Children with IEPs in regular assessment with accommodations | 22 | 5 | 1,256 |
| d. Children with IEPs in alternate assessment against alternate standards | 173 | 183 | 182 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 4,940 | 4,720 | 3,164 |
| b. Children with IEPs in regular assessment with no accommodations | 3,421 | 2,527 | 1,432 |
| c. Children with IEPs in regular assessment with accommodations | 15 | 3 | 1,307 |
| d. Children with IEPs in alternate assessment against alternate standards | 172 | 182 | 182 |

\*The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 3,617 | 4,944 |  | 95.00% | 73.16% | Did not meet target | N/A |
| **B** | Grade 8 | 2,706 | 4,721 |  | 95.00% | 57.32% | Did not meet target | N/A |
| **C** | Grade HS | 2,802 | 3,164 |  | 95.00% | 88.56% | Did not meet target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 3,608 | 4,940 |  | 95.00% | 73.04% | Did not meet target | N/A |
| **B** | Grade 8 | 2,712 | 4,720 |  | 95.00% | 57.46% | Did not meet target | N/A |
| **C** | Grade HS | 2,921 | 3,164 |  | 95.00% | 92.32% | Did not meet target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

http://nevadareportcard.nv.gov/di/main/assessment

**Provide additional information about this indicator (optional)**

The NDE used EDFacts data from FFY 2018 to calculate baseline data that reflect pre-COVID data trends and comport with the new 3A measurement requirements.

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since participant rates in the SBAC and the ACT assessments ranged from 54% to 92%, the data are incomplete and likely not representative of the make-up of the State population.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

The State has revised baseline for this indicator, using data from FFY 2018, and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 3A - Required Actions

# Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 17.50% |
| Reading | B | Grade 8 | 2018 | 8.80% |
| Reading | C | Grade HS | 2018 | 8.94% |
| Math | A | Grade 4 | 2018 | 16.14% |
| Math | B | Grade 8 | 2018 | 4.34% |
| Math | C | Grade HS | 2018 | 3.08% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 18.00% | 19.00% | 20.00% | 21.00% | 22.00% | 24.00% |
| Reading | B >= | Grade 8 | 9.00% | 10.00% | 11.00% | 12.00% | 13.00% | 15.00% |
| Reading | C >= | Grade HS | 9.00% | 10.00% | 11.00% | 12.00% | 13.00% | 15.00% |
| Math | A >= | Grade 4 | 17.00% | 18.00% | 19.00% | 20.00% | 21.00% | 23.00% |
| Math | B >= | Grade 8 | 5.00% | 6.00% | 7.00% | 8.00% | 9.00% | 11.00% |
| Math | C >= | Grade HS | 4.00% | 5.00% | 6.00% | 7.00% | 8.00% | 10.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 3
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, a Doodle Poll was sent to workgroup members to determine three (3) mutually agreeable meeting dates/times in September 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in October laid the foundation for the work ahead and focused on Indicator 8. Following the meeting, the Part B Data Manager and Workgroup Lead created a Microsoft Teams Channel and granted access to all stakeholders. The Part B Data Manager and Workgroup lead provided the stakeholder group with additional information and resources surrounding Indicator 8 that was requested by the group. The Microsoft Teams Channel was utilized throughout the remainder of CG workgroup meetings to share supporting resources for Indicators 3 and 5. The second meeting in October kicked off with a follow-up discussion surrounding Indicator 8 before finalizing the group’s recommendations. Next the stakeholder group proceeded to review data, engage in robust conversation, and lay out several recommendations for measurement of Indicator 5. Finally, the third meeting in November focused on Indicator 3, where the CG workgroup was able to suggest multiple recommendations for measures 3A, 3B, 3C, and 3D.

Information Specific to Indicator 3
• The measurements for Indicator 3 have changed in the FFY 2020-2025 SPP/APR
• Measure 3C from FFY 2019 has now been separated into two sub-indicators, 3B (proficiency rate for children with IEPs against grade level academic achievement), and 3C (proficiency rate for children with IEPs against alternate academic achievement standards)
• Measure 3D (gap in proficiency rates for children with IEPs when compared to all students against grade level academic achievement standards) is new to FFY 2020-2025
• Measure 3A (participation rate for children with IEPs) remains the same from FFY2019 to FFY 2020-2025, although participation rates are now measured for grades 4, 8, and high school
• The NDE reviewed the new and existing sub-indicators for Indicator 3 and recalculated actual data from FFY 2016 forward, so that trend data aligned to the new measurement requirements could be reviewed by the CG Stakeholder Workgroup
• In November, the CG Stakeholder Workgroup formulated options for preliminary recommendations based on their analysis and discussion of historical data in light of new measurement requirements, and these recommendations were proposed for input in the public survey
• Stakeholders expressed concerns about determining appropriate targets given that 2019-2020 assessment data were unavailable due to the COVID-19 pandemic and because the U.S. Department of Education granted a waiver to Nevada for administering these assessments
• Stakeholders noted a desire to reconvene as a group and reexamine all sub-indicators for Indicator 3 in one year to determine if any adjustments should be made to the baseline and/or targets
• The proposal to set the baseline and targets for 3A at 95% to align with ESEA requirements was proposed for input in the public survey
• The baseline and options for targets for 3B and 3C (with annual increases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• The baseline and options for targets for 3D (with annual decreases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• Following the review of all input from the CG Stakeholder Workgroup, including the public survey input, the NDE selected the following baselines and targets by combining multiple recommendations
• The NDE selected the recalculated FFY 2018 data (from the spring 2019 assessments) as the baseline for Indicators 3A, 3B, and 3C; the NDE selected FFY 2020 actual data as the baseline for Indicator 3D
• The NDE selected 95% as the participation rate target for Indicator 3A
• The NDE selected performance targets for Indicator 3B that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected performance targets for Indicator 3C that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected gap reduction targets for Indicator 3D that remained stable for the first three years, decreased by 0.5% in the fourth year, and decreased by 1.0% in the fifth and sixth years

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 3,444 | 2,523 | 2,620 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 531 | 269 | 92 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 7 | \*[[5]](#footnote-6)1 | 112 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 3,436 | 2,530 | 2,739 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 397 | 74 | 31 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | \*[[6]](#footnote-7)1 | \*[[7]](#footnote-8)1 | 35 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 538 | 3,444 |  | 18.00% | 15.62% | Did not meet target | N/A |
| **B** | Grade 8 | \*[[8]](#footnote-9)1 | 2,523 |  | 9.00% | \*[[9]](#footnote-10)1 | Met target | N/A |
| **C** | Grade HS | 204 | 2,620 |  | 9.00% | 7.79% | Did not meet target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 400 | 3,436 |  | 17.00% | 11.64% | Did not meet target | N/A |
| **B** | Grade 8 | \*[[10]](#footnote-11)1 | 2,530 |  | 5.00% | \*[[11]](#footnote-12)1 | Did not meet target | N/A |
| **C** | Grade HS | \*[[12]](#footnote-13)1 | 2,739 |  | 4.00% | \*[[13]](#footnote-14)1 | Did not meet target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

http://nevadareportcard.nv.gov/di/main/assessment

**Provide additional information about this indicator (optional)**

The NDE used EDFacts data from FFY 2018 to calculate baseline data that reflect pre-COVID data trends and comport with the new 3B measurement requirements.

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since participant rates in the SBAC and the ACT assessments ranged from 54% to 92% (see Indicator 3A), the performance data are incomplete and likely not representative of the make-up of the State population.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State has revised baseline for this indicator, using data from FFY 2018, and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 3B - Required Actions

# Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 15.47% |
| Reading | B | Grade 8 | 2018 | 0.00% |
| Reading | C | Grade HS | 2018 | 0.00% |
| Math | A | Grade 4 | 2018 | 17.77% |
| Math | B | Grade 8 | 2018 | 1.13% |
| Math | C | Grade HS | 2018 | 15.08% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 16.00% | 17.00% | 18.00% | 19.00% | 20.00% | 22.00% |
| Reading | B >= | Grade 8 | 1.00% | 2.00% | 3.00% | 4.00% | 5.00% | 7.00% |
| Reading | C >= | Grade HS | 1.00% | 2.00% | 3.00% | 4.00% | 5.00% | 7.00% |
| Math | A >= | Grade 4 | 18.00% | 19.00% | 20.00% | 21.00% | 22.00% | 24.00% |
| Math | B >= | Grade 8 | 2.00% | 3.00% | 4.00% | 5.00% | 6.00% | 8.00% |
| Math | C >= | Grade HS | 16.00% | 17.00% | 18.00% | 19.00% | 20.00% | 22.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 3
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, a Doodle Poll was sent to workgroup members to determine three (3) mutually agreeable meeting dates/times in September 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in October laid the foundation for the work ahead and focused on Indicator 8. Following the meeting, the Part B Data Manager and Workgroup Lead created a Microsoft Teams Channel and granted access to all stakeholders. The Part B Data Manager and Workgroup lead provided the stakeholder group with additional information and resources surrounding Indicator 8 that was requested by the group. The Microsoft Teams Channel was utilized throughout the remainder of CG workgroup meetings to share supporting resources for Indicators 3 and 5. The second meeting in October kicked off with a follow-up discussion surrounding Indicator 8 before finalizing the group’s recommendations. Next the stakeholder group proceeded to review data, engage in robust conversation, and lay out several recommendations for measurement of Indicator 5. Finally, the third meeting in November focused on Indicator 3, where the CG workgroup was able to suggest multiple recommendations for measures 3A, 3B, 3C, and 3D.

Information Specific to Indicator 3
• The measurements for Indicator 3 have changed in the FFY 2020-2025 SPP/APR
• Measure 3C from FFY 2019 has now been separated into two sub-indicators, 3B (proficiency rate for children with IEPs against grade level academic achievement), and 3C (proficiency rate for children with IEPs against alternate academic achievement standards)
• Measure 3D (gap in proficiency rates for children with IEPs when compared to all students against grade level academic achievement standards) is new to FFY 2020-2025
• Measure 3A (participation rate for children with IEPs) remains the same from FFY2019 to FFY 2020-2025, although participation rates are now measured for grades 4, 8, and high school
• The NDE reviewed the new and existing sub-indicators for Indicator 3 and recalculated actual data from FFY 2016 forward, so that trend data aligned to the new measurement requirements could be reviewed by the CG Stakeholder Workgroup
• In November, the CG Stakeholder Workgroup formulated options for preliminary recommendations based on their analysis and discussion of historical data in light of new measurement requirements, and these recommendations were proposed for input in the public survey
• Stakeholders expressed concerns about determining appropriate targets given that 2019-2020 assessment data were unavailable due to the COVID-19 pandemic and because the U.S. Department of Education granted a waiver to Nevada for administering these assessments
• Stakeholders noted a desire to reconvene as a group and reexamine all sub-indicators for Indicator 3 in one year to determine if any adjustments should be made to the baseline and/or targets
• The proposal to set the baseline and targets for 3A at 95% to align with ESEA requirements was proposed for input in the public survey
• The baseline and options for targets for 3B and 3C (with annual increases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• The baseline and options for targets for 3D (with annual decreases ranging from 0.25% to 1.0%) were proposed for input in the public survey
• Following the review of all input from the CG Stakeholder Workgroup, including the public survey input, the NDE selected the following baselines and targets by combining multiple recommendations
• The NDE selected the recalculated FFY 2018 data (from the spring 2019 assessments) as the baseline for Indicators 3A, 3B, and 3C; the NDE selected FFY 2020 actual data as the baseline for Indicator 3D
• The NDE selected 95% as the participation rate target for Indicator 3A
• The NDE selected performance targets for Indicator 3B that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected performance targets for Indicator 3C that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected gap reduction targets for Indicator 3D that remained stable for the first three years, decreased by 0.5% in the fourth year, and decreased by 1.0% in the fifth and sixth years

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 173 | 183 | 182 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 23 | \*[[14]](#footnote-15)1 | \*[[15]](#footnote-16)1 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 172 | 182 | 182 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 30 | 5 | 22 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 23 | 173 |  | 16.00% | 13.29% | Did not meet target | N/A |
| **B** | Grade 8 | \*[[16]](#footnote-17)1 | 183 |  | 1.00% | \*[[17]](#footnote-18)1 | Did not meet target | N/A |
| **C** | Grade HS | \*[[18]](#footnote-19)1 | 182 |  | 1.00% | \*[[19]](#footnote-20)1 | Met target | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 30 | 172 |  | 18.00% | 17.44% | Did not meet target | N/A |
| **B** | Grade 8 | 5 | 182 |  | 2.00% | 2.75% | Met target | N/A |
| **C** | Grade HS | 22 | 182 |  | 16.00% | 12.09% | Did not meet target | N/A |

**Regulatory Information**

**The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]**

**Public Reporting Information**

**Provide links to the page(s) where you provide public reports of assessment results.**

http://nevadareportcard.nv.gov/di/main/assessment

**Provide additional information about this indicator (optional)**

The NDE used EDFacts data from FFY 2018 to calculate baseline data that reflect pre-COVID data trends and comport with the new 3C measurement requirements.

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since participant rates in the SBAC and the ACT assessments ranged from 54% to 92% (see Indicator 3A), the performance data are incomplete and likely not representative of the make-up of the State population.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 3C - Required Actions

# Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator**: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

3D. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2020-2021 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2020-2021 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 24.69 |
| Reading | B | Grade 8 | 2020 | 33.64 |
| Reading | C | Grade HS | 2020 | 38.92 |
| Math | A | Grade 4 | 2020 | 16.55 |
| Math | B | Grade 8 | 2020 | 18.50 |
| Math | C | Grade HS | 2020 | 19.96 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 24.50 | 24.50  | 24.50 | 24.00 | 23.00 | 22.00 |
| Reading | B <= | Grade 8 | 33.50 | 33.50 | 33.50 | 33.00 | 32.00 | 31.00 |
| Reading | C <= | Grade HS | 38.50 | 38.50 | 38.50 | 38.00 | 37.00 | 36.00 |
| Math | A <= | Grade 4 | 16.50 | 16.50 | 16.50 | 16.00 | 15.00 | 14.00 |
| Math | B <= | Grade 8 | 18.50 | 18.50 | 18.50 | 18.00 | 17.00 | 16.00 |
| Math | C <= | Grade HS | 19.50 | 19.50 | 19.50 | 19.00 | 18.00 | 17.00 |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 3
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

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Information Specific to Indicator 3
• The measurements for Indicator 3 have changed in the FFY 2020-2025 SPP/APR
• Measure 3C from FFY 2019 has now been separated into two sub-indicators, 3B (proficiency rate for children with IEPs against grade level academic achievement), and 3C (proficiency rate for children with IEPs against alternate academic achievement standards)
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• Stakeholders noted a desire to reconvene as a group and reexamine all sub-indicators for Indicator 3 in one year to determine if any adjustments should be made to the baseline and/or targets
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• The NDE selected the recalculated FFY 2018 data (from the spring 2019 assessments) as the baseline for Indicators 3A, 3B, and 3C; the NDE selected FFY 2020 actual data as the baseline for Indicator 3D
• The NDE selected 95% as the participation rate target for Indicator 3A
• The NDE selected performance targets for Indicator 3B that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected performance targets for Indicator 3C that increased 1% per year for the first five years, and 2% per year in the sixth year
• The NDE selected gap reduction targets for Indicator 3D that remained stable for the first three years, decreased by 0.5% in the fourth year, and decreased by 1.0% in the fifth and sixth years

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 27,652 | 22,446 | 29,446 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 3,444 | 2,523 | 2,620 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 11,138 | 9,943 | 13,521 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 8 | \*[[20]](#footnote-21)1 | 231 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 531 | 269 | 92 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 7 | \*[[21]](#footnote-22)1 | 112 |

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 27,568 | 22,448 | 29,764 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 3,436 | 2,530 | 2,739 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 7,769 | 4,809 | 6,559 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | \*[[22]](#footnote-23)1 | \*[[23]](#footnote-24)1 | 98 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 397 | 74 | 31 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | \*[[24]](#footnote-25)1 | \*[[25]](#footnote-26)1 | 35 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 15.62% | 40.31% |  | 24.50 | 24.69 | N/A | N/A |
| **B** | Grade 8 | \*[[26]](#footnote-27)1 | \*[[27]](#footnote-28)1 |  | 33.50 | 33.64 | N/A | N/A |
| **C** | Grade HS | 7.79% | 46.70% |  | 38.50 | 38.92 | N/A | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | \*[[28]](#footnote-29)1 | \*[[29]](#footnote-30)1 |  | 16.50 | 16.55 | N/A | N/A |
| **B** | Grade 8 | \*[[30]](#footnote-31)1 | \*[[31]](#footnote-32)1 |  | 18.50 | 18.50 | N/A | N/A |
| **C** | Grade HS | 2.41% | 22.37% |  | 19.50 | 19.96 | N/A | N/A |

**Provide additional information about this indicator (optional)**

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since participant rates in the SBAC and the ACT assessments ranged from 54% to 92% (see Indicator 3A), the performance gap data are incomplete and likely not representative of the make-up of the State population.

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

The State established baseline for this indicator, using data from FFY 2020, and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

**Data Source**

State discipline data, including State’s analysis of State’s Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

**Measurement**

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 4
EQUITY STAKEHOLDER WORKGROUP

Number of Stakeholders: 11
Parents: 4
Local Education Agencies: 3
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Equity Stakeholder Workgroup was formed to address Indicators 4, 9, and 10. Eleven (11) stakeholders were selected to participate in the Equity Stakeholder Workgroup. There were multiple representatives in each of the four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), with the southern, northern, and rural geographic regions of Nevada all being represented and recruited. Potential stakeholders were recruited directly by email and by phone calls. Additionally, potential stakeholders were asked to participate in this workgroup during various NDE internal and external meetings. These meetings include a statewide Multitiered Systems of Support meeting on April 26, 2021, consisting of participants from NDE, statewide agencies and school districts (LEAs) across the state, and a school-based Restorative Practices workgroup on June 28, 2021, including representatives from NDE, state agencies and LEA representatives across the state. During every recruitment invitation, all potential representatives were encouraged to reach out to any other parents, LEA, NDE, state agency representatives or anybody else that would be interested in becoming a stakeholder in the Equity Workgroup. All invitees were encouraged to make it known that all stakeholders interested in participating in the Equity Stakeholder Workgroup would be welcome.

Next, a Doodle Poll was sent to workgroup members to determine a mutually agreeable meeting date/time in August of 2021. Approximately one week prior to the meeting, an email including materials (agenda and various historical indicator data) to review prior to the meeting was sent to workgroup members. Upon completion of the meeting, all stakeholders upon request were sent a copy of the PowerPoint presentation.

The meeting in August focused on indicators 4A, 4B, 9 and 10. During this meeting, all stakeholders were provided an in-depth walkthrough of the methodology used in previous SPP/APR submissions to calculate actual data for Indicators 4A, 4B, 9 and 10. Once this information was presented, the Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%. It was then explained that 4B is a compliance indicator that will remain at the 0% target set by OSEP. The Equity Stakeholder Workgroup then discussed the fact that Indicators 9 and 10 are also compliance indicators that will remain set at the 0% target set by OSEP. Once the indicator walkthroughs, calculations, and target goals were set, the members of the Equity Stakeholder Workgroup voiced an interest in continuing to meet to discuss the implementation strategies for these indicators. In order to accommodate this request, a Doodle poll will be sent out in early February 2022 to schedule the continuation of the Equity Stakeholder Workgroup meetings.

Information Specific to Indicators 4A and 4B
• The measurement requirements for Indicators 4A and 4B were not changed
• LEA rates are calculated by dividing the LEA’s total number of students with disabilities suspended/expelled for more than 10 school days by the total number of students with disabilities in the LEA
• Nevada has historically used this methodology to calculate actual data for Indicator 4A: Nevada compares LEA rates for suspension/expulsion of students with disabilities to the statewide bar for suspension/expulsion of students with disabilities to evaluate comparability. An LEA has a significant discrepancy when its suspension/expulsion rate for children with disabilities is at least five percentage points higher than the state’s average suspension/expulsion rate for all children with disabilities (“the statewide bar”). The statewide bar is calculated by dividing the statewide total number of students with disabilities suspended/expelled for more than 10 school days in a school year by the statewide total number of students with disabilities and adding five percentage points.
• A similar calculation is used for Indicator 4B, except the students are disaggregated by race/ethnicity before the rate for suspension/expulsion is calculated, and then the rates are compared to the statewide bar.
• Nevada uses a minimum “n” size requirement to exclude LEAs from the calculation for the indicator percentages if the LEA has fewer than 25 students with disabilities who were suspended more than 10 school days during the data reporting year, or fewer than 25 students with disabilities within the race/ethnic category.
• The NDE presented the Equity Stakeholder Workgroup with historical targets and actual data from FFY 2014 forward
• Although states may set the target for Indicator 4A, Nevada has historically set the target at 0% because significant discrepancies in rates of disciplinary removals among LEAs is discouraged
• The Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%
• Because Indicator 4B is a compliance indicator, OSEP sets the target at 0%
• The Equity Stakeholder Workgroup recommended that the baselines be updated to reflect FFY 2019 actual data
• Following the review of all input, the NDE has selected the baselines and targets recommended by the Equity Stakeholder Workgroup

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n/cell-size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 0 | 2 | 0.00% | 0.00% | 0.00% | Met target | No Slippage |

**Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring (34 CFR §300.170(a))**

Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State

**State’s definition of “significant discrepancy” and methodology**

Nevada compares LEA rates for suspension/expulsion of students with disabilities to the statewide bar, defined below, for suspension/expulsion of students with disabilities to evaluate comparability.

An LEA has a significant discrepancy when its suspension/expulsion rate for children with disabilities is at least five percentage points higher than the state's average suspension/expulsion rate for all children with disabilities ("the statewide bar").

The statewide bar is calculated by dividing the statewide total number of students with disabilities suspended/expelled out of school for more than 10 school days in a school year by the statewide total number of students with disabilities, and adding five percentage points.

Nevada uses a minimum "n" size requirement to exclude LEAs from the calculation if the LEA has fewer than 25 students with disabilities who were suspended out of school for more than 10 school days during the data reporting year (a one-year lag).

LEA rates are calculated by dividing the LEA's total number of students with disabilities suspended/expelled out of school for more than 10 school days by the total number of students with disabilities in the LEA during the data reporting year (a one-year lag).

**Provide additional information about this indicator (optional)**

During 2019-2020, Nevada had 19 LEAs in operation. Because Indicator 4 includes lag-year data, there are 19 LEAs included in the Indicator 4 calculations. One of these LEAs, the Achievement School District, was no longer in operation as of July 1, 2020. Consequently, elsewhere in this SPP/APR, when analyzing data from FFY 2020 (i.e., school year 2020-2021), there are 18 LEAs. The INTRODUCTION accurately states that for FFY 2020, Nevada had 18 LEAs in operation.

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

Not applicable. Nevada was not required to complete a review of policies, procedures, and practices in FFY2020 because no LEAs had significant discrepancies in their rates of suspension/expulsions out of school for more than 10 school days for children with IEPs using 2019-2020 data.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Compliance Indicator:** Rates of suspension and expulsion:

 A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

**Data Source**

State discipline data, including State’s analysis of State’s Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

**Measurement**

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n/cell-size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 0 | 0 | 2 | 0.00% | 0% | 0.00% | Met target | No Slippage |

**Were all races and ethnicities included in the review?**

YES

**State’s definition of “significant discrepancy” and methodology**

Nevada compares LEA rates for suspension/expulsion of students with disabilities in each race/ethnic category to the statewide bar, defined below, for suspension/expulsion of students with disabilities to evaluate comparability.

An LEA has a significant discrepancy when its suspension/expulsion rate for children with disabilities, in any race/ethnic category, is at least five percentage points higher than the state's average suspension/expulsion rate for all children with disabilities ("the statewide bar").

The statewide bar is calculated by dividing the statewide total number of students with disabilities suspended/expelled out of school for more than 10 school days in a school year by the statewide total number of students with disabilities, and adding five percentage points.

Nevada uses a minimum "n" size requirement to exclude LEAs from the calculation if the LEA has fewer than 25 students with disabilities, in any race/ethnic category, who were suspended out of school for more than 10 school days during the data reporting year (a one-year lag).

LEA rates are calculated by dividing the LEA's total number of students with disabilities, by race/ethnic category, suspended/expelled out of school for more than 10 school days by the total number of students with disabilities in the LEA, by race/ethnic category, during the data reporting year (a one-year lag).

**Provide additional information about this indicator (optional)**

During 2019-2020, Nevada had 19 LEAs in operation. Because Indicator 4 includes lag-year data, there are 19 LEAs included in the Indicator 4 calculations. One of these LEAs, the Achievement School District, was no longer in operation as of July 1, 2020. Consequently, elsewhere in this SPP/APR, when analyzing data from FFY 2020 (i.e., school year 2020-2021), there are 18 LEAs. The INTRODUCTION accurately states that for FFY 2020, Nevada had 18 LEAs in operation.

Although OSEP sets the target for Indicator 4B at 0%, the NDE sought stakeholder input to examine historical data, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 4
EQUITY STAKEHOLDER WORKGROUP

Number of Stakeholders: 11
Parents: 4
Local Education Agencies: 3
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Equity Stakeholder Workgroup was formed to address Indicators 4, 9, and 10. Eleven (11) stakeholders were selected to participate in the Equity Stakeholder Workgroup. There were multiple representatives in each of the four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), with the southern, northern, and rural geographic regions of Nevada all being represented and recruited. Potential stakeholders were recruited directly by email and by phone calls. Additionally, potential stakeholders were asked to participate in this workgroup during various NDE internal and external meetings. These meetings include a statewide Multitiered Systems of Support meeting on April 26, 2021, consisting of participants from NDE, statewide agencies and school districts (LEAs) across the state, and a school-based Restorative Practices workgroup on June 28, 2021, including representatives from NDE, state agencies and LEA representatives across the state. During every recruitment invitation, all potential representatives were encouraged to reach out to any other parents, LEA, NDE, state agency representatives or anybody else that would be interested in becoming a stakeholder in the Equity Workgroup. All invitees were encouraged to make it known that all stakeholders interested in participating in the Equity Stakeholder Workgroup would be welcome.

Next, a Doodle Poll was sent to workgroup members to determine a mutually agreeable meeting date/time in August of 2021. Approximately one week prior to the meeting, an email including materials (agenda and various historical indicator data) to review prior to the meeting was sent to workgroup members. Upon completion of the meeting, all stakeholders upon request were sent a copy of the PowerPoint presentation.

The meeting in August focused on indicators 4A, 4B, 9 and 10. During this meeting, all stakeholders were provided an in-depth walkthrough of the methodology used in previous SPP/APR submissions to calculate actual data for Indicators 4A, 4B, 9 and 10. Once this information was presented, the Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%. It was then explained that 4B is a compliance indicator that will remain at the 0% target set by OSEP. The Equity Stakeholder Workgroup then discussed the fact that Indicators 9 and 10 are also compliance indicators that will remain set at the 0% target set by OSEP. Once the indicator walkthroughs, calculations, and target goals were set, the members of the Equity Stakeholder Workgroup voiced an interest in continuing to meet to discuss the implementation strategies for these indicators. In order to accommodate this request, a Doodle poll will be sent out in early February 2022 to schedule the continuation of the Equity Stakeholder Workgroup meetings.

Information Specific to Indicators 4A and 4B
• The measurement requirements for Indicators 4A and 4B were not changed
• LEA rates are calculated by dividing the LEA’s total number of students with disabilities suspended/expelled for more than 10 school days by the total number of students with disabilities in the LEA
• Nevada has historically used this methodology to calculate actual data for Indicator 4A: Nevada compares LEA rates for suspension/expulsion of students with disabilities to the statewide bar for suspension/expulsion of students with disabilities to evaluate comparability. An LEA has a significant discrepancy when its suspension/expulsion rate for children with disabilities is at least five percentage points higher than the state’s average suspension/expulsion rate for all children with disabilities (“the statewide bar”). The statewide bar is calculated by dividing the statewide total number of students with disabilities suspended/expelled for more than 10 school days in a school year by the statewide total number of students with disabilities and adding five percentage points.
• A similar calculation is used for Indicator 4B, except the students are disaggregated by race/ethnicity before the rate for suspension/expulsion is calculated, and then the rates are compared to the statewide bar.
• Nevada uses a minimum “n” size requirement to exclude LEAs from the calculation for the indicator percentages if the LEA has fewer than 25 students with disabilities who were suspended more than 10 school days during the data reporting year, or fewer than 25 students with disabilities within the race/ethnic category.
• The NDE presented the Equity Stakeholder Workgroup with historical targets and actual data from FFY 2014 forward
• Although states may set the target for Indicator 4A, Nevada has historically set the target at 0% because significant discrepancies in rates of disciplinary removals among LEAs is discouraged
• The Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%
• Because Indicator 4B is a compliance indicator, OSEP sets the target at 0%
• The Equity Stakeholder Workgroup recommended that the baselines be updated to reflect FFY 2019 actual data
• Following the review of all input, the NDE has selected the baselines and targets recommended by the Equity Stakeholder Workgroup

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

Not applicable. Nevada was not required to complete a review of policies, procedures, and practices in FFY2020 because no LEAs had significant discrepancies in their rates of suspension/expulsions out of school for more than 10 school days for children with IEPs using 2019-2020 data.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 4B- Required Actions

# Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

**Measurement**

 A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

 B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

 C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA, explain.

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 63.00% | 63.00% | 64.00% | 64.00% | 64.00% |
| A | 63.60% | Data | 63.48% | 63.63% | 62.27% | 61.54% | 61.15% |
| B | 2020 | Target <= | 15.00% | 15.00% | 15.00% | 15.00% | 15.00% |
| B | 14.01% | Data | 14.66% | 14.65% | 15.34% | 15.56% | 15.86% |
| C | 2020 | Target <= | 1.60% | 1.60% | 1.60% | 1.60% | 1.60% |
| C | 1.39% | Data | 1.54% | 1.47% | 1.43% | 1.51% | 1.46% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 63.60% | 65.00% | 67.00% | 69.00% | 71.00% | 73.00% |
| Target B <= | 14.01% | 13.50% | 13.00% | 12.00% | 11.00% | 10.00% |
| Target C <= | 1.39% | 1.36% | 1.36% | 1.36% | 1.36% | 1.36% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 5
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, a Doodle Poll was sent to workgroup members to determine three (3) mutually agreeable meeting dates/times in September 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in October laid the foundation for the work ahead and focused on Indicator 8. Following the meeting, the Part B Data Manager and Workgroup Lead created a Microsoft Teams Channel and granted access to all stakeholders. The Part B Data Manager and Workgroup lead provided the stakeholder group with additional information and resources surrounding Indicator 8 that was requested by the group. The Microsoft Teams Channel was utilized throughout the remainder of CG workgroup meetings to share supporting resources for Indicators 3 and 5. The second meeting in October kicked off with a follow-up discussion surrounding Indicator 8 before finalizing the group’s recommendations. Next the stakeholder group proceeded to review data, engage in robust conversation, and lay out several recommendations for measurement of Indicator 5. Finally, the third meeting in November focused on Indicator 3, where the CG workgroup was able to suggest multiple recommendations for measures 3A, 3B, 3C, and 3D.

Information Specific to Indicator 5
• The measurement for Indicator 5 has changed and now includes students who are 5 years old and in kindergarten
• The NDE presented the CG Stakeholder Workgroup with historical targets and actual data from FFY 2009 forward
• Because the measurement has changed for FFY 2020, the baselines were recommended to be set at the FFY 2020 actual data level (previous actual data would not have been comparable); and the FFY 2020 actual data level is the target for FFY 2020
• The baseline and options for targets for Indicators 5A, 5B and 5C (with annual increases ranging from 1% to 2% in various years across the six-year span) were proposed for input in the public survey
• Following the review of all input from the CG Stakeholder Workgroup, including the public input survey, the NDE selected the following targets
• For Indicator 5A, the targets increase over baseline data by 2% per year, beginning in FFY 2021
• For Indicator 5B, the targets decrease from baseline data by 0.5% per year in FFY 2021 and FFY 2022, and by 1% per year over the previous year beginning in FFY 2023
• For Indicator 5C, the targets decrease by 0.03% from baseline data, beginning in FFY 2021

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 58,170 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 36,998 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 8,151 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 634 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 9 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 167 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**FFY 2020 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 36,998 | 58,170 | 61.15% | 63.60% | 63.60% | N/A | N/A |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 8,151 | 58,170 | 15.86% | 14.01% | 14.01% | N/A | N/A |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 810 | 58,170 | 1.46% | 1.39% | 1.39% | N/A | N/A |

**Provide additional information about this indicator (optional)**

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

 C. Receiving special education and related services in the home.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS089.

**Measurement**

 A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

 B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

 C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

**Instructions**

*Sampling from the State’s 618 data is not allowed.*

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (*e.g.*, 75-85%).Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State’s data reported under IDEA section 618, explain.

## 6 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A** | Target >= | 24.70% | 24.70% | 25.70% | 25.70% | 25.70% |
| **A** | Data | 30.21% | 33.41% | 34.07% | 39.44% | 43.87% |
| **B** | Target <= | 53.30% | 53.30% | 52.30% | 52.30% | 52.30% |
| **B** | Data | 50.53% | 47.59% | 43.51% | 40.39% | 37.21% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 6
STRONG START (SS) STAKEHOLDER WORKGROUP

Number of Stakeholders: 17
Parents: 6
Local Education Agencies: 6
Former State 619 Coordinator/Community Representative: 1
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Strong Start (SS) Stakeholder Work Group was established for stakeholders to provide input regarding Indicators 6, 7, 11, and 12. Seventeen (17) stakeholders were selected to participate in the SS Stakeholder Workgroup. Stakeholders included advocates, parents, local education agencies (LEA) special education administrators, and Nevada Department of Education (SEA) staff. Parent members were from local and statewide advocacy and advisory committees, individual parents, and parents of students with disabilities. Special education administrators represented north, south, and rural areas. Three members of the NDE staff participated. One member of the group was the State’s former State 619 Coordinator.

The workgroup met virtually via the Microsoft Teams platform on three separate occasions for 90 minutes each. Stakeholders participated in a Doodle Poll in order to identify what day and times they were available for meetings.

The first meeting was held virtually on November 1, 2021. In order to assist stakeholders in understanding the task, an agenda was provided and additional documents were distributed, including Interim Guidance SB102, Part B Indicators, and an Indicator 6 PowerPoint. This meeting was recorded. All meeting documents and the recording of the meeting is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 1.

During the first meeting, we established the foundation for the work ahead. Stakeholders were given background information on the SPP/APR and OSEP requirements for each indicator. We identified the purpose of target setting and methods for setting targets. After a thorough review of trend data and open discussion and questions regarding the data, the group recommended using FFY 2019 (2019-2020) as baseline data for Indicator 6 because the October 1, 2019, data were collected pre-pandemic. However, since the measurement for Indicator 6 had changed since FFY 2019, the NDE later determined it was appropriate to use FFY 2020 data as baseline data.

The second meeting occurred virtually on November 3, 2021. Stakeholders were given the agenda as well as Indicator 6 Target Options, and the SS Workgroup PowerPoint for meeting 2. The workgroup was given Indicator 6 Target Options at their request. The workgroup felt it could be more productive to have a copy of the historical data in graph form including data details to then compare various target options. The workgroup also stated that in order to understand and identify targets for Indicator 6C, the number of students included in this placement category rather than the percentage was more helpful, and these data were provided. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 2.

During the second meeting, stakeholders recommended setting targets to reflect an increase in inclusion while self-contained rates decrease. Stakeholders asked 6C data be quantified, by providing student counts in addition to percentages. These data were distributed prior to the third meeting.

The third meeting occurred virtually on November 15, 2021. Once again stakeholders received an agenda, Indicator 7 options, a target setting infographic slide, and an Outcomes infographic. These documents were distributed to help stakeholders understand Indicator 7 data, i.e., what data is collected and how two summary statements for each data collection category are calculated. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 3.

The stakeholders recommended Indicator 7 targets that realistically increase over time. Stakeholders identified concerns regarding keeping baseline data at the FFY 2013 level, because historically we have not met targets and continue to have slippage. Starting targets at current year data and ending above baseline require significant year-over-year increases. Stakeholders found consensus and recommended changing the targets to appropriately aggressive and yet achievable targets. Stakeholders recommended continued professional development and technical assistance on the Outcomes data, and specially targeted training so staff members understand what Indicator 7C (appropriate behavior to meet their needs) is measuring.

All documentation provided to stakeholders was organized via Microsoft Office Suite. The stakeholder group communicated with e-mails, Microsoft Teams Channel – Strong Start Indicator Workgroup. The channel houses chats, files, meeting minutes, and recordings.

Information Specific to Indicator 6
• The measurement for Indicator 6 has changed and now excludes students who are 5 years old and in kindergarten; in addition, the indicator now includes the percentage of preschool children receiving special education and related services in the home
• The NDE presented the SS Stakeholder Workgroup with historical targets and actual from FFY 2016 forward, along with separate calculations designed to show comparable data under the new measurement
• The NDE also presented the SS Stakeholder Workgroup with comparable national data so that Nevada’s data could be seen in a larger context
• Because the measurement has changed for FFY 2020, the baseline was ultimately recommended to be set at the FFY 2020 level (previous actual data would not have been comparable)
• The expectation from OSEP is that the 6A percentage increases over time, and the SS Stakeholder Workgroup decided a steady increase each year was appropriate
• The expectation from OSEP is that the 6B percentage decreases over time, and as they proposed targets, the SS Stakeholder Workgroup discussed the need to balance low targets with the need to maintain service delivery options for individual children with disabilities
• Regarding 6C, the SS Stakeholder Workgroup discussed the need to ensure that there is a clear understanding that students receiving special education services in the home as a result of an IEP placement decision are different than students who are being homeschooled; in addition, the Workgroup discussed that for families whose children receive services at home, this placement is not necessarily negative or more restrictive than school-based options
• The SS Stakeholder Workgroup also discussed the need to expand Nevada’s options for inclusive pre-Kindergarten placements
• The baselines and targets recommended by the SS Stakeholder Workgroup were proposed for input in the public survey
• Following the review of all input, the NDE has selected the baselines and targets recommended by the SS Stakeholder Workgroup, and supported by the public survey

**Targets**

**Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.**

Inclusive Targets

**Please select if the State wants to use target ranges for 6C.**

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A** | 2020 | 40.29% |
| **B** | 2020 | 49.19% |
| **C** | 2020 | 0.65% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 40.29% | 40.29% | 41.29% | 42.29% | 43.29% | 44.29% |
| Target B <= | 49.19% | 49.19% | 48.19% | 47.19% | 46.19% | 45.19% |

**Inclusive Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C <= | 0.65% | 0.65% | 0.65% | 0.65% | 0.65% | 0.64% |

**Prepopulated Data**

**Data Source:**

SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

**Date:**

07/07/2021

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 1,220 | 2,575 | 35 | 3,830 |
| a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 420 | 1,106 | 17 | 1,543 |
| b1. Number of children attending separate special education class | 694 | 1,166 | 11 | 1,871 |
| b2. Number of children attending separate school | 3 | 9 | 1 | 13 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 11 | 12 | 2 | 25 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**FFY 2020 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,543 | 3,830 | 43.87% | 40.29% | 40.29% | N/A | N/A |
| B. Separate special education class, separate school or residential facility | 1,884 | 3,830 | 37.21% | 49.19% | 49.19% | N/A | N/A |
| C. Home | 25 | 3,830 |  | 0.65% | 0.65% | N/A | N/A |

**Provide additional information about this indicator (optional)**

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416 (a)(3)(A))

**Data Source**

State selected data source.

**Measurement**

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes:**

**Summary Statement 1**: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 1:** Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 2**: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

## 7 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A1 | 2013 | Target >= | 78.50% | 78.50% | 80.60% | 80.60% | 80.60% |
| A1 | 78.55% | Data | 78.35% | 82.89% | 76.66% | 72.29% | 71.93% |
| A2 | 2013 | Target >= | 58.22% | 58.22% | 59.31% | 59.31% | 59.31% |
| A2 | 57.13% | Data | 56.49% | 56.13% | 51.73% | 48.79% | 44.27% |
| B1 | 2013 | Target >= | 77.85% | 77.85% | 80.60% | 86.60% | 86.60% |
| B1 | 77.06% | Data | 78.16% | 81.05% | 76.60% | 75.05% | 72.89% |
| B2 | 2013 | Target >= | 55.07% | 55.07% | 56.00% | 56.00% | 56.00% |
| B2 | 54.14% | Data | 54.96% | 55.29% | 54.19% | 49.57% | 44.68% |
| C1 | 2013 | Target >= | 79.15% | 79.15% | 80.30% | 80.30% | 80.30% |
| C1 | 72.21% | Data | 66.46% | 79.49% | 93.63% | 52.39% | 72.37% |
| C2 | 2013 | Target >= | 62.96% | 62.96% | 65.60% | 65.60% | 65.60% |
| C2 | 60.32% | Data | 53.95% | 70.19% | 84.27% | 46.64% | 42.91% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 68.71% | 68.71% | 71.71% | 73.63% | 76.09% | 78.56% |
| Target A2 >= | 42.56% | 42.56% | 46.20% | 49.84% | 53.48% | 57.14% |
| Target B1 >= | 70.74% | 70.74% | 72.32% | 73.90% | 75.48% | 77.07% |
| Target B2 >= | 45.41% | 45.41% | 47.59% | 49.77% | 51.95% | 54.15% |
| Target C1 >= | 70.31% | 70.31% | 70.78% | 71.25% | 71.72% | 72.22% |
| Target C2 >= | 41.71% | 41.71% | 46.36% | 51.01% | 55.66% | 60.33% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 7
STRONG START (SS) STAKEHOLDER WORKGROUP

Number of Stakeholders: 17
Parents: 6
Local Education Agencies: 6
Former State 619 Coordinator/Community Representative: 1
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Strong Start (SS) Stakeholder Work Group was established for stakeholders to provide input regarding Indicators 6, 7, 11, and 12. Seventeen (17) stakeholders were selected to participate in the SS Stakeholder Workgroup. Stakeholders included advocates, parents, local education agencies (LEA) special education administrators, and Nevada Department of Education (SEA) staff. Parent members were from local and statewide advocacy and advisory committees, individual parents, and parents of students with disabilities. Special education administrators represented north, south, and rural areas. Three members of the NDE staff participated. One member of the group was the State’s former State 619 Coordinator.

The workgroup met virtually via the Microsoft Teams platform on three separate occasions for 90 minutes each. Stakeholders participated in a Doodle Poll in order to identify what day and times they were available for meetings.

The first meeting was held virtually on November 1, 2021. In order to assist stakeholders in understanding the task, an agenda was provided and additional documents were distributed, including Interim Guidance SB102, Part B Indicators, and an Indicator 6 PowerPoint. This meeting was recorded. All meeting documents and the recording of the meeting is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 1.

During the first meeting, we established the foundation for the work ahead. Stakeholders were given background information on the SPP/APR and OSEP requirements for each indicator. We identified the purpose of target setting and methods for setting targets. After a thorough review of trend data and open discussion and questions regarding the data, the group recommended using FFY 2019 (2019-2020) as baseline data for Indicator 6 because the October 1, 2019, data were collected pre-pandemic. However, since the measurement for Indicator 6 had changed since FFY 2019, the NDE later determined it was appropriate to use FFY 2020 data as baseline data.

The second meeting occurred virtually on November 3, 2021. Stakeholders were given the agenda as well as Indicator 6 Target Options, and the SS Workgroup PowerPoint for meeting 2. The workgroup was given Indicator 6 Target Options at their request. The workgroup felt it could be more productive to have a copy of the historical data in graph form including data details to then compare various target options. The workgroup also stated that in order to understand and identify targets for Indicator 6C, the number of students included in this placement category rather than the percentage was more helpful, and these data were provided. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 2.

During the second meeting, stakeholders recommended setting targets to reflect an increase in inclusion while self-contained rates decrease. Stakeholders asked 6C data be quantified, by providing student counts in addition to percentages. These data were distributed prior to the third meeting.

The third meeting occurred virtually on November 15, 2021. Once again stakeholders received an agenda, Indicator 7 options, a target setting infographic slide, and an Outcomes infographic. These documents were distributed to help stakeholders understand Indicator 7 data, i.e., what data is collected and how two summary statements for each data collection category are calculated. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 3.

The stakeholders recommended Indicator 7 targets that realistically increase over time. Stakeholders identified concerns regarding keeping baseline data at the FFY 2013 level, because historically we have not met targets and continue to have slippage. Starting targets at current year data and ending above baseline require significant year-over-year increases. Stakeholders found consensus and recommended changing the targets to appropriately aggressive and yet achievable targets. Stakeholders recommended continued professional development and technical assistance on the Outcomes data, and specially targeted training so staff members understand what Indicator 7C (appropriate behavior to meet their needs) is measuring.

All documentation provided to stakeholders was organized via Microsoft Office Suite. The stakeholder group communicated with e-mails, Microsoft Teams Channel – Strong Start Indicator Workgroup. The channel houses chats, files, meeting minutes, and recordings.

Information Specific to Indicator 7
• The measurement for Indicator 7 has not changed, and the SS Stakeholder Workgroup recommended maintaining the baselines at the FFY 2013 level
• The SS Stakeholder Workgroup recommended that the baselines and targets be reexamined and possibly reset after the new statewide data collection system is launched; this data collection is expected to improve the quality of the data collection
• The SS Stakeholder Workgroup acknowledged that year-to-year, the data reflect assessments of different children, which makes year-to-year results difficult to compare
• The SS Stakeholder Workgroup recommended setting the FFY 2020 targets to align with the FFY 2020 actual data, and then hold those targets unchanged for FFY 2021 to adjust for potential pandemic impacts, with gradual increases from FFY 2022 through FFY 2025
• The baselines and targets recommended by the SS Stakeholder Workgroup were proposed for input in the public survey
• Following the review of all input, the NDE selected the baselines and targets recommended by the SS Stakeholder Workgroup, and supported by the public survey

**FFY 2020 SPP/APR Data**

**Number of preschool children aged 3 through 5 with IEPs assessed**

2,841

**Outcome A: Positive social-emotional skills (including social relationships)**

| **Outcome A Progress Category** | **Number of children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 43 | 1.51% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 728 | 25.62% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 861 | 30.31% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 832 | 29.29% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 377 | 13.27% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 1,693 | 2,464 | 71.93% | 68.71% | 68.71% | N/A | N/A |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,209 | 2,841 | 44.27% | 42.56% | 42.56% | Met target | No Slippage |

**Outcome B: Acquisition and use of knowledge and skills (including early language/communication)**

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 45 | 1.58% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 682 | 24.01% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 824 | 29.00% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 934 | 32.88% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 356 | 12.53% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 1,758 | 2,485 | 72.89% | 70.74% | 70.74% | Met target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,290 | 2,841 | 44.68% | 45.41% | 45.41% | Met target | No Slippage |

**Outcome C: Use of appropriate behaviors to meet their needs**

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 49 | 1.72% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 696 | 24.50% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 911 | 32.07% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 853 | 30.02% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 332 | 11.69% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.*Calculation:(c+d)/(a+b+c+d)*  | 1,764 | 2,509 | 72.37% | 70.31% | 70.31% | Met target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,185 | 2,841 | 42.91% | 41.71% | 41.71% | Met target | No Slippage |

**Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)**

YES

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)**

YES

**List the instruments and procedures used to gather data for this indicator.**

The NDE has determined a specific list of state-approved assessments from which districts have the option to choose. These assessment options include: AEPS (Assessment, Evaluation, and Programming System); Brigance (IED - II); DAYC (Developmental Assessment of Young Children); and/or Developmental Continuum (Teaching Strategies-Creative Curriculum). Assessments are administered by licensed district service providers (e.g. early childhood special education teachers, speech language pathologists) within one month of entry into district services. Based on the assessment results, a score is established to determine the child’s comparability to same-age peers. To compute this score, Nevada has chosen to use the Child Outcomes Summary Form (COS) developed by the national Early Childhood Outcomes (ECO) Center. A COS score is established for each of three indicator outcome areas. For each of the three areas, a score of 6 or 7 on the COS represents functioning at a level comparable to same-age peers, while a score of 5 or less represents functioning at a level below same-age peers. Once the assessment is complete and the comparability scores are determined based on the COS, data are entered into an established excel spreadsheet with parameters in place to help prevent the entry of misinformation (e.g., a code exists to flag a birth date that is entered which makes the child under age 3 or over age 5). Each district compiles into one database the data for all children served, and submits this information to the NDE through secured internet submission.

**Provide additional information about this indicator (optional)**

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

(20 U.S.C. 1416(a)(3)(A))

**Data Source**

State selected data source.

**Measurement**

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

**Instructions**

*Sampling****of parents from whom response is requested****is allowed.* *When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)*

Describe the results of the calculations and compare the results to the target.

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

Include in the State’s analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023,** when reporting the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services, States must include race/ethnicity in their analysis. In addition, the State’s analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

## 8 - Indicator Data

| **Question** | **Yes / No**  |
| --- | --- |
| Do you use a separate data collection methodology for preschool children?  | NO |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 8
CONTINUOUS GROWTH (CG) STAKEHOLDER WORKGROUP

Number of Stakeholders: 13
Parents: 3
Local Education Agencies: 6
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Continuous Growth (CG) Stakeholder Workgroup was formed to address Indicators 3, 5, and 8. Thirteen (13) stakeholders were selected to participate in the CG Stakeholder Workgroup. There was a combination of representatives in each of three categories of stakeholders (parents, LEAs, and the SEA (NDE)), and the representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, a Doodle Poll was sent to workgroup members to determine three (3) mutually agreeable meeting dates/times in September 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in October laid the foundation for the work ahead and focused on Indicator 8. Following the meeting, the Part B Data Manager and Workgroup Lead created a Microsoft Teams Channel and granted access to all stakeholders. The Part B Data Manager and Workgroup lead provided the stakeholder group with additional information and resources surrounding Indicator 8 that was requested by the group. The Microsoft Teams Channel was utilized throughout the remainder of CG workgroup meetings to share supporting resources for Indicators 3 and 5. The second meeting in October kicked off with a follow-up discussion surrounding Indicator 8 before finalizing the group’s recommendations. Next the stakeholder group proceeded to review data, engage in robust conversation, and lay out several recommendations for measurement of Indicator 5. Finally, the third meeting in November focused on Indicator 3, where the CG workgroup was able to suggest multiple recommendations for measures 3A, 3B, 3C, and 3D.

Information Specific to Indicator 8
• The measurement for Indicator 8 has not changed; new OSEP requests for comparisons of response rate and analyses of representativeness have historically been provided by Nevada in its SPP/APR submissions; new OSEP requests for analyses of potential nonresponse bias has not been previously provided
• The NDE surveys the parents of all students with disabilities for each LEA in years when they are selected for monitoring (except Clark and Washoe from whom a sample of parents are surveyed each year)
• The NDE presented the CG Stakeholder Workgroup with historical targets and actual data from FFY 2009 forward, including recent data analyses addressing representativeness
• The CG Stakeholder Workgroup also recommended improvement strategies related to increasing response rates, and suggested examining what other states are doing, as well as examining whether response rates differ when the survey is accessed in hard copy vs. electronically
• The CG Stakeholder Workgroup also recommended that the survey itself be reevaluated to determine whether revisions might increase response rates
• The CG Stakeholder Workgroup recommended setting the baseline at the FFY 2019 level, since those data were collected pre-COVID-19
• The CG Stakeholder Workgroup recommended setting the first three targets at 78%, and the last three targets at 79%

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 75.31% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 78.00% | 78.00% | 78.00% | 78.00% | 78.00% |
| Data | 72.83% | 77.19% | 74.67% | 71.51% | 75.31% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 78.00% | 78.00% | 78.00% | 79.00% | 79.00% | 79.00% |

**FFY 2020 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,329 | 1,830 | 75.31% | 78.00% | 72.62% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

In FFY 2020, 72.62% of Nevada parents responded in agreement to survey question #25 (the proxy survey question for Indicator 8), down from 75.31% the prior year. Because parents in different LEAs are surveyed each year (except for Clark and Washoe from whom a sample of parents is surveyed each year), slight progress or slippage from one year to the next is not considered significant. Although there are year-to-year fluctuations, for the past several years, Nevada's data has remained stable between 70-77%.

**Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.**

The data are collected for children with disabilities in preschool in the same way as the data are collected for school-age children with disabilities. The parents of all students with disabilities for each LEA (except Clark County School District and Washoe County School District) are surveyed in the year that the LEA is selected for on-site monitoring, including the parents of all children with disabilities ages three through five. For Clark and Washoe school districts, the samples are created to be representative of the age, ethnicity, and disability category for the entire population of students with disabilities in those districts, including children with disabilities in preschools. There are no threats to validity or reliability for the preschool surveys that are any different than for the school-age surveys.

**The number of parents to whom the surveys were distributed.**

14,996

**Percentage of respondent parents**

12.20%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 10.48% | 12.20% |

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

The NDE has and will continue to work with Piedra Data to analyze the FFY 2020 data to identify specific strategies to increase overall response rates and to oversample to increase the responses from race/ethnicity groups that are under-represented in the response group, particularly the Hispanic/Latino and Black/African American groups.

The work the NDE has been doing has produced results with regard to overall response rates. Nevada's response rate has increased steadily over the last three years. In FFY 2018, the response rate was 8.88%. In FFY 2019, the response rate was 10.48%. In FFY 2020, the response rate was 12.20%.

**Describe the analysis** **of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.**

SURVEY SAMPLE RESPONSE RATE
During FFY 2020, parent surveys were disseminated to all students with disabilities in four LEAs scheduled for a comprehensive monitoring visit (Lyon, Pershing, SPCSA and Storey). A sample was selected for parent survey in Clark County School District because that school district was also scheduled for a comprehensive monitoring visit. In addition, a sample was selected for parent survey in Washoe County School District because that district has an average daily membership (ADM) of more than 50,000 students.

Surveys were successfully sent to 14,996 parents, and a total of 1,830 responses were received for a 12.2% response rate (1830/14996 = 12.2%), an increase from the 10.48% response rate in FFY 2019. This response rate exceeds the minimum number required for an adequate confidence level based on established survey sample guidelines (e.g., http://www.surveysystem.com/sscalc.htm).

For the first time, the NDE has examined its Indicator 8 survey report from Piedra Data to create some hypotheses regarding potential nonresponse bias. These insights will be used in planning with Piedra Data in the spring of 2022 to design some specific analyses to include in future reports. For example, in the FFY 2020 responses, it appears that the parents of Black/African American students were 25% less likely than the parents of White students to agree with Question #25. This suggests that when White students are relatively overrepresented (e.g., by 11 percentage points when compared to child count data) in comparison to Black/African American students who are relatively underrepresented (e.g., by 6 percentage points), the overall % of parents who agree with Question #25 may be affected by nonresponse bias. In other words, the overall calculation of parent agreement with Question #25 may be more positive than it would have been if fewer parents of students who are White responded, and if more parents of students who are Black/African American responded. In contrast, although the parents of students who are Hispanic/Latino were significantly underrepresented (by 8 percentage points when compared to child count data), those who did respond responded slightly more positively than the parents of students who are White, and about 25% more positively than parents of students who are Black/African American. In other words, it is possible that the underrepresentation of parents whose children are Hispanic/Latino may have skewed the overall results in a negative direction.

The NDE conducted a similar analysis looking at the responses of parents whose children are in different disability categories. For example, although the "n" was very small, the parents of students with hearing impairments represented about 14% of the survey respondents (but only 1% of the child count), while the parents of students with other health impairments represented about 2% of the survey respondents (but 10% of the child count). Comparing the two groups, it appears that parents of students with hearing impairments are overrepresented, and parents of students with other health impairments are underrepresented. In Nevada, parents of students with other health impairments, as compared to students with hearing impairments, may be less likely to have the support of and be well-connected to parent, school and community support organizations. One hypothesis related to nonresponse bias is that the parents of students with more significant disabilities (e.g., hearing impairments) might be more engaged with their student's school and staff, and for that reason might be more likely to take the time to respond to a parent survey (especially one as long as Nevada's). We note that for both of these groups, they expressed almost the same level of agreement with Question 25. However, if the parents of students with other health impairments, who represent 10% of Nevada's students with disabilities, are only responding at a rate of 2%, then their degree of agreement is not adequately represented in the survey responses as a whole, and this fact would affect the overall statewide percentage. The analysis suggests the possible need to create outreach strategies specifically designed to encourage survey responses from the parents of students who may not be as engaged as others in the special education programs in their children's schools.

All of these data point to the need to work more diligently to ensure representativeness in responses from parents whose children are underrepresented in the data, both by race/ethnic category and disability category.

In addition, the NDE will work with Piedra Data so that in the future we can examine the "late responder" data (i.e., those who responded after the third prompt) as compared to the data from parents who promptly responded to the survey. If "late responders" may be a proxy for all of the parents who do not respond, then comparing prompt and late responders to see whether there are differences in the extent to which they agree with Question 25 will be useful. If late responders are relatively less likely to agree with Question 25, and if late responders are a valid proxy for those who never respond, then there will be implications for the validity and reliability of the survey responses as a measure of Indicator 8.

**Include in the State’s analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.**

REPRESENTATIVENESS OF SURVEY RESULTS -- HOW THE DATA REPRESENTS DEMOGRAPHICS OF THE STATE
In order to examine the representativeness of the respondents in the FFY 2020 parent survey, student-level data regarding grade level, disability category, and race/ethnicity category are collected for each survey response. Then, the grade level, disability category, and race/ethnicity category data for survey responses are compared to the grade level, disability category, and race/ethnicity category data in the October 1, 2020, child count of students ages 3-21 in the surveyed districts.

REPRESENTATIVENESS BY DISABILITY CATEGORY
The National Post-School Outcomes Center (NPSO) has stated that when representativeness is outside the +/- 3% range, the lack of representativeness is important. When comparing the representativeness within disability categories, Nevada's survey respondents in most categories are within the NPSO acceptable range. See the following data:

-- 3% students with intellectual disabilities in the child count, compared to 3% in survey respondents
-- 13% students with speech/language impairments in the child count, compared to 16% in survey respondents
-- 3% students with emotional disturbance in child count, compared to 2% in survey respondents
-- 8% students with developmental delay in child count, compared to 6% in survey respondents
-- 15% students with autism in child count, compared to 17% in survey respondents

36% of the responding parents were parents of children with learning disabilities, compared to 42% in child count. This represents a 6-point gap and a decrease from the 7-point gap reported in FFY 2019.

REPRESENTATIVENESS BY RACE/ETHNICITY CATEGORY
Analysis of the race/ethnicity representativeness showed a very close representativeness (within the +/- 3% range) in categories for American Indian/Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, and Two or More Races. In the other three categories, the analysis showed larger gaps in representativeness.
-- 43% students in Hispanic/Latino category in child count, compared to 35% in survey respondents (8-point gap, up from a 5-point gap in FFY 2019)
-- 16% students in Black/African American category in child count, compared to 10% in survey respondents (6-point gap, down from a 11-point gap in FFY 2019)
-- 29% students in White category in child count, compared to 40% in survey (11-point gap, down from a 16-point gap in FFY 2019)

REPRESENTATIVENESS BY GRADE LEVEL
Analysis of the grade category representativeness showed a close representativeness between PreK groups in the child count (6%) and respondents in the survey (5%), suggesting that preschool parent survey data are representative of the PreK population in these school districts.

**The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)**

NO

**If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

The NDE has and will continue to work with Piedra Data to analyze the FFY 2020 data to identify specific strategies increase response rates and to oversample to increase the responses from race/ethnicity groups that are under-represented in the response group, particularly the Hispanic/Latino and Black/African American groups.

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).**

Nevada compares the proportion of survey responders to the target group (child count data), and if the discrepancy is outside the +/-3% range then the responders are not representative of the target group.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | YES |
| If yes, has your previously approved sampling plan changed? | NO |

**Describe the sampling methodology outlining how the design will yield valid and reliable estimates.**

Nevada’s sampling plan was approved in the submission of the original SPP in December 2005, and it has not changed. In each SPP/APR submitted since December 2005, Nevada has incorporated its sampling plan directly into the SPP/APR document, and it appears below:

INDICATOR 8 SAMPLING PLAN

Population Represented
Parents of students with disabilities in Washoe and Clark County School Districts will be sampled to represent the entire population of students with disabilities in those two school districts (i.e., the Washoe sample will represent the entire population of students with disabilities in the Washoe County School District).

Ensuring a Representative Sample
Because the NDE will sample from within each of the two largest school districts (Washoe and Clark) in each year, the sample will be representative of the population it is trying to represent (i.e., parents of students with disabilities in those districts).

Sampling Methods
The sample will be stratified to represent not only each district's population in terms of disability category, but also race/ethnicity and grade group. Because parents will be selected based upon the characteristics of their children (disability category, grade group, and race/ethnicity), the sample is expected to be the same as the population of students with disabilities in the district.

Specific Sampling Procedures
The NDE will use stratified sampling to ensure that a sample representative of the parents of all students with disabilities in the district is surveyed. Stratified sampling is a commonly used probability method that is superior to random sampling, particularly when a subset of the population has low incidence relative to other segments of the population. This method will be useful when sampling among low-incidence disability categories, such as students with vision and hearing impairments. Assistance in assuring a high quality stratified sample will be provided by Piedra Data, a NCSEAM-recommended vendor.

Method/Process for Data Collection
The NCSEAM survey will be used to collect data on the percent of parents who report that their children's schools facilitated parent involvement as a means of improving services and results for students with disabilities. The survey will be mailed to families and an Internet version will also be made available to parents who choose to complete the survey online.

Addressing Problems
Acknowledging that low survey response rates pose problems when drawing inferences about the population as a whole, the NDE will take the following steps to ensure that valid and reliable information is obtained: First, the NDE will work with Piedra Data and Scantron, Inc. to identify the number of responses that are necessary to reasonably draw inferences about the population. In order to ensure sufficient responses, the NDE will over-sample, and then weight responses as necessary.

Assuming that the NCSEAM survey addresses the common flaws in survey question design (unclear questions, providing a postage stamp on the return envelope, etc.), the NDE will work with Nevada PEP (the state's federally funded Parent Training and Information Center) to develop correspondence and other media communications encouraging parents to respond to the survey, and advising parents to seek assistance from Nevada PEP if they are unclear about any aspect of the survey. Incomplete surveys will be followed up with additional mailings.

A Spanish version of the survey will be used as an option for parents, and more than one method (paper and pencil as well as internet) will be available for parent response. Because sampling will only occur in the two largest school districts (Clark and Washoe), no violations of confidentiality are anticipated.

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | NO |
| If yes, provide a copy of the survey. |  |

**Provide additional information about this indicator (optional)**

## 8 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

**Response to actions required in FFY 2019 SPP/APR**

## 8 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 8 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

**Compliance indicator**: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

**Data Source**

State’s analysis, based on State’s Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

**Measurement**

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n and/or cell size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.**

1

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 0 | 0 | 17 | 0.00% | 0% | 0.00% | N/A | N/A |

**Were all races and ethnicities included in the review?**

YES

**Define “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).**

Nevada defines disproportionate representation of racial and ethnic groups (i.e., Hispanic/Latino, American Indian/Alaska Native, Asian, Black/African American, Native Hawaiian/Other Pacific Islander, White, and Two or More Races) in special education and related services by using the following criteria: (1) weighted risk ratio; (2) with the risk-ratio threshold set at equal to or greater than 3.0; (3) for three consecutive years; (4) with a minimum cell size of 25 (risk numerator).

In FFY2020, one district was totally excluded from the calculation because the district did not meet the minimum cell size for any racial/ethnic group.

**Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.**

In FFY2020, Nevada did not identify any disproportionate representation of racial/ethnic groups in special education and related services.

**Provide additional information about this indicator (optional)**

Although OSEP sets the target for Indicator 9 at 0%, the NDE sought stakeholder input to examine historical data, review methodology, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 9
EQUITY STAKEHOLDER WORKGROUP

Number of Stakeholders: 11
Parents: 4
Local Education Agencies: 3
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Equity Stakeholder Workgroup was formed to address Indicators 4, 9, and 10. Eleven (11) stakeholders were selected to participate in the Equity Stakeholder Workgroup. There were multiple representatives in each of the four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), with the southern, northern, and rural geographic regions of Nevada all being represented and recruited. Potential stakeholders were recruited directly by email and by phone calls. Additionally, potential stakeholders were asked to participate in this workgroup during various NDE internal and external meetings. These meetings include a statewide Multitiered Systems of Support meeting on April 26, 2021, consisting of participants from NDE, statewide agencies and school districts (LEAs) across the state, and a school-based Restorative Practices workgroup on June 28, 2021, including representatives from NDE, state agencies and LEA representatives across the state. During every recruitment invitation, all potential representatives were encouraged to reach out to any other parents, LEA, NDE, state agency representatives or anybody else that would be interested in becoming a stakeholder in the Equity Workgroup. All invitees were encouraged to make it known that all stakeholders interested in participating in the Equity Stakeholder Workgroup would be welcome.

Next, a Doodle Poll was sent to workgroup members to determine a mutually agreeable meeting date/time in August of 2021. Approximately one week prior to the meeting, an email including materials (agenda and various historical indicator data) to review prior to the meeting was sent to workgroup members. Upon completion of the meeting, all stakeholders upon request were sent a copy of the PowerPoint presentation.

The meeting in August focused on indicators 4A, 4B, 9 and 10. During this meeting, all stakeholders were provided an in-depth walkthrough of the methodology used in previous SPP/APR submissions to calculate actual data for Indicators 4A, 4B, 9 and 10. Once this information was presented, the Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%. It was then explained that 4B is a compliance indicator that will remain at the 0% target set by OSEP. The Equity Stakeholder Workgroup then discussed the fact that Indicators 9 and 10 are also compliance indicators that will remain set at the 0% target set by OSEP. Once the indicator walkthroughs, calculations, and target goals were set, the members of the Equity Stakeholder Workgroup voiced an interest in continuing to meet to discuss the implementation strategies for these indicators. In order to accommodate this request, a Doodle poll will be sent out in early February 2022 to schedule the continuation of the Equity Stakeholder Workgroup meetings.

Information Specific to Indicator 9
• The measurement requirements for Indicator 9 were changed to include students age 5 who were in kindergarten
• Because the measurement requirements for Indicator 9 were changed, Nevada changed its baseline year to FFY 2020
• Nevada defines disproportionate representation of racial and ethnic groups (7 categories) in special education and related services by using the following criteria: (1) weighted risk ratio; (2) with the risk-ratio threshold set at equal to or greater than 3.0; (3) for three consecutive years; (4) with a minimum cell size of 25 (risk numerator)
• Indicator 9 is a calculation of the total number of students with disabilities by race/ethnic group
• The NDE presented the Equity Stakeholder Workgroup with historical targets and actual data from FFY 2014 forward
• Because this is a compliance indicator, OSEP sets the target at 0%

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
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## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

**Compliance indicator**: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

 (20 U.S.C. 1416(a)(3)(C))

**Data Source**

State’s analysis, based on State’s Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

**Measurement**

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for FFY 2020, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n and/or cell size requirement? (yes/no)**

YES

**If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.**

4

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 0 | 0 | 14 | 0.00% | 0% | 0.00% | N/A | N/A |

**Were all races and ethnicities included in the review?**

YES

**Define “disproportionate representation.” Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).**

Nevada defines disproportionate representation of racial and ethnic groups (i.e., Hispanic/Latino, American Indian/Alaska Native, Asian, Black/African American, Native Hawaiian/Other Pacific Islander, White, and Two or More Races) in special education and related services by using the following criteria: (1) weighted risk ratio; (2) with the risk-ratio threshold set at equal to or greater than 3.0; (3) for three consecutive years; (4) with a minimum cell size of 25 (risk numerator).

In FFY2020, four districts were totally excluded from the calculation because the districts did not meet the minimum cell size for any racial/ethnic group.

**Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.**

In FFY2020, Nevada did not identify any disproportionate representation of racial/ethnic groups in specific disability categories.

**Provide additional information about this indicator (optional)**

Although OSEP sets the target for Indicator 10 at 0%, the NDE sought stakeholder input to examine historical data, review methodology, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 10
EQUITY STAKEHOLDER WORKGROUP

Number of Stakeholders: 11
Parents: 4
Local Education Agencies: 3
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Equity Stakeholder Workgroup was formed to address Indicators 4, 9, and 10. Eleven (11) stakeholders were selected to participate in the Equity Stakeholder Workgroup. There were multiple representatives in each of the four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), with the southern, northern, and rural geographic regions of Nevada all being represented and recruited. Potential stakeholders were recruited directly by email and by phone calls. Additionally, potential stakeholders were asked to participate in this workgroup during various NDE internal and external meetings. These meetings include a statewide Multitiered Systems of Support meeting on April 26, 2021, consisting of participants from NDE, statewide agencies and school districts (LEAs) across the state, and a school-based Restorative Practices workgroup on June 28, 2021, including representatives from NDE, state agencies and LEA representatives across the state. During every recruitment invitation, all potential representatives were encouraged to reach out to any other parents, LEA, NDE, state agency representatives or anybody else that would be interested in becoming a stakeholder in the Equity Workgroup. All invitees were encouraged to make it known that all stakeholders interested in participating in the Equity Stakeholder Workgroup would be welcome.

Next, a Doodle Poll was sent to workgroup members to determine a mutually agreeable meeting date/time in August of 2021. Approximately one week prior to the meeting, an email including materials (agenda and various historical indicator data) to review prior to the meeting was sent to workgroup members. Upon completion of the meeting, all stakeholders upon request were sent a copy of the PowerPoint presentation.

The meeting in August focused on indicators 4A, 4B, 9 and 10. During this meeting, all stakeholders were provided an in-depth walkthrough of the methodology used in previous SPP/APR submissions to calculate actual data for Indicators 4A, 4B, 9 and 10. Once this information was presented, the Equity Stakeholder Workgroup recommended continuing to keep the targets for Indicator 4A at 0%. It was then explained that 4B is a compliance indicator that will remain at the 0% target set by OSEP. The Equity Stakeholder Workgroup then discussed the fact that Indicators 9 and 10 are also compliance indicators that will remain set at the 0% target set by OSEP. Once the indicator walkthroughs, calculations, and target goals were set, the members of the Equity Stakeholder Workgroup voiced an interest in continuing to meet to discuss the implementation strategies for these indicators. In order to accommodate this request, a Doodle poll will be sent out in early February 2022 to schedule the continuation of the Equity Stakeholder Workgroup meetings.

Information Specific to Indicator 10
• The measurement requirements for Indicator 10 were changed to include students age 5 who were in kindergarten
• Because the measurement requirements for Indicator 10 were changed, Nevada changed its baseline year to FFY 2020
• Nevada defines disproportionate representation of racial and ethnic groups (7 categories) in special education and related services by using the following criteria: (1) weighted risk ratio; (2) with the risk-ratio threshold set at equal to or greater than 3.0; (3) for three consecutive years; (4) with a minimum cell size of 25 (risk numerator)
• Indicator 10 is a calculation of the number of students with disabilities by race/ethnic group, in six separate disability categories
• The NDE presented the Equity Stakeholder Workgroup with historical targets and actual data from FFY 2014 forward
• Because this is a compliance indicator, OSEP sets the target at 0%

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Child Find

**Compliance indicator**: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

(20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State’s timeline for initial evaluations.

**Measurement**

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Percent = [(b) divided by (a)] times 100.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child’s previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 76.40% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 96.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 116 | 112 | 100.00% | 100% | 96.55% | Did not meet target | Slippage |

**Provide reasons for slippage**

During 2020-2021, there were four records reviewed (three from Clark County School District, and one from the State Public Charter School Authority) where the parental consent for the evaluation documentation could not be located by the LEA. Therefore, the NDE could not establish with certainty whether the students' initial evaluations occurred within the timeframe required by state law at NAC 388.337. Because it is possible that these evaluations did occur within the timeline required by state law, it is unclear whether the FFY 2020 data actually represents slippage or not.

**Number of children included in (a) but not included in (b)**

4

**Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.**

During 2020-2021, there were four records reviewed (three from Clark County School District, and one from the State Public Charter School Authority) where the parental consent for the evaluation documentation could not be located by the LEA. Therefore, the NDE could not establish with certainty whether the students' initial evaluations occurred within the timeframe required by state law at NAC 388.337, or were delayed. As a result, it is not possible to calculate the range of days beyond the timeline when the evaluation was completed (because the date on the parental consent begins the timeline). Similarly, the LEAs did not offer a reasons for any "delays" since it could not be established that delays actually occurred.

Monitoring during 2020-2021 could not be accomplished on-site because of Nevada’s COVID restrictions. This factor presented a challenge when the files being monitored were submitted to the NDE electronically. Whenever a required document, e.g., consent for the initial evaluation, was not provided in the electronic file submission by an LEA, the NDE made a list of any such documents and provided the list to the LEA so that a search could be conducted to retrieve the documents. Further complicating the issue is that the timeframe within which the LEAs were conducting these initial evaluations was also when COVID restrictions were in place, so in-person meetings with parents were restricted. As a result, the exchange of documents between parents and LEAs was also being accomplished by electronic means, which can also present complications. Even though the CCSD and SPCSA were given specific information so that they could search for and retrieve the documents, they were unable to produce them. The NDE notes that a failure to have a copy of a consent for initial evaluation has not been the cause of a finding in Clark County School District or the SPCSA in previous monitoring cycles, so the 4 missing documents did not raise a concern about a potential systemic failure.

In each of the 4 files in question that were reviewed by the NDE, prior written notices were provided for the proposed evaluation, a report of the results of the evaluation was completed, an eligibility determination was made, and an IEP was developed within 30 calendar days of the eligibility decision, with 100% compliance.

**Indicate the evaluation timeline used:**

The State established a timeline within which the evaluation must be conducted

**What is the State’s timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).**

Nevada's initial evaluation timeline is established in state regulation at NAC 388.337, as follows:

NAC 388.337 Deadlines for conducting initial evaluations; request for extension; exception.
 1. Except as otherwise provided by subsections 2 and 3, when a public agency determines that good cause exists to evaluate a pupil pursuant to NAC 388.330 to 388.440, inclusive, it shall conduct the initial evaluation within:
 (a) Forty-five school days after the parent provides informed written consent;
 (b) Forty-five school days after receipt of the decision of a hearing officer pursuant to NAC 388.310 ordering the evaluation or the time set forth in the decision, whichever is shorter; or
 (c) At any other time agreed upon in writing by the parent and the public agency.

 2. Upon the request of a public agency, the Superintendent may extend the deadline for conducting initial evaluations for not more than 15 school days.

 3. The deadline for conducting an initial evaluation does not apply to a public agency if:
 (a) A pupil enrolls in a school served by the public agency after the 45 school day timeframe has begun and before a determination by the pupil’s previous public agency as to whether the pupil is a pupil with a disability, but only if the succeeding public agency is making sufficient progress to ensure a prompt completion of the evaluation and the parent and subsequent public agency agree to a specific time when the evaluation will be completed; or
 (b) The parent of the pupil repeatedly fails or refuses to deliver the pupil for the evaluation.

The "exceptions" provided in NAC 388.337 pertain to situations where a pupil begins an evaluation in one public agency and transfers to another, and to instances "the parent of the pupil repeatedly fails or refuses to deliver the pupil for the evaluation." During 2020-2021, no cases fell within these exceptions.

**What is the source of the data provided for this indicator?**

State monitoring

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

These data are collected as part of annual state monitoring. See "Monitoring" subsection in "General Supervision" section in INTRODUCTION. Each year, each record reviewed is monitored to determine whether the student's initial evaluation was conducted within 45 school days of the date that the student's parent signed the consent for the student's initial evaluation. Follow-up inquiries are made as needed to clarify any questions that arise during monitoring.

In FFY 2020, data were collected from five LEAs that were monitored: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority.

**Provide additional information about this indicator (optional)**

Although OSEP sets the target for Indicator 11 at 100%, the NDE sought stakeholder input to examine historical data, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 11
STRONG START (SS) STAKEHOLDER WORKGROUP

Number of Stakeholders: 17
Parents: 6
Local Education Agencies: 6
Former State 619 Coordinator/Community Representative: 1
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Strong Start (SS) Stakeholder Work Group was established for stakeholders to provide input regarding Indicators 6, 7, 11, and 12. Seventeen (17) stakeholders were selected to participate in the SS Stakeholder Workgroup. Stakeholders included advocates, parents, local education agencies (LEA) special education administrators, and Nevada Department of Education (SEA) staff. Parent members were from local and statewide advocacy and advisory committees, individual parents, and parents of students with disabilities. Special education administrators represented north, south, and rural areas. Three members of the NDE staff participated. One member of the group was the State’s former State 619 Coordinator.

The workgroup met virtually via the Microsoft Teams platform on three separate occasions for 90 minutes each. Stakeholders participated in a Doodle Poll in order to identify what day and times they were available for meetings.

The first meeting was held virtually on November 1, 2021. In order to assist stakeholders in understanding the task, an agenda was provided and additional documents were distributed, including Interim Guidance SB102, Part B Indicators, and an Indicator 6 PowerPoint. This meeting was recorded. All meeting documents and the recording of the meeting is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 1.

During the first meeting, we established the foundation for the work ahead. Stakeholders were given background information on the SPP/APR and OSEP requirements for each indicator. We identified the purpose of target setting and methods for setting targets. After a thorough review of trend data and open discussion and questions regarding the data, the group recommended using FFY 2019 (2019-2020) as baseline data for Indicator 6 because the October 1, 2019, data were collected pre-pandemic. However, since the measurement for Indicator 6 had changed since FFY 2019, the NDE later determined it was appropriate to use FFY 2020 data as baseline data.

The second meeting occurred virtually on November 3, 2021. Stakeholders were given the agenda as well as Indicator 6 Target Options, and the SS Workgroup PowerPoint for meeting 2. The workgroup was given Indicator 6 Target Options at their request. The workgroup felt it could be more productive to have a copy of the historical data in graph form including data details to then compare various target options. The workgroup also stated that in order to understand and identify targets for Indicator 6C, the number of students included in this placement category rather than the percentage was more helpful, and these data were provided. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 2.

During the second meeting, stakeholders recommended setting targets to reflect an increase in inclusion while self-contained rates decrease. Stakeholders asked 6C data be quantified, by providing student counts in addition to percentages. These data were distributed prior to the third meeting.

The third meeting occurred virtually on November 15, 2021. Once again stakeholders received an agenda, Indicator 7 options, a target setting infographic slide, and an Outcomes infographic. These documents were distributed to help stakeholders understand Indicator 7 data, i.e., what data is collected and how two summary statements for each data collection category are calculated. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 3.

The stakeholders recommended Indicator 7 targets that realistically increase over time. Stakeholders identified concerns regarding keeping baseline data at the FFY 2013 level, because historically we have not met targets and continue to have slippage. Starting targets at current year data and ending above baseline require significant year-over-year increases. Stakeholders found consensus and recommended changing the targets to appropriately aggressive and yet achievable targets. Stakeholders recommended continued professional development and technical assistance on the Outcomes data, and specially targeted training so staff members understand what Indicator 7C (appropriate behavior to meet their needs) is measuring.

All documentation provided to stakeholders was organized via Microsoft Office Suite. The stakeholder group communicated with e-mails, Microsoft Teams Channel – Strong Start Indicator Workgroup. The channel houses chats, files, meeting minutes, and recordings.

Information Specific to Indicator 11
• The measurement for Indicator 11 has not changed
• Because this is a compliance indicator, OSEP sets the target at 100%
• Indicator 11 data are collected from LEAs that are selected each year to be included in the NDE’s monitoring cycle
• The NDE presented the SS Stakeholder Workgroup with historical targets and actual data from FFY 2009 forward
• The SS Stakeholder Workgroup recommended that the baseline remain at the FFY 2005 level
• The SS Stakeholder Workgroup recommended to improve procedures and protocols for identifying students with disabilities. The stakeholder group noted they are concerned with a stigma surrounding identifying students with disabilities
• The SS Stakeholder Workgroup also recommended enhanced training for office staff, hospitals, and schools, and expanded dissemination of Child Find brochures to increase community outreach
• The baseline recommended by the SS Stakeholder Workgroup was proposed for input in the public survey
• Following the review of all input, the NDE selected the baseline recommended by the SS Stakeholder Workgroup and the 100% target set by OSEP

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

The State did not indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays for children who were not evaluated within 60 days (or the State established timeline) of receiving parental consent for the evaluation, as required by the Measurement Table. Specifically, the State reported "NDE could not establish with certainty whether the students' initial evaluations occurred within the timeframe required by state law at NAC 388.337, or were delayed. As a result, it is not possible to calculate the range of days beyond the timeline when the evaluation was completed (because the date on the parental consent begins the timeline). Similarly, the LEAs did not offer a reasons for any "delays" since it could not be established that delays actually occurred".

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: Effective General Supervision Part B / Effective Transition

**Compliance indicator**: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

(20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data to be taken from State monitoring or State data system.

**Measurement**

 a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.

 b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.

 c. # of those found eligible who have an IEP developed and implemented by their third birthdays.

 d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.

 e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.

 f. # of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child’s third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 83.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 97.84% | 100.00% | 100.00% | 99.23% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.  | 479 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 32 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 351 |
| d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.  | 78 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 4 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 351 | 365 | 99.23% | 100% | 96.16% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

During FFY 2020, 96.16% of children referred by Part C prior to age 3, who were found eligible for Part B, had an IEP developed and implemented by their third birthdays. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the compliance calculation was 100%. Because the calculation for this indicator is based on monitoring findings in a different set of LEAs in each year of a four-year cycle, the comparison to the compliance percentage in the previous year is not a comparison to the same LEAs. In this particular year, the "n" for students in the calculation was considerably higher than in recent years because Clark County School District was included in the calculation. Data for 446 children in Clark County School District were analyzed, and 14 students transitioning from Part C to Part B in Clark County School District did not have IEPs developed and implemented by their third birthdays.

**Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f**

14

**Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.**

There were 14 children in Clark County School District for whom the child's eligibility determination and IEP development and implementation was not completed by the child's third birthday. In one instance the child's birthday was incorrectly entered into the student-level data base. In 13 instances the delays were the result of staff scheduling difficulties. The number of days beyond the third birthday ranged from one day to 118 days. Of the 14 delays, 12 delays were between one and 39 days. One delay was 64 days; another delay was 118 days.

**Attach PDF table (optional)**

**What is the source of the data provided for this indicator?**

State monitoring

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

Nevada has a four-year monitoring cycle and each LEA is selected for monitoring in one of the four years. See "Monitoring" subsection in "General Supervision" section in INTRODUCTION. Each LEA selected for monitoring in a given school year submits data with necessary elements to complete the calculation required for Indicator 12. Follow-up inquiries are made as needed to clarify any questions that arise during data analysis.

In FFY 2020, data were collected from five LEAs that were monitored: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority.

**Provide additional information about this indicator (optional)**

Although OSEP sets the target for Indicator 12 at 100%, the NDE sought stakeholder input to examine historical data, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 12
STRONG START (SS) STAKEHOLDER WORKGROUP

Number of Stakeholders: 17
Parents: 6
Local Education Agencies: 6
Former State 619 Coordinator/Community Representative: 1
State Education Agency (NDE): 4

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The Strong Start (SS) Stakeholder Work Group was established for stakeholders to provide input regarding Indicators 6, 7, 11, and 12. Seventeen (17) stakeholders were selected to participate in the SS Stakeholder Workgroup. Stakeholders included advocates, parents, local education agencies (LEA) special education administrators, and Nevada Department of Education (SEA) staff. Parent members were from local and statewide advocacy and advisory committees, individual parents, and parents of students with disabilities. Special education administrators represented north, south, and rural areas. Three members of the NDE staff participated. One member of the group was the State’s former State 619 Coordinator.

The workgroup met virtually via the Microsoft Teams platform on three separate occasions for 90 minutes each. Stakeholders participated in a Doodle Poll in order to identify what day and times they were available for meetings.

The first meeting was held virtually on November 1, 2021. In order to assist stakeholders in understanding the task, an agenda was provided and additional documents were distributed, including Interim Guidance SB102, Part B Indicators, and an Indicator 6 PowerPoint. This meeting was recorded. All meeting documents and the recording of the meeting is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 1.

During the first meeting, we established the foundation for the work ahead. Stakeholders were given background information on the SPP/APR and OSEP requirements for each indicator. We identified the purpose of target setting and methods for setting targets. After a thorough review of trend data and open discussion and questions regarding the data, the group recommended using FFY 2019 (2019-2020) as baseline data for Indicator 6 because the October 1, 2019, data were collected pre-pandemic. However, since the measurement for Indicator 6 had changed since FFY 2019, the NDE later determined it was appropriate to use FFY 2020 data as baseline data.

The second meeting occurred virtually on November 3, 2021. Stakeholders were given the agenda as well as Indicator 6 Target Options, and the SS Workgroup PowerPoint for meeting 2. The workgroup was given Indicator 6 Target Options at their request. The workgroup felt it could be more productive to have a copy of the historical data in graph form including data details to then compare various target options. The workgroup also stated that in order to understand and identify targets for Indicator 6C, the number of students included in this placement category rather than the percentage was more helpful, and these data were provided. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 2.

During the second meeting, stakeholders recommended setting targets to reflect an increase in inclusion while self-contained rates decrease. Stakeholders asked 6C data be quantified, by providing student counts in addition to percentages. These data were distributed prior to the third meeting.

The third meeting occurred virtually on November 15, 2021. Once again stakeholders received an agenda, Indicator 7 options, a target setting infographic slide, and an Outcomes infographic. These documents were distributed to help stakeholders understand Indicator 7 data, i.e., what data is collected and how two summary statements for each data collection category are calculated. This meeting was also recorded. All meeting documents and the recording is housed in the Microsoft Teams Channel – Strong Start Indicator Workgroup, meeting 3.

The stakeholders recommended Indicator 7 targets that realistically increase over time. Stakeholders identified concerns regarding keeping baseline data at the FFY 2013 level, because historically we have not met targets and continue to have slippage. Starting targets at current year data and ending above baseline require significant year-over-year increases. Stakeholders found consensus and recommended changing the targets to appropriately aggressive and yet achievable targets. Stakeholders recommended continued professional development and technical assistance on the Outcomes data, and specially targeted training so staff members understand what Indicator 7C (appropriate behavior to meet their needs) is measuring.

All documentation provided to stakeholders was organized via Microsoft Office Suite. The stakeholder group communicated with e-mails, Microsoft Teams Channel – Strong Start Indicator Workgroup. The channel houses chats, files, meeting minutes, and recordings.

Information Specific to Indicator 12
• The measurement for Indicator 12 has not changed
• Because this is a compliance indicator, OSEP sets the target at 100%
• Indicator 12 data are collected from LEAs that are selected each year to be included in the NDE’s monitoring cycle
• The NDE presented the SS Stakeholder Workgroup with historical targets and actual data from FFY 2009 forward
• The SS Stakeholder Workgroup recommended that the baseline remain at the FFY 2005 level
• The SS Stakeholder Workgroup also recommended an improvement strategy that early intervention continues and recommends finding opportunities that increase collaboration and communication between Part C and Part B
• The baseline recommended by the SS Stakeholder Workgroup was proposed for input in the public survey
• Following the review of all input, the NDE selected the baseline recommended by the SS Stakeholder Workgroup and the 100% target set by OSEP

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 1 | 1 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

During FFY 2019, one noncompliance finding was issued to Washoe County School District for failure to have an IEP developed and implemented by the third birthday of one child who was referred by Part C prior to age 3.

To verify correction at the system level, Washoe County School District submitted subsequent data from FFY 2020 that included the birth dates and IEP dates for Part C transfer students who were eligible for Part B services. The NDE reviewed these subsequently submitted data to verify that the Part C transfer students who are eligible for Part B had an IEP developed and implemented by the child's third birthday, with 100% compliance, demonstrating that all regulatory requirements were in compliance.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

The one child in Washoe County School District whose IEP was not developed and implemented by the student's third birthday had his/her IEP developed and implemented 22 days after the child's third birthday. Consequently, within FFY 2019, the noncompliance for this student was already corrected and the student was receiving services in accordance with the student's IEP.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

## 12 - OSEP Response

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Compliance indicator**: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

 (20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data to be taken from State monitoring or State data system.

**Measurement**

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

**Instructions**

*If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.*

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 80.56% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 80.56% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 55 | 62 | 80.56% | 100% | 88.71% | Did not meet target | No Slippage |

**What is the source of the data provided for this indicator?**

State monitoring

**Describe the method used to collect these data, and if data are from the State’s monitoring, describe the procedures used to collect these data.**

These data are collected as part of annual state monitoring. See "Monitoring" subsection in "General Supervision" section in INTRODUCTION. Each year, each record selected for students with disabilities age 16 and older is monitored to determine whether each of the required secondary transition components is in place.

In FFY 2020, data were collected from five LEAs that were monitored: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority.

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16?  | YES |
| If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age? | NO |

**If no, please explain**

Nevada state regulations do require that students beginning at age 14 be invited to their IEP meetings and that "transition services: course of study" be described in the IEP developed when the student is age 14. The remaining compliance items addressed in Indicator 13 are not required beginning at age 14, so youth at an age younger than 16 are not included in the data for this indicator. These are not new requirements under state law; the failure to provide this information in earlier APR submissions has been an oversight. NDE has never included youth under 16 in the data for Indicator 13.

**Provide additional information about this indicator (optional)**

Although OSEP sets the target for Indicator 13 at 100%, the NDE sought stakeholder input to examine historical data, consider baseline data, and suggest improvement strategies.

STAKEHOLDER INPUT REGARDING INDICATOR 13
COLLEGE AND CAREER READY (CCR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 12
Parents: 3
Local Education Agencies: 3
State Agencies: 3
State Education Agency (NDE): 3

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The College and Career Ready (CCR) Stakeholder Workgroup was formed to address Indicators 1, 2, 13, and 14. Twelve (12) stakeholders were selected to participate in the CCR Stakeholder Workgroup. There were three representatives in each of four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), and the three representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, Doodle Polls were sent to workgroup members to determine mutually agreeable meeting dates/times in June, July, and August of 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in June laid the foundation for the work ahead and focused on Indicators 1 and 2. Following the meeting, the Part B Data Manager and Workgroup Lead turned the June meeting Indicators 1 and 2 conversation/consensus into 3 proposed targets for each from which the workgroup ultimately made recommendations. The second meeting in July focused on Indicator 13 and finalizing the recommendations for Indicators 1 and 2. The final meeting in August focused on Indicator 14, Measures A, B, and C, and reviewing the finalized baseline and target recommendations for Indicators 1, 2, and 13.

The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, and 14 were included in a survey developed by the Part B Data Manager and moved forward for public input in December of 2021. The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, 13, and 14 along with the public input from the survey were reviewed and considered by NDE OIE in addition to the FFY 2020 data that became available following the summer 2021 meetings to ultimately set Nevada’s baselines and six-year targets for Indicators 1, 2, 13, and 14.

Information Specific to Indicator 13
• Because this is a compliance indicator, OSEP sets the target at 100%
• In the FFY 2020 SPP/APR, the measurement of this indicator was revised slightly to state that there must be evidence that, if appropriate, representatives of any participating agency that is likely to be responsible for providing or paying for transition services “including, if appropriate, pre-employment transition services,” was invited to the IEP Team meeting
• Indicator 13 data are collected from LEAs that are selected each year to be included in the NDE’s monitoring cycle
• The monitoring protocol will be revised to add the additional language regarding, “if appropriate, pre-employment transition services”
• The NDE presented the CCR Stakeholder Workgroup with historical targets and actual data from FFY 2009 forward
• In July, the CCR Stakeholder Workgroup recommended that the baseline be set at FFY 2019
• The CCR Stakeholder Workgroup also recommended an improvement strategy that the NDE move forward with a regulation change to require that all secondary transition planning requirements be in effect when students are 14 years of age
• The CCR Stakeholder Workgroup also recommended an improvement strategy that the NDE design enhanced monitoring protocols through ACCESS NEVADA to allow for annual self-assessment by LEAs
• Following the review of all input, the NDE selected the baseline recommended by the CCR Stakeholder Workgroup and the 100% targets set by OSEP

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 4 | 4 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

**Describe how the State verified that the source of noncompliance is correctly implementing the *regulatory requirements***

During FFY 2019, five LEAs (Carson City School District, Douglas County School District, Mineral County School District, Nye County School District, and Washoe County School District) were selected for a comprehensive record review as part of Nevada's four-year monitoring cycle. Four (4) findings of noncompliance were identified for the failure to have in place all secondary transition requirements. Findings were issued for Carson City School District, Douglas County School District, Nye County School District, and Washoe County School District. To verify that the regulatory requirements are being correctly implemented, each of the four LEAs were required to submit subsequent data through annual IEPs that included secondary transition components, developed between October 1, 2020, and April 1, 2021. Each LEA submitted the required IEPs. The NDE reviewed this subsequently submitted data and verified that all secondary transition requirements were in place with 100% compliance, demonstrating that all regulatory requirements were in compliance.

In addition, during 2020-2021, the NDE provided extensive training directly to LEA staff concerning the requirements included in Indicator 13 and best practices in transition planning. Virtual training was provided in these districts: Clark, Esmeralda, Humboldt, Lincoln, Lyon, Nye, and Washoe. In Douglas and Carson City, training was provided by LEA staff who have expertise in secondary transition, using NDE developed materials. This extensive training facilitates the correct implementation of the regulatory requirements, and it was provided in each of the LEAs that had findings of noncompliance for Indicator 13 in FFY 2019.

**Describe how the State verified that each *individual case* of noncompliance was corrected**

In FFY 2019, 2 individual cases of noncompliance were found in Carson City School District, 1 individual case of noncompliance was found in Douglas County School District, 1 individual case of noncompliance was found in Nye County School District, and 3 individual cases of noncompliance were found in Washoe County School District. Each of the 4 LEAs was notified about the findings of noncompliance, and each was required to convene IEP meetings to correct the noncompliance identified in the individual cases. Each of the 4 LEAs was required to submit the corrected IEPs to the NDE so that the NDE could verify that each individual case of noncompliance was correct. Each LEA submitted the corrected IEPs. The NDE reviewed each corrected IEP to verify that all secondary transition requirements were in place with 100% compliace. The NDE advised the LEAs that the corrections had been verified and the required corrective actions were complete for the individual cases of noncompliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

## 13 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Results indicator:** Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

 A. Enrolled in higher education within one year of leaving high school.

 B. Enrolled in higher education or competitively employed within one year of leaving high school.

C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

(20 U.S.C. 1416(a)(3)(B))

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

**Instructions**

*Sampling****of youth who had IEPs and are no longer in secondary school****is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See General Instructions on page 2 for additional instructions on sampling.)*

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

*Enrolled in higher education* as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

*Competitive employment* as used in measures B and C: States have two options to report data under “competitive employment”:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

*Enrolled in other postsecondary education or training* as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

*Some other employment* as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

**II. *Data Reporting***

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of “leavers” who are:

 1. Enrolled in higher education within one year of leaving high school;

 2. Competitively employed within one year of leaving high school (but not enrolled in higher education);

3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);

4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

**III. *Reporting on the Measures/Indicators***

Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race/ethnicity, disability category, and geographic location in the State.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

**Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023,** when reporting the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, States must include race/ethnicity in its analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 27.00% | 28.00% | 28.00% | 28.00% | 28.00% |
| A | 22.46% | Data | 18.47% | 18.88% | 20.71% | 22.20% | 30.24% |
| B | 2020 | Target >= | 56.00% | 57.00% | 57.00% | 57.00% | 57.00% |
| B | 61.86% | Data | 54.73% | 61.29% | 57.32% | 57.84% | 66.05% |
| C | 2020 | Target >= | 72.00% | 73.00% | 73.00% | 73.00% | 73.00% |
| C | 71.19% | Data | 68.94% | 75.05% | 71.89% | 71.76% | 76.88% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 27.00% | 27.00% | 30.00% | 30.00% | 33.00% | 33.00% |
| Target B >= | 63.00% | 63.00% | 66.00% | 66.00% | 70.00% | 70.00% |
| Target C >= | 74.00% | 76.00% | 78.00% | 78.00% | 80.00% | 80.00% |

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 14
COLLEGE AND CAREER READY (CCR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 12
Parents: 3
Local Education Agencies: 3
State Agencies: 3
State Education Agency (NDE): 3

See INTRODUCTION section “Broad Stakeholder Input” for general information related to recruitment and selection of individuals to participate in stakeholder workgroups, and overall processes and procedures to solicit and document stakeholder input.

The College and Career Ready (CCR) Stakeholder Workgroup was formed to address Indicators 1, 2, 13, and 14. Twelve (12) stakeholders were selected to participate in the CCR Stakeholder Workgroup. There were three representatives in each of four categories of stakeholders (parents, LEAs, state agencies, and the SEA (NDE)), and the three representatives represented the southern, northern, and rural geographic regions of Nevada.

Next, Doodle Polls were sent to workgroup members to determine mutually agreeable meeting dates/times in June, July, and August of 2021. Approximately one week prior to each of the three meetings, an email including materials (agenda and indicator data) to review prior to the meeting was sent to workgroup members.

The first meeting in June laid the foundation for the work ahead and focused on Indicators 1 and 2. Following the meeting, the Part B Data Manager and Workgroup Lead turned the June meeting Indicators 1 and 2 conversation/consensus into 3 proposed targets for each from which the workgroup ultimately made recommendations. The second meeting in July focused on Indicator 13 and finalizing the recommendations for Indicators 1 and 2. The final meeting in August focused on Indicator 14, Measures A, B, and C, and reviewing the finalized baseline and target recommendations for Indicators 1, 2, and 13.

The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, and 14 were included in a survey developed by the Part B Data Manager and moved forward for public input in December of 2021. The recommendations of the CCR Stakeholder Workgroup for baseline and targets for Indicators 1, 2, 13, and 14 along with the public input from the survey were reviewed and considered by NDE OIE in addition to the FFY 2020 data that became available following the summer 2021 meetings to ultimately set Nevada’s baselines and six-year targets for Indicators 1, 2, 13, and 14.

Information Specific to Indicator 14
• The measurement for Indicator 14 has not changed; new OSEP requests for comparisons of response rate and analyses of representativeness have historically been provided by Nevada in its SPP/APR submissions; new OSEP requests for analysis of potential nonresponse bias has not been previously provided
• The NDE presented the CCR Stakeholder Workgroup with historical targets and actual data from FFY 2010 forward
• In August, the CCR Stakeholder Workgroup recommended that the baseline be set at the FFY 2018 actual data level (students who exited in school year 17-18, who were surveyed one year later in 18-19), since this was the last data reporting year before COVID-19 may have affected the post-secondary outcomes for youth with disabilities; subsequently the NDE received FFY 2020 actual data which were almost exactly the same as the FFY 2018 data
• The CCR Stakeholder Workgroup also recommended improvement strategies related to the new survey vendor, new data collection systems, and providing expanded access to Virtual Job Shadow for students beginning at age 14
• The CCR Stakeholder Workgroup also recommended that the NDE work with its partners to continue and expand Pre-Employment Transition Services (Pre-ETS) provided by Vocational Rehabilitation, including hands-on practice with Pre-ETS
• The CCR Stakeholder Workgroup also recommended that the NDE leave open an option for target review and adjustment as the state moves beyond the COVID-19 impact on data
• In July and August, the CCR Stakeholder Workgroup formulated three-four options for preliminary recommendations for baselines and targets for Measures A, B, and C, based on their analysis and discussion of historical data
• In August, the CCR Stakeholder Workgroup narrowed the recommendation to one option for baselines and targets for Measures A, B, and C, which were proposed for input in the public survey
• Following the review of all input, the NDE selected the baseline and targets recommended by the CCR Stakeholder Workgroup, and supported by the public survey

NDE EXPLANATION FOR REVISION TO BASELINE YEAR
The decision to revise the baseline to use 2020 data was made and justified by the following factors:
(1) In August, 2021, the stakeholder group described above reviewed historical baselines, targets, and actual data from FFY 2010 forward
(2) The stakeholder group recommended that rigorous six-year targets should be set for FFY 2020 through FFY 2025
(3) The stakeholder group recommended Nevada's baseline year should be revised and that a baseline year should be selected that was more recent and would provide a rationale, based on actual data, to increase Nevada's six-year targets for FFY 2020 through FFY 2025
(4) The stakeholder group noted that the current baseline was set at FFY 2009, as follows: A=24%, B=53%, C=69%
(5) The stakeholder group determined that the FFY 2018 actual data was likely to be the last data reporting year before COVID-19 may have affected the post-secondary outcomes for youth with disabilities
(6) The stakeholder group noted that the FFY 2018 actual data were lower than the FFY 2009 baseline for Indicator 14-A, as follows: the FFY 2009 baseline for 14-A was 24%, and the FFY 2018 actual data were 22.2%
(7) However, the stakeholder group noted that the FFY 2018 actual data were higher than the FFY 2009 baseline for Indicators 14-B and 14-C as follows: the FFY 2009 baseline for 14-B was 53%, and the FFY 2018 actual data were 57.84%; the FFY 2009 baseline for 14-C was 69%, and the FFY 2018 actual data were 71.76%. The stakeholder group also understood that these data accumulate from A to B to C.
(8) The stakeholder group initially suggested that the baseline should be updated to reflect FFY 2018 actual data, to provide a data-based rationale for a rigorous increase in the FFY 2020 through FFY 2025 targets, as well as to provide a more recent baseline than the FFY 2009 baseline.
(9) After August 2021, the NDE received the actual FFY 2020 data, which were almost exactly the same as the FFY 2018 data, as follows: the 14-A actual data were 22.46% (up slightly from the FFY 2018 data); the 14-B actual data were 61.86% (up slightly from the FFY 2018 data); the 14-C actual data were 71.19% (compared to 71.76% in FFY 2018)
(10) Because the FFY 2020 actual data were the most recent data available (which addressed the stakeholder group's interest in establishing a baseline with recent data) and because the FFY 2020 actual data provided the data-based rationale for formulating rigorous targets for FFY 2020 through FFY 2025 (which addressed the stakeholder group's second priority), the NDE determined that a revision to set the Indicator 14 baselines at FFY 2020 actual data for Indicators 14-A, 14-B, and 14-C was justified.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 3,142 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 944 |
| Response Rate | 30.04% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 212 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 372 |
| 3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed) | 48 |
| 4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed). | 40 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 212 | 944 | 30.24% | 27.00% | 22.46% | N/A | N/A |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 584 | 944 | 66.05% | 63.00% | 61.86% | N/A | N/A |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 672 | 944 | 76.88% | 74.00% | 71.19% | N/A | N/A |

**Please select the reporting option your State is using:**

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 35.07% | 30.04% |

**Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.**

The NDE is implementing the following strategies which are expected to increase response rates, particularly for underrepresented groups:

--Nevada is streamlining the Indicator 14 survey to focus on just asking the required eight questions first and then offering participants an opportunity to complete an optional section (if we decide to keep any) that they can opt out of without impacting the Indicator 14 response rates.
--Nevada is making the Indicator 14 survey more user-friendly (short, simple, and easy to complete online or over the phone).
--Nevada is tailoring the survey to the intended audience by paying for Nevada area code numbers for the PIAR at SUNY Postdam Call Center.
--Nevada will provide pre-notification to students and families by adding content to existing NDE OIE Transition Trainings making “we’ll be calling you one year out to see how you’re doing” a conversation that happens at every transition IEP so students/families are expecting the communication (internet/web-based survey and/or phone interview call). Nevada previously did this through the Senior Exit Survey but discontinued that survey in 2020.

**Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

Nevada switched from the method of rolling over students from the Senior Exit Survey into the One Year Follow-Up Survey to using the 618 exit data for Indicator 14. This caused an increase in census target leaver totals (n=219) with the greatest increases seen in Minority (n=248), ELL (n=178), and Dropout (n=183), three categories where underrepresentation occurred. Further analysis will be done in the future to analyze the extent to which students categorized as Minority, ELL, and/or Dropout are represented in Categories A, B, and C, such that if those groups are underrepresented in the Categories, the measurement of the Categories may not reflect the true status of Nevada's students with disabilities one year after existing secondary school. The same analysis will be done regarding students in the "All Other Disability Categories" subgroup.

Nonresponses may occur because the survey is poorly designed and excessively long. This factor may have particularly impacted Minority and ELL populations. Dropouts were largely unable to be reached due to outdated contact information. Refusal to participate was also noted due to non-Nevada area code call center leading to lack of trust in requesting sensitive information. See above for a description of the strategies that Nevada will use to ensure in the future the response data are representative of targeted populations.

**Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

ANALYSIS OF DATA ON REPRESENTATIVENESS OF SURVEY RESPONSES

DISABILITY CATEGORY
Respondents were compared to the original survey population to determine the representativeness of the responding students when compared to the surveyed students, using the Response Calculator developed by the National Post-School Outcomes (NPSO) Center. Representativeness was compared by disability category for students with learning disabilities, emotional disturbance, and intellectual disabilities, with the following results:

-- 61.11% of students surveyed had learning disabilities; 58.69% of respondents had learning disabilities
-- 4.74% of students surveyed had emotional disturbance; 4.03% of respondents had emotional disturbance
-- 5.19% of students surveyed had intellectual disabilities; 5.19% of respondents had intellectual disabilities
Each of these differences was within the +/- 3% acceptable range identified by NPSO.

--28.96% of students surveyed had "all other disability categories"; 32.10% of respondents had "all other disability categories"
This difference was 3.14%, just outside the acceptable range.

RACE/ETHNIC CATEGORY
Students were also compared for representativeness according to minority (non-White) status, with the following results. 69.19% of students surveyed were minority students (non-White), and 64.51% of respondents were minority students. This 4.68% difference is just outside the acceptable range identified by NPSO.

GENDER AND ELL CATEGORY
Students were also compared for representativeness according to gender and ELL status, with the following results:

-- 35.42% of students surveyed were female; 34.43% of respondents were female
-- 64.58% of students surveyed were male; 65.57% of respondents were male
-- 26.16% of students surveyed were English Language Learners; 23.09% of respondents were English Language Learners
Gender differences were within the +/- 3% acceptable range identified by NPSO. The ELL difference of 3.07% is just outside the acceptable range.

DROPOUTS
Students were also compared for representativeness according to dropout status, with the following results.

11.65% of students surveyed were dropouts; 8.05% of respondents were dropouts. The difference of 3.6% is just outside the acceptable range.

**The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)**

NO

**If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

Nevada reflected on the response data and in consultation with PIAR staff at SUNY Potsdam (the state’s vendor) will use the following strategies to increase representativeness moving forward:

PLANNING:
(1) Nevada made the survey more user-friendly by removing additional questions that were not required for Indicator 14 reporting.
(2) Nevada utilizes pre-communication about the survey in the form of a reminder letter that goes out two months prior to the survey opening.
(3) Nevada emphasizes with LEAs that for each target year, all youth who are no longer in secondary school and had IEPs in effect at the time they left school should be included in the survey.
(4) NDE staff are available to support LEA staff throughout preparation and submission of Exiter’s contact information and accommodations needed, as well as informing students and their families about Indicator 14.

ADMINISTRATION:
(1) Nevada personalizes communication so that letters and callers include the students’ names and schools.
(2) Nevada implements multiple means of distribution (e.g., letters, emails, calls) and collection (e.g., online, calls).
(3) PIAR utilizes bilingual interviewers to contact households that may need languages other than English. Interviewers receive training and ongoing support that stress strategies to encourage participation by every exiter/family contacted.
(4) PIAR interviewers typically make up to seven contact attempts that are strategically scheduled across the days of the week, as well as across hours from morning through evening.
(5) PIAR supervisors use locally developed productivity monitoring software that tracks each interviewer’s work each day to help ensure that staff are following protocols and have an acceptable ratio of contacts made to completed surveys. If any are falling behind targets, individual support is provided.

LOCATING RESPONDENTS:
(1) During this interview cycle, about one in eight exiter’s contact information was found to be out-of-date; internet-bases searches rarely provide new information that results in additional completed surveys. NDE and PIAR staff will work toward finding other strategies to ensure current contact information.
(2) Nevada pre-notifies or gives a “heads up” notice about the survey coming in the form of a reminder letter that goes out two months prior to the survey opening.

INCENTIVIZING:
(1) Nevada emphasizes the importance of the results in every letter and email communication as well as through interviewers.

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).**

Nevada uses an analysis of +/-3% discrepancy in the proportion of survey responders compared to the target group (student leavers). This is consistent with how Nevada has historically reported representativeness and remains the way we will report representativeness moving forward. A positive difference indicates overrepresentation, and a negative difference indicates underrepresentation.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |
| **Survey Question** | **Yes / No** |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | NO |

**Provide additional information about this indicator (optional)**

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 14 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

 (20 U.S.C. 1416(a)(3)(B))

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

*Sampling is not allowed.*

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s data under IDEA section 618, explain.

States are not required to report data at the LEA level.

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1 Number of resolution sessions | 58 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1(a) Number resolution sessions resolved through settlement agreements | 40 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 15
DISPUTE RESOLUTION (DR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 9
Parent: 1
State Mediator: 1
Nevada Center for Excellence in Disabilities: 1
Local Education Agencies: 3
State Education Agency (NDE): 3

The Dispute Resolution (DR) Stakeholder Workgroup was formed to address Indicators 15 and 16. Nine (9) stakeholders participated in the DR Stakeholder Workgroup, representing the north, south, and rural regions of the state.

Indicator 15 measures the percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. Indicator 16 measures the percent of mediations held that resulted in mediation agreements. Annual data reflecting these measures are collected under section 618 of the IDEA and reported annually by the NDE. The NDE measures these indicators in accordance with the requirements of the 618 data collection, so there are no decisions to be made regarding measurement of the indicators.

Indicators 15 and 16 are unique in that they are neither compliance nor results indicators for LEAs. The annual LEA report cards do not report on LEA performance against these indicators, because they do not reflect LEA compliance or results. Indicators 15 and 16 are reflected in the state’s annual determination from OSEP in two measures: (1) whether the NDE’s submission of the SPP/APR contains “Valid and Reliable Data” for Indicators 15 and 16, and (2) whether the NDE’s submission of 618 data contains “Timely and Accurate Data” for Indicators 15 and 16.

As the result of the uniqueness of these two Indicators, the NDE consulted directly in person and via email with stakeholders who have been users of the dispute resolution system to gather their insights into these processes. In addition, the NDE presented and discussed Nevada’s current and historical Dispute Resolution data from FFY 2011 forward, along with the SPP/APR process, during a meeting of the state Special Education Advisory Committee in the fall of 2021.

Because these indicators reflect the extent to which parties to a dispute choose to use particular dispute resolution mechanisms, the NDE did not wish to appear to communicate that it had a preference for any mechanism that the parties find useful when resolving disputes. In other words, there was no attempt to “encourage” an increase in the Indicator 15 and 16 percentages, when a full panoply of mechanisms to resolve disputes is always available to the parties.

Information Specific to Indicator 15
• The measurement for Indicator 15 has not changed
• The IDEA requires that resolution meetings be convened by an LEA when it receives a due process hearing request, however, the IDEA also permits the parties to waive the meeting if they wish (34 CFR 300.510(a)(3))
• The IDEA does not require that resolution sessions result in a settlement agreement
• It is entirely up to the parties whether a resolution session results in a settlement agreement
• There are many other mechanisms used by LEAs and parents to resolve disputes, including informal discussions, mediations (see Indicator 16) and direct negotiations between the parties and/or their representatives
• The NDE has been working to strengthen the effectiveness and efficiency of the statewide due process resolution system, including work to create an online platform for ease of “paperwork” management by parents, LEAs, mediators, investigators, and hearing officers
• In FFY 2020, parties in Nevada resolved 68.97% of their disputes through resolution agreements reached in resolution sessions; in FFY 2019 the percentage was 90.11%
• In FFY 2020, parties in Nevada resolved 95% of their disputes without going to a hearing; Nevada’s resolution percentage is consistently in the high 90s
• Even though Nevada may not reach its target, a rigorous yet achievable target supports the NDE in continuing to provide information to parties about the variety of dispute resolution mechanisms available to them, including resolution sessions
• The DR Stakeholder Workgroup recommended several improvement strategies: (1) increase training for teachers and administrators to help them better inform parents about their dispute resolution options and about Nevada’s system; (2) make information about dispute resolution options more “parent” friendly by making the information practical and avoiding legal jargon; and (3) work with the Family Navigation Network by providing some basic information that can be shared with parents when questions about parental rights arise
• Following consultation with stakeholders, the NDE proposed the following targets and baselines for input in the public survey: (1) retain baseline at the FFY 2005 level (91%), and (2) increase targets over the previous 85% for FFY 2020-2022 at 91.25%; and for FFY 2023-2025 at 91.50%
• Following the review of all input, the NDE selected the baseline and targets recommended by the DR Stakeholder Workgroup, and supported by the public input survey

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 91.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 85.00% | 85.00% | 85.00% | 85.00% | 85.00% |
| Data | 72.04% | 87.00% | 80.95% | 73.85% | 90.11% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 91.25% | 91.25% | 91.25% | 91.50% | 91.50% | 91.50% |

**FFY 2020 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 40 | 58 | 90.11% | 91.25% | 68.97% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

As discussed in previous APRs, written resolution settlement agreements are not the only means for settling disputes. During 2020-2021, of the 63 total due process hearing requests received, only three went to a hearing. Consequently, Nevada's actual resolution rate was 95%. This overall resolution rate is significant. It suggests that although resolution sessions may not always result in written settlement agreements, various other means are successfully used in Nevada to resolve disputes without due process hearings. If resolution session "success" is declining in any particular year, it means nothing more than that LEAs and parents are using other effective means to resolve disputes, and the NDE does not value one dispute resolution mechanism over another.

**Provide additional information about this indicator (optional)**

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3(B))

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

**Instructions**

*Sampling is not allowed.*

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State’s data under IDEA section 618, explain.

States are not required to report data at the LEA level.

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 8 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 4 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 3 |

**Select yes if the data reported in this indicator are not the same as the State’s data reported under section 618 of the IDEA.**

NO

**Targets: Description of Stakeholder Input**

STAKEHOLDER INPUT REGARDING INDICATOR 16
DISPUTE RESOLUTION (DR) STAKEHOLDER WORKGROUP

Number of Stakeholders: 9
Parent: 1
State Mediator: 1
Nevada Center for Excellence in Disabilities: 1
Local Education Agencies: 3
State Education Agency (NDE): 3

The Dispute Resolution (DR) Stakeholder Workgroup was formed to address Indicators 15 and 16. Nine (9) stakeholders participated in the DR Stakeholder Workgroup, representing the north, south, and rural regions of the state.

Indicator 15 measures the percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. Indicator 16 measures the percent of mediations held that resulted in mediation agreements. Annual data reflecting these measures are collected under section 618 of the IDEA and reported annually by the NDE. The NDE measures these indicators in accordance with the requirements of the 618 data collection, so there are no decisions to be made regarding measurement of the indicators.

Indicators 15 and 16 are unique in that they are neither compliance nor results indicators for LEAs. The annual LEA report cards do not report on LEA performance against these indicators, because they do not reflect LEA compliance or results. Indicators 15 and 16 are reflected in the state’s annual determination from OSEP in two measures: (1) whether the NDE’s submission of the SPP/APR contains “Valid and Reliable Data” for Indicators 15 and 16, and (2) whether the NDE’s submission of 618 data contains “Timely and Accurate Data” for Indicators 15 and 16.

As the result of the uniqueness of these two Indicators, the NDE consulted directly in person and via email with stakeholders who have been users of the dispute resolution system to gather their insights into these processes. In addition, the NDE presented and discussed Nevada’s current and historical Dispute Resolution data from FFY 2011 forward, along with the SPP/APR process, during a meeting of the state Special Education Advisory Committee in the fall of 2021.

Because these indicators reflect the extent to which parties to a dispute choose to use particular dispute resolution mechanisms, the NDE did not wish to appear to communicate that it had a preference for any mechanism that the parties find useful when resolving disputes. In other words, there was no attempt to “encourage” an increase in the Indicator 15 and 16 percentages, when a full panoply of mechanisms to resolve disputes is always available to the parties.

Information Specific to Indicator 16
• The measurement for Indicator 16 has not changed
• The IDEA requires that the NDE establish and maintain a state mediation process (34 CFR 300.506)
• Participation in mediation is voluntary, and not mandated by the IDEA
• The mediator who participated in the DR Stakeholder Workgroup commented that she introduces a mediation session by emphasizing that her role is not to pressure any party into a decision that is not in the best interests of the student
• There are many other mechanisms used by LEAs and parents to resolve disputes, including informal discussions, resolution sessions (see Indicator 15) and direct negotiations between the parties and/or their representatives
• The NDE has been working to strengthen the effectiveness and efficiency of the statewide mediation system, including work to (1) create an online platform for ease of “paperwork” management by parents, LEAs and mediators; (2) create a link in the online platform to simplify providing evaluation feedback; (3) increase the pool of mediators available to conduct mediations; (4) use mediation evaluation data to continue to improve access to and use of the system; and (5) implement a voluntary, no-cost IEP Meeting Facilitation option for parents and LEAs to resolve emerging conflict
• The DR Stakeholder Workgroup observed that because the number of mediation requests is typically very small (10 or fewer) the overall percentage of success can be affected by as few as one or two mediations that do not result in an agreement
• In FFY 2020, parties in Nevada resolved 87.5% of their disputes through mediation agreements; in FFY 2019 the percentage was 80%
• In FFY 2020, parties in Nevada resolved 95% of their disputes without going to a hearing; Nevada’s resolution percentage is consistently in the high 90s
• A rigorous yet achievable target supports the NDE in continuing to provide information to parties about the variety of dispute resolution mechanisms available to them, including mediation
• Following consultation with stakeholders, the NDE proposed the following targets and baselines for input in the public survey: (1) retain baseline at the FFY 2005 level (80%), and (2) increase targets over the previous 80% for FFY 2020-2022 at 80.25%; and for FFY 2023-2025 at 80.50%
• Following the review of all input, the NDE selected the baseline and targets recommended by the DR Stakeholder Workgroup, and supported by the public input survey

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 80.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 80.00% | 80.00% | 80.00% | 80.00% | 80.00% |
| Data | 80.00% | 71.43% | 62.50% | 100.00% | 80.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 80.25% | 80.25% | 80.25% | 80.50% | 80.50% | 80.50% |

**FFY 2020 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 4 | 3 | 8 | 80.00% | 80.25% | 87.50% | Met target | No Slippage |

**Provide additional information about this indicator (optional)**

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2020. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

**Measurement**

The State’s SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

**Instructions**

**Baseline Data*:*** The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Children with Disabilities.

**Targets*:*** In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

**Updated Data:** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

*Phase I: Analysis:*

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

*Phase II: Plan* (which, is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and

- Evaluation.

*Phase III: Implementation and Evaluation* (which, is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

***Phase III: Implementation and Evaluation***

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., Feb 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

The Nevada Department of Education will improve the performance of third-grade students with disabilities in Clark County School District on statewide assessments of reading/language arts through building the school district's capacity to strengthen the skills of special education teachers in assessment, instructional planning, and teaching.

**Has the SiMR changed since the last SSIP submission? (yes/no)**

NO

**Is the State using a subset of the population from the indicator (*e.g.*, a sample, cohort model)? (yes/no)**

YES

**Provide a description of the subset of the population from the indicator.**

Not all third-grade students with disabilities are included in the Assess-Plan-Teach (APT) project that is being implemented in Clark County School District (CCSD). The subset of the population only includes third-grade students with disabilities in the 29 schools who participate in the APT project, and does not include students with speech-language impairments in those schools.

**Is the State’s theory of action new or revised since the previous submission? (yes/no)**

NO

**Please provide a link to the current theory of action.**

https://doe.nv.gov/uploadedFiles/ndedoenvgov/content/Inclusive\_Education/Documents/NV%20SSIP%20Theory%20of%20Action.pdf

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

NO

**If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or** **justification for the changes.**

Nevada has not made any final decisions regarding the activities, strategies or timelines described in the previous submission, but discussions are underway about modifying the APT project, beginning in FFY 2022. Prompting these discussion is the acknowledgement that a different model for providing the support of Instructional Interventionists to existing and new schools must be considered, since the Clark County School District does not currently have the capacity to employ a sufficient number of Instructional Interventionists to work directly with all schools. Among the strategies under consideration is a "train-the-mentors" model, where the APT Instructional Interventionists would provide training to an experienced mentor teacher already employed in the school, and that mentor teacher would provide the majority of direct support to the teachers in that school. In this way, the expertise of the existing cadre of instructional interventionists can be maximized, and new schools can be added to the project.

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2015 | 7.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 7.00% | 10.00% | 14.00% | 15.00% | 16.00% | 17.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of Students Scoring Proficient of Above on SBAC** | **Number of Students Tested on SBAC** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 14 | 261 |  | 7.00% | 5.36% | Did not meet target | N/A |

**Provide the data source for the FFY 2020 data.**

Smarter Balanced Consortium Assessment (SBAC) assessment administered in Spring 2021.

**Please describe how data are collected and analyzed for the SiMR**.

A data set is established including third-grade students with disabilities (minus students with speech-language impairments) in the 29 APT schools who participated in SBAC assessments. From that data set, subtotals are calculated for students who scored at Level 1 and Level 2 (not proficient), Level 3 (proficient) and Level 4 (above proficient). The total number of students who scored at Level 3 or 4 is divided by the total number of students who participated in the SBAC assessments. The resulting percentage is the actual data for reporting progress on Nevada's SiMR (14 students at or above proficient, divided by 261 students who were assessed = 5.36%).

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

COVID-related school closures in fall 2020 and many students participating in distance learning in spring 2021 negatively affected Nevada's ability to collect and report comprehensive Student Impact Data derived from the CORE Phonics Survey and Smarter Balanced Assessment Consortium (SBAC) assessments.

However, CORE Phonics Survey data were collected from approximately 1,200 students in 91 APT classrooms in fall and spring in school year 2020-2021. Between the fall and spring administration of the CORE Phonics Survey, students showed the following improvement in “average percent score”:
• Students in primary grades in resource rooms improved letter knowledge from an average score of 56 to 70 – the average percent change was 19%
• Students in primary grades in self-contained classrooms improved letter knowledge from an average score of 55 to 68 – the average percent change was 17%
• Students in primary grades in resource rooms improved word reading from an average score of 23 to 37 -- the average percent change was 11%
• Students in primary grades in self-contained classrooms improved word reading from an average score of 13 to 25 – the average percent change was 9%

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

The data for this reporting period were impacted specifically by COVID-19. Because significantly fewer third-grade students participated in SBAC assessments than participated in the APT project, the data are incomplete, which affects validity and reliability.

The last time that students fully participated in SBAC assessments was in the spring of 2019, when 482 third-grade students with disabilities who participated in the APT project were assessed through SBAC. In the spring of 2021, only 261 third-grade students with disabilities who participated in the APT project were assessed through SBAC. Overall, only about 54% of the students in CCSD participated in SBAC assessments in the spring of 2021. The number third-grade students in the APT project who participated in spring 2021 SBAC assessments (261), when compared to the number who participated in spring 2019 (482), represents the exact same percentage (261 / 482 = 54%).

In correspondence dated May 17, 2021, the U.S. Department of Education approved a waiver for Nevada under the ESEA, specifically waiving accountability, school identification, and report card provisions related to accountability. The waiver correspondence encouraged the State “to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. … [T]he results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population.”

This discussion makes clear that since approximately 54% of the students who participated in the APT project participated in SBAC assessments in spring 2021, the actual data (5.36% at or above proficient) may not be representative of all students who participated in the APT project.

One step Nevada took to mitigate the impact of COVID-19 on the data collection is to continue to collect and report CORE Phonics Survey data, including for many students who participated in distance learning.

**Section B: Implementation, Analysis and Evaluation**

**Please provide a link to the State’s current evaluation plan.**

https://doe.nv.gov/uploadedFiles/ndedoenvgov/content/Inclusive\_Education/Documents/NVSSIPEvaluationPlan.pdf

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

NO

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period:**

Nevada has identified three broad APT improvement strategies: (1) Infrastructure Development, (2) Professional Development, and (3) Data Systems Development. Outcomes were established in the April 2016 SSIP report. Some outcomes overlap among strategies, but achievements are only listed once below.

Broad Improvement Strategy #1, APT Infrastructure Development
Implementation of this strategy establishes the foundational infrastructure to support development, implementation, and expansion of APT as a critical component of the CCSD Comprehensive Literacy Frameworks for improving reading instruction for third-grade students with disabilities in the CCSD. During the reporting period, activities that were implemented included continued employment of Instructional Interventionists who serve as coaches, expenditures of federal funds in accordance with approved budgets, participation of 29 schools in the APT projects with the principals of those schools signing a Memorandum of Understanding regarding their participation, and continued support of Instructional Interventionists to support APT teachers at schools and build CCSD capacity to continue to implement and scale-up the project. See section below for a description of the short-term and intermediate outcomes achieved and the evaluation of those achievements.

Broad Improvement Strategy #2, Professional Development
Implementation of this strategy supports improved performance of third-grade students with disabilities on statewide assessments of reading/language arts through building CCSD capacity to strengthen the skills of teachers in assessment, instructional planning, and teaching. During the reporting period, CORE INC. training and training by Instructional Interventionists was provided to teachers, and coaching was implemented in APT schools, at times in-person and at times via remote technology. Six (6) CORE Reading Academies were offered; 8 APT teachers attended, and 41 total elementary teachers attended. The Instructional Interventionists provided 86 in-service training sessions, covering 27 topics; 206 APT teachers attended, 3932 total participants (all grade levels) attended. See section below for a description of the short-term and intermediate outcomes achieved and the evaluation of those achievements.

Broad Improvement Strategy #3, Data Systems Development
Implementation of this strategy supports identification, development, and implementation of data collection and analysis systems to support formative and summative evaluation of the reading performance of third-grade students with disabilities, and to assess the quality and fidelity of APT implementation. During the reporting period, activities that were implemented included using data to evaluate the training of teachers, using data to evaluate the coaching provided by Instructional Interventionists to teachers, providing training to increase teachers' knowledge about how to use data to assess, plan, and teach reading; providing training to increase teachers' knowledge about how to use progress monitoring data to assess, plan, and teach reading; using observational data to evaluate the extent to which teachers use 13 evidence-based APT practices with consistency; using data to evaluate students' progress in letter knowledge and word reading when comparing fall-to-spring CORE Phonics Survey data; and using SBAC data to evaluate progress toward the SiMR. See section below for a description of the short-term and intermediate outcomes achieved and the evaluation of those achievements.

**Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.**

INFRASTRUCTURE DEVELOPMENT
The INFRASTRUCTURE DEVELOPMENT Broad Improvement Strategy relates to governance, finance, and accountability. The implementation of activities to support infrastructure outcomes is necessary to achieve the SiMR, sustain systems improvement, and scale-up. In particular, adequate staff must be trained and employed to provide the coaching and support needed by staff at the APT schools; adequate funding must be provided to support staff, training, and materials; APT must be implemented with fidelity or it will not produce results; producing results is what will both sustain the improvement efforts as well as encourage the participation of new schools to scale-up the project. During 2020-2021, these short-term/intermediate outcomes were achieved:

1. 8 highly qualified Instructional Interventionists (IIs) were employed to support teachers, administrators, paraeducators, and the APT Leadership Team to improve and expand the APT model.
2. Federal funds were expended according to approved CCSD budget proposal.
3. 29 CCSD schools participated in the APT project and implemented APT with fidelity.
4. 29 principals signed a Memorandum of Understanding that included commitments for: (a) school participation for the grant period; (b) active teacher participation in training, roundtables, and project evaluation processes; (c) progress monitoring for students with IEPs; (d) release time for teachers to participate in training, site visits, coaching, etc.; and (e) support for IIs within the school building.
5. 100% of administrators reported that IIs have the skills to effectively to support APT teachers.
6. 100% of administrators reported that CCSD has the professional learning capacity to support ongoing implementation of APT.

PROFESSIONAL DEVELOPMENT
The PROFESSIONAL DEVELOPMENT Broad Improvement Strategy relates to quality standards, professional development and technical assistance. The implementation of activities to support professional development outcomes is necessary to achieve the SiMR, sustain systems improvement, and scale-up. In particular, in order to achieve the SiMR and expand the project, teachers and paraeducators in APT schools must learn the methods of assessing, planning, and teaching that are integral to the CORE model and READ WELL--the principal evidence-based practices used in the APT model--and those methods must be implemented with fidelity. During 2020-21, these short-term/intermediate outcomes were achieved:

1. 98% of APT teachers reported that training was high quality, relevant, and useful.
2. 97% of APT teachers reported that training increased their knowledge and skills of how to assess, plan and teach.
3. 96% of APT teachers reported that coaching was high quality, relevant, and useful.
4. 96% of APT teachers reported that coaching increased their knowledge and skills of how to assess, plan and teach.

DATA SYSTEMS DEVELOPMENT
The DATA SYSTEMS DEVELOPMENT Broad Improvement Strategy relates to data and accountability. The implementation of activities to support data systems outcomes is necessary to achieve the SiMR, sustain systems improvement, and scale-up. In particular, data systems are essential to ensure that teachers know how to use data to assess, plan, and teach; that students' formative and summative progress is measured; and that the implementation activities are properly evaluated, so that key adjustments can be made in a timely fashion. Data must be gathered to understand the extent to which APT is implemented with fidelity, or it will not produce results. Producing results is what will both sustain the improvement efforts as well as encourage the participation of new schools to scale-up the project. During 2020-2021, these short-term/intermediate outcomes were achieved:

1. 97% of APT teachers reported increased knowledge in using assessments to inform instruction.
2. 93% of APT teachers reported increased knowledge in using CORE data to assess, plan, and teach reading.
3. 92% of APT teachers reported increased knowledge in using progress monitoring data to assess, plan, and teach reading.
4. 87% of APT teachers reported increased knowledge in using Read Well unit test data to assess, plan, and teach reading.
5. The practice of monitoring, diagnosing and adjusting to student needs was used consistently in 35% of observations.
6. 13 evidence-based APT practices were used consistently, on average, in 45% of observations.
7. Approximately 1,200 students in 29 APT schools showed progress in letter knowledge and word reading when comparing fall-to-spring CORE Phonics Survey data.
8. 261 third-grade students with disabilities who participated in the APT project were assessed through SBAC in Spring 2021. Of those assessed, 14 were at or above proficiency, for a proficiency rate of 5.36% (14/261=5.36%).

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

NO

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

NEXT STEPS IN INFRASTRUCTURE DEVELOPMENT
Next steps for the Infrastructure Development strategy and anticipated outcomes are as follows:
1. The APT project will continue to employ highly qualified Instructional Interventionists to support teachers, administrators, paraeducators, and the APT Leadership Team to improve and expand the APT model. We expect that the work of the Instructional Interventionists will continue to be highly rated in surveys and focus groups.
2. The APT project will continue to expend federal funds according to approved CCSD budget proposals and we expect those funds to support next steps in adding schools to the project.
3. The APT project will continue to require a Memorandum of Understanding to be signed by APT school principals and we expect principals to remain highly committed to the project.
4. The APT Leadership Team is considering whether to implement a “train-the-mentors” model in 2022-2023 so that the core group of Instructional Interventionists can train mentor teachers at schools to assist with coaching and staff professional learning opportunities. The anticipated outcome would be that a number of new schools will be added to the APT project.

NEXT STEPS IN PROFESSIONAL DEVELOPMENT
Next steps for the Professional Development strategy and anticipated outcomes are as follows:
1. The APT project will continue to provide CORE Reading Academies and we expect APT teachers to continue to report that the training is high quality, relevant and useful; and that the training increased their knowledge and skills of how to assess, plan and teach.
2. The APT project will continue to provide coaching to teachers and we expect APT teachers to continue to report that the coaching was high quality, relevant and useful; and that coaching increased their knowledge and skills of how to assess, plan and teach, as well as how to implement APT.
3. The APT project will continue to provide training and support to school administrators and we expect that administrators will continue to report that the training and support increased their knowledge of assessing, planning and teaching early literacy and increased their capacity to develop and sustain APT.

NEXT STEPS IN DATA DEVELOPMENT
Next steps for the Data Systems Development strategy and anticipated outcomes are as follows:
1. The APT project will continue to provide training to teachers to focus on using data to assess, plan and teach reading and we expect that teachers will continue to report that the training has increased their knowledge to use assessments, CORE data, progress monitoring data, and Read Well unit test data to assess, plan and teach.
2. The APT project will continue to provide training to teachers on the use of evidence-based practices so that they can use those practices consistently and we expect that "consistency of implementation" data will show that teachers are increasing their consistent use of these practices.
3. APT teachers will continue to implement the APT project and we expect an improvement in the performance of 3rd grade students with disabilities on statewide assessments of reading/language arts.

**List the selected evidence-based practices implement in the reporting period:**

Nevada continues to implement two essential EBPs: (1) implementation of the CORE model for data-based problem solving to plan for and provide reading instruction for students with disabilities and assess progress, and (2) implementation of the Read Well curriculum to plan for and teach reading.

**Provide a summary of each evidence-based practices.**

Summary of CORE
CORE is an evidence-based professional development framework that supports the implementation of a school's reading curriculum. The CORE framework includes presentation of theory, modeling and demonstration, practice in workshop settings and simulated conditions, structured feedback, and coaching for classroom applications. The CORE Phonics Survey has a central role in the evaluation of student outcomes in the APT project.

Summary of READ WELL
Read Well is a research-based K–3 reading/language arts curriculum that helps students build the critical skills needed to be successful readers. Read Well complements CORE training and tools.

**Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.**

The role of CORE and READ WELL as evidence-based practices (EBPs) in impacting Nevada's SiMR is explained in Nevada's Theory of Action and summarized as follows: "If NDE provides technical support and resources to build CCSD's capacity to strengthen the skills of special education teachers in assessment, instructional planning, and teaching, then third-grade students with disabilities will receive specially designed instruction in reading to meet their unique needs, and then the performance of third-grade students with disabilities on statewide assessments of reading/language arts will improve." The EBPs described above comprise the "technical support and resources" embedded in APT that are intended to impact the SiMR.

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

Consistency (fidelity) of implementation data are collected by Instructional Interventionists who observe APT teachers and rate the extent to which teachers use 13 practices aligned with the APT model: alignment with Nevada academic content standards; teacher engagement; organization of classroom materials; alignment with student needs; implementing Read Well consistent with program manual; classroom management reflected in routines, procedures, and transitions; appropriate lesson pacing; varied instructional approaches; student engagement; evidence of monitoring, diagnosing, and adjusting to student needs; teacher to student feedback; explicit instruction; and gradual release model.

Consistency of implementation data were collected during the 2020-2021 school year through a combination of in-person observations and observations conducted through remote technology. There was a steady increase in the consistency of implementation from 2016-2017 through 2018-2019, with an average of 45% of practices used consistently in 2016-17, increasing to 56% in 2017-18, and reaching 65% in 2018-2019. In 2019-2020, through March 2020, there was a slight dip in the average frequency of use of the APT teaching practices to 63%. During the 2020-2021 school year, consistency of implementation dropped further, to an average frequency of 45%. This drop in the consistent implementation of 13 practices aligned with the APT model is related to the difficulties encountered in fully implementing the project during 2020-2021, when students were participating in distance learning in the fall and only some students returned to in-person learning by choice in the spring. Instruction is without doubt affected by the extent to which teachers work directly with students in a classroom, and for much of school year 2020-2021, teachers and students in the APT project were not together in classrooms.

Of the 13 practices rated, teachers demonstrated less consistent use of each practice when compared to the previous school year. As in previous years, the practice of alignment with Nevada academic content standards was observed the most frequently at 61%, along with teacher engagement (55%) organization of classroom materials (56%), and alignment with student needs (53%). The least consistent implementation was noted for use of the gradual release model (25%); monitoring, diagnosing and adjusting to student needs (35%); and use of varied instructional approaches (37%). Given the limitations in teaching using distance learning platforms, these data are not surprising.

These data are critical in identifying areas where teacher skill should be strengthened, and they help inform the content of training sessions and future coaching. It was clear that in 2021-2022 and moving forward, there is much work to be done to help teachers and paraeducators return to the high levels of APT implementation that was in evidence prior to the onset of the pandemic.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

1. The APT project will continue to provide CORE Reading Academies and Read Well training, and we expect APT teachers to continue to report that the training is high quality, relevant and useful; and that the training increased their knowledge and skills of how to assess, plan and teach. We also anticipate that students with disabilities in the APT classrooms will increase reading proficiency as measured by the SBAC.
2. The APT project will continue to provide coaching to teachers and we expect APT teachers to continue to report that the coaching was high quality, relevant and useful; and that coaching increased their knowledge and skills of how to assess, plan and teach, as well as how to implement APT. We also anticipate that students with disabilities in the APT classrooms will increase reading proficiency as measured by the SBAC.
2. The APT project will continue to provide training to teachers on the use of evidence-based practices so that they can use those practices consistently and we expect that "consistency of implementation" data will show that teachers are increasing their consistent use of these practices. We also anticipate that students with disabilities in the APT classrooms will increase reading proficiency as measured by the SBAC.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The stakeholder input group for Indicator 17 has been and continues to be the APT Leadership Team. APT Leadership Team stakeholder input was sought specifically related to the baseline and six-year targets for Indicator 17 for the FFY 2020-2025 SPP/APR.

The original Indicator 17 targets set in FFY 2013 were based on pre-SBAC data (we used Nevada’s Criterion Referenced Test [CRT] data) and were based on the proficient scores of ALL students with disabilities in Clark County School District, including students with speech-language impairments whose scores tend to be higher than the scores of other students with disabilities.

Once the APT project was underway in 2015-2016, several things became clear. First, the impact of APT would not be accurately measured through SBAC by including the scores of students with speech-language impairments who were less likely to be impacted by the APT reading instruction model, which focused on reading instruction in self-contained classrooms in the beginning, and then expanded to include resource classrooms. Second, when the scores of students with speech-language impairments were disaggregated from the scores of all students with disabilities at the APT schools, the actual data no longer aligned with data that had been used to set targets – the targets were set based on proficiency rates all third-grade students with disabilities in CCSD.

Beginning with the April 2017 SSIP report, we reported that the targets needed to be revised, because they were based on 2013-2014 results from the state’s previous CRT assessment, not the SBAC, and the targets were based on the entire group of third-grade students with disabilities. Further, the targets were based on data from all CCSD schools, and by design the APT schools have specialized programs for students with more significant disabilities that are not necessarily part of each neighborhood elementary school.

The APT Leadership Team as the SPP/APR Stakeholder Group determined that submission of the FFY 2020-2025 SPP/APR was an appropriate time to revise the targets to be rigorous, yet achievable.

Information Specific to Indicator 17
• In the Spring of 2019 (data reported in April 2020), the % proficient on SBAC was 14.3%
• There were no SBAC assessments in the Spring of 2020
• In the Spring of 2021, the % proficient is 5.4% and because the % of participants was low (approximately 54%) this actual data may not be representative of the scores of third-grade students with disabilities (minus students with speech-language impairments) in the APT schools
• The APT Leadership Team recommended that messaging be enhanced to let schools and parents know that there is no provision to "opt out" of participation in SBAC assessments in Spring 2022
• The APT Leadership Team reviewed previous targets and actual data from FFY 2014 through FFY 2019
• The APT Leadership Team proposed continuing the baseline as FFY 2015 (actual data, 7% proficient)
• The APT Leadership Team proposed establishing the following targets: FFY 2020 (7%), FFY 2021 (10%), FFY 2022 (14%), FFY 2023 (15%), FFY 2024 (16%), FFY 2025 (17%)
• Following the review of all input, the NDE has selected the baselines and targets recommended by the APT Leadership Team stakeholders

 **Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

Nevada has organized stakeholder engagement through the lens of NASDSE's "Leading by Convening” model. We have structured stakeholder involvement depending upon whether the purpose (“depth of interaction”) was to inform, network and collaborate, or transform. In the last five years, we have focused on the purpose to transform reading instruction in a total of 29 schools. In these years, the bulk of our work with stakeholders has involved those who are closest to the actual implementation of APT. The primary "transforming" stakeholder group is the APT Leadership Team who are continuously engaged in decision-making regarding ongoing SSIP implementation.

During 2020-2021, the APT Leadership Team included 3 CCSD administrators, 3 APT principals, 2 APT Instructional Interventionists, 3 NDE staff (including the OIE Director and Assistant Director), and the Educational Services Director from Nevada PEP, Nevada's federally funded parent training and information project. The Team meets frequently with a standing agenda to review fiscal matters, grants/contracts, personnel, and the design of the entire APT model, including all SSIP implementation and evaluation data issues. The Team is very much a working team, and nearly all SSIP implementation recommendations and decisions occur at this level. The Team met six times in 2020-2021, in November, December, January, March, May, and April.

A second means of engaging "transforming" stakeholders is through the Communication Protocol that serves as a bidirectional communication between school staff who implement APT and the APT Leadership team. Generally, three times per year in November, February, and May, the Communication Protocol is provided to schools with a deadline for submission. The Protocol asks for responses to three prompts: (1) what successes have you had; (2) what challenges have you had; and (3) is there anything you need from your Instructional Interventionist or the APT Leadership Team? In 2020-2021, two Protocols were implemented, with prompts modified to inquire about challenges/needs related to distance learning and other challenges posed by the COVID-19 pandemic. As the APT communication protocol is strengthened, APT principals and assistant principals will have an increased role in decision-making regarding ongoing implementation. Feedback from teachers and administrators, through all channels, has a direct impact on choices that are made about needs for training and coaching, and policy choices about uses of resources.

A third means of engaging "transforming" stakeholders is through direct communication with and engagement of parents. APT implementation is a standing topic at the Nevada PEP meetings. The APT project has supported "Literacy in the Library" field trips for parents and students to visit their local library. The librarian works directly with students while Nevada PEP staff meet with parents to discuss strategies for helping students become strong readers. In addition, Nevada PEP has hosted “Literacy Night” events in connection with fall parent-teacher conferences. During 2020-2021, COVID-19 restrictions foreclosed these events, but the plan is to resume once COVID-19 restrictions have eased.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

The primary purpose of the APT Leadership Team is to identify and solve both specific and systemic challenges with implementing the APT project. Consequently, concerns are expressed by the Nevada PEP representative, APT school principals, APT Instructional Interventionists, as well as CCSD and NDE administrators at each meeting. Every concern is taken seriously, and often a solution is arrived at during the context of a specific meeting. On other occasions, we commit to gathering additional data and/or input from other constituents before implementing a solution. Our meeting minutes identify the concerns that have been raised and the solutions that are planned. The minutes also capture "next steps" for any concerns that will require more intensive or long-term approaches to solve.

Similarly, a primary purpose of the Communication Protocol is to ask staff members and principals at the 29 APT schools to respond to this prompt: "What challenges have you had with implementing the APT initiative since the previous communication protocol? Reflect on possible solutions for these challenges." Schools are also asked to respond to this prompt: "Is there anything that you need from your Instructional Interventionist and/or the APT Leadership team to ensure improved success and outcomes, or do you have anything else that you would like to share?" These prompts invite the expression of concerns from these key stakeholders -- the teachers and principals who directly implement APT. Once the protocol is submitted to the APT Leadership Team, the Team decides whether items merit a systemic response (because other schools may have the same challenges or could benefit from the same suggestions) or whether an item is best addressed by an immediate contact from the APT staff -- or a combination. A one-page response is provided highlighting solutions to the concerns expressed.

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

No new activities not already described are planned for 2021-2022.

**Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.**

No new activities not already described are planned for 2021-2022.

**Describe any newly identified barriers and include steps to address these barriers.**

The NDE and the APT Leadership Team will continue to focus in 2021-2022 and 2022-2023 on regaining ground lost in the project when COVID-19 caused school closures in the spring and fall of 2020, followed by the spring of 2021 when many students continued to be educated through distance learning. COVID-19 created profound disruptions in the lives of students, families, staff and administrators in the Clark County School District. COVID-19 disrupted the initiatives the APT project had implemented to engage and support parents of students with disabilities. COVID-19 disrupted the practice of schooling as we knew it pre-pandemic. COVID-19 disrupted the recruitment and retention of teachers and administrators.

The NDE does not intend to implement any activities not already described in this report, but considerable work will be done to rebuild the APT system and support structures. The APT project is uniquely situated to address lost learning opportunities for students with disabilities. Its focus on basic reading instruction principles, intensive teacher training and coaching, and support for school administrators is precisely the model that principals need in their schools to help students regain their trajectory toward confident and competent readers. There are no "new steps" -- the model simply needs to be reintegrated into the schools now that students are back in classrooms.

**Provide additional information about this indicator (optional).**

The NDE was advised by the EDFacts Partner Support Center that it was appropriate to leave the "FFY 2019 Data" field blank, because Nevada measures its SiMR using SBAC data, and SBAC assessments were not administered in the state during FFY 2019 (spring 2020).

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 17 - Required Actions

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.**

**Name:**

Julie A. Bowers

**Title:**

Nevada Department of Education, Director, Office of Inclusive Education

**Email:**

jabowers@doe.nv.gov

**Phone:**

775-687-9146

**Submitted on:**

04/28/22 9:55:27 PM

# ED Attachments



1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)
3. Percentage blurred due to privacy protection [↑](#footnote-ref-4)
4. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-5)
5. 1 Data suppressed due to privacy protection [↑](#footnote-ref-6)
6. [↑](#footnote-ref-7)
7. [↑](#footnote-ref-8)
8. 1 Data suppressed due to privacy protection [↑](#footnote-ref-9)
9. [↑](#footnote-ref-10)
10. [↑](#footnote-ref-11)
11. [↑](#footnote-ref-12)
12. [↑](#footnote-ref-13)
13. [↑](#footnote-ref-14)
14. 1 Data suppressed due to privacy protection [↑](#footnote-ref-15)
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18. [↑](#footnote-ref-19)
19. [↑](#footnote-ref-20)
20. 1 Data suppressed due to privacy protection [↑](#footnote-ref-21)
21. 1 Data suppressed due to privacy protection [↑](#footnote-ref-22)
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27. [↑](#footnote-ref-28)
28. 1 Data suppressed due to privacy protection [↑](#footnote-ref-29)
29. [↑](#footnote-ref-30)
30. [↑](#footnote-ref-31)
31. [↑](#footnote-ref-32)