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

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

**For reporting on
FFY 2021**

**Nevada**



**PART C 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 infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. 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**

The Nevada Department of Health and Human Services IDEA Part C Office, as Nevada’s lead agency for the statewide EI system, works diligently with key stakeholders, including the State Interagency Coordinating Council (ICC), in the yearly development of the State Performance Plan / Annual Performance Report (SPP/APR). The SPP/APR serves as both a progress report for Nevada’s EI system and as a report for the State’s stakeholders. The State of Nevada’s IDEA Part C FFY 2021 SPP/APR covers the timeframe from July 1, 2021 through June 30, 2022. This timeframe is Federal Fiscal Year (FFY) 2021, State Fiscal Year (SFY) 2022.

Provided here is an overview of Nevada’s annual performance/indicator results and systems that are in place to ensure compliance with IDEA Part C requirements and purposes.

FFY 2021 Indicator Results

Indicator 1. Timely Provision of Services: 92.03%, Did not meet target; slippage occurred.

Indicator 2. Services in Natural Environments: 99.5% Met target; no slippage occurred.

Indicator 3. Child Outcomes
3 A1. 75.00% Met target; No slippage
3 A2. 35.19% Did not meet target; No slippage

3 B1. 76.06% Met target; No slippage
3 B2. 33.87% Did not meet target; No slippage

3 C1. 75.85% Met target; No slippage
3 C2. 37.79% Did not meet target; No slippage

Indicator 4. Family Involvement: Did not meet target; slippage.
4 A. 97.49% Did not meet target; no slippage occurred
4 B. 93.87% Did not meet target; no slippage occurred
4 C. 96.37% Met target; no slippage

Indicator 5. Child Find (Birth to One): 1.3% Met target; no slippage occurred.

Indicator 6. Child Find (Birth to Three): 3.05% Met target; no slippage occurred.

Indicator 7. 45-Day Timeline: 95.86% Did not meet target; slippage occurred

Indicator 8. Early Childhood Transition
Indicator 8A. 96.77% Did not meet target; slippage occurred
Indicator 8B. 54.98% Did not meet target; slippage occurred
Indicator 8C. 94.56% Did not meet target; slippage occurred

Indicator 9. Resolution Sessions: N/A

Indicator 10. Mediation: N/A

Indicator 11. State Systemic Improvement Plan: 75.00% Met target; No slippage

Nevada’s FFY 2021 SPP/APR will be submitted electronically through OSEP’s EMAPS data system by the deadline of February 1, 2023. Following OSEP’s Clarification for FFY 2021, this report will be submitted to Nevada’s Office of the Governor and posted to the Nevada IDEA Part C Office website at http://dhhs.nv.gov/Programs/IDEA/Publications/

Additional information related to data collection and reporting

Nevada's FFY 2021 SPP/APR will be posted on the Nevada Department of Health and Human Services (DHHS) Director's Office, IDEA Part C Office website at http://dhhs.nv.gov/Programs/IDEA/Publications/ not later than June 1, 2023 which is 120 days from February 1, 2023. Additionally, FFY 2021 Report Cards for each of the early intervention service provider programs in the State will be posted on the same website.

**General Supervision System**

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

The IDEA Part C Office maintains a general supervision system that includes procedures for compliance monitoring, dispute resolution and to ensure all components of the statewide early intervention (EI) system meet requirements of Part C of the Individuals with Disabilities Education Act (IDEA). The general supervision system is also designed to evaluate the effectiveness of the EI system in improving outcomes for children and families. The system supports activities to ensure early identification of infants and toddlers with disabilities and the timely provision of early intervention services.

Key monitoring system activities include:

Nevada's Early Intervention (EI) services system is comprised of twelve (12) EI programs statewide which must undergo comprehensive monitoring by the IDEA Part C Office. The general supervision process for comprehensive monitoring, which has been utilized and reported by the State since 2015, is to complete a review of half of the EI programs in each federal reporting period and the remaining EI programs in alternating years (biennially). In FFY 2021, the Part C Office completed comprehensive virtual site monitoring for a cohort of six (6) EIS programs relative to this indicator. The remaining six (6) EI programs were previously monitored in FFY 2020 and will continue on the biennial cycle. The number of children enrolled in each program was taken into consideration to ensure an equitable breakdown of the number of children served statewide, so the data is representative of all children across the state for each year of the cycle.

• Implementing multi-level systems for verification of timeliness and accuracy of data entry by direct users with specific focus on data related to child outcomes
• Conducting ongoing desk audits and focused monitoring as applicable for analyzing data across data sources to evaluate functioning of key system components at the state and program level
• Collecting or verifying data through on-site monitoring and focused monitoring with increased emphasis on results for infants and toddlers and their families
• Maintaining a system for compiling, analyzing and reporting data required under section 618 including investigation of complaints, mediation and due process requests
• Issuing findings of noncompliance to early intervention service providers as a result of general supervision activities (e.g., monitoring and complaint investigation), working with providers to identify underlying causes and ensuring the timely correction of noncompliance
• Collaborating with the ADSD to impose sanctions when appropriate to ensure early intervention service provider program improvement and compliance
• Reporting to the Nevada Early Intervention Interagency Coordinating Council (ICC) and other key stakeholders on the outcomes of program monitoring and improvement

Key dispute resolution procedures include:

• Collaborating with families and programs to address and resolve concerns
• Following IDEA regulations for timely follow up of complaints from families within 60 days of the complaint
• Providing procedural safeguards at all junctures, with the following options available to families, including mediation, hearing, and dispute resolution
• Having a board of mediators available for Part B and Part C systems shared by the Part B system to include mediators with training and experience in early childhood special education should they need to be called upon to support communication and dispute resolutions among families and programs.

Key procedures for data collection, analysis and reporting include:

• Maintaining the statewide Tracking Resources and Children (TRAC) data system for collecting key data from the point a child is referred to the EI system to the time the child exits Part C services; the system also collects critical service data throughout the time the child is enrolled in early intervention services
• Providing training and technical assistance (TA) to early intervention service providers regarding Part C data requirements
• Participating in conferences and webinars hosted by OSEP and OSEP funded TA providers
• Continuing to pursue statewide processes to obtain a data system that is more comprehensive and efficient at all levels of administration of the statewide EI system
• Compiling, analyzing and reporting data results to the U.S. Office of Special Education Programs (OSEP), state administration, key stakeholders and the public on the effectiveness of the system in improving outcomes for young children with disabilities and their families
• Collecting, compiling and analyzing data through the IDEA Part C Office Annual Family Survey to evaluate the impact of EI services in improving outcomes for families of infants and toddlers participating in early intervention services; working with stakeholders to review and revise the State's Family Survey instrument and process to optimize input from families in system evaluation and improvement
• Compiling, analyzing and reporting data on specific outcomes for children served by the system by integrating data from the TRAC data system and the Child Outcomes analysis spreadsheet developed by the Early Childhood Outcomes (ECO) Center
• Partnering with Nevada’s Aging and Disabilities Services Division (ADSD) to budget for a new data system, as well as review potential vendors for data system development

Key activities for collaboration include:

• Ongoing collaboration with Nevada Part C and the following entities in addressing concerns among EI families, programs and the system as needed: Aging and Disability Services Division (ADSD), ADSD Quality Assurance, National Center for Pyramid Model Innovations,
• Two Part C staff are committee members for the Early Hearing Detection and Intervention (EHDI) program; participation involves attending monthly meetings, and advising the committee on raising community awareness for EHDI.
•The IDEA Part C Office continued collaboration with state EI programs and a state leadership team of stakeholders for our pyramid project with technical assistance from the National Center for Pyramid Model Innovations (NCPMI). Nevada is the first Part C state in the nation to receive this technical assistance from NCPMI. Since the beginning of the Pyramid Model Project (November 2018) the State Leadership Team (SLT) has continued to be involved in developing leadership objectives, rating benchmarks of quality, action planning, and coaching support for Cohorts.
• The Part C Coordinator serves as a governor-appointed board member on the Nevada Early Childhood Advisory Council (ECAC). The Part C Coordinator has assisted the ECAC in developing the ECAC strategic plan for systems improvement.
• The Nevada Part C Office has assisted other states that are venturing into pyramid model social emotional supports, including providing presentations to Montana and Utah.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-based technical assistance and support to early intervention service (EIS) programs.**

Technical assistance (TA) in Nevada’s EI system includes:

• The IDEA Part C Office hosts monthly TA calls with management from all EI service provider agencies throughout Nevada. Topics and trainings are selected based on system needs or questions, and clarification includes references to IDEA regulation and DEC Recommended Practices.

• The IDEA Part C Office provides technical assistance according to OSEP’s guidance on providing services to individuals with disabilities during the post-pandemic era. TA topics included Service Methods re: teleintervention and in person service methods as options which are available to families for their identified needs, IFSP Content FAQs including providing prior written notice to families if a program is anticipating any missed timelines or timeframes, according to OSEP’s FAQ document, and compensatory services during Phase re-entry which occurred during February 2022, which included technical assistance on remedies such as compensatory visits as well as reimbursement for community services according to the IFSP if applicable for families.

• All EI programs also have an assigned Part C Liaison from the Nevada Part C Team. Liaisons provide additional technical assistance as needed by programs in individualized program meetings, emails, phone calls and trainings.

• Information and resources are emailed to program managers on at least a monthly basis including webinars and training resources to support program improvement.

• The IDEA Part C Office facilitates a lending library with resources for EI providers and families, with evidence-based content available in books, journals, CDs, and DVDs.

• The IDEA Part C Office receives TA at the federal level through monthly or bi-monthly calls with OSEP, ECTA, DaSy, CIFR and NCPMI on topics such as fiscal oversight, grant application, recommended practices, general supervision particularly for identified noncompliance and follow up verification of correction of noncompliance, and state early intervention system updates. Nevada Part C is grateful for TA advisors, stakeholders and EI programs which includes families and the hardworking staff that serve them. In large part to the credit of these many individuals and groups, Nevada received a determination of ‘Meets Requirements’ for the FFY 2020 period.

• The Nevada Part C Coordinator participates in the Infant and Toddler Coordinator’s Association as a director at large board member, with opportunities to learn about OSEP’s initiatives and policies and to support Nevada and other states in understanding these initiatives and policies.

**Professional Development System:**

**The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.**

The State IDEA Part C Office continues to focus on ongoing professional development for providers across the early intervention system for children ages birth to three years with disabilities and their families. It is recognized that improved outcomes for children requires consistent implementation of evidence-based practices. The overall system of professional development for early intervention service providers includes the following:

• The IDEA Part C Office prepared for national conference presentations during 2022 in collaboration with EI programs statewide, the National Center for Pyramid Model Innovations (NCPMI), the Pyramid Model Consortium and the State of Montana. Activities and trainings to support personnel in implementing evidence-based practices were conducted to improve the social-emotional outcomes for Part C eligible children and their families.

• The IDEA Part C Office, along with a dedicated workgroup of stakeholders began preparation for a Developmental Specialist (DS) Series with a new Professional Development Center that is being designed to provide no cost coursework toward DS licensure for all professional DS staff to attend and earn professional development credits for licensure. These courses will launch in April 2023 for the 1st cohort and in August 2023 for the 2nd cohort. A 3rd cohort is also being planned to launch during January 2024. Stakeholders included state and community EI programs, institutions of higher education, state administrations, Human Resources and information technology programs, ICC families and other stakeholders.

• The IDEA Part C Office reviews ongoing developmental specialist applications regarding alternative certification to meet credentialing requirements. The goal is to ensure access to highly qualified individuals while reducing barriers for qualifying persons providing special instruction to infants and toddlers and their families. The Alternative Certification Endorsement remains available for Developmental Specialists who meet equivalent Department of Education coursework requirements for the Endorsement in Early Childhood Developmentally Delayed.

• The IDEA Part C Office routinely distributes information on webinars and other resources related to evidence-based practices to all early intervention providers on an ongoing basis.

• The ADSD Quality Assurance team collaborates with the IDEA Part C Office by developing ongoing trainings to provide to early intervention service providers on quality practices to support improved outcomes for children and families e.g., trainings on Transition and social emotional development.

• The IDEA Part C Office provides a lending library for early intervention providers and families to borrow books, articles from peer-reviewed academic journals, and materials which cover evidence-based practices for early intervention. The IDEA Part C Office collaborates with local university professors regarding text book information so books may be ordered for our lending library, and in turn, support early interventionists with reduced costs of textbooks for courses needed for licensure.

• The Nevada Part C Coordinator participated in the Early Childhood Technical Assistance Center (ECTA) aRPy Ambassador program from 2020 to 2022, collaborating with other states and territories to disseminate the Division for Early Childhood (DEC) Recommended Practices to EI programs. During April 2022, The Part C Coordination completed a 2 year commitment for the aRPy Ambassador program, and the role was assumed by a Part C Developmental Specialist IV/Liaison. Monthly meetings with colleagues at the national level occur to keep the momentum going in promoting evidence-informed practices in the field in order to optimize development and successful achievement of outcomes for children and families receiving Early Interventions services.

**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 11, the State’s Systemic Improvement Plan (SSIP).**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

**Apply stakeholder input from introduction to all Part C results indicators. (y/n)**

YES

**Number of Parent Members:**

2

**Parent Members Engagement:**

**Describe how the parent members of the Interagency Coordinating Council, 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.**

In reference to Nevada Part C's previous FFY 2020 SPP/APR, parent members of the ICC are parents of children who have received are receiving early interventions services. These parents were engaged in setting targets during the October 2021 Quarterly ICC Meeting , the November 2021 Public Stakeholder meeting, the January 11, 2022 Quarterly ICC Meeting and January 27, 2022 ICC Review and Certification of the Annual Performance Report. Engagement included receiving information and providing information on setting targets with the use of the meaningful difference calculator, analyzing data for trends and patterns over the past five years, developing improvement strategies to promote rigor, and evaluating progress through review of qualitative (family survey) and quantitative data (program data). Meetings were governed by Open Meeting Law, and parents were a part of voting process for all Possible Action items, including the review and certification for the Annual Performance Report.

Parents in the Early Intervention system are encouraged to join the ICC and any ICC Subcommittees, which include the Child Find Subcommittee, Family Advisory Subcommittee and Equity Subcommittee. The ICC Equity Subcommittee was approved during the ICC's July 2021 quarterly meeting and began the first Equity Subcommittee meeting during October 2021. One of the two co-chairs for the ICC Equity Subcommittee is a parent of child who has received early intervention services and who was an ICC Parent Board Member.

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

**Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.**

Activities to increase the capacity of diverse groups of parents to support the development of implementation activities included:

• Formation of a new ICC Equity Subcommittee during October 2021. Subcommittee members are tasked with developing goals, vision and strategies/activities to support diversity, equity and inclusion in Nevada's EI system. The IDEA Part C Office plans to report on the Equity Subcommittee's work in improving representativeness in the Family Survey results along with any brainstorming for improving meaningful engagement for all EI families in Nevada.

• Recruitment and family engagement support through email, parent newsletters and ICC 2021 Calendar to all Early Intervention programs in English and Spanish, with information to be relayed by email, in person and virtually from Developmental Specialist/Service Coordinators to families regarding resources on procedural safeguards, IFSPs, library journals, books and videos for EI families, community resources for specific disabilities/conditions, community activities, shared experiences from EI families statewide and support group information.

• State Leadership Team recruitment to parents through direct service practitioners to join the Pyramid Model Project to promote social emotional development which is designed to improve overall outcomes for infants and toddlers with disabilities and their families.

**Soliciting Public Input:**

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

The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing strategies, and evaluating progress occurred as follows during this FFY 2021 reporting period:

 October 2021: Introduced ICC stakeholders to Target Setting by reviewing DaSy framework for setting targets
 November 2021: An in depth review of the Target Setting process was provided at the Public Stakeholder meeting.
 January 2022: Discussed with ICC the finalized targets which are being set for FFY 2020 and up to 2025.

Mechanisms for input included: public meeting in person and virtual comments, email and public survey.
Mechanisms for developing improvement strategies include State Leadership Team collaboration.
Mechanisms for evaluating progress include fidelity testing and gather qualitative (parent report and direct service provider report) and quantitative data (program data on fidelity).

Data analysis, developing improvement strategies and evaluating progress occurs regularly during quarterly meetings for local level yellow bar data for referrals and timely services, with more in depth analysis and review for annual performance report data occurring annually during the month of January (for this reporting period January 2022) and for OSEP Determination occurring annually during the months of July or August (for this reporting period, reviewed with stakeholders during July 2021 regarding Nevada's 2021 determination of Meets Requirements).

**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.**

In reference to previous target setting efforts, a public stakeholder meeting Nov 2021 incorporated the exploration of target setting with final targets set at the January 2022 ICC meeting. Data analysis included review of Indicator data on January 11th and 27th, 2022. Development of improvement strategies included feedback to ensure rigor for the targets. Evaluation for progress was conducted during ICC meetings on October 20, 2022 and January 30, 2023.

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2020 performance of each EIS Program 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 §303.702(b)(1)(i)(A); and a description of where, on its website, 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.**

Nevada's FFY 2020 SPP/APR is posted on the Nevada Department of Health and Human Services (DHHS) Director's Office, IDEA Part C Office website at http://dhhs.nv.gov/Programs/IDEA/Publications/ Additionally, FFY 2021 Report Cards for each of the early intervention service provider programs in the State are posted on the same webpage as listed, under Regional Programs Report Cards.

## Intro - Prior FFY Required Actions

OSEP notes that one or more of the Introduction attachment(s) included in the State’s FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

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

## Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report. OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

## Intro - Required Actions

# Indicator 1: Timely Provision of Services

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Compliance indicator:** Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

**Instructions**

If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

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. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State’s timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs’ (OSEP’s) response table 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, methods to ensure correction, 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.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 61.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 97.93% | 98.31% | 96.00% | 97.54% | 97.52% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 114 | 138 | 97.52% | 100% | 92.03% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Reasons for slippage include scheduling conflicts and critical personnel shortages occurring during the COVID-19 pandemic. Depending on COVID-19 incidence, moratoriums on face-to-face early intervention services occurred on and off statewide during July 2021 to March 2022. State employees completed mandatory furloughs in the 6 months immediately prior to this, impacting the return to the office and to in person services. Also, during this time, enrollment in the EI system experienced surges in case numbers (e.g., Dec 1st count FFY 2020: 2,953 children compared to Dec 1st count FFY 2021: 3,181 children). Incidentally, this upward trend is observed in our recent preliminary data (e.g., Dec 1st count FFY 2022: 3,285 children). These child count data appear to correlate to increases in state population size as well which outpaced the availability of personnel to provide EI services to the growing population.

Finally, delays due to scheduling conflicts and ongoing personnel shortages arising from the COVID-19 pandemic, including factors for exposure/quarantine, illness, hospitalization and extended health needs, i.e., extended symptoms following COVID-19 illness. Further personnel retention issues contributing to delays in services are attributed to resignations that occurred due to additional COVID-19 related factors, which included socioeconomic disparities arising within Nevada when personnel salary demands could not be met by employers to assist individuals in meeting their professional qualification requirements amidst cost-of-living challenges (i.e., skyrocketing costs for housing, fuel and food and increases to university tuition). The Nevada EI system is making proactive efforts toward closing the gap in retention disparities by developing no cost "Grow Your Own" evidence-based professional development to assist personnel in meeting professional requirements.

**Number of documented delays attributable to exceptional family circumstances**

***This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.***

13

**Provide reasons for delay, if applicable.**

Examples of exceptional family circumstances resulting in untimely initiation of services included missed or rescheduled appointments due to changes in the family’s schedule or child/family illness.

After accounting for services delayed due to exceptional family circumstances it was found that 127 of the 138 children reviewed (92%) had all new services initiated in a timely manner. For the eleven (11) children who did not receive timely services, the reasons for delay include scheduling conflicts and ongoing personnel shortages arising from the COVID-19 pandemic, including factors for exposure/quarantine, illness, hospitalization and extended health needs, i.e., "long COVID." Further personnel retention issues contributing to delays in services are attributed to resignations that occurred due to additional COVID-19 related factors, which included socioeconomic disparities arising within Nevada when personnel salary demands could not be met by employers to assist individuals in meeting their professional qualification requirements amidst cost-of-living challenges (i.e., skyrocketing costs for housing, fuel and food and increases to university tuition). The Nevada EI system is making proactive efforts toward closing the gap in retention disparities by developing no cost "Grow Your Own" evidence-based professional development to assist personnel in meeting professional requirements.

**Include your State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

Nevada's Definition of Timely Services:

Early intervention services identified on the initial and subsequent Individualized Family Service Plans (IFSP) of an eligible child, including IFSP reviews, will be provided to the child and family as soon as possible following the family's consent to implement the IFSP. Determination of whether services are provided in a timely manner is based on:

1. Initiation of new services within 30 days from the date the parents provided consent for the IFSP service; or
2. The projected IFSP initiation date as determined by the IFSP team including the family and indicated on the IFSP. This may include services such as periodic follow-up or services needed on an infrequent basis (e.g., on a quarterly basis).

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Nevada's Early Intervention (EI) services system is comprised of twelve (12) EI programs statewide which must undergo comprehensive monitoring by the IDEA Part C Office. The general supervision process for comprehensive monitoring, which has been utilized and reported by the State since 2015, is to complete a review of half of the EI programs in each federal reporting period and the remaining EI programs in alternating years (biennially). In FFY 2021, the Part C Office completed comprehensive virtual site monitoring for a cohort of six (6) EIS programs relative to this indicator. The remaining six (6) EI programs were previously monitored in FFY 2020 and will continue on the biennial cycle. The number of children enrolled in each program was taken into consideration to ensure an equitable breakdown of the number of children served statewide, so the data is representative of all children across the state for each year of the cycle.

Data for this indicator are gathered through child record reviews and are required to include all IFSPs (initial, periodic and annual reviews). The timeframe covered for the FFY 2021 monitoring was all activity between July 1, 2021 and March 31, 2022.

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

A minimum number of records was required to be reviewed by the IDEA Part C Office, which included: 10% of enrollment for large programs (300 or more active children) and 20% for smaller programs (fewer than 300 active children). The number of records reviewed is sufficient to ensure the data was representative of the statewide enrollment and accurately reflected the programs performance relative to all children served by the program.

Comprehensive Monitoring

A total of six (6) EIS programs were monitored for timely initiation of IFSP services in FFY 2021 and include a review of 204 records. Of the records reviewed, 138 had new services added at a new review period date during July 1, 2021 through March 31, 2022. A total of 114 records had all new services initiated within the required timeline. A total of 13 children had at least one service initiated after the required timeline due to family circumstances. Family circumstances resulting in untimely initiation of services included missed or rescheduled appointments due to changes in the family’s schedule or child/family illness. After accounting for services delayed due to family circumstances, it was found that 127 of the 138 children reviewed (92%) had all new services initiated in a timely manner. For the eleven (11) children who did not receive timely services, the reasons for delay include scheduling conflicts and personnel shortages arising from the COVID-19 pandemic, including factors for exposure/quarantine, illness, hospitalization and extended health needs, i.e., "long COVID." Further personnel retention issues contributing to delays in services are attributed to resignations that occurred due to additional COVID-19 related factors, which included socioeconomic disparities arising within Nevada when personnel salary demands could not be met by employers to assist individuals in meeting their professional qualification requirements amidst cost-of-living challenges (i.e., skyrocketing costs for housing, fuel and food and increases to university tuition). The Nevada EI system is making proactive efforts toward closing the gap in retention disparities by developing no cost "Grow Your Own" evidence-based professional development to assist personnel in meeting professional requirements.

This is an increase of children who did not receive Timely Initiation of Services reported last period in FFY 2020.

Of the six (6) programs monitored, five (5) EIS Programs were issued a finding of noncompliance relative to Indicator 1 based on the FFY2021 Annual Comprehensive Monitoring. Findings were as follows:

Program 1: 6 of 7 child records (85%) were compliant.
Program 2: 18 of 19 child records (95%) were compliant.
Program 3: 21 of 23 child records (91%) were compliant
Program 4: 41 of 47 child records (87%) were compliant.
Program 5: 12 of 13 child records (92%) were compliant.

Therefore, timely initiation of IFSP services for 127 of 138 children (92%) were compliant. There were four (4) programs with a level of performance that was not considered substantially compliant. As a result, a Corrective Action Plan (CAP) was required for the programs with program performance of 94% or below. The programs were notified they must correct the noncompliance as soon as possible but not later than one (1) year from the date the finding was issued (June 30, 2022). The program's correction for this indicator will be reported to OSEP in FFY 2021 APR.

**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.***

One (1) program did not meet the 100% target in FFY 2020 and were notified of findings of noncompliance. The program was required to analyze root causes to address program issues through corrective action plans. Since the program who was issued a finding of noncompliance in FFY 2020 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2020, the IDEA Part C Office conducted a verification audit for the program. A selection of children enrolled in the program was pulled from the TRAC data system. This program had an enrollment of 300 or more active records. Therefore, based on our state’s record selection for monitoring process, 10% of records were selected to verify correction. These data reflected the program was performing at 100% and implementing the timely services requirements correctly. As a result, the IDEA Part C Office verified timely correction of noncompliance for this program.

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

The IDEA Part C Office verified individual cases of noncompliance through desk audits and ongoing program reporting that services were initiated for each individual child, although late, unless the child was no longer in the jurisdiction of the EIS provider program/Early Intervention system and no later than one (1) year from the date of notification of noncompliance. This is verified and documented through the utilization of a standard individual child correction form that is a part of the state's monitoring procedures.

When appropriate (depending on the length of the delay), a remedy for the delay was also offered to the family to compensate for the delay in initiation of services. Two (2) child records were reviewed for this program to verify full correction of noncompliance from FFY 2020. This program also underwent training in the requirements for Timely Initiation of Services to ensure continued compliance is sustained. The program achieved correction of noncompliance within the one (1) year time for correction.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - 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 EIS program or provider 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 EIS program or provider, 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**

## 1 - OSEP Response

## 1 - 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 EIS program or provider 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 EIS program or provider, 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 2: Services in Natural Environments

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

**Instructions**

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

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

The data reported in this indicator should be consistent with the State’s 618 data reported in Table 2. If not, explain.

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 98.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= | 96.00% | 96.00% | 96.00% | 97.50% | 97.79% |
| Data | 98.64% | 99.51% | 99.30% | 99.68% | 99.93% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 98.08% | 98.37% | 98.66% | 98.95% | 99.27% |

**Targets: Description of Stakeholder Input**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 3,165 |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Total number of infants and toddlers with IFSPs | 3,181 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,165 | 3,181 | 99.93% | 98.08% | 99.50% | Met target | No Slippage |

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

Data for this indicator are generated using the Tracking Resources and Children (TRAC) child data collection system. These data are reported based on the 618 data report for December 1, 2021 and reflect the number and percent of children who received the majority of their early intervention services in natural environments. All early intervention (EI) programs were reviewed during this reporting period based on 618 data from December 1, 2021 to determine whether children enrolled in each program received the majority of their services in settings considered natural environment.

Although, the statewide target was met, there was one (1) program with a finding issued in this indicator due to a performance of 94%. The program was notified they must correct the noncompliance as soon as possible but not later than one (1) year from the date the finding was issued (June 30, 2022). However, the program has terminated their contract with the Aging and Disability Services Division (ADSD) as of November 1, 2022. Therefore, correction cannot be verified as corrected for this program. All child records were transferred to other EI programs, so the Part C Office will continue to track and gather December 1 count data from all EI programs providing services in Nevada for continuous reporting in next year’s APR.

Nevada continues to maintain a high level of performance in this area and has exceeded the state target. This reporting year's performance data of (99.50%) is slightly lower than 99.93% reported in FFY 2020. These data continue to represent a high level of achievement and are attributable to the individualization of services for children and families.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3: Early Childhood Outcomes

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who demonstrate improved:

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

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

C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**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

 C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

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

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

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

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

**Summary Statement 1:** Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 1:**

Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by (# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 2:**

Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by the (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

*Sampling of****infants and toddlers with IFSPs****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 page 2 for additional instructions on sampling.)*

In the measurement, include in the numerator and denominator only infants and toddlers with IFSPs who received early intervention services for at least six months before exiting the Part C program.

Report: (1) the number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting data under Section 618 of the IDEA; and (2) the number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

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.

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 Process (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.

If the State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i), the State must report data in two ways. First, it must report on all eligible children but exclude its at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or “developmentally delayed children”) or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or “children with diagnosed conditions”)). Second, the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).

## 3 - Indicator Data

**Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i)? (yes/no)**

NO

**Targets: Description of Stakeholder Input**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A1** | 2013 | Target>= | 66.84% | 67.37% | 67.90% | 67.90% | 68.43% |
| **A1** | 65.25% | Data | 70.91% | 65.87% | 65.86% | 69.84% | 74.43% |
| **A2** | 2013 | Target>= | 40.04% | 40.14% | 40.14% | 40.14% | 40.24% |
| **A2** | 39.94% | Data | 44.48% | 42.86% | 38.48% | 35.93% | 34.39% |
| **B1** | 2013 | Target>= | 70.86% | 71.96% | 71.96% | 71.96% | 72.06% |
| **B1** | 70.76% | Data | 79.17% | 76.30% | 74.05% | 65.64% | 77.62% |
| **B2** | 2013 | Target>= | 38.34% | 38.44% | 38.44% | 38.44% | 38.54% |
| **B2** | 38.24% | Data | 40.43% | 39.59% | 35.02% | 33.07% | 33.53% |
| **C1** | 2013 | Target>= | 66.18% | 66.28% | 66.28% | 66.28% | 66.38% |
| **C1** | 66.08% | Data | 77.51% | 74.12% | 72.13% | 72.85% | 77.69% |
| **C2** | 2013 | Target>= | 41.80% | 41.90% | 41.90% | 41.90% | 42.00% |
| **C2** | 41.70% | Data | 49.63% | 47.71% | 41.42% | 40.96% | 37.38% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 68.96% | 69.49% | 70.02% | 70.55% | 71.08% |
| Target A2>= | 40.24% | 40.34% | 40.34% | 40.44% | 40.44% |
| Target B1>= | 72.06% | 72.16% | 72.16% | 72.26% | 72.26% |
| Target B2>= | 38.54% | 38.64% | 38.64% | 38.74% | 38.74% |
| Target C1>= | 66.38% | 66.48% | 66.48% | 66.58% | 66.58% |
| Target C2>= | 42.00% | 42.10% | 42.10% | 42.20% | 42.20% |

 **FFY 2021 SPP/APR Data**

**Number of infants and toddlers with IFSPs assessed**

1,810

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 7 | 0.39% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 418 | 23.09% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 748 | 41.33% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 527 | 29.12% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 110 | 6.08% |

| **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 3 years of age or exited the program | 1,275 | 1,700 | 74.43% | 68.96% | 75.00% | Met target | No Slippage |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 637 | 1,810 | 34.39% | 40.24% | 35.19% | Did not meet 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 Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 4 | 0.22% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 413 | 22.82% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 780 | 43.09% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 545 | 30.11% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 68 | 3.76% |

| **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 3 years of age or exited the program | 1,325 | 1,742 | 77.62% | 72.06% | 76.06% | Met target | No Slippage |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 613 | 1,810 | 33.53% | 38.54% | 33.87% | Did not meet target | No Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 7 | 0.39% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 410 | 22.65% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 709 | 39.17% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 601 | 33.20% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 83 | 4.59% |

| **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 3 years of age or exited the program | 1,310 | 1,727 | 77.69% | 66.38% | 75.85% | Met target | No Slippage |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 684 | 1,810 | 37.38% | 42.00% | 37.79% | Did not meet target | No Slippage |

**The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program**.

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting 618 data | 3,597 |
| The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program. | 1,642 |

| **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 data collected for infants and toddlers who received six (6) months or longer of early intervention services for FFY 2021 were collected using the Child Outcome Summary Form (COSF) 7-point rating scale. The rating scale was developed by the Early Childhood Outcome (ECO) Center to support criteria for defining how NV’s infants and toddlers are compared to same-aged peers. NV also uses the decision tree to support practitioners in determining an appropriate child outcome rating for infants and toddlers. The criterion to determine “comparable to same-aged peers” is defined as a child who has been assigned a score of 6 or 7 on the COS (Child Outcome Summary).

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

The number of infants and toddlers who exited the Part C program during the reporting period was 3,597 children. Of these 3,597 children, 1,955 children were expected to have Exit COSF data based on having received early intervention for six (6) months or more, with a remaining 1,642 children who received less than 6 months of services. Of the 1,955 children, complete data were available for 1,810 children. Nevada is reporting complete data for 92% of infants and toddlers who exited services with a program length of six (6) months or longer. A difference of 145 (8%) of children exists then for progress data which could not be reported; additional of this 145 children, there were 66 children who only had 1 or 2 outcomes included in their data and so their data were incomplete and could not be reported on in this indicator.

Progress data could not be reported for 145 (8%) infants and toddlers who exited services having received six (6) months of services. Reasons for the missing Exit data for these 145 children include:

• Some families that would have received more than 6 months of services but ended services prior to the 3rd birthday due to declining service options available during the intermittent moratoriums on face-to-face EI services, e.g. services within home and community settings shifted to services via telehealth, telephone consultation and limited in-clinic service options during the COVID-19 pandemic State of Emergency which was occurring during more than half of this reporting period (July 2021 to February 2022).

• Some families expressed their preference to forego their EI service visits via telehealth, telephone consultation and limited in-clinic option, and chose to obtain in-person community therapy services beyond the capabilities of the EI system or to forego services altogether.

• Entry COS data were submitted but the EIS program reported the child did not receive early intervention for the entire six (6) month timeframe due to loss of contact with families.

• Entry COS data were submitted for the child; however, the Exit data was not submitted by the program due to a lack of internal tracking processes.

• Exit COS data were submitted for the child; however, Entry data had not been submitted. Therefore, progress could not be determined.

• Entry and/or Exit COS data were submitted by personnel with incomplete fields and the current data system does not stop a data user from submitting the incomplete data.

Representation of progress data for 1,810 children has decreased compared to the previous year FFY 2020 when the State reported 2,076 children with complete Exit data. Also, the number of children who did not receive 6 months of services increased from 934 children during FFY 2020 to 1,642 during FFY 2021. This is a 75.8% increase from FFY 2020 to FFY 2021. Measures the State is taking currently in FFY 2022 in order to promote increased representation of progress data include efforts to secure a new data system with improved processes to gather data for this indicator. A new data system is expected during FFY 2023 through the use of American Rescue Plan funds, with a Go Live project timeframe of September 2023. The IDEA Part C Office is monitoring telehealth data to explore whether alternative options of service delivery methods may have any potential impacts on family engagement. Additional efforts being planned by IDEA Part C Office include providing technical assistance refreshers regarding family engagement training for EI programs.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of families participating in Part C who report that early intervention services have helped the family:

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

State selected data source. State must describe the data source in the SPP/APR.

**Measurement**

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs) divided by the (# of respondent families participating in Part C)] times 100.

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

**Instructions**

*Sampling of****families participating in Part C****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 page 2 for additional instructions on sampling.)*

Provide the actual numbers used in the calculation.

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

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 families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year’s response rate to the previous year(s) response rate(s), 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 families that received Part C services.

Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers receiving services in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.

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

If the analysis shows that the demographics of the infants or toddlers for whom families responded are not representative of the demographics of infants and toddlers receiving services in the Part C program, 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 families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and ethnicity in its analysis. In addition, the State’s analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2006 | Target>= | 96.50% | 97.00% | 97.50% | 97.50% | 97.75% |
| A | 94.29% | Data | 98.05% | 97.16% | 96.84% | 98.87% | 97.24% |
| B | 2006 | Target>= | 95.50% | 96.00% | 96.50% | 96.50% | 96.75% |
| B | ###C04BBASEDATA### | Data | 94.81% | 96.02% | 95.26% | 94.38% | 92.12% |
| C | 2006 | Target>= | 93.50% | 94.00% | 94.50% | 94.50% | 94.75% |
| C | 91.00% | Data | 97.09% | 95.74% | 92.89% | 97.18% | 95.52% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 98.00% | 98.25% | 98.50% | 98.75% | 99.00% |
| Target B>= | 97.00% | 97.25% | 97.50% | 97.75% | 98.00% |
| Target C>= | 95.00% | 95.25% | 95.50% | 95.75% | 96.00% |

**Targets: Description of Stakeholder Input**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

The Family Survey preliminary results for this reporting period were provided to the Interagency Coordinating Council stakeholders during April 2022, with the final results provided to ICC stakeholders during October 2022.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 1,793 |
| Number of respondent families participating in Part C  | 359 |
| Survey Response Rate | 20.02% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 349 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 358 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 337 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 359 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 345 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 358 |

| **Measure** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 97.24% | 98.00% | 97.49% | Did not meet target | No Slippage |
| B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2) | 92.12% | 97.00% | 93.87% | Did not meet target | No Slippage |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 95.52% | 95.00% | 96.37% | Met target | No Slippage |

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

| **Question** | **Yes / No** |
| --- | --- |
| Was a collection tool used? | YES |
| If yes, is it a new or revised collection tool?  | NO |
| The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. | YES |

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Survey Response Rate | 18.79% | 20.02% |

**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 overall survey results increased from 18.79% last year to 20.02% this year and are equitable both ethnically and regionally as described below. The IDEA Part C Office continued to utilize the changes to the Family Survey in FFY19 to increase clarity and ease of use for the families. The data supports this is helping to address ethnic and regional under-representation with the following changes to the Family Survey. Race/Ethnicity were re-ordered to start with the least common Race/Ethnicity and move to the most common Race/Ethnicity, and in order to obtain more accurate identification of program response rate we listed each program name along with its geographic location. The Family Outcomes Survey Instrument continues to have 17 close-ended questions and use the five-point Likert scale (strongly agree, agree, undecided, disagree, and strongly disagree). There is one open-ended question at the end of the survey which allows families to provide a written comment, and families still have the option of not answering questions if they feel they are not applicable.

04/23/2023 Clarification: Additionally, strategies that will be implemented to increase the response rate year over year for those groups that are underrepresented include casting a wider net for engagement with our families though:

• Translation activities: Translating the family survey into languages other than English and Spanish, such as simplified Chinese and Burmese, which IDEA Part C has already completed for our Parent Handbook translations; checking with local EI programs for languages needing translation;

• Formats: Continuing family survey formats with paper survey mailed to families via postal mail and via digital means through Survey Monkey, with inclusion of the aforementioned translations; additionally, IDEA Part C will be exploring an online platform option through an expected Parent Portal that may be added to Part C’s new data system NEIDS (Nevada Early Intervention Data System) after the Go Live launch projected by the vendor Yahasoft for Fall 2023.

• Partnering with Technical Assistance (TA) centers to learn from other Part C states and TA advisors regarding additional effective strategies which Nevada IDEA Part may consider utilizing. Nevada will inquire regarding effective strategies during upcoming meetings and conferences; Nevada IDEA Part C meets monthly with advisors from OSEP, DaSy (The Center for IDEA Early Childhood Data Systems), ECTA (Early Childhood Technical Assistance) Center and other Part C Coordinators from ITCA (Infant and Toddler Coordinators Association).

• Partnering with stakeholders within Nevada, such as Nevada’s Interagency Coordinating Council (ICC) Equity Subcommittee and local Early Intervention programs to request feedback and brainstorming on how to increase representativeness throughout Nevada. The ICC Equity Subcommittee meets quarterly.

• Providing support for capstone work being planned by professional learners attending the Developmental Specialist (DS) Series with Nevada’s EI Professional Development Center. The DS Series capstone is a unique project which brings value to the EI system and which Leaners must complete in order to obtain their certification for our Grow Your Own, no cost option of an Alternative Certification for the DS position. Instructors will promote capstone project options that may focus on increasing representativeness for underrepresented populations.

**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 families that received Part C services.**

To ensure the data is representative of the demographics of the State, the IDEA Part C Office used the Tracking Resources and Children (TRAC) database to obtain the names and addresses of all families in the early intervention system who had a child with an active IFSP for a minimum of six months and was receiving early intervention services from one of the state or community early intervention programs as of February 3, 2022. A total of 1,839 children met this criterion and these families were sent a survey for each child in the home enrolled in early intervention services. On March 10, 2022, the survey was emailed to all eligible families with an email address in the TRAC Data System. Hard copies were mailed to every eligible family (1839) starting March 10, 2022. A number of surveys were returned with invalid addresses (46). A cover letter accompanied each survey, as well as a postage-paid return envelope. The cover letter informed families their survey would be returned to the IDEA Part C Office and all responses would remain confidential. Families were also provided the option to complete their survey on-line through SurveyMonkey. If a family had provided their email address and it was entered into the TRAC data system, they were also emailed a copy of the cover letter and survey. Families were asked to answer the survey questions and return them by April 4, 2022. Local early intervention programs were notified by email of the date the surveys were mailed to families and were asked to encourage families in their program to respond to the survey.
Based on the initial mailing, it was determined the addresses in the TRAC data system for 46 family addresses were invalid. They are not included in the final count because these households never received a survey. Therefore, the final total for distribution of the survey was 1,793. The Nevada IDEA Part C Office mailed out the Family Surveys on March 10, 2022; this mailing included a cover letter with a link to the option to complete the Family Survey via Survey Monkey. An email reminder was sent on March 25, 2022, to all eligible families with an active email in the TRAC Data System to complete the Family Survey. The final total survey responses were 359. One hundred and eighty-one surveys were received by mail and one hundred seventy-eight responded via SurveyMonkey. This is a return rate of 20.02% which is an increase of 1.23% over last year (18.79%).

**Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program.** **States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.**

(Start Clarification)

Updated 04/23/2023: Using the representativeness calculator from Early Childhood Technical Assistance (ECTA) Center, our data compared the percentages of the statewide survey distribution and response for each race/ethnicity as well as the rate of return for each category. The percent of statewide responses were consistent with the percentage for distribution in the White, Asian. The category for Two or More Races were 7.81% of the statewide total but attributed 22.28%, almost tripled the percent of statewide total, this was the largest race/ethnicity category of returns with a rate of return of 57.14%. The remaining categories: American Indian/Alaska Native, Hispanic/Latino, and Black or African American and Native Hawaiian/Other Pacific Islander were slightly lower in percent of responses compared to distribution percentages. Each race ethnicity category had a rate of return of at least 12.2%.

Here below is the breakdown of the number (#) of family surveys distributed statewide by Race/Ethnicity (R/E), the percentage (%) of statewide total, the # responses statewide, the % statewide total and the rate of return by R/E:

White:
684 surveys distributed, which is 38.15% of statewide total; 138 was # Responses Statewide, for 38.44% of Statewide Total, with a Rate of Return by R/E of 20.17%.

Hispanic/Latino
694 surveys distributed, which is 38.71% of statewide total; 85 was # of Responses Statewide, for 23.68% of Statewide Total with a Rate of Return by R/E of 12.24%.

Black or African American
147 surveys distributed, which is 8.20% of statewide total; 19 was # of Responses Statewide, for 5.29% of Statewide Total with a Rate of Return by R/E of 12.92%.

Asian
101 surveys distributed, which is 5.63% of statewide total; 23 was # of Responses Statewide, for 6.41% of Statewide Total with a Rate of Return by R/E of 22.77%

American Indian or Alaska Native
6 surveys distributed, which is 0.33% of statewide total; 1 was # of Responses Statewide, for 0.28% of Statewide Total with a Rate of Return by R/E of 16.66%

Two or More Races
140 surveys distributed, which is 7.81% of statewide total; 80 was # of Responses Statewide, for 22.28% of Statewide Total with a Rate of Return by R/E of 57.14%.

Native Hawaiian/Other Pacific Islander
11 surveys distributed, which is 0.61% of statewide total; 2 was # of Responses Statewide, for 0.56% of Statewide Total with a Rate of Return by R/E of 18.81%.

No Race/Ethnicity listed
10 surveys distributed, which is 0.56% of statewide total; 11 was # of Responses Statewide, for 3.06% of Statewide Total with a Rate of Return by R/E of 1.10%.

Totals: 1793 surveys distributed, for 100% of statewide total; 359 was # of all Responses Statewide, for 100% of Statewide Total with an overall Rate of Return of 20.02%.

As the categories for American Indian or Alaska Native, Hispanic/Latino, Black or African American and Native Hawaiian/Other Pacific Islander were slightly lower compared to the corresponding distribution percentages, the response rates for these ethnicity groups are not representative of the population, and thus indicates that additional strategies and improvement activities are necessary to address the need for increased representativeness in the future. As mentioned, IDEA Part C must cast a wider net for families to engage in the family survey and will utilize the following strategies:

• Translation activities: Translating the family survey into languages other than English and Spanish, such as simplified Chinese and Burmese, which IDEA Part C has already completed for our Parent Handbook translations; and checking with local EI programs for languages needing translation;

• Formats: Continuing family survey formats with paper survey mailed to families via postal mail and via digital means through Survey Monkey, with inclusion of the aforementioned translations; additionally, IDEA Part C will be exploring an online platform option through an expected Parent Portal that may be added to Part C’s new data system NEIDS (Nevada Early Intervention Data System) after the Go Live launch projected by the vendor Yahasoft for Fall 2023.

• Partnering with Technical Assistance (TA) centers to learn from other Part C states and TA advisors regarding additional effective strategies which Nevada IDEA Part may consider utilizing. Nevada will inquire regarding effective strategies during upcoming meetings and conferences; Nevada IDEA Part C meets monthly with advisors from OSEP, DaSy (The Center for IDEA Early Childhood Data Systems), ECTA (Early Childhood Technical Assistance) Center and other Part C Coordinators from ITCA (Infant and Toddler Coordinators Association).

• Partnering with stakeholders within Nevada, such as Nevada’s Interagency Coordinating Council (ICC) Equity Subcommittee and local Early Intervention programs to request feedback and brainstorming on how to increase representativeness throughout Nevada. The ICC Equity Subcommittee meets quarterly.

• Providing support for capstone work being planned by professional learners attending the Developmental Specialist (DS) Series with Nevada’s EI Professional Development Center. Capstone work is a unique project which brings value to the EI system and which Leaners must complete in order to obtain their certification for the Grow Your Own, no cost option of an Alternative Certification for the DS position. Instructors will promote capstone project options that may focus on increasing representativeness for underrepresented populations.

(End Clarification; the following wording remains as submitted on 02/01/2023).
--

Nevada’s FFY 2021 rate of return of 20.02% shows an increase of 1.23% from 18.79% last year in FFY 2020. Of the 1,793 Family Surveys distributed with valid addresses, there were eight (8) hard copy Family Surveys returned without a program chosen. It is impossible to know which region of the state the eight (8) “No Answer” surveys (2.2%) should be attributed.

The percent of statewide responses received for each region were consistent with the percent distributed for each region. The southern region of the state had a lower than anticipated rate of return, with 58.2%% of the statewide responses while the region served 64.7% of those receiving surveys. The northwest region of the state had a slightly higher than anticipated rate of return, with 36.2% of the statewide responses while the region served 32.2% of those receiving surveys. Lastly, the northeast region of the state had a slightly lower rate of return of 3.3% while the region served 4.1% of those who received the survey.
The percent of statewide responses received for each region was generally consistent with the percent distributed for each region. The rate of survey return by region was also relatively consistent with the statewide rate of return with a variation of ±3.5%. The northwest region was higher than the statewide response at 3.58% above the statewide return rate. Southern and northeast regions were slightly lower than the statewide response, with -2.0% and -3.58% respectively.

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).**

The representativeness includes racial and geographic location as we do not use socio-economic status data for the State of Nevada. The IDEA Part C Office compared the population eligible to receive the survey to the actual surveys returned both in ethnicity and region to determine representativeness.

(Start Clarification)

Added 04/23/2023: The metric which IDEA Part C Office used is the representativeness calculator from the Early Childhood Technical Assistance (ECTA) Center. This representativeness calculator factored the survey distribution, responses and rate of return by EI program, comparison of regional distribution and response, and the distribution and rate of return by ethnicity.

(End Clarification)

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

The results of the FFY 2020 Survey are as follows:

1. Know Their Rights
Statewide: This data are based on responses to Question 13 of the SFY 2022 Annual Family Survey. Families generally agreed or strongly agreed with the three federally mandated questions on the survey. For questions related to understanding their rights under IDEA, 97.49% (349/358) of the families responding to the 2022 survey agreed with the following statement: "My IFSP team helps me know my parent rights regarding early intervention services (the procedural safeguards that are in the parent handbook)". There were 2.23% of the families who were undecided (8/358) and 0.28% of the families disagree (1/358) with the statement. There was one family that did not answer the question. Performance for this statement did not meet the state target of 98.0% but showed an increase of 0.25% compared to the 2021 survey.

2. Effectively Communicate Their Children’s Needs
Statewide: This data are based on responses to Question 6 of the SFY 2022 Annual Family Survey regarding the impact of participating in early intervention services on helping them to support their child’s development, 93.87% (337/359) of responses were favorable for the statement: “The early intervention services we received have helped me effectively communicate my child’s needs". There were 1.36% of families disagreed or strongly disagreed with the statement (7/359) and 4.80% of the families indicated they were undecided regarding this question (15/359). Performance for this statement did not meet the state target of 97.00% but showed an increase of 2.06% compared to the 2021 survey.

3. Help Their Children Develop and Learn
Statewide: These data are based on responses to Question 14 of the SFY 2022 Annual Family Survey regarding helping their child develop and learn 96.37% (345/358) responded favorably to the following statement: “My Early Intervention providers have supported me in knowing how to help my child develop and learn.” There were 1.12% of families which disagreed or strongly disagreed with the statement (4/358) and 2.51% families indicated they were undecided regarding this question (9/358). Performance for this statement met the state target of 95.00% and showed a decrease of 1.83% compared to the 2021 survey.

## 4 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , 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 families responding are representative of the population.

OSEP notes that one or more of the Indicator 4 attachment(s) included in the State’s FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

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

## 4 - OSEP Response

The State indicated that the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. However, in its description of the State's analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, the State also reported "[a]s the categories for American Indian or Alaska Native, Hispanic/Latino, Black or African American and Native Hawaiian/Other Pacific Islander were slightly lower compared to the corresponding distribution percentages, the response rates for these ethnicity groups are not representative of the population, and thus indicates that additional strategies and improvement activities are necessary to address the need for increased representativeness." OSEP notes that the State included strategies and improvement activities to address this issue in the future.

## 4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, 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 families responding are representative of the population.

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the E*DFacts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

**Instructions**

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

Describe the results of the calculations.The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.47% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 1.00% | 1.00% | 1.00% | 1.08% | 1.08% |
| Data | 1.11% | 1.13% | 1.08% | 1.08% | 1.07% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.12% | 1.16% | 1.20% | 1.24% | 1.28% |

Targets: Description of Stakeholder Input

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

Interagency Coordinating Council (ICC) Child Find Subcommittee meetings occurred three (3) times during this reporting period with stakeholders statewide (August 2021, December 2021 and March 2022). These ICC Child Find Subcommittee meetings followed Nevada Open Meeting Law and covered topics for strategic public awareness with developmental milestones and family engagement activities.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 1 with IFSPs | 438 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 1 | 33,591 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 438 | 33,591 | 1.07% | 1.12% | 1.30% | Met target | No Slippage |

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

Data for this indicator are gathered through the Tracking Resources and Children (TRAC) statewide data system and include all children with an active Individualized Family Service Plan (IFSP) on December 1, 2021. This is a point-in-time count.

Nevada count of children served ages birth to one (1) year for this reporting period was 438 which is 56 more children than reported for December 1, 2020. The number represents 1.30% of the general population of infants in the State.

Nevada’s performance at 1.30% met the 1.12% target. This is slightly above the national average of 1.25%.

Our State Demographer provides annual population estimates specific to counties in Nevada by age. The numbers of those ages birth to 1 provided by the State Demographer for the reporting period reflect a higher population count (40,549 children) than OSEP's estimate entered in the table above see "Population of infants and toddlers birth to 1" as 33,591 children. It may be worth noting that there may be a discrepancy in numbers due to actual population growth out pacing the estimated data set. Using the State Demographer's number as the denominator, we see the data reflect 1.08% for this indicator--this would not have met the FFY 2021 Target of 1.12% and yet would have had no slippage. The IDEA Part C Office continues to implement strategies to ensure that state and local referral sources are aware of how to access and refer infants for whom there is a developmental concern.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100.

**Instructions**

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

Describe the results of the calculations . The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.36% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 2.00% | 2.00% | 2.00% | 2.46% | 2.46% |
| Data | 2.98% | 2.95% | 2.97% | 3.19% | 2.73% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 2.63% | 2.80% | 2.97% | 3.14% | 3.31% |

Targets: Description of Stakeholder Input

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

Interagency Coordinating Council (ICC) Child Find Subcommittee meetings occurred three (3) times during this reporting period with stakeholders statewide (August 2021, December 2021 and March 2022). These ICC Child Find Subcommittee meetings followed Nevada Open Meeting Law and covered topics for strategic public awareness with developmental milestones and family engagement activities.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 3 with IFSPs | 3,181 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 3 | 104,383 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,181 | 104,383 | 2.73% | 2.63% | 3.05% | Met target | No Slippage |

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

Data for this indicator are gathered through the Tracking Resources and Children (TRAC) statewide data system and include all children with an active Individualized Family Service Plan (IFSP) on December 1, 2021. This is a point-in-time count.

Nevada count of children served ages birth to three (3) years for this reporting period was 3,181, which is 228 children more than reported for December 1, 2020 (2,953). Nevada’s performance at 3.05% met the 2.63% target. This performance is slightly below the national average of 3.66%. The IDEA Part C Office continues to implement strategies to ensure that state and local referral sources are aware of how to access and refer infants for whom there is a developmental concern.

Our State Demographer provides annual population estimates specific to counties in Nevada by age. The numbers of those ages birth to 3 provided by the State Demographer for the reporting period reflect a higher population count (121,210 children) than OSEP's estimate entered in the table above see "Population of infants and toddlers birth to 3" as 104,383 children. It may be worth noting that there may be a discrepancy in numbers due to actual population growth out pacing the estimated data set. Using the State Demographer's number as the denominator, we see the data reflect 2.62% for this indicator--this would not have met the FFY 2021 Target of 2.63% and yet would have had no slippage. The IDEA Part C Office continues to implement strategies to ensure that state and local referral sources are aware of how to access and refer infants for whom there is a developmental concern.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

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

**Compliance indicator:** Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

**Measurement**

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

**Instructions**

*If data are from State monitoring, describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.*

Targets must be 100%.

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 actual numbers used in the calculation.

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 67.10% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.88% | 99.76% | NVR | 99.01% | 99.18% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,903 | 3,529 | 99.18% | 100% | 95.86% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable.**

Reasons for slippage include scheduling conflicts and critical personnel shortages occurring during the COVID-19 pandemic. Depending on COVID-19 incidence, moratoriums on face-to-face early intervention services occurred on and off statewide during July 2021 to March 2022. State employees completed mandatory furloughs in the 6 months immediately prior to this, impacting the return to the office and to in person services. Also, during this time, enrollment in the EI system experienced surges in case numbers (e.g., Dec 1st count FFY 2020: 2,953 children compared to Dec 1st count FFY 2021: 3,181 children). Incidentally, this upward trend is observed in our recent preliminary data (e.g., Dec 1st count FFY 2022: 3,285 children). These child count data appear to correlate to increases in state population size as well which outpaced the availability of personnel to provide EI services to the growing population.

Finally, delays due to scheduling conflicts and ongoing personnel shortages arising from the COVID-19 pandemic, including factors for exposure/quarantine, illness, hospitalization and extended health needs, i.e., "long COVID." Further personnel retention issues contributing to delays in services are attributed to resignations that occurred due to additional COVID-19 related factors, which included socioeconomic disparities arising within Nevada when personnel salary demands could not be met by employers to assist individuals in meeting their professional qualification requirements amidst cost-of-living challenges (i.e., skyrocketing costs for housing, fuel and food and increases to university tuition). The Nevada EI system is making proactive efforts toward closing the gap in retention disparities by developing no cost "Grow Your Own" evidence-based professional development to assist personnel in meeting professional requirements.

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.**

480

**Provide reasons for delay, if applicable.**

Reasons for delay according official child records include staff turnover, child illness (some child hospitalizations), families changing programs and having to restart intake process and parents canceling MDT or IFSP meetings due to work schedules or other schedule conflicts.

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Full reporting period: July 1, 2021 through June 30, 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

(Clarification 04/23/2023)

The performance data for this indicator are taken from the Tracking Resources and Children (TRAC) data system. All early intervention service (EIS) providers in the State are required to maintain individual child data in the TRAC system for all children enrolled in their programs. The data for this report are based on the final data for the FFY 2021 reporting period. Data were collected from every child with a new referral and IFSP in all programs for the period from July 1,2021 through June 30, 2022 and is representative of the total population served in this time period.

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

The Nevada Part C Team considers that these data may be impacted due to staff turnover resulting in critical staff shortages. From March 2020 part of this FFY 2021 reporting period (February 2022) the state of Nevada was in a state of emergency issued by Nevada's Governor. Due to limitations during the COVID-19 pandemic, state staff were required to work remotely intermittently as state offices were closed intermittently following the state of emergency.

A finding of noncompliance is issued to any program whose performance was less than 100%. In FFY 2021, eleven (11) programs were issued findings of noncompliance for the 45-day timeline. Quarterly data reviews will be ongoing as these eleven (11) programs are still within their year of correction and will be reported on during FFY 2022 federal reporting.

**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** |
| --- | --- | --- | --- |
| 7 | 7 | 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.***

Quarterly data reports for this indicator are generated from the TRAC data system. When a program was found to be at 100% for one (1) quarter based on the new data, the program demonstrated it is implementing the requirements of this indicator for all children enrolled, and the program was provided written notification of correction of the identified noncompliance. Each program that was issued new findings were required to review their tracking processes for the eligible timeline to identify the underlying causes leading to non-compliance and to ensure compliance with the 45-day timeline. For the programs that have a finding of noncompliance for this indicator based on data for the first three quarters, the agency’s TRAC data for the fourth quarter of the year is used to verify correction.

The IDEA Part C Office verified through desk audits and ongoing program reporting that the evaluation and assessment and an initial IFSP meeting were conducted, although late, for the children whose program had noncompliance. In FFY 2020, sixteen (16) individual child records across seven (7) programs were issued findings of noncompliance. Quarterly data reviews revealed all seven (7) programs had timely correction, with three (3) of seven (7) programs being issued letter of correction from IDEA Part C on June 30, 2021. One (1) of seven (7) programs received their letter of correction on January 27, 2022. Another one (1) of seven (7) programs received their letter of correction on February 18, 2022. The remaining two (2) of seven (7) programs received their letter of correction on February 24, 2022. The issuance of the letters of correction for all seven (7) programs reflect these programs at 100% compliance. Additional technical assistance was provided in the requirements of the 45-Day Time requirement to ensure continued compliance is sustained.

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

Sixteen (16) individual child records across seven (7) programs were issued findings of noncompliance. During FFY 2020 (July 1, 2020 to June 30, 2021), quarterly data reviews reflected that evaluation, eligibility and initial IFSP were completed for these sixteen (16) children, although late.

**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** |
| --- | --- | --- | --- |
| FFY 2019 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

Quarterly data reports for this indicator are generated from the TRAC data system. New data reports generated in quarters subsequent to the issuing of the finding are reviewed. When a program was found to be at 100% for one (1) quarter based on the new data, the program demonstrated it is implementing the requirements of this indicator for all children enrolled, and the program was provided written notification of correction of the identified noncompliance. Each program that was issued new findings were required to review their tracking processes for the eligible timeline to identify the underlying causes leading to non-compliance and to ensure compliance with the 45-day timeline. For the programs that have a finding of noncompliance for this indicator based on data for the first three quarters, the agency’s TRAC data for the fourth quarter of the year is used to verify correction.

The IDEA Part C Office verified through desk audits and ongoing program reporting that the evaluation and assessment and an initial IFSP meeting were conducted, although late, for the children whose program had noncompliance. One (1) program remaining from FFY 2019 noncompliance did not demonstrate correction for this indicator during FFY 2020, reflecting 99.6% compliance, which is considered substantially compliant. Nonetheless, this program remained on a corrective action plan (CAP) for this indicator and subsequently corrected on April 18, 2022 bringing the program to 100% during the FFY 2021 reporting period. Additional technical assistance was provided by IDEA Part C to this program on the requirements of the 45-Day Time requirement to ensure continued compliance is sustained.

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

The IDEA Part C Office pulls a data set for each quarter. If all children in that quarter have received their IFSP in a timely manner then the program is 100% compliant. Quarterly data reports for this indicator are generated from the TRAC data system. New data reports generated in quarters subsequent to the issuing of the finding are reviewed. When a program was found to be at 100% for one (1) quarter based on the new data, the program demonstrated it is implementing the requirements of this indicator for all children enrolled, and the program was provided written notification of correction of the identified noncompliance. Each program that was issued new findings were required to review their tracking processes for the eligible timeline to identify the underlying causes leading to non-compliance and to ensure compliance with the 45-day timeline. For the programs that have a finding of noncompliance for this indicator based on data for the first three quarters, the agency’s TRAC data for the fourth quarter of the year is used to verify correction.

## 7 - 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. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2019 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2020 and each EIS program or provider with remaining noncompliance identified in FFY 2019: (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 EIS program or provider, 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**

## 7 - OSEP Response

## 7 - 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 EIS program or provider 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 EIS program or provider, 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 8A: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 85.71% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 95.10% | 97.98% | NVR | 93.51% | 98.39% |

**Targets**

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

**FFY 2021 SPP/APR Data**

**Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. (yes/no)**

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 90 | 93 | 98.39% | 100% | 96.77% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Three (3) of the six (6) programs in the FFY21 Comprehensive Monitoring were issued findings, with one child record out of compliance for each of the three (3) programs. This is in comparison to FFY20, in which one (1) program was issued a finding for a single child record being out of compliance.

The number of records reviewed for Indicator 8A is small in relation to the overall number of records active statewide. Due to the small number of records, one record can remove a program or the state from substantial compliance. In FFY20, 61 of 62 records were compliant at 98.39%, whereas in FFY21 there were 90 of 93 records compliant at 96.77%.

**Number of documented delays attributable to exceptional family circumstances**
**This number will be added to the “Number of children exiting Part C who have an IFSP with transition steps and services” field to calculate the numerator for this indicator.**

0

**Provide reasons for delay, if applicable.**

Delays on the development of the transition plan for three (3) child records reviewed were attributed to a missing component in each transition plan, rendering them incomplete. The transition plans were completed, although late.

Training on transition planning requirements will be revisited throughout the state. Due to sustained critical staff shortages and turnover, new and seasoned staff will receive a refresher training on this indicator to address noncompliance. The statewide system would benefit from ongoing required training and technical assistance in transition compliance indicators, policies, and procedures. The Nevada IDEA Part C Office will provide this technical assistance to all program managers during monthly statewide technical assistance calls. It will be mandatory for managers to then follow-up with their practitioners.

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

State monitoring

**Describe the method used to select EIS programs for monitoring.**

Nevada's Early Intervention (EI) services system is comprised of twelve (12) EI programs statewide which must undergo comprehensive monitoring by the IDEA Part C Office. The general supervision process for Comprehensive Monitoring, which has been utilized and reported by the State since 2015, is to complete a review of half of the EI programs in each federal reporting period and the remaining EI programs in alternating years (biennially). In FFY 2021, the Part C Office completed comprehensive virtual site monitoring for a cohort of six (6) EIS programs relative to this indicator. The remaining six (6) EI programs were previously monitored in FFY 2020 and will continue on the biennial cycle. The number of children enrolled in each program was taken into consideration to ensure an equitable breakdown of the number of children served statewide, so the data is representative of all children across the state for each year of the cycle.

Virtual monitoring included desk audit of TRAC data system, review of official child records in state and community EI program data bases and review of official child records scanned from programs to the Part C Office.

Data for this indicator are taken from Comprehensive Program Monitoring for the reporting period (July 1, 2021– March 31, 2022). A minimum number of records were required to be reviewed by the IDEA Part C Office, which included: 10% of enrollment for large programs (300 or more active children) and 20% for smaller programs (fewer than 300 active children). The number of records reviewed is sufficient to ensure the data was representative of the statewide enrollment and accurately reflected the programs performance relative to all children served by the program. Throughout this monitoring period the provision of services included telehealth or telephone conference and limited in-clinic visits due to the mandated moratorium of temporarily suspending face-to-face services within the home and community.

The data are gathered through monitoring for this indicator, rather than from the TRAC data system, resulting in a difference between the total number of children exiting Part C services in the State during the fiscal year and the number of children for whom data is reflected for Indicator 8A.

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

The state did not meet the target and there was slippage in this indicator. The data reflect a decrease of 1.62% bringing compliance in this indicator to 96.77%.

Three (3) programs were each issued a finding of noncompliance in FFY 2021 based on IDEA Part C Office monitoring. These corrections will be reported in FFY22.

**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.***

One program was issued a new finding in FFY20, however, the program had timely correction. For this program the IDEA Part C office reviewed the record to verify correction. As a result, the data reflected that the program was performing at 100% and had timely correction.

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

The IDEA Part C Office verified through desk audits and ongoing program reporting for this program, the transition plan for the child record with noncompliance was developed, although late. This is documented through the utilization of a standard individual child correction form that is a part of the state's monitoring procedures.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8A - 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 EIS program or provider 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 EIS program or provider, 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**

## 8A - OSEP Response

## 8A - 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 EIS program or provider 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 EIS program or provider, 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 8B: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8B - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 72.73% |

**Targets**

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

**FFY 2021 SPP/APR Data**

**Data include notification to both the SEA and LEA**

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,429 | 2,599 | 72.73% | 100% | 54.98% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Reasons for slippage include our IDEA Part C Office did not keep pace with reporting to produce monthly reports to LEAs, SEAs and EI programs due to a critical shortage in the IDEA Part C Office amidst COVID-19 illness, hospitalizations, bereavement leave, state of emergency procedures for office access and ARP grant deadline-related evaluation and purchasing procedures to meet federal obligation requirements regarding securing a new data system.

Also for this reporting period, a rebound from the pause on in person services occurred with increasing numbers of children entering the system as well as entering the system late (between 100 and 90 days prior to the 3rd birthday). The EI system database does not have an automated notification for late referrals, nor is there an automated system for annual LEA notification tracking. During this time, the IDEA Part C Office were only notifying LEAs on children who would turn 3 years within the next 9 months. To improve efficiencies, toward the end of the reporting period, the IDEA Part C Office extended the notifications to include all children turning 3 years within the next 12 months. This change was enacted to support families, programs and school districts in meeting transition conference timelines.

**Number of parents who opted out**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

0

**Provide reasons for delay, if applicable.**

Reasons for delay include our IDEA Part C Office did not keep pace with reporting to produce monthly reports to LEAs, SEAs and EI programs due to a critical shortage in the IDEA Part C Office amidst COVID-19 illness, hospitalizations, bereavement leave, state of emergency procedures for office access and ARP grant deadline-related evaluation and purchasing procedures to meet federal obligation requirements regarding securing a new data system.

Also for this reporting period, a rebound from the pause on in person services occurred with increasing numbers of children entering the system as well as entering the system late (between 100 and 90 days prior to the 3rd birthday). The EI system database does not have an automated notification for late referrals, nor is there an automated system for annual LEA notification tracking. During this time, the IDEA Part C Office were only notifying LEAs on children who would turn 3 years within the next 9 months. To improve efficiencies, toward the end of the reporting period, the IDEA Part C Office extended the notifications to include all children turning 3 years within the next 12 months. This change was enacted to support families, programs and school districts in meeting transition conference timelines.

**Describe the method used to collect these data.**

Nevada does not have an opt-out policy for notifications to the State Education Agency (SEA) and the Local Education Agency (LEA).

The compliance percentage for this indicator was derived using the Tracking Resources and Children (TRAC) child data collection system. In completing the 618 Exit Data Report, Nevada used the categories under Program Completion for FFY 2021 to calculate the number of children exiting Part C and potentially eligible for Part B. Nevada has defined "potentially eligible for Part B" as all Part C eligible children since Nevada has a restrictive eligibility definition. The Nevada IDEA Part C Office retrieves child information from TRAC and submits two reports to each school district (LEA). The first report includes any child active in the system after their second birthdate, notifying the LEAs and SEA of children that will turn 3 within the next 12 months. This is done to prevent any gap in notification, as children may exit and re-enter less than 90 days before their third birthday. The second report, issued simultaneously, contains the notification information for each child that has turned three from the reporting date back to the beginning of the fiscal year. This allows Nevada to notify for all children, including those that entered Part C late. Annually a report for all children from the previous fiscal year is sent to the LEAs and SEA.

Since the passing of the previous Data Manager in FFY20, the current Data Manager has faced continued challenges of learning data processes with limited understanding and access to the back end of the antiquated data system as well as limited understanding to developing code. In order to meet the needs of the LEAs and SEA in Nevada the report, coding, and tracking were modified multiple times throughout FFY2021. The process has continued to be streamlined, although monthly timelines were not consistently met throughout the reporting year. The continuous changes made to the reporting created some tracking issues throughout FFY21.

The Part C Office is anticipating continued improvements for the LEA process with the American Rescue Plan grant as the Part C Office is utilizing these funds toward purchasing a new customizable off the shelf data system. Vendor selection occurred during March 2022 and Nevada expects to roll out the new data system during September 2023 (FFY23). The new data system is expected to improve tracking, notification, and alert Part C and program staff when new or late referrals are in the system indicating the need to notify LEA/SEA.

The IDEA Part C Office issues monthly email notifications to the pertinent LEA and to the SEA. An email is sent to each county school district. If an email is returned undeliverable, the 619 Coordinator and the county are contacted to determine the reason and correct the contact information to ensure timely and accurate notification. School districts where there were no children potentially eligible received notifications that stated there were no children in their district who were potentially eligible for Part B during the reporting period. Children who were referred less than 90 days prior to their third (3rd) birthday are not included in this calculation, though the LEA/SEA were notified late.

**Do you have a written opt-out policy? (yes/no)**

NO

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

July 1, 2021 through June 30, 2022

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

The process is verified at multiple levels to ensure appropriate notification has been sent for all children with an IFSP which are all potentially eligible for Part B services. Notification is sent to the LEA and the SEA for all children exiting Part C and potentially eligible for Part B during the reporting period. The State of Nevada verifies the number of Part B potentially eligible children exiting Part C against the notifications sent to LEAs and SEAs for all children. For this reporting period spanning the entire reporting period, there were 2,599 children who were potentially eligible for Part B services, 1,429 children were reported for transition to the LEA/SEA on time.

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

The Part C Office is anticipating continued improvements for the LEA process with the American Rescue Plan (ARP) grant as the Part C Office has begun utilizing in large part these funds toward purchasing a new data system. Concentrated and intentional efforts carried out by IDEA Part C Office during the FFY 2021 reporting period related to obtaining a new data system with ARP funding included: Fiscal/budget preparations, justifications and stakeholder engagement for ARP allocations (July-Oct 2021), Vendor demonstrations (Nov-Dec 2021), contract solicitation process (Nov-Dec 2021), request for proposals (Jan 2022), evaluation (Feb-March 2022), selection and contract work (April-May 2022), legislative approval and hiring the project manager contractor (May-June 2022). All of these efforts were required to begin the actual data system build with selected, contracted vendor YahaSoft beginning discovery during July 2022. The potential roll out of the new data system is anticipated to occur during September 2023.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - 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 EIS program or provider 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 EIS program or provider, 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**

## 8B - OSEP Response

## 8B - 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 EIS program or provider 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 EIS program or provider, 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 8C: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 71.40% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 97.94% | 98.51% | 97.49% | 99.92% | 97.96% |

**Targets**

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

**FFY 2021 SPP/APR Data**

**Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services. (yes/no)**

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,413 | 1,680 | 97.96% | 100% | 94.56% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Reasons for slippage include scheduling conflicts and critical personnel shortages occurring during the COVID-19 pandemic. Depending on COVID-19 incidence, moratoriums on face-to-face early intervention services occurred on and off statewide during July 2021 to March 2022. State employees completed mandatory furloughs in the 6 months immediately prior to this, impacting the return to the office and to in person services. Also, during this time, enrollment in the EI system experienced surges in case numbers (e.g., Dec 1st count FFY 2020: 2,953 children compared to Dec 1st count FFY 2021: 3,181 children). Incidentally, this upward trend is observed in our recent preliminary data (e.g., Dec 1st count FFY 2022: 3,285 children). These child count data appear to correlate to increases in state population size as well which outpaced the availability of personnel to provide EI services to the growing population.

Finally, delays due to scheduling conflicts and ongoing personnel shortages arising from the COVID-19 pandemic, including factors for exposure/quarantine, illness, hospitalization and extended health needs, i.e., extended symptoms following COVID-19 illness. Further personnel retention issues contributing to delays in services are attributed to resignations that occurred due to additional COVID-19 related factors, which included socioeconomic disparities arising within Nevada when personnel salary demands could not be met by employers to assist individuals in meeting their professional qualification requirements amidst cost-of-living challenges (i.e., skyrocketing costs for housing, fuel and food and increases to university tuition). The Nevada EI system is making proactive efforts toward closing the gap in retention disparities by developing no cost "Grow Your Own" evidence-based professional development to assist personnel in meeting professional requirements.

**Number of toddlers for whom the parent did not provide approval for the transition conference**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

26

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.**

151

**Provide reasons for delay, if applicable.**

Examples of exceptional family circumstances resulting in missing transition timelines included missed or rescheduled appointments due to changes in the family’s schedule or child/family illness and declines by families to hold their transition conference with the school district and EI program by at least 90 days prior to the child's 3rd birthday with these families later changing their decision and wanting to hold their transition conference after the 90-day timeline.

Program reasons for delay were attributed to training issues in that some personnel completed transition planning but not the actual transition conference, believing that the completion of the transition planning sufficed for meeting IDEA Part C requirements. Further, turnover among new Developmental Specialists/Service Coordinators left new IFSP teams experiencing challenges in meeting missing IFSP and Transition plan requirements.

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

July 1, 2021 through June 30, 2022.

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

The data include every child who exited at three within the reporting period with an exit category of Part B Eligible or Part B Not Determined, who were required to have a transition conference.

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

Staff require additional data system training for entering transition information in terms of distinctions between transition planning and transition meeting.

**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** |
| --- | --- | --- | --- |
| 8 | 6 | 0 | 2 |

**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 FFY 2020, eight (8) programs were issued new findings for this indicator and six (6) programs had timely correction that was verified by the IDEA Part C Office. Two (2) programs did not have verified correction of noncompliance within a one (1) year period of time. The IDEA Part C Office continues to review subsequent quarterly data and will continue monitoring these programs with desk audits for these two (2) programs to identify progress made and any training needs. IDEA Part C Office will report on this during FFY 2022.

Data reports for all EI programs for this indicator are generated on a quarterly basis from the Tracking Resources and Children (TRAC) data system. Data is individualized by each program to include the total number of required transition conferences including: the number of children exiting Part C services, transition conferences completed within the required timeline, conferences not completed due to family exception and program exception. From that information, the percentage of compliance is calculated for each program. The Part C Office reviews this data each quarter for compliance. All data reports generated in quarters subsequent to the issuing of the finding are reviewed. When a program was found to be at 100% for one (1) quarter it was determined the program had met the requirements for all children enrolled and the program was provided with written notification of correction of the noncompliance.

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

Sixty-nine (69) children across (8) programs did not have timely transition conferences in FFY 2020. Of these eight (8) programs, six (6) programs were verified to have corrected their noncompliance. Four (4) of the six (6) programs were issued timely correction letters on June 30, 2021. Incidentally, these four (4) programs received their correction letters on the same day as their program response letters following FFY 2020 comprehensive monitoring because these four (4) programs were found to have 100% compliance based on their 3rd quarter data for the number of children required to have a timely transition meeting. One (1) of the six (6) programs was issued their letter of correction on February 15, 2022. The remaining one (1) of the six (6) programs received their letter of correction on February 24, 2022.

Data reports for all EI programs for this indicator are generated on a quarterly basis from the Tracking Resources and Children (TRAC) data system. Data is individualized by each program to include the total number of required transition conferences including: the number of children exiting Part C services, transition conferences completed within the required timeline, conferences not completed due to family exception and program exception. From that information, the percentage of compliance is calculated for each program. The Part C Office reviews this data each quarter for compliance. All data reports generated in quarters subsequent to the issuing of the finding are reviewed. When a program was found to be at 100% for one (1) quarter it was determined the program had met the requirements for all children enrolled and the program was provided with written notification of correction of the noncompliance.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Two (2) programs did not have verified correction of noncompliance within a one (1) year period of time. The IDEA Part C Office continues to review subsequent quarterly data and will continue monitoring these programs with desk audits for these two (2) programs to identify progress made and any training needs and address the corrective action plan (CAP) as well as any underlying causes and the extent of these causes. For example, the IDEA Part C Office provided technical assistance communications with these two (2) programs including meetings to develop their CAPs and to identify and implement program solutions to build upon the available knowledge for personnel (i.e., reviewing training materials, power point presentations on Transition conferences). IDEA Part C Office collaborates with the DHHS Aging and Disability Services Division Quality Assurance Team to identify training needs and training implementation. The IDEA Part C Office will report on this further during FFY 2022.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - 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 EIS program or provider 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 EIS program or provider, 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**

## 8C - OSEP Response

## 8C - 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. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (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 EIS program or provider, 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 9: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

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

This indicator is not applicable to a State that has adopted Part C due process procedures under section 639 of the IDEA.

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, the State must develop baseline and targets and report 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 618 data, explain.

States are not required to report data at the EIS program level.

## 9 - Indicator Data

**Not Applicable**

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

NO

**Select yes to use target ranges.**

**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

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  | 0.00% | .00% |  |
| Data |  |  |  |  |  |

**Targets**

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

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

**Targets**

| **FFY** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target |  |  |  |  |  |  |  |  |  |  |

**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 (low)** | **FFY 2021 Target (high)** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  |  | N/A | N/A |

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

**Instructions**

Sampling from the State’s 618 data 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 mediations reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. 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 618 data, explain.

States are not required to report data at the EIS program level.

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**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

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  | 0.00% | .00% |  |
| Data |  |  |  |  |  |

**Targets**

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

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

## 10 - Prior FFY Required Actions

None

## 10 - 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.

## 10 - Required Actions

# Indicator 11: 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 infants and toddlers with disabilities and their families. 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 Infants and Toddlers with Disabilities and their Families.

***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 five 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 through February 2027, 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 Infants and Toddlers with Disabilities and their Families. 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 infants and toddlers with disabilities and their families by improving early intervention services. Stakeholders, including parents of infants and toddlers with disabilities, early intervention service (EIS) programs and providers, the State Interagency Coordinating Council, and others, are critical participants in improving results for infants and toddlers with disabilities and their families and must be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 11. 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 Infants and Toddlers with Disabilities and their Families;

- 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 EIS Program and/or EIS Provider 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 for Infants and Toddlers with Disabilities and Their Families (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 FFY 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., February 1, 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, 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, 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.

## 11 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

Infants and toddlers exiting early intervention services will demonstrate a significant increased rate of growth in positive social-emotional skills (including social relationships).

**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.**

Indicator 3 data are used regarding infants and toddlers who have received at least 6 months of early intervention services in terms of child outcomes at entry and exit, along with data from online professional development, online provider survey, Family Survey and Pyramid Model project cohort programs.

**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://dhhs.nv.gov/uploadedFiles/dhhsnvgov/content/Programs/IDEA/Theory%20of%20Action\_SSIP\_1.5.22.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** |
| --- | --- |
| 2013 | 65.25% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 68.96% | 69.49% | 70.02% | 70.55% | 71.08% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 3A1. (numerator) The number who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 3A1. (denominator) The number of those children who entered or exited the program below age expectations in Outcome A | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 1,275 | 1,700 | 74.43% | 68.96% | 75.00% | Met target | No Slippage |

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

Child outcome summary (COS) has been used for Indicator 11 State Systemic Improvement Plan (SSIP) annually since 2013, and continues to be used for FFY 2021 reporting. The COS data pertain to infants and toddlers at entry and exit for those children who have received at least 6 months of early intervention services.

Results from Indicator 3. Child Outcomes are specific to Indicator 3 A1. include 75.00% Met target; No slippage.

**Please describe how data are collected and analyzed for the SiMR**.

COS from all children at entry and exit for children with at least 6 months of services. FFY 2021 data of 75.00% reflects the FFY 2021 Target of 68.96% was met, with no slippage. The data collected for infants and toddlers who received six (6) months or longer of early intervention services for FFY 2021 were collected using the Child Outcome Summary Form (COSF) 7-point rating scale. The rating scale was developed by the Early Childhood Outcome (ECO) Center to support criteria for defining how NV’s infants and toddlers are compared to same-aged peers. NV also uses the decision tree to support practitioners in determining an appropriate child outcome rating for infants and toddlers. The criterion to determine “comparable to same-aged peers” is defined as a child who has been assigned a score of 6 or 7 on the COS (Child Outcome Summary).

Social emotional modules available on IDEA Part C's website have pre-test and post-test data compiled into excel spreadsheets to reflect practitioners' progress in knowledge on social emotional topics. Practitioners required to take these modules every 2 years.

Provider survey data regarding confidence and competence for social emotional topics is provided by individual practitioners in the system who voluntarily share their reflections on their practice. This data is obtained via Survey monkey, with compiled data reports analyzed and listed here in Indicator 11.

Family survey data shared for this indicator are obtained from families via mail in survey or emailed electronic survey. Data is compiled by IDEA Part C Office staff, with information categorized per EI program in terms of qualitative data that include individualized open responses for EI experiences. The data are analyzed in comparison to previous years of responses.

**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.**

Other data collected to assess Nevada's progress toward the SiMR include:

• Official child records IFSP SE outcome progress
• Social Emotional (SE) modules from IDEA Part C website
• Annual EI Provider survey
• Annual Family survey
• SSIP Social Emotional/pyramid model project State Leadership Team (SLT) evaluation and action planning

The data collected from these activities are explained below in Additional Data (progress monitoring).

**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.**

Please see Nevada Part C’s SSIP Evaluation and Action Plan on our website Publications page under State Systems Improvement Plan at: https://dhhs.nv.gov/Programs/IDEA/Publications/

**Is the State’s evaluation plan new or revised since the previous submission? (yes/no)**

YES

**If yes, provide a description of the changes and updates to the evaluation plan.**

Updates from key State Leadership Team (SLT) stakeholder meetings include the following efforts intended to continue momentum and to promote effective and ongoing social emotional supports for the EI system:

July 2022: Annual statewide Pyramid celebration to highlight progress among cohorts, family training, and to support scale up for up and coming cohorts

September 2022: One EI program from the 1st Pyramid cohort announced they would be undergoing program closure by November 2022. Other programs experienced critical staff shortages, making training attendance challenging with caseload coverage needs. Two programs in northern rural Nevada were in the process of merging and planned to utilize pyramid veterans to assist practitioners; One program in the northeast planned to build momentum and buy in by hosting book club meetings where practitioners could discuss topics of Prevent-Teach-Reinforce for families.

January 2023: Travel arrangements and scheduling was planned for an in person State Leadership Team Retreat to be held in Reno during February 8-9, 2023. Part C grant funds will be utilized to cover travel expenses for SLT members. The 2-day retreat meetings will cover ongoing rating of Benchmarks of Quality (BoQ), scale up, and roles of SLT members.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

No changes to evaluation components occurred, however updates were provided to highlight sustainment, scale up efforts and statewide stakeholder engagement.

**Provide a summary of each infrastructure improvement strategy implemented in the reporting period.**

• Quality Standards/Data: The Pyramid tool Benchmarks of Quality (BoQs) continued (November and December 2022) with updates approximately every 6 months by the State Leadership Team and Implementation Site Leadership Teams. The BoQs measure the extent to which these indicators/critical elements are in place: Leadership team, Staff readiness/buy in, Family engagement, Building staff capacity, Providing interventions to children with persistent challenging behavior and Monitoring implementation and outcomes.

 • Technical Assistance/Accountability: Annual comprehensive monitoring during April to June 2022 and monthly technical assistance continued to be provided to all programs and included guidance on developing and evaluating IFSP child SE outcomes.

 • Governance/Finance: Decision-making continued with the SLT and with the administrations with Part C and ADSD as the most recent MOU from July 1, 2021 to June 30, 2022 was updated to include funding for Pyramid materials as well as for travel that was projected to resume eventually for Pyramid practices trainings and meetings.

 • Professional Development:

1) SE Modules continued to be required to be completed by practitioners every two years;

2) Pyramid Model training for scale up paused due to critical staff shortages; nonetheless Nevada’s Part C and EI system partnered with Montana Part C and the Pyramid Model Consortium to develop EI-specific E-Modules known as Pyramid Model Practices in Early Intervention, with contracts, scripts and purchasing occurring throughout 2022, with an expected Go Live link for the E-Modules expected during February 2023. The content for these E-Modules captures the in depth essentials needed for statewide pyramid programming, with course lessons covering the following: Pyramid model overviews, principles, practice areas, building relationships and interactions with families, family perspectives, reflecting and reframing connections with families, cultural responsivity, culture and the child's development, levels of cultural awareness, implicit bias, communication practices, active listening, attachment relationships and temperaments, high quality environments and the transactional model, case studies, knowledge checks and more.

3) Professional Development Retention Initiative: With expansion from Cohorts 1 and 2 expanding to Cohort 3, a new Cohort 3 program entered an informational stage, i.e., Cohort 3 has not been ready to be an implementation site due to a critical staff shortage, however the program’s management is participating in SLT meetings to become familiarized with pyramid model. Further, due to statewide critical staff shortages across multiple EI programs, retention initiatives have been at the forefront of system efforts to continue required system improvement efforts and to ultimately prevent delays to services for families to the extent possible. These retention initiatives include “Grow Your Own” programs of study that will begin in April 2023. This professional development will be provided to individuals holding the Developmental Specialist/Service Coordinator position. The PD is at no cost and is based on evidence-based practices.

**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.**

Short term and Intermediate outcomes achieved are listed below. These outcomes are related to quality standards, accountability/monitoring and technical assistance which are necessary to sustainability of pyramid model programming. The sustainability of pyramid programming is promoted in that practitioners are key in supporting and coaching families in achieving their identified goals for social emotional development. As mentioned in previous SSIP reporting, social emotional development in turn benefits overall development and individualized outcomes.

Short term outcomes achieved:

1. Service practitioner’s confidence and competence level will improve when identifying social-emotional needs for infants and toddlers.
2. Service practitioners will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers.
3. There will be an increase in service practitioners’ knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.
4. Service practitioners’ working knowledge and understanding of the use of evidenced-based practices (EBP) to support the social-emotional development of infants and toddlers will increase.

Intermediate outcomes achieved:

1. IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
2. Families will be better able to support and enhance their child’s social-emotional skills and overall development.
3. Service practitioners’ use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
4. IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
5. Families will be better able to support and enhance their child’s social-emotional skills and overall development.
6. Service practitioners’ use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
7. Families will be better able to support and enhance their child’s social-emotional skills and overall development.

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

YES

**Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved*.***

New improvement strategies designed as a retention initiative cover the infrastructure areas listed further below to address statewide critical staff shortages. Part C and EI leadership viewed these staff shortages as posing an imminent danger to meeting the critical mission of serving children and families with quality EI services in a timely manner. Further, a lack of personnel had already hampered SSIP efforts in that pyramid model trainings had to be postponed for staff. Without necessary pyramid training, scale up for potential implementation sites proved to be slow going during this post-pandemic era.

System trends in the first few months of 2022 reflected that new hire Developmental Specialists were resigning from the EI system as the incidence of COVID-19 was subsiding. Staff reported to Nevada Part C information during Summer 2022, that was later confirmed through data from staff surveys in October 2022, which revealed that staff considered the barriers to remaining in their positions included financial hardship as related to affording coursework for required professional licensure. Staff stated that they were experiencing an economic crisis which included skyrocketing housing costs across northern and southern regions of the state, increases in food and fuel costs, and tuition increases for all institutions of higher education in the state. This critical staff shortage ultimately resulted in multiple programs being outpaced in terms of available personnel available to provide services to increasing caseloads of EI children and families, with Delayed Services becoming a reality for 3 of 12 EI programs by Fall 2022.

Governance/Finance:

During July 2022, the Department of Health and Human Services Director's Office encouraged Nevada Part C Office to submit a proposal for ARP funds available through the Governor's Finance Office. The Nevada Part C Office submitted a proposal for $368,100 in ARP funds to cover the costs of developing an Early Intervention Professional Development (PD) Center.

During July-August 2022, Nevada Part C Office received technical assistance from the OSEP-funded Early Childhood Personnel Center (ECPC) and the State of Nevada Department of Administration/Human Resources on evidence-informed frameworks to build a strong PD infrastructure. Along with a PD workgroup comprised of dedicated individuals across state and community programs, efforts toward building a PD Center included IT set up, logo/branding for the PD Center with infographics, a curriculum build/program of study, and Open House/Office Hours meeting to engage with prospective Learners. During September 2022, the Part C Office was notified that the DHHS Director's Office selected the PD proposal to move forward to the State's legislative Inter-Finance Committee (IFC) for approval of funds. During October 2022, the IFC legislators approved the funding for the new EI PD Center. Plans are underway by the EI system's workgroup of stakeholders to design evidence-informed course curriculum that is comparable to university programming as well as to use the approved funds for a contractor that will lead in curriculum implementation, and that will cover payment for course materials and resources for Learners and volunteer Instructors.

Professional Development/Quality Standards:

The new 18-month DS Series program is scheduled to begin during April 2023 for the first Cohort of 25 Learners. The 2nd Cohort is planned for August 2023 and the 3rd Cohort is projected to begin during January 2024. Quality Standards for this professional development curriculum follow the evidence-based curriculum framework provided by the Early Childhood Personnel Center (ECPC), including alignment with Division for Early Childhood (DEC) Recommended Practices, Zero to Three standards, Professional Standards and Competencies for Early Childhood Educators and Initial Practice Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators.

The PD retention initiative is regarded as a means to bolster the EI workforce that will support families in implementing EI practices including the pyramid model. The intentional planning for this initiative is ultimately expected to promote continuity of services and connectedness with families and thus prevent delays in services, all which will lead to improved family engagement in IFSP teams applying evidence-based strategies to promote children's development with fidelity. This will lead to improved outcomes for EI families including progress for these children toward their optimal development.

**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 for Professional Development improvement strategy are to review and select participants by February 15th from the submitted Learner applications for the first DS Series Cohort that will begin in April 2023. A wait list of remaining applicants not selected will be generated for the 2nd Cohort set to begin during August 2023. Hiring and onboarding is needed for a contractor who would lead the PD Center. Preparing volunteer Instructors to work with adults must be scheduled. And providing an initial Learner Orientation during late March 2023 must be scheduled to occur prior to the first course in April 2023. Steps that are farther into the future include evaluation for effective PD rollout and implementation, including data collection that may be used for improvement as well as for justification and request to the legislature to have the contractor position potentially shift to becoming a permanent state position if the data supports the need. The anticipated outcome to be attained during this next reporting period would include that EI personnel are retained and supported in meeting their professional requirements; subsequently EI personnel would ideally remain working in the EI system to serve infants and toddlers with disabilities and their families, and ultimately to support the social emotional development for these children to benefit their overall optimal development and outcomes.

**List the selected evidence-based practices implemented in the reporting period:**

The evidence-based recommended practices that were implemented in Nevada during the FFY 2021 reporting period remained as previously reported on as well as included practices to address system retention issues due to critical staff shortages.

From the Division for Early Childhood (DEC) Recommended Practices on Leadership in reference to Nevada Part C securing funding, seeking TA and planning to implement a new professional development center as a strategic retention initiative:

Leadership. L8. Leaders work across levels and sectors to secure fiscal and human resources and maximize the use of these resources to successfully implement the DEC Recommended Practices.

Leadership. L9. Leaders develop and implement an evidence-based professional development system or approach that provides practitioners a variety of supports to ensure they have the knowledge and skills needed to implement the DEC Recommended Practices.

Leadership. L11. Leaders collaborate with higher education, state licensing and certification agencies, practitioners, professional associations, and other stakeholders to develop or revise state competencies that align with DEC, Council for Exceptional Children (CEC), and other national professional standards.

Listed below for reference are the evidence-based practices previously listed in the previous year's FFY 2020 SPP/APR SSIP:

1) Division for Early Childhood’s Recommended Practices (2014, http://www.dec-sped.org/recommendedpractices) and
2) OSEP Technical Assistance Community of Practice Workgroup on Principles and Practices in Natural Environments (2008, https://ectacenter.org/~pdfs/topics/families/Finalmissionandprinciples3\_11\_08.pdf)
3) National Center for Pyramid Model Innovations (NCPMI): All practices listed in the Early Interventionist Pyramid Practices Fidelity Instrument (EIPPFI)

Ongoing evidence-based practices in NV Part C include, but are not limited to due to space limitations in this reporting section:

• Building partnerships with families: Practitioner identifies and uses the caregiver’s individual preferences, priorities, and needs when providing supports. (DEC F-3, F-4; EI Key Principle 4)

DEC Family F3. Practitioners are responsive to the family’s concerns, priorities, and changing life circumstances.
DEC Family F4. Practitioners and the family work together to create outcomes or goals, develop individualized plans, and implement practices that address the family's priorities and concerns and the child's strengths and needs.
Key principle 4: The early intervention process from initial contacts through transition must be dynamic and individualized to reflect the child’s and family members’ preferences, learning styles and cultural beliefs.

• Social emotional development: Practitioner supports caregivers in promoting their child’s social emotional competence by scaffolding and expanding on their child’s expressions, interactions, play, communication, and autonomy. (DEC F-5, F- 6, INT1-5; EI Key Principle 3)
DEC Family F5. Practitioners support family functioning, promote family confidence and competence, and strengthen family- child relationships by acting in ways that recognize and build on family strengths and capacities.
DEC Family F6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family’s preferences.
DEC Interaction INT5. Practitioners promote the child's problem-solving behavior by observing, interpreting, and scaffolding in response to the child's growing level of autonomy and self-regulation.
DEC Teaming and Collaboration TC2. Practitioners and families work together systematically and regularly exchange expertise, knowledge and information to build team capacity, and jointly solve problems, plan and implement interventions.
Key Principle 3. The primary role of a service provider in early intervention is to work with and support family members and caregivers in children’s lives.

• Family Centered Coaching: Practitioner collaborates with the caregiver to identify opportunities to practice new skills during daily routines and activities in between visits. (DEC INS-13; EI key principle 3, 4 already listed above)
DEC Instruction INS13. Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult- child interactions and instruction intentionally designed to promote child learning and development.

• Dyadic Relationships: Practitioner coaches the caregiver in responding to challenging behaviors in ways that reduce the efficacy and efficiency of the challenging behavior. (INS 7, INS 9, INS 13, INT5. EI key principle 2, 3).
DEC Instruction I7. Practitioners use explicit feedback and consequences to increase child engagement, play, and skills.
DEC Instruction I9. Practitioners use peer mediated intervention to teach skills and to promote child engagement and learning.
DEC Instruction INS13. Already listed above
DEC Interaction INT5. Practitioners promote the child's problem-solving behavior by observing, interpreting, and scaffolding in response to the child's growing level of autonomy and self- regulation.
Key principle 2. All families, with the necessary supports and resources, can enhance their children’s learning and development.

• Challenging behavior: Practitioners collaborates with caregivers and other professionals to create a contextual and relevant behavior support plan. (DEC F3, F4. previously listed; EI key principle 2-4 listed, 5, 6, 7).
Principle 5. IFSP outcomes must be functional and based on children’s and families’ needs and family-identified priorities.
Principle 6. The family’s priorities, needs and interests are addressed most appropriately by a primary provider who represents and receives team and community support.
Principle 7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.

**Provide a summary of each evidence-based practice.**

Regarding the evidence-based practices that are listed above, DEC RP Leadership L8 affirmed Nevada Part C's work with the DHHS Director's Office Fiscal Team to submit a proposal for the Governor's Finance Office toward remaining ARP funds that would eventually be legislative approved in October 2020 for funding our new EI Professional Development Center. Further, Human Resources Administration with the State of Nevada provided their expertise in curriculum design including the use of a capstone project to allow Learners an avenue to give back to the EI system, i.e., creating an innovative project that may add value to the EI system. The PD Center is a strategic retention initiative that will be an option for Learners who need a no cost path toward licensure.

DEC RP L9. speaks to our PD workgroup that is endeavoring to remove barriers for professionals to meet their licensure requirements for our DS Series program which will be comparable to certification programs through institutions of higher education. Competencies will be measured through class participation (virtual classroom via Microsoft Teams meetings), reflective journaling, literature reviews and ongoing capstone project work.

DEC RP L11 reinforces that our Nevada Part C Office's collaborations are going in right direction in that we have collaborated with, as well as sought out feedback from, entities internal and external to Nevada, including the Nevada Department of Education Office of Licensure, institutions of higher education (University of Nevada, Reno and University of Nevada, Las Vegas), Early Childhood Personnel Center, University of Illinois, Early Childhood Technical Assistance Center and WestEd.

Here below for reference are the summaries for the prior year FFY 2020 SSIP evidence-based practices:

DEC Recommended practices and Early Intervention Key Principles used in Nevada's Pyramid Model include: Building partnerships with families, SE development, Family-centered coaching, Dyadic relationships and Challenging behavior:

Examples of how Nevada IFSP teams promote SE outcomes for families with the use of evidence-based practices include:

DEC Recommended Practice Family F 6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized and tailored to the family’s preferences.

 o Use the caregiver’s preferred language
 o Ask caregiver to share information or ideas on which strategies to implement
 o Observe and bring attention to child responses or initiations (e.g. facial expressions, eye contact, gestures) to caregiver behaviors during caregiver-child interactions
 o Support caregiver in identifying specific routines the caregiver and child already do to practice skills throughout the day
 o Model or suggest ways for the caregiver to support the child's communication attempts during caregiver-child interactions
 o Provide supportive and specific feedback to caregivers when attempting new strategies to expand on child’s communication
 o Affirm caregiver competence and confidence in caregiver-child interactions

NCPMI Family Centered Coaching: Practitioner engages the caregiver in collaborative problem-solving regarding caregiver child interactions and their child’s social emotional competence; DEC Teaming and Collaboration TC DEC Teaming and Collaboration TC2. Practitioners and families work together systematically and regularly exchange expertise, knowledge and information to build team capacity, and jointly solve problems, plan and implement interventions.

 o Ask reflective questions in response to caregiver comments, questions, or concerns.
 o Actively listens to family’s suggestions and offers additional suggestions when appropriate.

DEC Assessment A3. Practitioners use assessment materials and strategies that are appropriate for the child's age and level of development and accommodate the child's sensory, physical, communication, cultural, linguistic, social and emotional characteristics, and DEC Assessment A8. Practitioners use clinical reasoning in addition to assessment results to identify the child's current level of functioning and to determine the child's eligibility and plan for instruction:

 o Collaborates with the caregiver to create social emotional goals based on the caregiver’s preferences, priorities, and needs.
 o Writes goals using language the caregiver can understand.

By implementing Pyramid Model and selected DEC RPs and EI Key Principles, practitioners will be better able to coach families to respond to their children's social-emotional needs, and families will be better able to support their children's social-emotional development.

**Provide a summary of how each evidence-based practices 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 IDEA Part C Office is collaborating with stakeholders to continue providing Leadership for retention initiatives designed to support early interventionist Developmental Specialsts (DSs) who would like to remain working in the EI field. Having a diverse, capable and knowledgeable workforce is essential to meet the needs of children with disabilities and their families. Having this workforce that can meet their professional qualifications will in a huge way promote caseload coverage as personnel are able to serve their caseload of families, support the child’s social emotional development and promote the achievement of the child’s outcomes.

The summary of information below continues to be applicable for Nevada IDEA Part C:

Nevada Part C will require that all staff complete the upcoming E-modules, which Nevada Part C purchased with ARP funds. Also, the IDEA Part C Office is planning to purchase more SE screeners, ASQ SE, SEAM, Piccolo, DECA; with every program already trained for these, with options for programs to choose the tool that works best with each family. (DEC Recommended Practice Leadership L 10. Leaders ensure practitioners know and follow professional standards and all applicable laws and regulations governing service provision and DEC Recommended Practice Instruction I 13. Practitioners use coaching or consultative strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development). These practices along with those listed in sections throughout this SSIP/Indicator 11 and related activities support the SiMR by equipping practitioners to be trained on social emotional development within the field of early intervention for children ages birth to 3 years with disabilities and their families, and on using the most appropriate social emotional screening or assessment tool with their families. These efforts will in turn promote practitioner confidence and competence in identifying areas potentially in need of instruction for improvement regarding social emotional development. Therefore, efforts with practitioners growing in their competence an confidence to support families in social emotional development, combined with families growing in their trust in working with their IFSP teams, will move these practices toward fidelity, and will then promote families in achieving their social emotional outcomes. Further, increased statewide results for infants and toddlers making progress in their social emotional development will continue to move the needle forward for Nevada's Early Intervention services system in consistently meeting targets for the State SiMR. And finally, the effective cycle will be expected to successfully and sustainably continue through to 2025 with thoughtful and intentional collaborations occurring from the 'grass tops to grass roots,' i.e., state leadership team levels of support to programs, coaches, practitioners and families with our youngest and most vulnerable population in Nevada.

**Describe the data collected to monitor fidelity of implementation and to assess practice change.**

NV Pyramid Model practices have implemented use of the Early Intervention Pyramid Practice Fidelity Instrument (EIPPFI), see EIPPFI at this link: https://challengingbehavior.cbcs.usf.edu/Implementation/data/EIPPFI.html

The EIPPFI is used at baseline/initial, 6 months, annual and then annually thereafter to measure a practitioner's fidelity of practices. Used by practitioners regarding work with families, the EIPPFI identifies the ranges of implementation so that coaches may establish targeted professional development activities to strengthen common areas of need.

During February 2022, the EI system returned to in person services in families’ homes while still providing services via telehealth for those families who preferred that method of service delivery. Unfortunately, Pyramid Model data coordinator and practitioner coach roles experienced turnover and EI programs experienced critical staff shortages. By August 2022, EI system leadership expressed that existing staff were facing barriers in keeping pace with the growing numbers of caseloads of children and families in need of EI services. Pyramid trainings and data collection were paused as existing staff were required to absorb cases from staff who had retired, resigned or were experiencing health concerns due to COVID-19 exposure and influenza exposure having sporadically continued even after the pandemic had largely subsided. In northern Nevada, EI programs took on extra cases to promote service continuity for the families of an EI program that had to close down, although this affected these programs in terms of availability for pyramid efforts. Although these were not ideal circumstances for personnel, EI programs endeavored to remain dedicated leaders during crisis conditions, as advised in the DEC Recommended Practice for Leadership L 13. “Leaders promote efficient and coordinated service delivery for children and families by creating the conditions for practitioners from multiple disciplines to work with the family as a team.”

**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.**

Official child records:

Statewide data from comprehensive monitoring conducted during April to June of 2021 included the percent of SE outcomes achieved within IFSPs were (previous APR FFY 2020: 29.8% from 43 of 144 total outcomes). An increase of 3.4% is observed from FFY 2021 data with 83 of 250 (33.2%) social emotional (SE) outcomes achieved within programs that underwent annual comprehensive monitoring.

Provider survey results: (43 respondents)
74% (compared to last year’s 82% of practitioners survey agreed to the statement: I have received ongoing or follow-up guidance regarding support of the social-emotional development of infants and toddlers.
93% (compared to last year’s 91%) of practitioners surveyed agreed to the statement: After receiving training, I am more comfortable and confident in my knowledge about typical social-emotional development in infants and toddlers.
92% (compared to last year’s 94%) of practitioners surveyed agreed to the statement: I have used the information gained in social-emotional development trainings to support meaningful conversations with families about their child's social-emotional development and its importance.
90% (compared to last year’s 85%) of practitioners agreed to the statement: Because of training I have received, I am more comfortable obtaining information about the child's social-emotional skills and needs to inform IFSP development and program planning for the child and family.
72% (compared to last year’s 81%) of respondents agreed with the statement: I am more comfortable obtaining information about the child's social-emotional skills to inform the entry and exit Child Outcome Summary (COS) ratings.

SE Modules:

For this reporting period, we are presenting results from the SE modules scores from July 2021 to January 2022, there was a total of 111 staff who completed the pretest with a 79% average, with a result range from 18% to 100%. For the post test, 103 staff scored results with an 85% average, with a result range from 41% to 100%
Compared to last year’s results, the percentage for pre test results was the same, while the percentage for post test average scores declined from 3% from 88 to 85.
Nonetheless, 99% of test takers agreed with this post-training statement that they felt they had increased their knowledge when responding to the following:

After completing this Module do you feel you have increased your knowledge to begin to address the social-emotional needs and challenging behavior of young children?

Family Survey results (DEC Recommended Practice Family F 9. Practitioners help families know and understand their rights and Family F 3. Practitioners are responsive to the family’s concerns, priorities and changing life circumstances):

Compared to results of 95.5% in FFY 2020, results decreased by 3.7% in FFY 2021 to 91.8% or 124 of 135) of Family Survey respondents agreed with the statement:
I have meaningful conversations with our service providers about my child’s social-emotional development (positive interactions with others, learning to control emotions and behaviors, understanding, and following rules and being able to effectively communicate needs).

Compared to results of 87.7% in FFY 2020, results increased by 0.4% in FFY 2021 to 88.1% or 119 of 135 of Family Survey respondents agreed with the statement:
Early intervention services help me feel comfortable in supporting my child in developing positive relationships with other children and adults.

This data reflects progress in that SSIP efforts remain close to being on par with the previous year’s results. Pyramid model supports continue in a somewhat consistent fashion of moving the system forward toward coaching families with fidelity of practice which will result in improved outcomes for the families receiving EI services.

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

Provided below are a few of the next steps for evidence-based practices anticipated for Nevada's Early Intervention services system:

DEC Recommended Practice Leadership L 13. Leaders promote efficient and coordinated service delivery for children and families by creating the conditions for practitioners from multiple disciplines to work with the family as a team:

• Continued expansion of professional development to be web-based and easily accessible.
• Continue scale up with program coaching and practitioner coaching with the 2 existing cohorts, with plans to add another cohort during Summer/Fall 2022.

DEC Recommended Practice Family F 1. Practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic and socio- economic diversity:

• Collaborate with parent members on the Interagency Coordinating Council (ICC) and on the ICC Equity Subcommittee to brainstorm engaging methods to reach diverse families as well as to solidify social emotional learning strategies occurring in a families' visits with practitioners, e.g. the use of social media to meet families where they are re: obtaining useful information quickly and in a meaningful way;
• Gather family survey feedback on early intervention received re: social emotional development; compile family responses into a Family Survey Report, to post online on the IDEA Part C website by Summer 2022; have practitioners share this web information with their families; suitable for all families to review in that families already in scaled up pyramid implementation sites may learn and gauge from other families on social emotional perspectives, and families whose programs have not yet joined the scale up may have information on upcoming pyramid model project steps for their respective programs.

DEC Recommended Practice Family F5. Practitioners support family functioning , promote family confidence and competence and strengthen family-child relationships by acting in way that recognize and build on family strengths and capacities; DEC Recommended Practice Instruction INS13. Practitioners use coaching or consultation strategies with primary caregivers or other adults to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development; and DEC Recommended Practice Interaction INT2. Practitioners promote the child's social development by encourage the child to initiate or sustain positive interactions with other children and adults during routines and activities through modeling, teaching, feedback or other types of guided support:

• Continue to assess for fidelity among practitioners, as well as continue to provide training and support to ensure that practitioners are affirming caregiver competence and confidence during caregiver-child interactions.
• Continue to train, support and assess for fidelity among practitioners to ensure practitioners support the caregiver in strategies to support their child's social emotional development, e.g., coaching on imitating child’s play and commenting on child’s play.

DEC Recommended Practice Leadership L 12. Leaders collaborate with stakeholders to collect and use data for program management and continuous program improvement and to examine the effectiveness of services and supports in improving child and family outcomes.

• The State Leadership Team (SLT) and Pyramid Model project statewide Data Manager will continue to support Data Coordinators at each implementation site with training and collaborative meetings to ensure fidelity data is collected, analyzed and reported accurately and timely.
• The SLT will work to develop an annual report with data visualization to distribute to stakeholders (which include families) and the public re: the State’s progress. This annual report, while not required by OSEP for federal reporting, is planned to be a key informing data tool toward future SPP/APR/SSIP reporting and will be a tool which practitioners may share and discuss with families.

These combined efforts will then promote DEC Recommended Practice Family F 10. Practitioners inform families about leadership and advocacy skill- building opportunities and encourage those who are interested to participate:

• Practitioners will invite families to join their respective program’s implementation site leadership team and/or the State Leadership Team to promote their valuable voice being heard and being a part of sound decision making to promote progress for all families in Early Intervention, thus promoting progress for the State’s SiMR.
• Families may in turn also reach out to other families to encourage participation in pyramid model project efforts that extend beyond SLT meetings to community celebrations and connections.

These steps will fuel the attainment of the following outcomes:

Short term outcomes:

1. Service practitioner’s confidence and competence level will improve when identifying social-emotional needs for infants and toddlers.
2. Service practitioners will have an increase in their knowledge and skills to consistently and accurately determine appropriate child outcome measurement ratings for infants and toddlers.
3. There will be an increase in service practitioners’ knowledge and ability to communicate with families about the role and impact of social-emotional development on successful interventions.
4. Service practitioners’ working knowledge and understanding of the use of evidenced-based practices (EBP) to support the social-emotional development of infants and toddlers will increase.

Intermediate outcomes achieved pending data:

Intermediate Outcomes:

1. Local practitioners will be able to produce ongoing qualitative and quantitative reports to improve program performance and identify areas for targeted coaching and TA.
2. IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
3. Families will be better able to support and enhance their child’s social-emotional skills and overall development.
4. Service practitioners’ use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
5. IFSPs will include functional outcomes and strategies that are based on the culture and routines of the family and address the social-emotional needs/skills of the child.
6. Families will be better able to support and enhance their child’s social-emotional skills and overall development.
7. Service practitioners’ use of evidence-based practices in assessing the social-emotional skills and needs of infants and toddlers will improve, be sustainable and implemented with fidelity.
8. Families will be better able to support and enhance their child’s social-emotional skills and overall development.

**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.**

Indicator 3.A1 data reflect progress statewide for child outcomes and is moving the needle forward within Nevada for increased numbers of children who have improved social emotional development after having received early intervention services. Continuing with the SSIP will yield additional needed data at local levels as personnel become trained with scale up efforts. Upcoming data will reveal the impact of scale up efforts with program coaches and practitioner coaches occurring at local pyramid implementation sites as well as the impact of professional development E-modules which will be available to all programs statewide, thus including building knowledge for all practitioners from all programs whether or not scale up has occurred.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets. Stakeholders updated targets for the previous year, FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting. The ICC began review of the FFY 2021 SPP/APR during October 2022 and January 2023 quarterly meetings.

Throughout the course of FFY 2021, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during July 2021, October 2021, January 2022, April 2022, October 2022 and January 2023. The July 2022 quarterly meeting was canceled due to medical condition of the ICC chairperson. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings typically occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Subcommittee is the ICC Equity Subcommittee launched during October 2021. During this FFY 2021 reporting period, the ICC Equity Subcommittee recruited and voted on members, developed a mission statement and collaborated on advising the EI system on the following: Identifying equity issues within early intervention, barriers to services (geographical regions, language, ethnicity, outreach, budgetary, connectivity, etc.), underserved and vulnerable populations within the already vulnerable early intervention population, plans to support Equity through advising to the ICC, which advises the Early Intervention (EI) system, scheduling strategic equity planning, special projects and collaboration with other councils, committees and programs, developing the Membership, Mission and Vision for the ICC Equity Subcommittee, accepting volunteers for Members and support staff who will commit to attending at least 3 out of 4 quarterly meetings throughout the year, with scheduled quarterly meetings to ideally occur during the months of January, April, July and October. For the initial launch, however, the Equity Subcommittee met during December 2021 as well to elect subcommittee co-chairs.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

• The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within four (4) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

• Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022, and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator 3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for the previous SSP/APR FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of the FFY 2021 SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

• On October 20th, 2022 and January 30th, 2023, ICC stakeholders reviewed the FFY 2021 SPP/APR (with the targets having been set during October 2021). On January 30th, 2023, the ICC voted unanimously to approve the current FFY 2021 SPP/APR submission due February 1st, 2023 to OSEP.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting and overall advising for Nevada's Early Intervention Services system.

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-established targets, which were updated for this FFY 2020 report with stakeholder feedback during the October 2021 ICC meeting and November 2021 Public Stakeholder Meeting for Target Setting.

Throughout the course of FFY 2020, the IDEA Part C Office presented data and other key early intervention (EI) system information, as well as gained feedback and advising from the following groups: the Department of Health and Human Services (DHHS) Administration, DHHS Aging and Disabilities Services Division (ADSD), ADSD Quality Assurance for Children’s Services, Nevada’s Interagency Coordinating Council (ICC) including ICC Subcommittees, state EI and community partner EI programs, federal, state, and local community agencies (i.e. United States Air Force base representative for the military community stationed in Southern Nevada; Medicaid and Health Care Finance Policy representative; northern region early childhood mental health program representative), the Nevada System of Higher Education, Nevada Department of Education Part B/619, inter-tribal liaisons, and family and legal advocacy groups.

Key stakeholder involvement activities included:

• Quarterly ICC Meetings, via videoconference across the State’s southern, northwest and northeast regions during October 2020, January 2021 and April 2021, and most recently July 2021, October 2021,and January 2022. These meetings follow Nevada’s Open Meeting Law, and include review of minutes, community program presentations, Part C EI system updates and data reports including any formal complaints, subcommittee reports, and strategic planning to improve Nevada’s system and to promote improved outcomes for families with infants and toddlers with disabilities. Quarterly meetings occur during the months of July, October, January and April.

• ICC Subcommittee meetings for Child Find and Family Advisory are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. The newest ICC Equity Subcommittee launched their first meeting during October 2021 and meets quarterly to discuss and advise the EI system on equity topics such as improving family engagement and representativeness in terms of ethnicity and geographical location.

• Stakeholder support and feedback occurred during the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholders, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.

The Pyramid Model State Leadership Team (SLT) meets monthly to support statewide Early Intervention efforts to promote social emotional development. The SLT is comprised of IDEA Part C staff, EI program leaders from both the public and private sectors, Quality Assurance staff, and family advocacy personnel. The pyramid model project is being implemented within five (5) of twelve (12) EI sites, with continued scale up planned statewide over the next year.

Target setting stakeholder meetings occurred during October 2021 with the ICC and November 2021 with public stakeholders. Additional target setting and SPP/APR review occurred with the ICC during January 11, 2022 and January 27, 2022, with a review of all indicators and targets as well as proposed targets for the next 5 years. Stakeholder feedback included suggestions to increase targets to reflect more rigorous expectations, especially for Indicator 3 A1 on Child Outcomes with regard to progress in Social Emotional development, as this is the indicator for Nevada's State-identified measurable result (SiMR). The stakeholder feedback regarding increasing the target for Indicator3 A1 stemmed from the State meeting the target with no slippage for Indicator 3 A1. The ICC and the IDEA Part C Office decided to keep the proposed target setting within the percentage according to the meaningful differences calculator since the State showed a significant improvement for just one year, which was for this current FFY 2020 reporting period. The ICC and the IDEA Part C Office agreed that review of next year's SiMR result may provide additional data for informed decision making for whether to re-establish the target next year or as applicable for any upcoming years.

The IDEA Part C Office is grateful for this past year's increased stakeholder engagement for SPP/APR reporting, target setting and overall advising for Nevada's Early Intervention Services system.
Stakeholder input included: SLT meetings (monthly January to November 2021), ICC meetings (quarterly, January, April, July, October 2021) and public forum (Target setting, Tues, Nov. 30th, 2021).

**Describe the specific strategies implemented to engage stakeholders in key improvement efforts.**

Strategies to engage stakeholders included:
PD Workgroup (regular monthly meetings, obtain TA and refer to their resources

Assistance and support through collaboration for pyramid model practitioner coach calls and program coach calls between IDEA Part C Office and the pyramid model coaches/Quality Assurance team;

Assistance in having SLT members attend the National Training Institute conference, however the conference was canceled due to COVID.
Information dissemination: Announce updates at every monthly Technical Assistance call with EI programs, every ICC meeting and every NECAC meeting.

Specific strategies implemented to engage stakeholders in key improvement efforts toward meeting the SiMR included:

• State Leadership Team (SLT) monthly meetings with stakeholders, who have signed an agreement of their commitment to the EI Pyramid project, continues with EI program representatives, family members, parent advocacy representative, Quality Assurance and IDEA Part C team which includes the Pyramid Model Co-Leads, Data Manager and Lead Administrative Assistant. SLT members are considered equal partners in making decisions, helping with implementation and proposing strategies to improve action plans. Members are invited to join based on expertise and interest in social emotional development. The SLT develops these following activities to promote further engagement with EI programs and families:

 o Evaluation/Action plans for Nevada EI Pyramid Model, rating of Benchmarks of Quality (BoQ),
 o Trainings with technical assistance by NCPMI (National Center for Pyramid Model Innovations)
 o Pyramid Model newsletters
 o Annual Pyramid Model celebrations, typically with forward invitations for the next cohort to attend.

• IDEA Part C revised the annual Memorandum of Understanding with ADSD to clarify ADSD’s scope of work and budget, which now includes stakeholder parameters for roles and responsibilities, data collection and reporting, and implementation site engagement and scale up. Further, resources are now allocated to include travel, training and materials for Pyramid Model implementation.

This governance has streamlined EI services among participating programs so that these programs have multiple layers of local and statewide support for staff who work directly with families; in turn, these efforts are connecting to what is happening at child and family levels in that families are now directly receiving from trained providers the instructional services and supports to promote their child's social emotional development.

• Lastly, additional stakeholder input is obtained quarterly from the Interagency Coordinating Council (ICC), which is a Governor-appointment board that must include representatives from families, EI programs, family advocacy, Medicaid and private insurance, Part B 619, Head Start/Early Head Start, child welfare services, Bureau of Indian Education, and the field of mental health. Appointment to the ICC is determined through the State of Nevada’s Governor’s Office with recommendations considered.

During ICC meetings, the council discusses information regarding EI services in Nevada, and ICC members will ask questions and brainstorm solutions for various issues.

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

YES

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

Stakeholder concerns included:

Administration for state EI programs reported to the IDEA Part C Office that they were concerned about critical provider shortages, with remaining staff needing to prioritize direct service provision, which would in turn impact the number of staff who would be able to attend program coaching calls and practitioner coaching calls. One of the community EI programs in Cohort 1 experienced critical staff shortages relative to pyramid work, with turnover at manager level, program coach, data manager/coordinator, practitioner coaches and practitioners. The program requested a reprieve temporarily from SLT meetings in January 2022, and they plan to return to the pyramid collaboration upon hiring additional staff. With limited staff availability, and the need for more information from remaining participants in pyramid model efforts, SLT members worked diligently to provide new pyramid cohort programs a resource with frequently asked questions, FAQs, which would provide clear, streamlined support amidst critical shortages.

Another challenge was that face to face work/connections generally stopped due to COVID-19, and connections needed to be made virtually, which can be a challenge when staff are in multiple meetings per day with their caseloads of families, with their supervisors, etc. This can lead to virtual interaction fatigue. The SLT aspired to maximize virtual call to the extent possible by adding meeting strategies such as providing more in depth notes following each call and providing a ‘parking lot’ section for items needing to be addressed at a later time.

**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.**

A few ideas provided by the PD Workgroup include: Exploring the steps needed to develop an app for Learners to quickly access their coursework; holding workgroup/SLT retreat to complete more meaningful work through an in person setting; planning rollout of E-modules, new codes to be sent from the Pyramid Consortium, planning continued collaboration and PD throughout the PD coursework, with a focus on SE in the PD Strategies class and Advanced Strategies class

**Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR.**

The PD DS Series is an18-month program starting in April 2023 through September 2024 and will assist Developmental Specialists in meeting their professional requirements prior to their 3-year mark to work in EI. By fulfilling a retention initiative purpose, we're also keeping the momentum going to support our SiMR. Finally, timelines for hiring/onboarding and training gaps cannot keep pace with the increasing caseloads resulting from staff turnover, nonetheless an expected outcome is that we will narrow the gap of DSs who are leaving the field due to barriers to licensure. This will invariably lead to continuity of quality services provided with fidelity for families who would then be poised to achieve their outcomes and for their children to be supported in making progress toward their optimal development.

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

Barriers during 2022 to present include: Statewide economic factors (housing crisis, inflation for food, gas, tuition), post-COVID effects despite the pandemic having largely subsided (state of emergency ended 2022), we are hearing reports of staff who continue to experience extended COVID-19 effects that remain after having had the illness, as well as staff who cannot return to work conditions beyond remote options, contributing to ongoing staff shortages/retention; Equity efforts for access to EI as some programs with more critical staffing shortages must inform families of delayed services as well as limited methods to services such as via telehealth or in person depending on staff conditions and limitations. Finally, a current challenge involves that our population has grown in Nevada, challenging to keep pace with population needing EI resources. Child counts in previous years as compared to recent child counts reflect an increasing trend in statewide caseload counts of children and families receiving Early Intervention services over 3 years: December 2022 (preliminary data in process of being analyzed for April 2023 Child Count & Settings federal reporting, 3,285 children); December 2021 of (3,181 children); December 2020: (2,951 children).

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

Additional information on Nevada Early Intervention System's Professional Development (PD) Center will be forthcoming on the IDEA Part C website. The DS Series Learner Application, which provides information for Learners including our PD Center logo and detailed acknowledgment for codes of conduct, materials use and responsibilities related to the retention initiative, is available for viewing at this link prepared by the IDEA Part C Office:

https://forms.office.com/Pages/ResponsePage.aspx?id=5kCj5J64aE6OqhVE0nA5gHNSL5i8QqBBiWR8Uh4K8DNUQlc0Q1E5MlpJOTNOWFZOWUlNRjJYR1pLQy4u

This Learner application was made available to DSs statewide on January 6, 2023 with a deadline of January 31, 2023 for the April 2023 cohort. By February 15, 2023, the IDEA Part C Office will select 25 participants in an equitable manner for the April 2023 cohort, with selection based on geographical location for regional representativeness, date of hire for prioritized position requirements due by the 3rd year from hire date and program sector representativeness based on distribution of State (public sector) and Community Partner (private sector) program employees. At time of submission of this FFY 2021 report, more than 30 individuals have applied, and so a wait list will need to be generated for the 2nd DS Series cohort scheduled to begin during August 2023. A 3rd DS Series cohort is scheduled for January 2024.

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

## 11 - 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 Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role**

Designated Lead Agency Director

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.**

**Name:**

Lori Ann Malina-Lovell

**Title:**

Clinical Program Planner I / Part C Coordinator

**Email:**

lamalinalovell@dhhs.nv.gov

**Phone:**

(702) 486-3012

**Submitted on:**

04/24/23 12:39:53 AM

# Determination Enclosures

## RDA Matrix

**Nevada**

2023 Part C Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[1]](#footnote-2)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 70.54% | Needs Assistance |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 8 | 5 | 62.50% |
| **Compliance** | 14 | 11 | 78.57% |

**2023 Part C Results Matrix**

**I. Data Quality**

**(a) Data Completeness: The percent of children included in your State’s 2021 Outcomes Data (Indicator C3)**

|  |  |
| --- | --- |
| Number of Children Reported in Indicator C3 (i.e., outcome data) | 1,810 |
| Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data) | 3,597 |
| Percentage of Children Exiting who are Included in Outcome Data (%) | 50.32 |
| **Data Completeness Score[[2]](#footnote-3)** | 1 |

**(b) Data Anomalies: Anomalies in your State’s FFY 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Anomalies Score**[[3]](#footnote-4) | 2 |

**II. Child Performance**

**(a) Data Comparison: Comparing your State’s 2021 Outcomes Data to other States’ 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Comparison Score[[4]](#footnote-5)** | 1 |

**(b) Performance Change Over Time: Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

|  |  |
| --- | --- |
| **Performance Change Score[[5]](#footnote-6)** | 1 |

| **Summary Statement Performance** | **Outcome A: Positive Social Relationships SS1 (%)** | **Outcome A: Positive Social Relationships SS2 (%)** | **Outcome B: Knowledge and SkillsSS1 (%)** | **Outcome B: Knowledge and SkillsSS2 (%)** | **Outcome C: Actions to Meet Needs SS1 (%)** | **Outcome C: Actions to Meet NeedsSS2 (%)** |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY 2021**  | 75.00% | 35.19% | 76.06% | 33.87% | 75.85% | 37.79% |
| **FFY 2020**  | 74.43% | 34.39% | 77.62% | 33.53% | 77.69% | 37.38% |

**2023 Part C Compliance Matrix**

| **Part C Compliance Indicator[[6]](#footnote-7)** | **Performance (%)**  | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 1: Timely service provision** | 92.03% | YES | 2 |
| **Indicator 7: 45-day timeline** | 95.86% | YES | 2 |
| **Indicator 8A: Timely transition plan** | 96.77% | YES | 2 |
| **Indicator 8B: Transition notification** | 54.98% | YES | 0 |
| **Indicator 8C: Timely transition conference** | 94.56% | NO | 2 |
| **Timely and Accurate State-Reported Data** | 93.75% |  | 1 |
| **Timely State Complaint Decisions** | N/A |  | N/A |
| **Timely Due Process Hearing Decisions** | N/A |  | N/A |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

**Appendix A**

**I. (a) Data Completeness:**

**The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)**

Data completeness was calculated using the total number of Part C children who were included in your State’s FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State’s Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State’s FFY 2021 IDEA Section 618 Exit Data.

|  |  |
| --- | --- |
| **Data Completeness Score** | **Percent of Part C Children included in Outcomes Data (C3) and 618 Data** |
| **0** | **Lower than 34%** |
| **1** | **34% through 64%** |
| **2** | **65% and above** |

**Appendix B**

**I. (b) Data Quality:**

**Anomalies in Your State's FFY 2021 Outcomes Data**

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e[[7]](#footnote-8)[[8]](#footnote-9). In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State’s data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

|  |  |
| --- | --- |
| **Outcome A** | **Positive Social Relationships** |
| **Outcome B** | **Knowledge and Skills** |
| **Outcome C** | **Actions to Meet Needs** |

|  |  |
| --- | --- |
| **Category a** | **Percent of infants and toddlers who did not improve functioning** |
| **Category b** | **Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers** |
| **Category c** | **Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it** |
| **Category d** | **Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers** |
| **Category e** | **Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers** |

**Expected Range of Responses for Each Outcome and Category, FFY 2021**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-1SD** | **+1SD** |
| **Outcome A\Category a** | 1.43 | 1.62 | -0.19 | 3.05 |
| **Outcome B\Category a** | 1.26 | 2.27 | -1.01 | 3.53 |
| **Outcome C\Category a** | 1.14 | 1.59 | -0.45 | 2.73 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-2SD** | **+2SD** |
| **Outcome A\ Category b** | 23.62 | 8.94 | 5.75 | 41.49 |
| **Outcome A\ Category c** | 20.32 | 12.69 | -5.05 | 45.69 |
| **Outcome A\ Category d** | 27.33 | 9.46 | 8.42 | 46.24 |
| **Outcome A\ Category e** | 27.3 | 15.11 | -2.92 | 57.52 |
| **Outcome B\ Category b** | 25.16 | 9.76 | 5.65 | 44.68 |
| **Outcome B\ Category c** | 28.73 | 12.11 | 4.5 | 52.95 |
| **Outcome B\ Category d** | 31.76 | 8.06 | 15.64 | 47.87 |
| **Outcome B\ Category e** | 13.09 | 8.56 | -4.02 | 30.21 |
| **Outcome C\ Category b** | 20.27 | 8.49 | 3.29 | 37.26 |
| **Outcome C\ Category c** | 23.01 | 13.08 | -3.16 | 49.17 |
| **Outcome C\ Category d** | 34.09 | 8.09 | 17.9 | 50.28 |
| **Outcome C\ Category e** | 21.49 | 15.06 | -8.62 | 51.6 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | **Total Points Received in All Progress Areas** |
| 0 | 0 through 9 points |
| 1 | 10 through 12 points |
| 2 | 13 through 15 points |

**Anomalies in Your State’s Outcomes Data FFY 2021**

|  |  |
| --- | --- |
| **Number of Infants and Toddlers with IFSP’s Assessed in your State** | **1,810** |

| **Outcome A — Positive Social Relationships** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 7 | 418 | 748 | 527 | 110 |
| **Performance (%)** | 0.39% | 23.09% | 41.33% | 29.12% | 6.08% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome B — Knowledge and Skills** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 4 | 413 | 780 | 545 | 68 |
| **Performance (%)** | 0.22% | 22.82% | 43.09% | 30.11% | 3.76% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome C — Actions to Meet Needs** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 7 | 410 | 709 | 601 | 83 |
| **Performance (%)** | 0.39% | 22.65% | 39.17% | 33.20% | 4.59% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

|  | **Total Score** |
| --- | --- |
| **Outcome A** | 5 |
| **Outcome B** | 5 |
| **Outcome C** | 5 |
| **Outcomes A-C** | 15 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | 2 |

**Appendix C**

**II. (a) Data Comparison:**

**Comparing Your State’s 2021 Outcomes Data to Other States’ 2021 Outcome Data**

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement[[9]](#footnote-10). Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

*Summary Statement 1: Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.*

*Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.*

**Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021**

| **Percentiles** | **Outcome A SS1** | **Outcome A SS2** | **Outcome B SS1** | **Outcome B SS2** | **Outcome C SS1** | **Outcome C SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **10** | 43.42% | 36.60% | 54.62% | 29.02% | 55.14% | 36.15% |
| **90** | 82.74% | 69.30% | 79.34% | 55.52% | 85.72% | 76.15% |

|  |  |
| --- | --- |
| **Data Comparison Score** | **Total Points Received Across SS1 and SS2** |
| **0** | 0 through 4 points |
| **1** | 5 through 8 points |
| **2** | 9 through 12 points |

**Your State’s Summary Statement Performance FFY 2021**

| **Summary Statement (SS)** | **Outcome A: Positive Social Relationships SS1** | **Outcome A: Positive Social Relationships SS2** | **Outcome B: Knowledge and Skills SS1** | **Outcome B: Knowledge and Skills SS2** | **Outcome C: Actions to meet needs SS1** | **Outcome C: Actions to meet needs SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **Performance (%)** | 75.00% | 35.19% | 76.06% | 33.87% | 75.85% | 37.79% |
| **Points** | 1 | 0 | 1 | 1 | 1 | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2(\*)** | 5 |

|  |  |
| --- | --- |
| **Your State’s Data Comparison Score** | 1 |

**Appendix D**

**II. (b) Performance Change Over Time:**

**Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

The Summary Statement percentages in each Outcomes Area from the previous year’s reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of p<=.05. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of ‘0’, ‘1’, or ‘2’ for each State is based on the total points awarded. Where OSEP has approved a State’s reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of ‘N/A’ for this element.

**Test of Proportional Difference Calculation Overview**

The summary statement percentages from the previous year’s reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of p<=.05. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on[[10]](#footnote-11)

Sqrt[([FFY2021% \* (1-FFY2021%)] / FFY2021N) + ([FFY2022% \* (1-FFY2022%)] / FFY2022N)] = Standard Error of Difference in Proportions

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

Difference in proportions /standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the *p* value is determined.

Step 5: The difference in proportions is coded as statistically significant if the *p* value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

|  |  |
| --- | --- |
| **Indicator 3 Overall Performance Change Score** | **Cut Points for Change Over Time in Summary Statements Total Score** |
| **0** | Lowest score through 3 |
| **1** | 4 through 7 |
| **2** | 8 through highest |

| **Summary Statement/ Child Outcome** | **FFY 2020 N** | **FFY 2020 Summary Statement (%)** | **FFY 2021 N** | **FFY 2021 Summary Statement (%)** | **Difference between Percentages (%)** | **Std Error** | **z value** | **p-value** | **p<=.05** | **Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SS1/Outcome A: Positive Social Relationships** | 1,940 | 74.43% | 1,700 | 75.00% | 0.57 | 0.0144 | 0.3928 | 0.6945 | NO | 1 |
| **SS1/Outcome B: Knowledge and Skills** | 1,997 | 77.62% | 1,742 | 76.06% | -1.55 | 0.0138 | -1.1232 | 0.2613 | NO | 1 |
| **SS1/Outcome C: Actions to meet needs** | 1,977 | 77.69% | 1,727 | 75.85% | -1.84 | 0.0139 | -1.3216 | 0.1863 | NO | 1 |
| **SS2/Outcome A: Positive Social Relationships** | 2,076 | 34.39% | 1,810 | 35.19% | 0.80 | 0.0153 | 0.5224 | 0.6014 | NO | 1 |
| **SS2/Outcome B: Knowledge and Skills** | 2,076 | 33.53% | 1,810 | 33.87% | 0.34 | 0.0152 | 0.2246 | 0.8223 | NO | 1 |
| **SS2/Outcome C: Actions to meet needs** | 2,076 | 37.38% | 1,810 | 37.79% | 0.41 | 0.0156 | 0.2635 | 0.7922 | NO | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2** | **6** |

|  |  |
| --- | --- |
| **Your State’s Performance Change Score** | **1** |

## Data Rubric

**Nevada**

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

|  | **Part C Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3** | 1 | 1 |
| **4** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8A** | 1 | 1 |
| **8B** | 1 | 1 |
| **8C** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
|  | **Subtotal** | 13 |
| **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) = | 18 |

|  |  | **618 Data[[12]](#footnote-13)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
|  **Child Count/Settings Due Date: 4/6/22** | 0 | N/A | N/A | 0 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 6 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 2) = | 12.00 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 18 |
| B. 618 Grand Total | 12.00 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 30.00 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 4.00 |
| **Denominator** | 32.00 |
| D. Subtotal (C divided by Denominator\*) = | 0.9375 |
| E. Indicator Score (Subtotal D x 100) = | 93.75 |

**\*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 2.**

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

**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 C 618 Data**

**1) Timely** – A State will receive one point if it submits counts/ responses for an 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** | **EMAPS Survey** | **Due Date** |
| Part C Child Count and Setting | Part C Child Count and Settings in EMAPS | 1st Wednesday in April |
| Part C Exiting | Part C Exiting Collection in EMAPS | 1st Wednesday in November |
| Part C Dispute Resolution  | Part C Dispute Resolution Survey in EMAPS | 1st Wednesday in November |

**2) Complete Data** – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. 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. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

## 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. 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 C." [↑](#footnote-ref-2)
2. Please see Appendix A for a detailed description of this calculation. [↑](#footnote-ref-3)
3. Please see Appendix B for a detailed description of this calculation. [↑](#footnote-ref-4)
4. Please see Appendix C for a detailed description of this calculation. [↑](#footnote-ref-5)
5. Please see Appendix D for a detailed description of this calculation. [↑](#footnote-ref-6)
6. The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-7)
7. Numbers shown as rounded for display purposes. [↑](#footnote-ref-8)
8. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-9)
9. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-10)
10. Numbers shown as rounded for display purposes. [↑](#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 2 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)