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

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

**For reporting on   
FFY 2021**

**Nevada**

U.S. Department of Education seal

**PART B DUE February 1, 2023**

**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 2021 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 2021 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).   
  
Nevada has 18 Local Educational Agencies (LEAs), including 17 school districts, whose jurisdictions are coterminous with Nevada's 17 counties, and the State Sponsored Charter School Authority, which is designated as an LEA by state law. Throughout this document, the terms "district/districts" and "LEA/LEAs" are used interchangeably.

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

**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 (when fully staffed) 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 2021 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. This monitoring approach was approved by OSEP in April 2008 as part of the Indicator 8 sampling description set forth below in Indicator 8.  
  
All schools in the LEA have records selected for review, except Washoe County School District (WCSD), Clark County School District (CCSD0, and the State Sponsored Charter School Authority (SPCSA) where size dictates selection. In WCSD, CCSD and the SPCSA, 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 LEAs provide record review documentation to demonstrate correction of individual and systemic noncompliance within one year.  
  
DATA MANAGEMENT AND REPORTING  
The NDE annually collects 618 data. 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 for exiting, discipline, and personnel data collections. Dispute resolution and MOE/CEIS/CCEIS data are collected via paper tables and document review. All 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.  
  
Prior to the pandemic, the NDE annually hosted the Mega Conference for hundreds of educators statewide to engage them in learning to enhance long-standing practices as well as emerging strategies for successful teaching and learning. As we emerge from the closures and return to all in person learning, we have found that teacher shortages have impacted the ability to have large in-person events. The NDE has pivoted to use a combination of virtual administrator meetings and communities of practice, synchronous and asynchronous virtual trainings, and specific training modules hosted on the NDE website to continue to meet this need. These options have allowed the professional learning and technical assistance to occur on a more frequent basis and has opened the door for more professionals to participate in professional learning on a more consistent basis. As we move to the future Nevada will continue to evaluate the use of these options and determine whether it will return to hosting large in-person conferences. 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.   
  
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. 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). 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).   
  
Stakeholder recruitment commenced in May of 2021. 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.   
  
Each Indicator Workgroup established communal meeting times best fit for participating stakeholders and utilized Nevada Department of Education’s Microsoft Office 365 collaboration tools. 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 had 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. 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. Survey responders represented a broad network of partners and constituents. OIE reviewed and collectively discussed all information collected during the stakeholder process. Survey results were analyzed, giving particular attention to results submitted by parents. Nevada stakeholders developed the thoughtful, thorough, rigorous yet achievable baselines and targets set forth in the FFY 2020 SPP/APR.   
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2020" for specific details regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets in the 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.**

ACTIVITIES REPORTED IN FFY 2021  
Although the NDE did not propose any revisions to its targets in the SPP/APR, the NDE provides this information about activities conducted to increase the capacity of diverse groups of parents.  
  
In addition to the NDE's ongoing work described below in "ACTIVITIES REPORTED IN FFY 2020," the NDE has engaged in the following activities designed to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities:  
-- NDE enhanced its recruitment for parents to serve on the Special Education Advisory Committee, by sending nomination forms to a broader group of its partners, including UNLV, UNR, Nevada PEP, and other state and local agencies who are stakeholders in special education. One purpose of this broader recruitment effort was to reach diverse groups of parents, as well as parents whose children represent a more diverse range of disabilities.   
-- NDE provides fiscal support to Nevada PEP, Nevada's federally funded parent training and information center. Nevada PEP's mission aligns with this objective and they conduct outreach activities to provide training and information to diverse groups of parents, in order to support those parents in becoming more effective advocates for improved outcomes for their children.  
-- The SPP/APR provides performance data and targets to parents regarding key outcomes for children with disabilities. The NDE has included the SPP/APR as one of dozens of documents on the NDE website that will be translated into multiple languages.  
-- The NDE assures that all of its public-facing communications, including print and electronic media, are compliant with ADA requirements.  
-- The NDE has begun work on a statewide project to create standards for practice around personalized, competency-based learning which will focus on equity through its embrace of student diversity. As parents are integral partners in their children's education, this project will also increase the capacity of diverse groups of parents to improve outcomes for their children with disabilities.  
-- The NDE provides professional learning opportunities that emphasize culturally responsive practices, including personalized learning environments, positive approaches to discipline, welcoming school environments, and collaboration among stakeholders to support all students and parents, including diverse groups of parents.  
  
ACTIVITIES REPORTED IN FFY 2020  
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.   
  
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.

**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.

**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 the FFY results for each of the six years will be provided to SEAC and SEDA.

**Reporting to the Public**

**How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, 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 FFY2020 LEA performance reports, see the section with the header "2020-2021 (May 2022)."  
  
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/. Nevada has not revised the targets that it submitted with its FFY 2020 APR in 2022.  
  
This webpage contains a link to the Part B State SPP/APR Data Displays contained on GRADS360 ("State Performance Plan (SPP) Letters and Annual Performance Report (APR) Letters"). 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 "2022 SPP/APR and State Determination Letters PART B – Nevada" link.

## Intro - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

In FFY 2020, Nevada’s RDA Percentage was 72.5%. OSEP encouraged NDE to access technical assistance related to results elements and compliance indicators for which the state received a zero score: (1) percentage of 8th grade children with disabilities scoring at basic or above on the NAEP reading assessment; (2) percentage of 8th grade children with disabilities scoring at basic or above on the NAEP math assessment; and (3) Percentage of Children with Disabilities who Graduated with a Regular High School Diploma. NDE received assistance from several technical assistance centers, discussed below.  
  
National Center for Systemic Improvement (NCSI)  
NDE works with NCSI on key projects related to enhancing and improving NDE’s General Supervision System, including: (1) ACCESS Nevada, (2) Differentiated Monitoring System, (3) guidance for students with disabilities who are emergent bilingual, (4) leadership skills for Nevada’s new director, (5) management and leadership skills for Nevada’s assistant director (AD) in the multi-state AD shared interest group, (6) Results-Based Accountability, and (7) Evidence-Based Practice community of practice.   
  
A team from NDE OIE will participate in the 2023 In-Person Cross-State Learning Collaborative Convening in May 2023. An NDE OIE staff member participated as a Thought Leader in the NCSI 2022 Thought Leader Conversation Series: Pursuing Equity at the Intersection of Language and Disability.   
  
1. ACCESS Nevada  
NDE started working in 2019 with NCSI to review and revise the policies and procedures related to general supervision. This work resulted in development of ACCESS Nevada, a new data collection reporting system to be launched in spring 2023. NDE staff meet quarterly with NCSI to review progress and new resources related to the project.  
  
2. Differentiated Monitoring System (DMS)  
NDE participates in NCSI monthly TA calls related to the DMS, resulting in a deeper understanding of 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 2022 NDE partnered with NCSI to provide support 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 SEA Leaders to review federal requirements and share experiences to enhance skills.  
  
5. Assistant Director shared interest group  
NDE OIE Assistant Director participates in monthly meetings with other SEA special education ADs to discuss challenges and solutions unique to their positions. Topics focus on challenges unique to individual states as well as national trends (e.g., special educator shortages).  
  
6. Results-Based Accountability and Support Collaborative (RBAS)   
NDE participates in monthly meetings with other SEA Leaders to learn how to develop, implement and evaluate components of an RBA general supervision system.   
  
National Technical Assistance Center on Transition:   
The Collaborative (NTACT:C)  
NDE continues to 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, who go beyond minimum compliance in transition efforts, and who have recently updated Formal Interagency Agreements between Vocational Rehabilitation and the SEA) and in utilizing materials to train LEA staff (e.g., the Transition Assessment Toolkit and Indicator 13 FAQs). NDE OIE staff participate in professional learning opportunities offered by NTACT:C including the Indicator B14 CoP, CTE/SpEd/VR Network, Students with Disabilities Service Delivery Solutions Peer Network, and the Alternate Diploma Discussion. NDE worked closely with Charlotte Alverson outside of the regularly scheduled Indicator B14 CoP for the February 1, 2023, SPP/APR submission to OSEP. NDE participated in a research study utilizing a Delphi process to operationally define seven newly identified predictors of post-school success in secondary transition and identify observable and measurable program characteristics.  
  
PROGRESS Center at the American Institutes for Research  
NDE joined the Special Interest Group to ensure collaboration between SEAs and LEAs to improve implementation.  
  
Early Childhood Technical Assistance (ECTA)  
NDE has built on the technical assistance received from ECTA. For example, NDE produced and disseminated a tool to assist with the quality of the Indicator 7 data collection ("Outcomes Decision Tree").  
  
National Center on Educational Outcomes (NCEO)  
NDE has held discussions with representatives from the NCEO to assist in the development of an LEA reporting and assurance system for monitoring and improvement related to the 1% cap on students with disabilities participating in the Nevada Alternate Assessment. This system will be a collaboration between the NCEO, the NDE OIE, and the NDE Office of Assessment Data and Accountability Management. System development and implementation are targeted in 2023. A member of the OIE staff is now also participating in the 1% CoP facilitated by NCEO.  
  
Center for IDEA Fiscal Reporting (CIFR)  
NDE participates in CIFR’s multi-state Part B State Set Aside CoP and 2023 New IDEA State Fiscal Staff CoP meetings. This participation will help us improve our fiscal systems and restructure those systems around our general supervision requirements.  
  
Early Childhood Inclusion CoP  
NDE participates regularly in the Early Childhood Inclusion CoP, including conference calls on inclusion, transition, suspension/expulsion, social/emotional skill development, and improved behavioral outcomes.   
  
IDEA Center for Early Childhood Data Systems (DaSy)  
NDE participates in TA offered by DaSy, including webinars on topics regarding collection and reporting of data. 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 NCPMI and staff attend monthly meetings. Information and training from NCPMI using the Pyramid Model has been disseminated to the LEAs throughout the state. 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 participates in IDC webinar trainings, Data Manger Summits, Peer-To-Peer groups, one-to-one support opportunities. NDE regularly utilizes several tools produced by IDC including IDEA EDFacts Data Checker and other resources. Work with IDC has strengthened cross-office collaboration for timely and accurate State-reported IDEA data. 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 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.  
  
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 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 available resources.

## Intro - OSEP Response

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022 determination letter informed the State that it 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. The State provided the required information.

## Intro - Required Actions

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 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 2022 SPP/APR submission, due February 1, 2024, 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 2021 SPP/APR, use data from 2020-2021), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 97.00% | 100.00% | 100.00% | 100.00% | 72.72% |
| Data | 29.29% | 64.73% | 65.96% | 67.2%[[2]](#footnote-3) | 72.72% |

**Targets**

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,308 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 22 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 165 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 110 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 910 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,308 | 3,515 | 72.72% | 74.00% | 65.66% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

These are lag-year data from the 2020-2021 school year. During the 2020-2021 school year, most of Nevada's LEAs were closed to in-person education, and regular and special education coursework was being provided through distance learning. To earn a regular (standard) diploma in Nevada, students must earn a minimum of 22.5 course credits and participate in the ACT Plus Writing examination as a college and career readiness assessment.   
  
COVID-19 closures of the casino and entertainment industries in Nevada were devastating to Nevada's economy. In addition, COVID-19 school closures placed enormous economic pressure on Nevada's students and families, with older students often required to provide childcare to younger siblings and to seek outside employment to support family finances. Challenges in completing the required minimum of 22.5 credits were significant, and the slippage from the previous graduation rate of 72.72% was not unexpected. The slippage is also closely connected to the increase in the dropout rate reported in Indicator 2. As dropout rates increase, graduation rates decrease.

**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 2020-2021 required a student to (1) earn a minimum of 22.5 credits, and (2) participate the ACT Plus Writing examination as a college and career readiness assessment. No difference existed between the conditions required of a youth with an IEP and a youth without an IEP 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

## 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

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.

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

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.

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 2021 SPP/APR, use data from 2020-2021), and compare the results to the target.

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.

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.

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.

## 2 - Indicator Data

**Historical Data[[3]](#footnote-4)**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 5.20% | 5.10% | 5.00% | 5.00% | 15.85% |
| Data | 5.25% | 5.28% | 4.41% | 3.44% | 15.85% |

**Targets**

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,308 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 22 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 165 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 110 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 910 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 910 | 3,515 | 15.85% | 15.00% | 25.89% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

These are lag-year data from the 2020-2021 school year. During the 2020-2021 school year, most of Nevada's LEAs were closed to in-person education, and regular and special education coursework was being provided through distance learning. To earn a regular (standard) diploma in Nevada, students must earn a minimum of 22.5 course credits and participate in the ACT Plus Writing examination as a college and career readiness assessment.   
  
COVID-19 closures of the casino and entertainment industries in Nevada were devastating to Nevada's economy. In addition, COVID-19 school closures placed enormous economic pressure on Nevada's students and families, with older students often required to provide childcare to younger siblings and to seek outside employment to support family finances. These challenges resulted in many more students dropping out of school than dropped out during the 2019-2020 school year. The slippage is also closely connected to the decrease in the graduation rate reported in Indicator 1. As dropout rates increase, graduation rates decrease.

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

NAC 387.048 "Dropout" defined. "Dropout" means any pupil who withdrew during the previous school year for any reason specified in subsection 3 of NAC 387.215.  
  
NAC 387.215 Reason for withdrawal of pupil. The reason listed in the master register of enrollment and attendance for the withdrawal of a pupil must be stated as one of the following:  
   
NAC 287.215  
3. For a pupil who is not known to be receiving educational services, withdrawal of the pupil from the system of K-12 public education:  
 (a) By the pupil or the parent or guardian of the pupil, as applicable, for any of the following reasons:  
 (1) The pupil is credit deficient;  
 (2) Pregnancy;  
 (3) Marriage;  
 (4) Employment;  
 (5) The pupil’s physical or mental condition prevents or renders inadvisable the pupil’s attendance at school or the pupil’s application to study, certified pursuant to NRS 392.050, including, without limitation, a long-term medical condition or admission to a program of substance abuse treatment or a rehabilitative setting;  
 (6) Authorization by the juvenile division of the district court pursuant to NRS 392.090;  
 (7) Self-supported or parental support in accordance with NRS 392.100;  
 (8) Apprenticeship in accordance with NRS 392.110; or  
 (9) Any other reason not specified in subparagraphs (1) to (8), inclusive.  
 (b) Because the pupil’s age exceeds the maximum age at which the pupil is entitled to a public education in this State.  
 (c) Due to:  
 (1) Permanent expulsion;  
 (2) Disciplinary or other eligibility reasons; or  
 (3) Incarceration.  
 (d) To enroll in an educational program for adults or other educational program which does not offer a diploma, including, without limitation:  
 (1) A program of general educational development; or  
 (2) A program of vocational or technical education for adults.  
 (e) As a result of the unknown enrollment status of the pupil due to the absence of the pupil:  
 (1) For 10 consecutive school days if the whereabouts of the pupil are unknown or the reason for the pupil’s absence cannot be determined;  
 (2) For 1 month when an expected date of return is not known; or  
 (3) For unexplained absence, as set forth in subsection 2 of NAC 387.220.  
 (f) When attendance is excused pursuant to NRS 392.060 for completion of the 12 grades of elementary and high school courses.  
 (g) When attendance is excused pursuant to NRS 392.080 because the pupil’s residence is located at such a distance from the nearest public school as to render attendance unsafe or impractical.

**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

## 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** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |

**Targets: Description of Stakeholder Input**See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 4,972 | 4,589 | 3,676 |
| b. Children with IEPs in regular assessment with no accommodations | 4,452 | 3,899 | 1,424 |
| c. Children with IEPs in regular assessment with accommodations | 29 | 17 | 1,556 |
| d. Children with IEPs in alternate assessment against alternate standards | 305 | 349 | 384 |

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 4,961 | 4,587 | 3,676 |
| b. Children with IEPs in regular assessment with no accommodations | 4,448 | 3,903 | 1,503 |
| c. Children with IEPs in regular assessment with accommodations | 27 | 16 | 1,674 |
| d. Children with IEPs in alternate assessment against alternate standards | 304 | 350 | 385 |

\*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 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 4,786 | 4,972 | 73.16% | 95.00% | 96.26% | Met target | No Slippage |
| **B** | Grade 8 | 4,265 | 4,589 | 57.32% | 95.00% | 92.94% | Did not meet target | No Slippage |
| **C** | Grade HS | 3,364 | 3,676 | 88.56% | 95.00% | 91.51% | Did not meet target | No Slippage |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 4,779 | 4,961 | 73.04% | 95.00% | 96.33% | Met target | No Slippage |
| **B** | Grade 8 | 4,269 | 4,587 | 57.46% | 95.00% | 93.07% | Did not meet target | No Slippage |
| **C** | Grade HS | 3,562 | 3,676 | 92.32% | 95.00% | 96.90% | Met target | No Slippage |

**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)**

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**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 | 4,481 | 3,916 | 2,980 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 770 | 366 | 71 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 4 | x[[4]](#footnote-5) | 184 |

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**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 | 4,475 | 3,919 | 3,177 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 653 | 149 | 20 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x4 | x4 | 66 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 774 | 4,481 | 15.62% | 19.00% | 17.27% | Did not meet target | No Slippage |
| **B** | Grade 8 | x4 | 3,916 | x4 | 10.00% | x4 | Did not meet target | Slippage |
| **C** | Grade HS | 255 | 2,980 | 7.79% | 10.00% | 8.56% | Did not meet target | No Slippage |

**Provide reasons for slippage for Group B, if applicable**

It is well documented that students were adversely affected by the COVID-19 pandemic. See, e.g., "Reading and mathematics scores decline during COVID-19 PANDEMIC" describing declining NAEP scores in 2022 compared to 2020, https://www.nationsreportcard.gov/highlights/ltt/2022/. Those adverse effects continue to be felt.   
  
From March of 2020 through the 2020-2021 school year, most Nevada students were not receiving direct instruction from teachers in classrooms. Instead, they were participating in regular and special education classes being taught through distance learning. The decline seen in these SBAC scores is not surprising under these circumstances. COVID-19 school closures adversely affected student achievement, and not just in the year when the schools were closed. Instead, the lost months of direct, in-person instruction have created an overall decline in performance that lingers into subsequent years as children struggle to make up for lost opportunities to learn to grade-level academic achievement standards.

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x[[5]](#footnote-6) | 4,475 | x5 | 18.00% | x5 | Did not meet target | No Slippage |
| **B** | Grade 8 | x5 | 3,919 | x5 | 6.00% | x5 | Did not meet target | No Slippage |
| **C** | Grade HS | 86 | 3,177 | 2.41% | 5.00% | 2.71% | Did not meet target | No Slippage |

**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)**

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

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

**Targets: Description of Stakeholder Input**See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**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 | 305 | 349 | 384 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 35 | x[[6]](#footnote-7) | x6 |

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**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 | 304 | 350 | 385 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 68 | 7 | 75 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 35 | 305 | 13.29% | 17.00% | 11.48% | Did not meet target | Slippage |
| **B** | Grade 8 | x6 | 349 | x6 | 2.00% | x6 | Did not meet target | No Slippage |
| **C** | Grade HS | x6 | 384 | x6 | 2.00% | x6 | Did not meet target | Slippage |

**Provide reasons for slippage for Group A, if applicable**

It is well documented that students were adversely affected by the COVID-19 pandemic. See, e.g., "Reading and mathematics scores decline during COVID-19 PANDEMIC" describing declining NAEP scores in 2022 compared to 2020, https://www.nationsreportcard.gov/highlights/ltt/2022/. Those adverse effects continue to be felt.   
  
From March of 2020 through the 2020-2021 school year, most Nevada students were not receiving direct instruction from teachers in classrooms. Instead, they were participating in regular and special education classes being taught through distance learning. The decline seen in these Nevada Alternate Assessment scores is not surprising under these circumstances, particularly among students with significant cognitive disabilities, for whom the Nevada Alternate Assessment was designed. COVID-19 school closures adversely affected student achievement, and not just in the year when the schools were closed. Instead, the lost months of direct, in-person instruction have created an overall decline in performance that lingers into subsequent years as children struggle to make up for lost opportunities to learn to alternate academic achievement standards.

**Provide reasons for slippage for Group C, if applicable**

It is well documented that students were adversely affected by the COVID-19 pandemic. See, e.g., "Reading and mathematics scores decline during COVID-19 PANDEMIC" describing declining NAEP scores in 2022 compared to 2020, https://www.nationsreportcard.gov/highlights/ltt/2022/. Those adverse effects continue to be felt.   
  
From March of 2020 through the 2020-2021 school year, most Nevada students were not receiving direct instruction from teachers in classrooms. Instead, they were participating in regular and special education classes being taught through distance learning. The decline seen in these Nevada Alternate Assessment scores is not surprising under these circumstances, particularly among students with significant cognitive disabilities, for whom the Nevada Alternate Assessment was designed. COVID-19 school closures adversely affected student achievement, and not just in the year when the schools were closed. Instead, the lost months of direct, in-person instruction have created an overall decline in performance that lingers into subsequent years as children struggle to make up for lost opportunities to learn to alternate academic achievement standards.

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 68 | 304 | 17.44% | 19.00% | 22.37% | Met target | No Slippage |
| **B** | Grade 8 | 7 | 350 | 2.75% | 3.00% | 2.00% | Did not meet target | Slippage |
| **C** | Grade HS | 75 | 385 | 12.09% | 17.00% | 19.48% | Met target | No Slippage |

**Provide reasons for slippage for Group A, if applicable**

**Provide reasons for slippage for Group B, if applicable**

It is well documented that students were adversely affected by the COVID-19 pandemic. See, e.g., "Reading and mathematics scores decline during COVID-19 PANDEMIC" describing declining NAEP scores in 2022 compared to 2020, https://www.nationsreportcard.gov/highlights/ltt/2022/. Those adverse effects continue to be felt.   
  
From March of 2020 through the 2020-2021 school year, most Nevada students were not receiving direct instruction from teachers in classrooms. Instead, they were participating in regular and special education classes being taught through distance learning. The decline seen in these Nevada Alternate Assessment scores is not surprising under these circumstances, particularly among students with significant cognitive disabilities, for whom the Nevada Alternate Assessment was designed. COVID-19 school closures adversely affected student achievement, and not just in the year when the schools were closed. Instead, the lost months of direct, in-person instruction have created an overall decline in performance that lingers into subsequent years as children struggle to make up for lost opportunities to learn to alternate academic achievement standards.

**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)**

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

## 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 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 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 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 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** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 24.50 | 24.50 | 24.00 | 23.00 | 22.00 |
| Reading | B <= | Grade 8 | 33.50 | 33.50 | 33.00 | 32.00 | 31.00 |
| Reading | C <= | Grade HS | 38.50 | 38.50 | 38.00 | 37.00 | 36.00 |
| Math | A <= | Grade 4 | 16.50 | 16.50 | 16.00 | 15.00 | 14.00 |
| Math | B <= | Grade 8 | 18.50 | 18.50 | 18.00 | 17.00 | 16.00 |
| Math | C <= | Grade HS | 19.50 | 19.50 | 19.00 | 18.00 | 17.00 |

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**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 | 34,678 | 36,833 | 32,412 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 4,481 | 3,916 | 2,980 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 14,799 | 15,791 | 14,230 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 7 | x[[7]](#footnote-8) | 419 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 770 | 366 | 71 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 4 | x7 | 184 |

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**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 | 34,620 | 36,782 | 32,943 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 4,475 | 3,919 | 3,177 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 12,071 | 8,179 | 6,558 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | x7 | x7 | 192 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 653 | 149 | 20 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x7 | x7 | 66 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 17.27% | 42.70% | 24.69 | 24.50 | 25.42 | Did not meet target | No Slippage |
| **B** | Grade 8 | x[[8]](#footnote-9) | x8 | 33.64 | 33.50 | 33.46 | Met target | No Slippage |
| **C** | Grade HS | 8.56% | 45.20% | 38.92 | 38.50 | 36.64 | Met target | No Slippage |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x8 | x8 | 16.55 | 16.50 | 20.24 | Did not meet target | Slippage |
| **B** | Grade 8 | x8 | x8 | 18.50 | 18.50 | 18.43 | Met target | No Slippage |
| **C** | Grade HS | 2.71% | 20.49% | 19.96 | 19.50 | 17.78 | Met target | No Slippage |

**Provide reasons for slippage for Group A, if applicable**

It is well documented that students were adversely affected by the COVID-19 pandemic. See, e.g., "Reading and mathematics scores decline during COVID-19 PANDEMIC" describing declining NAEP scores in 2022 compared to 2020, https://www.nationsreportcard.gov/highlights/ltt/2022/. Those adverse effects continue to be felt.   
  
From March of 2020 through the 2020-2021 school year, most Nevada students were not receiving direct instruction from teachers in classrooms. Instead, they were participating in regular and special education classes being taught through distance learning. The slippage in closing the gap between students without disabilities and students with disabilities measured against grade-level academic achievement standards is likely a long-term result of the COVID-19 school closures. COVID-19 school closures adversely affected student achievement, and not just in the year when the schools were closed. Instead, the lost months of direct, in-person instruction have created an overall decline in performance that lingers into subsequent years as children struggle to make-up for lost opportunities to learn to grade-level academic achievement standards.

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

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

## 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 2021 SPP/APR, use data from 2020-2021), 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 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.**

18

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 0.00% | 0.00% |  | N/A | N/A |

**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. During 2020-2021, a total of 13 students in 5 LEAs were suspended or expelled for greater than 10 days in a school year. The October 1, 2020, IDEA child count for the state's LEAs totaled 61,985, and the state's average suspension rate was 0.02% (13/61,985=0.02%).   
  
Nevada uses a minimum cell size requirement to exclude LEAs from the calculation if the LEA has fewer than 25 students with disabilities who were suspended/expelled 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)**

Nevada met its target (0%) and experienced no slippage from the FFY 2020 reporting year.   
  
Effective July 1, 2019, Nevada enacted legislation significantly reducing the authority of LEAs to suspend or expel students with disabilities out-of-school. Implementation of this legislation, combined with the fact that during much of the 2020-2021 school year, most of Nevada's students were being educated through distance learning, led to a circumstance where no LEA met the state's minimum cell size of 25 students with disabilities suspended or expelled for greater than 10 days in a school year. Consequently, all 18 LEAs were excluded from the calculation.  
  
When zeroes were correctly entered into the data entry fields, the SPP/APR module did not perform a calculation to reflect the FFY 2021 data and to indicate that Nevada met its target (0%) and that no slippage occurred. The Nevada Department of Education contacted EDFacts about this concern and was advised that the "status/slippage calculations are behaving as expected since zeroes have been entered. Please add any additional information in the comment section as needed."   
  
While appreciating the mathematical challenge of dividing zero by zero, the fact remains that Nevada had no LEAs that had 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.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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 FFY 2021 because no LEAs had significant discrepancies in their rates of suspensions/expulsions out of school for more than 10 days for children with IEPs using 2020-2021 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 2020**

| **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 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "Effective July 1, 2019, Nevada enacted legislation significantly reducing the authority of LEAs to suspend or expel students with disabilities out-of-school. Implementation of this legislation, combined with the fact that during much of the 2020-2021 school year, most of Nevada's students were being educated through distance learning, led to a circumstance where no LEA met the state's minimum cell size of 25 students with disabilities suspended or expelled for greater than 10 days in a school year. Consequently, all 18 LEAs were excluded from the calculation." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.  
  
The State’s chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

## 4A - Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy under the State’s chosen methodology, and how the State’s threshold for measuring significant discrepancy in the rate of long-term suspensions and expulsions is reasonably designed.

# 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 2021 SPP/APR, use data from 2020-2021), 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

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

**FFY 2021 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.**

18

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 0 | 0.00% | 0% |  | N/A | N/A |

**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. During 2020-2021, a total of 13 students in 5 LEAs were suspended or expelled for greater than 10 days in a school year. The October 1, 2020, IDEA child count for the state's LEAs totaled 61,985, and the state's average suspension rate was 0.02% (13/61,985=0.02%).   
  
Nevada uses a minimum cell 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/expelled 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)**

Nevada met its target (0%) and experienced no slippage from the FFY 2020 reporting year.   
  
Effective July 1, 2019, Nevada enacted legislation significantly reducing the authority of LEAs to suspend or expel students with disabilities out-of-school. Implementation of this legislation, combined with the fact that during much of the 2020-2021 school year, most of Nevada's students were being educated through distance learning, led to a circumstance where no LEA met the state's minimum cell size of 25 students with disabilities, in any race/ethnic category, suspended or expelled for greater than 10 days in a school year. Consequently, all 18 LEAs were excluded from the calculation.  
  
When zeroes were correctly entered into the data entry fields, the SPP/APR module did not perform a calculation to reflect the FFY 2021 data and to indicate that Nevada met its target (0%) and that no slippage occurred. The Nevada Department of Education contacted EDFacts about this concern and was advised that the "status/slippage calculations are behaving as expected since zeroes have been entered. Please add any additional information in the comment section as needed."   
  
While appreciating the mathematical challenge of dividing zero by zero, the fact remains that Nevada had no LEAs that had 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.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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 FFY 2021 because no LEAs had significant discrepancies in their rates of suspensions/expulsions out of school for more than 10 days for children with IEPs using 2020-2021 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 2020**

| **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 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "Effective July 1, 2019, Nevada enacted legislation significantly reducing the authority of LEAs to suspend or expel students with disabilities out-of-school. Implementation of this legislation, combined with the fact that during much of the 2020-2021 school year, most of Nevada's students were being educated through distance learning, led to a circumstance where no LEA met the state's minimum cell size of 25 students with disabilities, in any race/ethnic category, suspended or expelled for greater than 10 days in a school year." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.  
  
The State’s chosen methodology results in a threshold for measuring significant discrepancy, by race and ethnicity, in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

## 4B- Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy, by race and ethnicity, under the State’s chosen methodology; and how the State’s threshold for measuring significant discrepancy, by race and ethnicity, in the rate of long-term suspensions and expulsions is reasonably designed.

# 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2020 | Target >= | 63.00% | 64.00% | 64.00% | 64.00% | 63.60% |
| A | 63.60% | Data | 63.63% | 62.27% | 61.54% | 61.15% | 63.60% |
| B | 2020 | Target <= | 15.00% | 15.00% | 15.00% | 15.00% | 14.01% |
| B | 14.01% | Data | 14.65% | 15.34% | 15.56% | 15.86% | 14.01% |
| C | 2020 | Target <= | 1.60% | 1.60% | 1.60% | 1.60% | 1.39% |
| C | 1.39% | Data | 1.47% | 1.43% | 1.51% | 1.46% | 1.39% |

**Targets**

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 58,126 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 36,125 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 9,123 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 554 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 7 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 164 |

**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 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 36,125 | 58,126 | 63.60% | 65.00% | 62.15% | Did not meet target | Slippage |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 9,123 | 58,126 | 14.01% | 13.50% | 15.70% | Did not meet target | Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 725 | 58,126 | 1.39% | 1.36% | 1.25% | Met target | No Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | During FFY 2021, 62.15% of children aged 5K through 21 were placed inside the regular class 80% or more of the day. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the compliance calculation was 63.60%. This amount of slippage is extremely small, and is not the result of any changes in policies, procedures, or data collection. The percentage of students served in this category has been very stable during the last several years.  The determination of the least restrictive environment where special education and related services will be delivered is an individualized decision made by each student's IEP committee, based upon the unique needs of each student. The decrease in the relative percentage of students served inside the regular class 80% or more of the day is the result of individualized determinations by students' IEP committees. One clear possibility for these decisions is related to the fact that extended school closures (up to 18 months) when education was offered through distance learning resulted in students falling behind in achieving grade-level academic standards. As a result, IEP committees may well have determined that there was a benefit to increasing the amount of time students would spend in special education settings, where student:teacher ratios are smaller than in general education classrooms, and where more specially designed instruction can be provided in 1:1 adult:student interactions targeted to building (and rebuilding) foundational academic skills.   In addition, anecdotal evidence exists to suggest that after being out of school for up to 18 months, students required additional individual and small-group support to build (and rebuild) social-emotional learning skills, and focused time to work on these skills may have resulted in slightly more removal from general education environments. |
| **B** | During FFY 2021, 15.7% of children aged 5K through 21 were placed inside the regular class less than 40% of the day. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the compliance calculation was 14.01%. This amount of slippage is extremely small, and is not the result of any changes in policies, procedures, or data collection. The percentage of students served in this category has been very stable during the last several years.   The determination of the least restrictive environment where special education and related services will be delivered is an individualized decision made by each student's IEP committee, based upon the unique needs of each student. The increase in the relative percentage of students served inside the regular class less than 40% of the day is the result of individualized determinations by students' IEP committees. One clear possibility for these decisions is related to the fact that extended school closures (up to 18 months) when education was offered through distance learning resulted in students falling behind in achieving grade-level academic standards. As a result, IEP committees may well have determined that there was a benefit to increasing the amount of time students would spend in special education settings, where student:teacher ratios are smaller than in general education classrooms, and where more specially designed instruction can be provided in 1:1 adult:student interactions targeted to building (and rebuilding) foundational academic skills.  In addition, anecdotal evidence exists to suggest that after being out of school for up to 18 months, students required additional individual and small-group support to build (and rebuild) social-emotional learning skills, and focused time to work on these skills may have resulted in slightly more removal from general education environments. |

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A** | Target >= | 24.70% | 25.70% | 25.70% | 25.70% | 40.29% |
| **A** | Data | 33.41% | 34.07% | 39.44% | 43.87% | 40.29% |
| **B** | Target <= | 53.30% | 52.30% | 52.30% | 52.30% | 49.19% |
| **B** | Data | 47.59% | 43.51% | 40.39% | 37.21% | 49.19% |

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

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

**Inclusive Targets – 6C**

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

**Prepopulated Data**

**Data Source:**

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

**Date:**

07/06/2022

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 1,307 | 2,159 | 47 | 3,513 |
| 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 | 425 | 858 | 21 | 1,304 |
| b1. Number of children attending separate special education class | 728 | 1,047 | 7 | 1,782 |
| b2. Number of children attending separate school | 4 | 4 | 3 | 11 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 10 | 10 | 0 | 20 |

**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 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 1,304 | 3,513 | 40.29% | 40.29% | 37.12% | Did not meet target | Slippage |
| B. Separate special education class, separate school or residential facility | 1,793 | 3,513 | 49.19% | 49.19% | 51.04% | Did not meet target | Slippage |
| C. Home | 20 | 3,513 | 0.65% | 0.65% | 0.57% | Met target | No Slippage |

**Provide reasons for slippage for Group A aged 3 through 5, if applicable**

During FFY 2021, 37.12% of children aged 3 through 5 (preK) were placed in a regular early childhood program and received the majority of special education and related services in the regular early childhood program. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the calculation was 40.29%.  
  
The following reasons have been identified as contributing to slippage for this Indicator:  
Statewide, Nevada's population of students participating in inclusive settings decreased by 239 students in school year 2021-2022. This decrease in children participating can be attributed to the carryover from the COVID-19 pandemic which led to staff shortages and parents being hesitant to send their children to public preschool settings.   
  
Nevada does not have universal Pre-K and therefore it is likely that preschool environment reporting for children with disabilities was impacted by the decrease of regular early childhood programs offered in Nevada. The general education programs offered in districts throughout the state do not typically include children who are three. LEAs continue to be challenged to find a regular early childhood program settings for young children, especially those who are 3 years old. LEAs are encouraged to develop inclusive programs using Title I funds, to collaborate with local Head Start programs, and to collaborate with private preschool programs. Without support from state funding for all preschool age children, many LEA programs provide services exclusively to students receiving special education and related services, resulting in higher numbers of students participating in less inclusive environments. In addition, the measurement for this indicator changed to exclude children who were 5 years old but enrolled in kindergarten. Historically, students age 5 who were enrolled in kindergarten had contributed substantially to Nevada’s Indicator 6A inclusion rate.   
  
To address this slippage, the NDE has identified the following improvement strategies:  
• Provide technical support and training on Least Restrictive Environment (LRE) codes and best practices for creating Inclusive settings for children 3-5.   
• Consider pairing districts who did not meet targets with districts who have high inclusion rates for children 3-5.   
• Showcase districts with high inclusion rates for children 3-5 during Special Education District Administrator meetings.   
• Research the practices of districts who have received grant funding from the State PreK Grant to determine if there is a correlation between the funding received and the inclusion of children ages 3-5 in general Pre-K programs.  
• Provide specific, focused training to the many new special education directors in Nevada.

**Provide reasons for slippage for Group B aged 3 through 5, if applicable**

During FFY 2021, 51.04% of children aged 3 through 5 (preK) were placed in a separate special education class, separate school or residential facility. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the calculation was 49.19%.  
  
The following reasons have been identified as contributing to slippage for this Indicator:  
Statewide, Nevada's population of students participating in inclusive settings decreased by 239 students in school year 2021-2022. This decrease in children participating can be attributed to the carryover from the COVID-19 pandemic which led to staff shortages and parents being hesitant to send their children to public preschool settings.   
  
Nevada does not have universal Pre-K and therefore it is likely that preschool environment reporting for children with disabilities was impacted by the decrease of regular early childhood programs offered in Nevada. The general education programs offered in districts throughout the state do not typically include children who are three. LEAs continue to be challenged to find a regular early childhood program settings for young children, especially those who are 3 years old. LEAs are encouraged to develop inclusive programs using Title I funds, to collaborate with local Head Start programs, and to collaborate with private preschool programs. Without support from state funding for all preschool age children, many LEA programs provide services exclusively to students receiving special education and related services, resulting in higher numbers of students participating in less inclusive environments. In addition, the measurement for this indicator changed to exclude children who were 5 years old but enrolled in kindergarten. Historically, students age 5 who were enrolled in kindergarten had contributed substantially to Nevada’s Indicator 6A inclusion rate.   
  
To address this slippage, the NDE has identified the following improvement strategies:  
• Provide technical support and training on Least Restrictive Environment (LRE) codes and best practices for creating Inclusive settings for children 3-5.   
• Consider pairing districts who did not meet targets with districts who have high inclusion rates for children 3-5.   
• Showcase districts with high inclusion rates for children 3-5 during Special Education District Administrator meetings.   
• Research the practices of districts who have received grant funding from the State PreK Grant to determine if there is a correlation between the funding received and the inclusion of children ages 3-5 in general Pre-K programs.  
• Provide specific, focused training to the many new special education directors in Nevada.

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

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A1 | 2013 | Target >= | 78.50% | 80.60% | 80.60% | 80.60% | 68.71% |
| A1 | 78.55% | Data | 82.89% | 76.66% | 72.29% | 71.93% | 68.71% |
| A2 | 2013 | Target >= | 58.22% | 59.31% | 59.31% | 59.31% | 42.56% |
| A2 | 57.13% | Data | 56.13% | 51.73% | 48.79% | 44.27% | 42.56% |
| B1 | 2013 | Target >= | 77.85% | 80.60% | 86.60% | 86.60% | 70.74% |
| B1 | 77.06% | Data | 81.05% | 76.60% | 75.05% | 72.89% | 70.74% |
| B2 | 2013 | Target >= | 55.07% | 56.00% | 56.00% | 56.00% | 45.41% |
| B2 | 54.14% | Data | 55.29% | 54.19% | 49.57% | 44.68% | 45.41% |
| C1 | 2013 | Target >= | 79.15% | 80.30% | 80.30% | 80.30% | 70.31% |
| C1 | 72.21% | Data | 79.49% | 93.63% | 52.39% | 72.37% | 70.31% |
| C2 | 2013 | Target >= | 62.96% | 65.60% | 65.60% | 65.60% | 41.71% |
| C2 | 60.32% | Data | 70.19% | 84.27% | 46.64% | 42.91% | 41.71% |

**Targets**

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

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 SPP/APR Data**

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

2,355

**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 | 22 | 0.93% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 526 | 22.34% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 616 | 26.16% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 746 | 31.68% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 445 | 18.90% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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)* | 1,362 | 1,910 | 68.71% | 68.71% | 71.31% | Met target | No Slippage |
| 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)* | 1,191 | 2,355 | 42.56% | 42.56% | 50.57% | 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 | 11 | 0.47% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 525 | 22.29% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 735 | 31.21% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 711 | 30.19% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 373 | 15.84% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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)* | 1,446 | 1,982 | 70.74% | 70.74% | 72.96% | 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)* | 1,084 | 2,355 | 45.41% | 45.41% | 46.03% | 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 | 38 | 1.61% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 540 | 22.93% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 497 | 21.10% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 821 | 34.86% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 459 | 19.49% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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)* | 1,318 | 1,896 | 70.31% | 70.31% | 69.51% | Did not meet 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)* | 1,280 | 2,355 | 41.71% | 41.71% | 54.35% | 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

## 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023,** 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 must consider race/ethnicity. 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 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.

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**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 78.00% | 78.00% | 78.00% | 78.00% | 78.00% |
| Data | 77.19% | 74.67% | 71.51% | 75.31% | 72.62% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1,304 | | 1,805 | 72.62% | 78.00% | 72.24% | Did not meet target | No Slippage |

**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, Washoe County School District, and the State Sponsored Charter School Authority [SPCSA]) 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 and the SPCSA, the samples are created to be representative of the age, ethnicity, and disability category for the entire population of students with disabilities in those LEAs, 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.**

13,863

**Percentage of respondent parents**

13.02%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate | 12.20% | 13.02% |

**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 2021 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 four 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 12.2%. In FFY 2021, the response rate was 13.02%.  
  
According to the 2021-2020 report provided by Piedra Data Services, the “number of returned services exceeds the minimum number required for an adequate confidence level based on established survey sample guidelines (e.g., https://www.surveysystem.com/sscalc.htm).”  
  
Specific strategies that will be used in the future to increase Nevada’s response rate will address both the timing of the distribution of the survey, and the length of the window during which survey responses will be collected. These strategies were suggested by the target-setting stakeholder group to increase the response rate overall, but also to increase the responses of underrepresented groups. For LEAs monitored during 2022-2023 (including the three largest LEAs whose students will be sampled for inclusion in the survey), the survey will be disseminated during the spring of 2023, rather than later in the year as had occurred in the past. This change will increase the likelihood that parent addresses are current, and that students are still enrolled in special education programs in the LEAs from which the samples have been drawn. In addition, during 2023-2024, the survey window will be open for a longer period of time than during past years, increasing from approximately 8-10 weeks to approximately 14-16 weeks. This change will provide more opportunities for parents to respond by giving them a longer time within which to do so. It will also provide additional opportunities for follow-up contact with nonrespondents. Finally, the NDE has begun discussions with its stakeholders to consider revising the survey to create a version that is short, user-friendly, and collects valid and reliable data to measure the extent to which parents report that schools facilitated parent involvement as a means of improving services and results for children with disabilities. Work is underway to collect and begin preliminary review of surveys used by other states who have higher response rates than the response rate in Nevada.

**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 2021, parent surveys were disseminated to all students with disabilities in three LEAs scheduled for a comprehensive monitoring visit (Churchill, Esmeralda, Lincoln). A sample was selected for parent survey in Clark County School District, Washoe County School District, and the State Sponsored Charter School Authority because those LEAs have an average daily membership (ADM) of more than 50,000 students.  
  
Surveys were successfully sent to 13,863 parents, and a total of 1,805 responses were received for a 13.02% response rate (1805/13863 = 13.02%), an increase from the 12.2% response rate in FFY 2020. 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).  
  
In FFY 2021, the NDE requested additional data from Piedra Data to analyze nonresponse bias. Our focus was on potential nonresponse bias related to disproportionate responses in race/ethnicity categories, which was more significant than disproportionate responses in disability categories.  
  
The requested data included tables of raw data, disaggregated by race/ethnicity, to show how many ACTUAL survey respondents agreed or disagreed with Question 25, and a calculation of the percentage of ACTUAL survey respondents who agreed with Question 25. Once these raw numbers were obtained, the NDE calculated the # of responses that WOULD HAVE BEEN RECEIVED if the responses were comparable to the proportion of the race/ethnic representation in the CHILD COUNT in the LEAs that were surveyed. As an example, Black/African American students represented 16% of the CHILD COUNT, but only 10% of the SURVEY RESPONDENTS.   
  
The calculation was made to answer, for example, this question: How many SURVEY RESPONDENTS would there have been if Black/African American students represented 16% of the SURVEY RESPONDENTS? For example, there were 174 ACTUAL RESPONDENTS who were parents of Black/African American students, at the rate of 10% of the respondents. But when the ADJUSTED RESPONDENTS were calculated to reflect the fact that Black/African American students comprise 16% of the students in the CHILD COUNT, the number of ADJUSTED RESPONDENTS grew to 289 students. This calculation was done to adjust totals in each race/ethnic category except for American Indian or Alaska Native, and Native Hawaiian or Other Pacific Islander groups, because their representation in the CHILD COUNT was nearly identical to their representation in SURVEY RESPONDENTS.   
  
Once the ADJUSTED RESPONDENTS were calculated, then the ADJUSTED RESPONDENTS were multiplied by the percent of actual respondents who agreed with Question 25 in the original data. This calculation produced a hypothetical percentage of agreement with Question 25, based on an assumption that nonresponders would have responded in the same way that responders did. For example, in the ACTUAL survey, parents of students who are Black/African American agreed with Question 25 at a rate of 70.69%. The ADJUSTED RESPONDENTS totaled 289, and when the actual percentage of agreement with Question 25 was multiplied by 70.69%, the result was that 204 hypothetical parents agreed with Question 25, and 85 hypothetical parents disagreed.   
  
This analysis was conducted for each race/ethnic category: recalculating the number of responses that would have existed if the survey respondents had been proportionate to the child count; distributing the adjusted totals according to whether they would have agreed or disagreed with Question 25 according to the relative percentage of agreement in the actual survey data; and then recalculating the percentage of agreement with Question 25. In the end, the total hypothetical percentage of agreement with Question 25 only increased slightly, from 72.2% to 72.97%. These data suggest that there may be very little nonresponse bias according to race/ethnic categories in Nevada’s data. The reasons for this result are discussed below.   
  
Making adjustments to totals within race/ethnic categories to conduct a hypothetical analysis of nonresponse bias produced interesting results that were influenced by the relative proportion of various race/ethnic categories in the total as a whole. As an example, because the Black/African American and Hispanic/Latino groups were underrepresented in the survey results, adjusting (and increasing) the number for those two groups tended to increase their relative effect on the % agreement with Question 25. However, the relative percentage of those two groups when compared to the total is very different. Black/African American students comprise 16% of the CHILD COUNT; but Hispanic/Latino students comprise 44% of the CHILD COUNT. As a result, increasing the number of students who are Black/African American in the hypothetical analysis has much less effect than increasing the number of students who are Hispanic/Latino in the hypothetical analysis. Notably, the % agreement for the Black/African American category in the survey results was 70.69%, so when the number of these responses was hypothetically increased, it tended to “decrease” the overall percentage of agreement. However, the % agreement for the Hispanic/Latino group was 77.83%, so when the number of these responses was hypothetically increased it tended to “increase” the overall percentage of agreement – to a much greater extent than the “decrease” that resulted from hypothetically increasing the number of Black/African American respondents. Finally, parents of students who were White comprised 27% of the CHILD COUNT population, but 37% of the survey respondents. The % agreement for the White group was 67.6%. As a result, when the White category was hypothetically adjusted downward to align with the 27% in the child count, the negative effect of these survey respondents was diminished in calculating the overall total % in agreement with Question 25.   
  
To summarize, making hypothetical adjustments to the results to analyze potential nonresponse bias according to race/ethnic categories did not produce a significant difference in the overall result for Indicator 8. Adjusting the Hispanic/Latino (increasing the number), White (decreasing the number), and Two Or More Races (decreasing the number) groups tended to increase the % of responses in agreement with Question 25. These three categories together comprise 67% of the CHILD COUNT in the LEAs that were surveyed. Adjusting the Black/African American (increasing the number) and Asian (decreasing the number) groups tended to decrease the % of responses in agreement with Question 25. These increases and decreases tended to cancel each other out, resulting in a hypothetical % of agreement that was very close to the survey results (72.2% compared to 72.97%).   
  
In addition, the NDE examined "late responder" data (i.e., those who responded during the last three weeks that the survey was open) as compared to the data from parents who promptly responded to the survey. The data revealed that late responders agreed with Question 25 at a rate of 72.55%, which was slightly higher than survey respondents who responded "promptly" (i.e., those who responded prior to the last three weeks that the survey was open), who responded that they agreed with Question 25 at a rate of 72.23%. If late responders are a proxy for all parents who do not respond, then it would appear that those who do not respond would respond similarly to those who do respond.

**Include the State’s analyses of the extent to which the demographics of the parents responding 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.**

REPRESENTATIVENESS OF SURVEY RESULTS -- HOW THE DATA REPRESENTS DEMOGRAPHICS OF THE STATE  
In order to examine the representativeness of the respondents in the FFY 2021 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, 2021, child count of students ages 3-21 in the surveyed LEAs.  
  
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 15% in survey respondents  
-- 3% students with emotional disturbance in the child count, compared to 2% in survey respondents  
-- 7% students with developmental delay in the child count, compared to 6% in survey respondents  
-- 16% students with autism spectrum disorders in the child count, compared to 19% in survey respondents  
  
14% of the responding parents were parents of children with other health impairments, compared to 10% in the child count.  
38% of the responding parents were parents of children with learning disabilities, compared to 42% in child count. This represents a 5-point gap and a decrease from the 6-point gap reported in FFY 2020. In FFY 2019, a 7-point gap existed, so progress continues to be made.  
  
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.  
-- 44% students in Hispanic/Latino category in the child count, compared to 38% in survey respondents (6-point gap, down from an 8-point gap in FFY 2020)  
-- 16% students in Black/African American category in the child count, compared to 10% in survey respondents (6-point gap, unchanged from FFY 2020)  
-- 27% students in White category in child count, compared to 37% in survey (10-point gap, down from an 11-point gap in FFY 2020)  
  
REPRESENTATIVENESS BY GRADE LEVEL  
Analysis of the grade category representativeness showed a close representativeness between PreK groups in the child count (5.6%) 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 2021 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, updated to reflect that there are now three LEAs whose ADM (average daily membership) exceeds 50,000 so they are sampled (Clark, Washoe, and the State Sponsored Charter School Authority [SPCSA]).  
  
INDICATOR 8 SAMPLING PLAN  
  
Population Represented  
Parents of students with disabilities in Washoe and Clark County School Districts, and the State Sponsored Charter School Authority (SPCSA) will be sampled to represent the entire population of students with disabilities in those three LEAs (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 three largest LEAs (Washoe, Clark, SPCSA) 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 LEA'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 LEA.  
  
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 LEA 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 weigh 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 three largest LEAs (Clark, Washoe, SPCSA), 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 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.

**Response to actions required in FFY 2020 SPP/APR**

See applicable section above where the NDE addresses demographic representativeness and the steps the NDE is taking to address this issue. See applicable section above where the NDE analyzed response data including potential nonresponse bias.

## 8 - OSEP Response

OSEP’s response to the State’s initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover.

## 8 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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 2021 reporting period (i.e., after June 30, 2022).

**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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 17 | 0.00% | 0% | 0.00% | Met target | No Slippage |

**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 except where the OSEP disproportionality template automatically calculates an alternate risk ratio when there were fewer than 10 children in the comparison group; (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 FFY 2021, one LEA was totally excluded from the calculation because the LEA 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 FFY 2021, Nevada did not identify any disproportionate representation of racial/ethnic groups in special education and related services.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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

## 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 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 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 2021 reporting period (i.e., after June 30, 2022).

**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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 14 | 0.00% | 0% | 0.00% | Met target | No Slippage |

**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 except where the OSEP disproportionality template automatically calculates an alternate risk ratio when there were fewer than 10 children in the comparison group; (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 FFY 2021, four LEAs were totally excluded from the calculation because the LEAs did not meet the minimum cell size for any racial/ethnic group in any of the six disabilities categories analyzed.

**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 FFY 2021, Nevada did not identify any disproportionate overrepresentation of racial/ethnic groups in specific disability categories.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 96.55% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 18 | 18 | 96.55% | 100% | 100.00% | Met target | No Slippage |

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

0

**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.**

**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 Nevada Administrative Code (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 2021-2022, 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 in accordance with the requirements of NAC 388.337, generally 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 2021, data were collected from three LEAs that were monitored: Churchill County School District, Esmeralda County School District, and Lincoln County School District.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 2 | 2 | 0 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

During 2020-2021, five LEAs were selected for a comprehensive record review as part of Nevada's four-year monitoring cycle: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority (SPCSA).  
  
A noncompliance finding for failure to complete initial evaluations within 45 school days was issued for two LEAs: Clark County School District and the SPCSA. To clarify, the noncompliance findings were issued because four (three in Clark County School District and one in the SPCSA) parental consents 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. The findings were related to the failure to locate the consent form, not based on actual evidence that the initial evaluations were delayed. As noted in Nevada's FFY 2020 SPP/APR, 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.   
  
Nevertheless, to verify correct implementation of the regulatory requirements, Clark County School District and the SPCSA were ordered to (1) review policies/procedures and forms to identify and make necessary modifications; (2) provide training for staff on compliance requirements; and (3) submit three complete files containing an initial evaluation for students conducted between October 1, 2021, and March 1, 2022, containing all required documentation to provide evidence that compliant practices are now in place. Each LEA submitted the required material to satisfy the corrective action requirements, including documenting that consents for initial evaluations were in the file and that initial evaluations were completed within the regulatory 45-school-day timeline. The NDE reviewed the information submitted, including new files, and specifically verified that the sources of noncompliance were correctly implementing the regulatory requirements, with 100% compliance.

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

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. Consequently, within the 2020-2021 school year, the noncompliance for these four students was already corrected and the students were receiving services in accordance with each student's IEP.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 11 - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

See applicable sections above where the NDE describes verification of correction of noncompliance findings.

## 11 - OSEP Response

## 11 - Required Actions

# 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.84% | 100.00% | 100.00% | 99.23% | 96.16% |

**Targets**

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

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 11 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 0 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 5 |
| 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. | 1 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 1 |
| 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 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. | 5 | 9 | 96.16% | 100% | 55.56% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

During FFY 2021, 55.56% of children in LEAs that were monitored were referred by Part C prior to age 3, were found eligible for Part B, and 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 96.16%. 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.   
  
The following reasons have been identified as contributing to slippage for this Indicator:  
• During COVID-19, many of the agencies involved in the transition for children from Part C to Part B went virtual, which caused a delay in transition activities. In addition, staff shortages have led to delays in ensuring that eligibility, IEP development and implementation is accomplished by the child’s 3rd birthday.   
• Agencies involved in the transition for children from Part C to Part B may communicate infrequently, which can cause delays in the process.   
• The technological system for tracking children needs to be updated.   
  
To address this slippage, the NDE has identified the following improvement strategies:  
• Create a “think tank” of individuals from IDEA Part C, Nevada Ready State Pre-K, Headstart, Easter Seals, and School District Leaders to develop a comprehensive plan to improve the outcomes and compliance with the transition of 3-year-old children with disabilities from Part C to Part B.   
• Request Technical assistance from ECTA to create an effective system for ensuring that all children found eligible for Part B have an IEP developed and implemented by their 3rd birthday.   
• Meet with State leaders outside of Nevada who have effective systems in place.   
• Research systems for tracking children from Part C to Part B to ensure that timelines are met.   
• While this data is collected through the State monitoring system, it is apparent that the collection of this data is not happening frequently enough, so the State will implement yearly monitoring of Indicator 12 for all districts in the State.   
• Review and update the MOU that is currently in place with Part C and Head start.   
• Provide specific, focused training to the many new special education directors in Nevada.

**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**

4

**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 4 children in Churchill 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 each instance, the delay was the result of staff scheduling issues, with two instances occurring during the summer. The number of days beyond the third birthday ranged from one day to 62 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 2021, data were collected from three LEAs that were monitored: Churchill County School District, Esmeralda County School District, and Lincoln County School District.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 2020 Findings of Noncompliance Verified as Corrected**

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

During 2020-2021, five LEAs were selected for a comprehensive record review as part of Nevada's four-year monitoring cycle: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority (SPCSA).  
  
A noncompliance finding for failure to have IEPs developed and implemented by the third birthdays of Part C transfers was issued for Clark County School District. 446 records were reviewed for Clark County School District, and of those, 14 (95.9%) children served in Part C and referred to Part B for an eligibility determination who were found eligible did not have an IEP developed and implemented by their third birthdays.   
  
To verify correct implementation of the regulatory requirements, Clark County School District was ordered to (1) review policies/procedures and forms to identify and make necessary modifications; (2) provide training for staff on compliance requirements; and (3) submit updated data for students referred from Part C to Part B after the issuance of the noncompliance finding, to document that IEPs were developed and implemented by the third birthday consistent with the requirements of Indicator 12. Clark County School District submitted the required material and updated data to satisfy the corrective action requirements. The NDE reviewed the information submitted, including updated data, and specifically verified that the source of noncompliance was correctly implementing the regulatory requirements, with 100% compliance.

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

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. All eligible students whose files were reviewed had IEPs developed and implemented at the time the file was monitored.  
  
Consequently, within the 2020-2021 school year, the noncompliance for these 14 students was already corrected and the students were receiving services in accordance with each student's IEP.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

**Response to actions required in FFY 2020 SPP/APR**

See applicable sections above where the NDE describes verification of correction of noncompliance findings.

## 12 - OSEP Response

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 80.56% | 88.71% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5 | 11 | 88.71% | 100% | 45.45% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

During FFY 2021, 45.45% of youth aged 16 and above in LEAs that were monitored had IEPs that contained each of the required components for secondary transition. Nevada did not reach its target for this indicator and demonstrated slippage from the previous year when the compliance calculation was 88.71%. 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.  
  
Nevada evaluates seven items (several with sub-items) on its compliance checklist to determine compliance with Indicator 13. For the districts monitored during 2021-2022, six records were found not to be compliant with various requirements for providing written notice inviting the student to the IEP meeting, agency participation in IEP meetings, conducting age-appropriate transition assessments, formulating measurable post-secondary goals, developing annual goals that support post-secondary goals, and determining the student's transition services needs. IEPs monitored in the spring of 2022 were often developed during the late spring of 2021 and early fall of 2021, when many students were just returning to in-school instruction, and when many school staff were still developing IEPs using remote technology. These findings may well have been related to the challenges of developing IEPs using remote technology, when missed IEP elements can be more difficult to recognize.

**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 2021, data were collected from three LEAs that were monitored: Churchill County School District, Esmeralda County School District, and Lincoln County School District.

| **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**

Only two of the requirements are required at an age younger than 16. 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.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 2020 Findings of Noncompliance Verified as Corrected**

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

During 2020-2021, five LEAs were selected for a comprehensive record review as part of Nevada's four-year monitoring cycle: Clark County School District, Lyon County School District, Pershing County School District, Storey County School District, and the State Public Charter School Authority (SPCSA).  
  
A noncompliance finding was issued for the SPCSA for failure to have in place all secondary transition requirements.  
  
To verify correct implementation of the regulatory requirements, the SPCSA was ordered to (1) review policies/procedures and forms to identify and make necessary modifications; (2) provide training for staff on compliance requirements; and (3) submit three complete files containing an annual IEP including transition for students ages 16 or older developed between October 1, 2021, and March 1, 2022, containing all required documentation to provide evidence that compliant practices are now in place. The SPCSA submitted the required material to satisfy the corrective action requirements. The NDE reviewed the information submitted, including new files, and specifically verified that the source of noncompliance was correctly implementing the regulatory requirements, with 100% compliance. The NDE will provide specific training to the SPCSA on the secondary transition requirements during the spring of 2023.

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

In FFY 2021, the NDE issued the SPCSA a noncompliance finding for failure to include required transition components in the IEPs of students aged 16 and above. The SPCSA was required to convene IEP meetings to correct the noncompliance identified in the individual cases for students who remained enrolled in the SPCSA.   
  
The SPCSA was required to submit the corrected IEPs to the NDE so that the NDE could verify that each individual case of noncompliance was corrected. The SPCSA submitted the corrected IEPs. The NDE reviewed each corrected IEP to verify that all secondary transition requirements were in place with 100% compliance. The NDE advised the SPCSA 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 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

**Response to actions required in FFY 2020 SPP/APR**

See applicable sections above where the NDE describes verification of correction of noncompliance findings.

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# 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 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include the State’s 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. States must include race/ethnicity in their 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. 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.

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2020 | Target >= | 28.00% | 28.00% | 28.00% | 28.00% | 27.00% |
| A | 22.46% | Data | 18.88% | 20.71% | 22.20% | 30.24% | 22.46% |
| B | 2020 | Target >= | 57.00% | 57.00% | 57.00% | 57.00% | 63.00% |
| B | 61.86% | Data | 61.29% | 57.32% | 57.84% | 66.05% | 61.86% |
| C | 2020 | Target >= | 73.00% | 73.00% | 73.00% | 73.00% | 74.00% |
| C | 71.19% | Data | 75.05% | 71.89% | 71.76% | 76.88% | 71.19% |

**FFY 2020 Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 27.00% | 30.00% | 30.00% | 33.00% | 33.00% |
| Target B >= | 63.00% | 66.00% | 66.00% | 70.00% | 70.00% |
| Target C >= | 76.00% | 78.00% | 78.00% | 80.00% | 80.00% |

**Targets: Description of Stakeholder Input**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 3,228 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 794 |
| Response Rate | 24.60% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 158 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 328 |
| 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) | 51 |
| 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). | 88 |

| **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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 158 | 794 | 22.46% | 27.00% | 19.90% | Did not meet target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 486 | 794 | 61.86% | 63.00% | 61.21% | Did not meet target | No Slippage |
| 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) | 625 | 794 | 71.19% | 76.00% | 78.72% | Met target | No Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | The following reasons have been identified as contributing to slippage for this Indicator:  1. The data being reported for FFY 2021 is the second full COVID-impacted data year impacting performance on Indicator 14 with slippage in Measure A due to the following specific reasons: • Exiters reported taking a year off/delaying college enrollment (gap year) due to COVID (due to circumstances caused by the pandemic and/or knowing distance learning was not ideal for their learning needs as individuals with disabilities, often based on their distance learning experience during their senior year of high school) • Exiters reported starting but dropping out when virtual instruction was not conducive to successful outcomes for their learning styles/needs and waiting to return until in-person learning resumed • Exiters reported loss of financial aid due to failing online courses  2. Per Nevada’s Indicator 14 contractor, Bob Shepherd, from the Potsdam Institute for Applied Research (PIAR) at State University New York (SUNY) Potsdam, COVID-19 also impacted data completeness, validity and reliability and specifically impacted the State’s ability to collect the data for Indicator 14. Mr. Shepherd reported having more difficulty reaching students during the COVID pandemic, as many students had moved, left the state, etc., and we did not have current contact information to find them, or we were able to reach a family member who had limited information on what the student was doing for higher education, employment, etc. who had left the state. Mr. Shepherd also reported issues hiring and retaining qualified callers to conduct the survey. He had to rehire and retrain callers to an extent he had never previously seen prior to COVID-impacted years.  3. The step the State took to mitigate the impact of COVID-19 on the Indicator 14 data collection was to continue to make calls through the beginning of November compared with pre-COVID years when the survey concluded the end of September. |

**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** | **2020** | **2021** |
| Response Rate | 30.04% | 24.60% |

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

As described more fully below in the section where we “Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics,” Nevada’s analysis of data revealed that Nevada had underrepresentation in dropouts and minority students. Specifically:  
• A crosswalk between dropouts and minority students showed that these are often the same students  
• Response rates were down as dropouts and minority students were largely unable to be reached due to outdated contact information  
To address concerns about outdated contact information which contributes significantly to lower response rates for all students, but particularly for dropout and minority students, the following strategies will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.   
• Nevada will start survey calls at the same time the online survey goes live (June 1) rather than delaying calls three weeks to provide time for online survey completion  
• Nevada will tailor the survey to the intended audience by paying for Nevada area code numbers for the PIAR at SUNY Potsdam Call Center (because students may be reluctant to answer calls from area codes they do not recognize)  
• Nevada will continue to utilize the newly streamlined Indicator 14 survey, with fifteen optional questions removed throughout the survey, to focus on asking the required questions (because the length of the survey itself may have contributed to nonresponse)  
• Nevada will continue to look for ways to make the Indicator 14 survey more user-friendly (short, simple, and easy to complete online or over the phone) moving forward  
  
See also the specific PLANNING, ADMINISTRATION, LOCATING RESPONDENTS, and INCENTIVIZING strategies listed below in the section where we “Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.”

**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’s overall response rate has declined in the last three years, from 35.07% in FFY 2019, to 30.04% in FFY 2020, to 24.70% in FFY 2021. As noted in the discussion of Measure A Slippage above, Nevada’s Indicator 14 contractor, Bob Shepherd, from the Potsdam Institute for Applied Research (PIAR) at State University New York (SUNY) Potsdam, COVID-19 impacted data completeness, validity and reliability and specifically impacted the State’s ability to collect the data for Indicator 14. Mr. Shepherd reported having more difficulty reaching students during the COVID pandemic, as many students had moved, left the state, etc., and we did not have current contact information to find them, or we were able to reach a family member who had limited information on what the student was doing for higher education, employment, etc. who had left the state. Mr. Shepherd also reported issues hiring and retaining qualified callers to conduct the survey. He had to rehire and retrain callers to an extent he had never previously seen prior to COVID-impacted years. Strategies to address this decline in response rate are described in the discussion of Measure A Slippage above.  
  
NDE analyzed the response rates across several categories of responders: Students with learning disabilities, students with emotional disturbance, students with intellectual disabilities, students with all other disability categories, female students, male students, minority students, rural students, students who are English Learners, and students who dropped out of school. The response rate in these subgroups was within the +/- 3 percentage points acceptable range identified by NPSP, except for students in two groups: students with intellectual disabilities and students who dropped out of school.   
  
Students with intellectual disabilities responded to the survey at a 15.94% rate and students who dropped out of school responded to the survey at a 15.49% rate, compared to the overall rate of 24.60%. The “representativeness” of students with intellectual disabilities in the survey was within the +/- 3 percentage points acceptable range (see discussion below), but students who dropped out of school were underrepresented by 7.63 percentage points, suggesting that nonresponse bias in the dropout group may affect the extent to which these results are representative of all students with IEPs who left school during the 2020-2021 school year.   
  
Students who dropped out of school are underrepresented as respondents, and their response rate is 9.11 percentage points lower than the overall response rate (24.6 – 15.49 = 9.11). That calculates to a relative percentage difference of 37% ([9.11 / 24.6] x 100 = 37%).   
  
NDE compared the percentage of students who dropped out of school who reported one-year-out that they were enrolled in higher education (9.7%) to the rate for non-dropouts (21.4%), and to the rate for all students (19.9%). Students who dropped out of school were much less likely than students who did not drop out to be enrolled in higher education.   
  
Because the response rate from the dropout group was significantly less than the overall response rate, there is a likelihood that the results for Indicator 14 may not be generalizable to all students with IEPs who left school during the 2020-2021 school year. If more dropouts had responded to the survey, and if their responses had been similar to those who did respond, then the percentage for Measure A would have been lower than these results indicate.   
  
We also examined the rate at which students who dropped out of school reported being competitively employed and compared that rate to the rate for non-dropouts. The data revealed that students who dropped out were competitively employed at a higher rate (48.5%) than non-dropouts (40.2%). Since Measure B combines students who were enrolled in higher education with students competitively employed, when the combined percentages are compared, the totals were very close. Measure B for students who dropped out of school was 58.3%, compared to 61.6% for non-dropouts, and compared to 61.2% for all students.   
  
Measure C combines students enrolled in higher education, students competitively employed, students enrolled in other education or training, and students otherwise employed. Students who dropped out of school were slightly less likely to report being enrolled in other education or training when compared to non-dropouts (4.8% compared to 6.7%), but they were slightly more likely to report being in some other employment (13.6% compared to 10.7%). When all four categories were combined, Measure C for students who dropped out of school was 76.7% compared to 79.0% for non-dropouts, and 78.7% for all students.  
  
These analyses suggest that nonresponse bias affected Measure A, but because students who dropped out of school were more likely to be competitively employed or enrolled in some other employment than non-dropouts, Measures B and C appear to have been much less affected.   
  
See previous section for steps that will be taken to increase response rates.

**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 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.**

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:  
  
-- 62.17% of students surveyed had learning disabilities; 61.21% of respondents had learning disabilities  
-- 5.98% of students surveyed had emotional disturbance; 5.54% of respondents had emotional disturbance  
-- 4.28% of students surveyed had intellectual disabilities; 2.77% of respondents had intellectual disabilities  
-- 27.57% of students surveyed had "all other disability categories"; 30.48% of respondents had "all other disability categories"  
Each of these differences was within the +/- 3% acceptable range identified by NPSO.  
  
RACE/ETHNIC CATEGORY  
Students were also compared for representativeness according to minority (non-White) status, with the following results. 70.72% of students surveyed were minority students (non-White), and 66.75% of respondents were minority students. 3.97% difference is just outside the acceptable range identified by NPSO and represents an improvement over the 4.68% difference in the previous year.  
  
GENDER AND ELL CATEGORY  
Students were also compared for representativeness according to gender and ELL status, with the following results:  
  
-- 35.84% of students surveyed were female; 35.77% of respondents were female  
-- 64.16% of students surveyed were male; 64.23% of respondents were male  
-- 24.50% of students surveyed were English Language Learners; 27.58% of respondents were English Language Learners  
Gender differences were within the +/- 3% acceptable range identified by NPSO. The ELL difference of 3.08% is just outside the acceptable range.  
  
DROPOUTS  
Students were also compared for representativeness according to dropout status, with the following results.  
  
20.60% of students surveyed were dropouts; 12.97% of respondents were dropouts. The difference of 7.63% is outside the acceptable range and is a larger percentage of difference than the previous year.

**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.**

Analysis of the data revealed that Nevada had underrepresentation in dropouts and minority students. Specifically:  
o A crosswalk between dropouts and minority students showed that these are often the same students.  
o Response rates were down as dropouts and minority students were largely unable to be reached due to outdated contact information.   
o Overall response rates were down due to the loss of connection due to lack of in-person learning from the end of this cohort’s junior year throughout their senior year as well as due to increased mobility during a global pandemic.   
  
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.  
   
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-based 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

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.

**Response to actions required in FFY 2020 SPP/APR**

See applicable section above where the NDE addresses demographic representativeness and the steps the NDE is taking to address this issue. See applicable section above where the NDE analyzed response data including potential nonresponse bias.

## 14 - OSEP Response

## 14 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 65 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 4 |

**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**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 91.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 85.00% | 85.00% | 85.00% | 85.00% | 91.25% |
| Data | 87.00% | 80.95% | 73.85% | 90.11% | 68.97% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 91.25% | 91.25% | 91.50% | 91.50% | 91.50% |

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4 | 65 | 68.97% | 91.25% | 6.15% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

The slippage from FFY 2020 data at 68.97% to FFY 2021 data at 6.15% is the result of a shift in data analysis and reporting in Clark County School District (CCSD). These data are pre-populated from the SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints. The "EMAPS User Guide: IDEA Part B Dispute Resolution" defines "Written Settlement Agreement" as "a legally binding written, signed by the parent and a representative of the public agency, specifying the resolution of the dispute that formed the basis for a due process complaint ARRIVED AT IN A RESOLUTION MEETING ..." (emphasis added). Nothing in this definition suggests that if "most" of the provisions that appear in a settlement agreement were actually arrived at in a resolution meeting, then the agreement meets the definition. The NDE's instructions for this data collection have incorporated this definition for many years.   
  
As explained by CCSD officials, during collection of data for the 2021-2022 school year, CCSD began to interpret this definition more strictly than in previous years. In previous years, if a settlement was reached during the resolution meeting that contained most of the content that was eventually reflected in a settlement agreement, then the district indicated in its data collection that "a written, signed settlement agreement was developed specifying the resolution arrived at in a resolution meeting, and the settlement agreement was signed by both parties."   
  
However, during the collection of data for the 2021-2022 school year, CCSD gave careful consideration to the phrase ARRIVED AT IN A RESOLUTION MEETING and concluded that although their settlement agreements contain most of the agreements arrived at during the resolution meetings, through the process of exchanging drafts with opposing counsel, the final written settlement agreement usually contains additional terms that were not specifically ARRIVED AT IN A RESOLUTION MEETING. In other words, within the four corners of the final written settlement agreement, there is usually substantive content (beyond the general release language) that was not explicitly ARRIVED AT IN A RESOLUTION MEETING.   
  
For these reasons, the NDE reported significantly fewer "written settlement agreements reached through resolution meetings," in the "SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints," as the result of this change in interpretation of the data element by CCSD.   
  
The NDE intends to discuss this strict interpretation with OSEP to ensure that it is consistent with OSEP's expectations about how the term "written settlement agreement" should be interpreted. If OSEP affirms that every substantive provision must have been agreed upon during the resolution meeting for the meeting to "count" as a hearing request resolved through a resolution session settlement agreement, then the NDE will convene a group of stakeholders to revise Nevada's Indicator 15 targets.

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

As discussed in previous APRs, written settlement agreements resulting from resolution meetings are not the only means for settling disputes. During 2021-2022, of the 81 total due process hearing requests received, only three went to a hearing. Consequently, Nevada's actual resolution rate was 96%. 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. The NDE does not value one dispute resolution mechanism over another.

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

## 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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 6 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 1 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 4 |

**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**

See INTRODUCTION section entitled "Broad Stakeholder Input" for an overall discussion regarding broad stakeholder input on the SPP/APR targets.  
  
See each separate Indicator section in Nevada's "IDEA Part B SPP/APR FFY 2000" for detailed information regarding the Indicator-specific mechanisms for soliciting broad stakeholder input on the State's targets for this Indicator, http://www.doe.nv.gov/Inclusive\_Education/SPP\_and\_APR/.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 80.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 80.00% | 80.00% | 80.00% | 80.00% | 80.25% |
| Data | 71.43% | 62.50% | 100.00% | 80.00% | 87.50% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 80.25% | 80.25% | 80.50% | 80.50% | 80.50% |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | 4 | 6 | 87.50% | 80.25% | 83.33% | 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 2021. The State is not required to provide 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

**Updated Data:** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, 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 2021 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 2021 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 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).).

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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) 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 participated in the APT project, and the subset 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

**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** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 10.00% | 14.00% | 15.00% | 16.00% | 17.00% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of Students Scoring Proficient or Above on SBAC** | **Number of Students Tested on SBAC** | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | **Status** | **Slippage** |
| 16 | 294 | 5.36% | 10.00% | 5.44% | Did not meet target | No Slippage |

**Provide the data source for the FFY 2021 data.**

Smarter Balanced Consortium Assessment (SBAC) assessment administered in Spring 2022.

**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 (16 students at or above proficient, divided by 294 students who were assessed = 5.44%).

**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.**

CORE Phonics Survey data were collected from approximately 630 students in 140 APT classrooms in fall and spring in school year 2021-2022. 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 75 – the average percent change was 17%  
• Students in primary grades in self-contained classrooms improved letter knowledge from an average score of 55 to 70 – the average percent change was 21%  
• Students in primary grades in resource rooms improved word reading from an average score of 23 to 38 -- the average percent change was 18%  
• Students in primary grades in self-contained classrooms improved word reading from an average score of 13 to 26 – the average percent change was 15%  
  
Each of these measures reflect improvement over the CORE Phonics Survey data reported for the 2020-2021 school year.

**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)**

NO

**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 project; 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. Three (3) CORE Reading Academies were offered; 17 APT teachers attended, and 36 additional teachers attended, for a total of 53 attendees. The Instructional Interventionists provided 40 in-service training sessions, covering 12 topics; 135 APT teachers attended; 253 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 10 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 2021-2022, these short-term/intermediate outcomes were achieved:  
  
1. 4 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. 89% of administrators reported that IIs have the skills to effectively to support APT teachers.   
5. 94% 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 2021-2022, these short-term/intermediate outcomes were achieved:  
  
1. 89% of APT teachers reported that training was high quality, relevant, and useful.   
2. 86% of APT teachers reported that training increased their knowledge and skills of how to assess, plan and teach.   
3. 90% of APT teachers reported that coaching was high quality, relevant, and useful.   
4. 87% 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 2021-2022, these short-term/intermediate outcomes were achieved:   
  
1. 93% of APT teachers reported increased knowledge in using assessments to inform instruction.   
2. 95% of APT teachers reported increased knowledge in using CORE data to assess, plan, and teach reading.   
3. 88% of APT teachers reported increased knowledge in using progress monitoring data to assess, plan, and teach reading.   
4. 81% of APT teachers reported increased knowledge in using Read Well unit test data to assess, plan, and teach reading.   
5. 10 evidence-based APT practices were used consistently, on average, in 70% of observations.   
6. Approximately 630 students in 29 APT schools showed progress in letter knowledge and word reading when comparing fall-to-spring CORE Phonics Survey data.   
7. 294 third-grade students with disabilities who participated in the APT project were assessed through SBAC in Spring 2022. Of those assessed, 16 were at or above proficiency, for a proficiency rate of 5.44% (16/294 = 5.44%).

**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. During 2021-2022, the APT Leadership Team met to make decisions about adding schools during the 2022-2023 school year. One school had indicated it was no longer interested in participating in the APT project and the request was granted, leaving 28 schools in the original Cohort. In order to add schools, a decision was made to rank existing schools based on the extent of support they continued to need in the project, so that existing IIs could provide services to additional "new" schools. Existing schools were designated as either (1) self-sustaining (minimal support), (2) maintenance (need in-person coaching support but less than a new school), (3) intensive support (need the high level of support that new schools require). When the existing 28 schools were evaluated, 7 were designated as "self-sustaining/referral" schools where they may receive materials, etc., from the APT project, but not coaching support. These 7 schools will no longer be considered part of the APT project. for data collection purposes. That left 21 schools, and 4 of those schools were designated as needing "intensive support" as the result of significant staff and administration turn-over. The remaining 17 schools were designated as "maintenance" and requiring less II support than the "intensive" schools. Four (4) new schools were added to the APT project and designated as needing intensive support. To summarize, going into the 2022-2023 school year, there were 17 schools in the "maintenance" group and 8 schools in the "intensive" group, for a total of 25 schools.  
  
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 10 practices aligned with the APT model: alignment with Nevada academic content standards; teacher engagement; organization of classroom materials; appropriate pacing; alignment with student needs; classroom management reflected in routines, procedures, and transitions; implementing provided curriculum consistent to the program manual; explicit instruction; gradual release model; and student engagement.   
  
Consistency of implementation data were collected during the 2021-2022 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%. However, by 2021-2022 when students and teachers had returned to classrooms, the average frequency had increased to 70%.   
  
Of the 10 practices rated, the practice of alignment with Nevada academic content standards was observed the most frequently at 96%. Higher than average frequencies were reported for teacher engagement (87%), organization of classroom materials (83%), appropriate pacing (80%), alignment with student needs (77%), and classroom management (77%). The least consistent implementation was noted for student engagement (26%), use of the gradual release model (53%); and explicit instruction (54%).   
  
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 2022-2023 and moving forward, much work continues to need 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.**

There were no additional data collected to support 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.  
3. 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.

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

YES

**If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.**

The NDE and the APT Leadership Team will continue to focus in 2022-2023 and 2023-2024 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 is being 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.   
  
All of the learning lost to the pandemic cannot be recouped in one year, and although the SBAC evaluation data does not yet show a return to our highest pre-COVID SBAC performance for these students, it does show very slight improvement from 2020-2021 levels. We must be patient while children regain lost ground.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

**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 2021-2022, the APT Leadership Team included 3 CCSD administrators, 1 APT principal, 2 APT Instructional Interventionists, 2 NDE staff (including the OIE 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 five times in 2021-2022, in August, November, January, May, and June.   
  
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. In previous years, the Communication Protocol was provided to schools three times per year 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?  
  
During 2021-2022, the communication protocol was not implemented as originally designed. The APT Leadership team discussed the fact that much had been learned and many technological tools have been developed during the COVID-19 school closures, and the continued implementation of a paper-based feedback mechanism is no longer optimal. The time it takes for buildings to respond to communication protocol prompts, followed by time for the APT Leadership Team to review and respond, is not as efficient and effective as it can be. A decision was made to overhaul the communication feedback tool so that building administrators can provide feedback, ask questions, and request assistance in "real time" and responses can be provided much more promptly. Work toward this goal is slated for the 2022-2023 school year. 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, and Nevada PEP provides substantial training to parents relating to reading, social/emotional learning, and other important topics throughout each year. During 2021-2022, Nevada PEP began development of a podcast series designed for parents and is considering doing one to highlight the APT project. Nevada PEP also provides training and support upon request from any APT school.   
  
Finally, during 2021-2022, the APT Leadership Team made an important decision that will further strengthen the connection between school district stakeholders and parents. The CCSD Director of Family & Community Engagement Services was asked to join the APT Leadership Team, and this individual has a history of working cooperatively with CCSD schools and Nevada PEP. As a result, the APT Leadership Team plans to outline a specific plan of action to increase involvement of parents with the APT project.

**Were there any concerns expressed by stakeholders during engagement activities? (yes/no)**

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

During the 2021-2022 school year, the primary concern expressed by stakeholders was how to balance project implementation with fewer IIs than in previous years, with the desire to add new schools. The project addressed this concern by reorganizing the level of support to be provided to existing schools, so that II resources could be utilized where they were most needed in existing schools, and new schools could be added.  
  
As described above, one school had indicated it was no longer interested in participating in the APT project and the request was granted, leaving 28 schools in the original Cohort. In order to add schools, a decision was made to rank existing schools based on the extent of support they continued to need in the project, so that existing IIs could provide services to additional "new" schools. Existing schools were designated as either (1) self-sustaining (minimal support), (2) maintenance (need in-person coaching support but less than a new school), (3) intensive support (need the high level of support that new schools require). When the existing 28 schools were evaluated, 7 were designated as "self-sustaining/referral" schools where they may receive materials, etc., from the APT project, but not coaching support. These 7 schools will no longer be considered part of the APT project. for data collection purposes. That left 21 schools, and 4 of those schools were designated as needing "intensive support" as the result of significant staff and administration turn-over. The remaining 17 schools were designated as "maintenance" and requiring less II support than the "intensive" schools. Four (4) new schools were added to the APT project and designated as needing intensive support. To summarize, going into the 2022-2023 school year, there were 17 schools in the "maintenance" group and 8 schools in the "intensive" group, for a total of 25 schools.

**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 2022-2023.

**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 2022-2023.

**Describe any newly identified barriers and include steps to address these barriers.**

There were no newly identified barriers.

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

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

## 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 Bowers

**Title:**

Nevada Department of Education, Director, Office of Inclusive Education

**Email:**

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**Phone:**

775-687-9146

**Submitted on:**

04/26/23 9:59:23 PM

# Determination Enclosures

## RDA Matrix

**Nevada**

2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[9]](#footnote-10)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 67.08% | Needs Assistance |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 24 | 13 | 54.17% |
| **Compliance** | 20 | 16 | 80.00% |

**2023 Part B Results Matrix**

**Reading Assessment Elements**

| **Reading Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 90% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 85% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 24% | 1 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 91% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 28% | 1 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 90% | 1 |

**Math Assessment Elements**

| **Math Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 90% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 85% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 39% | 1 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 87% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 16% | 0 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 91% | 1 |

**Exiting Data Elements**

| **Exiting Data Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of Children with Disabilities who Dropped Out** | 26 | 0 |
| **Percentage of Children with Disabilities who Graduated with a Regular High School Diploma\*\*** | 65 | 0 |

\*\*When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. § 300.102(a)(3)(iv), in effect June 30, 2017, “the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential.”

**2023 Part B Compliance Matrix**

| **Part B Compliance Indicator[[10]](#footnote-11)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.** | 0.00% | N/A | 2 |
| **Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 11: Timely initial evaluation** | 100.00% | YES | 2 |
| **Indicator 12: IEP developed and implemented by third birthday** | 55.56% | YES | 0 |
| **Indicator 13: Secondary transition** | 45.45% | YES | 0 |
| **Timely and Accurate State-Reported Data** | 97.62% |  | 2 |
| **Timely State Complaint Decisions** | 100.00% |  | 2 |
| **Timely Due Process Hearing Decisions** | 100.00% |  | 2 |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

## Data Rubric

**Nevada**

FFY 2021 APR[[11]](#footnote-12)

|  | **Part B Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3A** | 1 | 1 |
| **3B** | 1 | 1 |
| **3C** | 1 | 1 |
| **3D** | 1 | 1 |
| **4A** | 1 | 1 |
| **4B** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
| **12** | 1 | 1 |
| **13** | 1 | 1 |
| **14** | 1 | 1 |
| **15** | 1 | 1 |
| **16** | 1 | 1 |
| **17** | 1 | 1 |
|  | **Subtotal** | 21 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 26 |

|  |  | **618 Data[[12]](#footnote-13)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
| **Child Count/**  **Ed Envs**  **Due Date: 4/6/22** | 1 | 1 | 0 | 2 |
| **Personnel Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Discipline Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **State Assessment Due Date: 12/21/2022** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **MOE/CEIS Due Date: 5/4/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 20 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 1.23809524) = | 24.76 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 26 |
| B. 618 Grand Total | 24.76 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 50.76 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 52.00 |
| D. Subtotal (C divided by Denominator\*) = | 0.9762 |
| E. Indicator Score (Subtotal D x 100) = | 97.62 |

**\*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APR and 618 -Timely and Accurate State Reported Data**

**DATE: February 2023 Submission**

**SPP/APR Data**

**1) Valid and Reliable Data** - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

**Part B 618 Data**

**1) Timely** – A State will receive one point if it submits all EDFacts files or the entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

|  |  |  |
| --- | --- | --- |
| **618 Data Collection** | **EDFacts Files/ EMAPS Survey** | **Due Date** |
| Part B Child Count and Educational Environments | C002 & C089 | 1st Wednesday in April |
| Part B Personnel | C070, C099, C112 | 1st Wednesday in November |
| Part B Exiting | C009 | 1st Wednesday in November |
| Part B Discipline | C005, C006, C007, C088, C143, C144 | 1st Wednesday in November |
| Part B Assessment | C175, C178, C185, C188 | Wednesday in the 3rd week of December (aligned with CSPR data due date) |
| Part B Dispute Resolution | Part B Dispute Resolution Survey in EMAPS | 1st Wednesday in November |
| Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services | Part B MOE Reduction and CEIS Survey in EMAPS | 1st Wednesday in May |

**2) Complete Data** – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to EDFacts aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in EMAPS. State-level data include data from all districts or agencies.

**3) Passed Edit Check –** A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

## Dispute Resolution



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP’s IDEA Website.  How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

[https://sites.ed.gov/idea/how-the-department-made-determinations/](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsites.ed.gov%2Fidea%2Fhow-the-department-made-determinations%2F&data=05%7C01%7Cdan.royal%40aemcorp.com%7C56561a053eed4e4dffea08db4cd0ea7f%7C7a41925ef6974f7cbec30470887ac752%7C0%7C0%7C638188232405320922%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=REJfNg%2BRs0Gk73rS2KzO2SIVRCUhHLglGd6vbm9wEwc%3D&reserved=0)

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. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-4)
4. Data suppressed due to small cell size. [↑](#footnote-ref-5)
5. Data suppressed due to small cell size. [↑](#footnote-ref-6)
6. Data suppressed due to small cell size. [↑](#footnote-ref-7)
7. Data suppressed due to small cell size. [↑](#footnote-ref-8)
8. Data suppressed due to small cell size. [↑](#footnote-ref-9)
9. For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B." [↑](#footnote-ref-10)
10. The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-11)
11. In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table. [↑](#footnote-ref-12)
12. In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a ‘0’. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table. [↑](#footnote-ref-13)