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

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

**For reporting on   
FFY 2019**

**Nevada**

U.S. Department of Education seal

**PART C DUE   
February 1, 2021**

**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 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 2019 SPP/APR covers the timeframe from July 1, 2019 through June 30, 2020. This timeframe is Federal Fiscal Year (FFY) 2019, State Fiscal Year (SFY) 2020.   
  
The FFY 2019 SPP/APR and attachments including Indicator 11, meets requirements for Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 with documentation for Accessibility checks resulting in no issues found.  
  
Provided here is an overview of Nevada’s systems that are in place to ensure compliance with IDEA Part C requirements and purposes. Also provided is Nevada’s performance status relative to 10 of 11 SPP/APR indicators which also ensure compliance with IDEA Part C (with the 11th indicator, the State Systemic Improvement Plan, to be submitted to OSEP by April 1, 2021).   
  
Indicator 1: Timely Provision of Services  
The State’s target for Indicator 1: Timely Provision of Services is 100%. After accounting for services delayed due to family circumstances, it was found that 113 of the 122 children reviewed (97.54%) had all new services initiated in a timely manner. No slippage occurred as the State’s FFY 2019 result in this indicator exceeds the 96% reported for FFY 2018. A total of two (2) new findings of noncompliance were issued as a result of general supervision activities in FFY 2018. During FFY 2019, the IDEA Part C Office verified timely correction of noncompliance for both programs.   
  
Indicator 2: Services in Natural Environments  
The State surpassed the 97.5% target, with 99.68% of children who received the majority of their early intervention services in natural environments. There were no findings issued in this performance indicator based on the December 1, 2019 count. 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 (99.68%) is slightly higher than 99.3% reported in FFY 2018.  
  
Indicator 3: Early Childhood Outcomes  
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.  
  
Data performance varies for Indicator 3 statements regarding meeting data targets, and information on slippage is provided. The data collected for infants and toddlers who received six (6) months or longer of early intervention services for FFY 2019 were collected using the Child Outcome Summary 7-point rating scale. Nevada is reporting complete data for 2,307 of 2,397 (96.25%) of infants and toddlers who exited services with a program length of six (6) months or longer. Representation of progress data has increased compared to the previous years.  
  
Indicator 4: Family Involvement  
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.  
  
Performance for Indicator 4 statements varied in meeting the State’s targets, with the State having met the target for both 4A and 4C, but not having met the target for 4B. There was no slippage for any of these three areas. The State experienced a decreased return rate for family surveys during FFY 2019 compared to previous years. Multiple factors which affected the return rate of surveys are provided, including implications from the COVID-19 pandemic. Also provided in this report are strategies the State will implement to increase representativeness of the demographics of infants, toddlers and families enrolled in early intervention services.  
  
Indicator 5: Child Find (Birth to One)  
Nevada count of children served, ages birth to one (1) year for this reporting period was 387 which is exactly the number of children as reported for December 1, 2018. This represents 1.08% of the general population of infants in the State. Although this indicator had no slippage, the Part C Staff continue 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.  
  
Indicator 6: Child Find (Birth to Three)  
On December 1, 2019, which is the data point-in-time count for FFY 2019, Nevada’s number of children served between the ages of birth through 2 years was 3,470. This is 205 more children than the 3,265 children reported for the FFY 2018 data point-in-time count from December 1, 2018. These children represent 3.19% of the projected general population of 108,839 infants in the State. Data indicate the State exceeded the 2.46% target for FFY 2019. The state of Nevada ranked 32nd when compared to the rest of the U.S. and outlying areas.  
  
Indicator 7: 45-Day Timeline  
Data indicate that 2,035 of all 2,312 (99.01%) initial IFSPs were compliant with the 45-day timeline requirement. All EIS provider agencies were found to be substantially compliant and all programs with noncompliance stemming from FFY 2018 have been verified as corrected.   
  
Indicator 8: Early Childhood Transition  
The performance target for this Indicator is 100% for each of the three (3) components of this Indicator. Data are gathered through program monitoring (8A) and the TRAC data system (8B and 8C). The components for this indicator include 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 Education Agency (SEA) and the Local Education 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.  
  
The data are inclusive of all children exiting Part C services with an IFSP on their third birthday and potentially eligible for Part B services during the reporting period. The State did not meet targets for the three Indicator 8 components. As it is required to report on follow up for any noncompliance from the previous year, information is provided in this report regarding verification of corrections for findings of noncompliance identified during FFY 2018.  
  
Indicator 9: Resolution Sessions and Indicator 10: Mediation  
States are not required to establish baseline or targets for Indicators 9 and 10 until the State has had a request for 10 sessions in each indicator. The State did not have any requests for Dispute Resolution or Mediation during this reporting period.  
  
Indicator 11: State Systemic Improvement Plan  
Indicator 11 is comprised of the annual State Systemic Improvement Plan (SSIP), which is required to be submitted to OSEP by April 1, 2021.   
  
Nevada’s FFY 2019 SPP/APR will be submitted electronically through OSEP’s EMAP data system by the deadline of February 1, 2021. The report will also be submitted to Nevada’s Office of the Governor and posted to the Nevada IDEA Part C Office website during May 2021 at http://dhhs.nv.gov/Programs/IDEA/Publications/

Additional information related to data collection and reporting

Unique challenges to Nevada’s Early Intervention Services system occurred during the FFY 2019 reporting period. Services to families were significantly impacted as a result of the COVID-19 pandemic. Governor Sisolak issued a State of Emergency directive on March 12, 2020. Also on March 12, 2020, Nevada’s Department of Health and Human Services (DHHS) advised for state employees to conduct work remotely to the extent possible. The IDEA Part C Office lead the emergency action planning for early intervention services by calling for an emergency planning meeting with available stakeholders on March 13, 2020. Stakeholder collaboration with the DHHS Aging & Disability Services Division, Community EI providers, ICC, and national technical assistance informed the IDEA Part C Office’s March 13, 2020 recommendation to DHHS to place a moratorium on all face-to-face services for two weeks. On March 15, 2020, Nevada was informed that State offices would be closed indefinitely. Also on March 15, 2020, DHHS placed a moratorium on all early intervention face-to-face services, and this would remain in effect until September 2020 when State phase planning allowed for limited in-person clinic services to resume.   
  
From the beginning of the moratorium on face-to-face EI services, continuity of EI services to families was maintained through alternative service options via telehealth and telephone consultation. Providers and families adjusted to the changing landscape of service methods, although some families chose to exit from EI services, preferring to instead access available in-person community services or to forego services altogether.   
  
Other challenges resulting from the COVID-19 pandemic included limitations upon EI programs and providers, including remote work for EI staff with closure of program offices, limited network and hardware access, implementing new and unfamiliar software, staff working remotely with school aged children at home due to school closures, staff illness and staff turnover. More information is provided throughout this FFY 2019 SPP/APR regarding the impact of COVID-19 upon Nevada.

**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:   
  
• 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 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 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. The first year of the pyramid model project, occurring from January 2019 to present, involved developing leadership objectives, benchmarks of quality, and coaching support for Cohort 1 implementation sites in northern Nevada. The second year of the pyramid model project included Cohort 2 scale up among 2 additional EI programs in other regions within Nevada, and evaluation of the project at family, provider and program levels. Cohort 3 is expected to join the pyramid project during 2021 and Cohort 4 will be included during 2022. Additionally, the Nevada IDEA Part C Office will be presenting on our state’s NCPMI project at the National Training Institute’s annual conference during April 2020. More information will be provided within the State Systemic Improvement Plan (SSIP) during April 2020.   
• The Part C Coordinator serves as a governor-appointed board member on the Nevada Early Childhood Advisory Council (ECAC) and is Co-Chair for the ECAC’s Child and Family Health Subcommittee. The Part C Coordinator has assisted the ECAC in developing the ECAC strategic plan for systems improvement and state application for the federal Preschool Development Grant (PDG-B-5).   
• The Part C Coordinator has been selected by the Early Childhood Technical Assistance Center as an aRPy Ambassador for the DEC’s Recommended Practices. During January 2020, the Part C Coordinator began a 2-year commitment to improve early childhood outcomes within the state of Nevada and the nation by raising awareness for the DEC’s Recommended Practices and tools. The Recommended Practices are shared statewide during monthly Part C TA calls with management from all 12 EI programs.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to 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 are selected based on system needs or questions, and clarification includes references to IDEA regulation and DEC Recommended Practices.   
• 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.  
• 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 monthly from OSEP, ECTA, and NCPMI. Nevada received a determination of ‘Needs Assistance’ for the FFY 2018 period due to the narrative explanation on noncompliance during the FFY 2018 SPP/APR. In preparation for drafting this current FFY 2019 SPP/APR, the NV Part C Office sought and received technical assistance on how to more clearly reflect Nevada’s performance this past year and any correction of outstanding noncompliance in previous years.

**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 childhood system for children birth to five, both for early intervention and for early childhood education. 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 and early intervention programs participated in NCPMI activities and trainings to support personnel in implementing evidence-based practices to improve the social-emotional outcomes for Part C eligible children and their families.  
• 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 maintains a system for providing training to all new employees coming into the early intervention system, as well as existing employees directed to participate as a result of identification of noncompliance, through New Employee Orientation (NEO). This includes a comprehensive review of the system and stresses the importance of family centered evidenced-based practices.  
• Topical trainings are also provided or facilitated by the IDEA Part C Office as the need is identified through evaluation of the system or based on provider request. Examples of topical trainings and technical assistance conducting during FFY 2019 this past year included: Preparation for comprehensive monitoring, TRAC data system training, Individual Family Service Plan (IFSP) services and supports, Social-Emotional modules, Pyramid model project/Social-Emotional trainings, COVID-19 emergency action procedures for alternative services, Highly Qualified Professional licensure requirements, DEC Recommended Practices, and Race and Equity supports for the Early Intervention System.  
• 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.  
• There is a strong collaborative initiative between the IDEA Part C Office and the State’s EHDI program to promote appropriate training and follow-up for personnel who work with children who are deaf or hard of hearing.  
• The ADSD QA 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. QA conducts onsite observations of early intervention providers and communicates any concerns to the IDEA Part C Office.   
• 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.

**Stakeholder Involvement:**

**The mechanism for soliciting broad stakeholder input on 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 Systemic Improvement Plan (SSIP).**

Nevada’s performance status is reported numerically and by percentage for each indicator compared to established and re-estabished targets, which have remained the same as the targets from FFY 2018 per stakeholder agreement on January 9, 2020 and further reviewed by stakeholders at the ICC meeting on January 12, 2021. ICC quarterly meetings were not conducted during April 2020 and July 2020 due to the COVID-19 pandemic.  
  
Throughout the course of FFY 2019, 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 January 2020 and October 2020, and most recently, January 2021 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, Family Advisory, and Professional Development are available to meet quarterly as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives. From March 2020 to June 2020, however, due to the COVID-19 pandemic, board meetings in the State of Nevada were not held unless there was a critical need.   
  
• SSIP Stakeholder Meetings via webinar have traditionally been scheduled during March of each year in preparation for April 1st deadlines to OSEP. However, during March 2020, the March 18th, 2020 SSIP Stakeholder Meeting was canceled due to Nevada’s governor had issued a state of emergency directive on March 12th, 2020 due to the COVID-19 pandemic. Nevada’s early intervention system was thrust into emergency action planning for both services to families and work environments for staff. While a large stakeholder meeting did not occur during March 2020, many components in the SSIP included stakeholder support and feedback, namely the meetings for the Part C pyramid model/social emotional project, such as monthly State Leadership Team meetings with stakeholder, statewide pyramid project Coaching Call meetings, and statewide pyramid project Data Team meetings.   
  
For clarification, the State’s pyramid model project with technical assistance from the National Center for Pyramid Model Innovations (NCPMI) involved the IDEA Part C Office facilitating a State Leadership Team (SLT) of stakeholders. During FFY 2019, the SLT met monthly both face to face and teleconference meetings, with the exception of the months of March 2020 through June 2020 due to the COVID-19 pandemic. 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 fourteen (14) EI sites, with continued scale up planned statewide over the next year. More information on the stakeholder engagement for the pyramid model project will be provided in the State’s SSIP during April 2021.   
  
The IDEA Part C Office is grateful for the large community of support for Nevada’s EI system.

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

NO

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 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 2018 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 2018 APR in 2020, is available.**

Nevada's FFY 2019 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 May 31, 2021. Additionally, FFY 2019 Report Cards for each of the early intervention service provider programs in the State will be posted on the same website. Report cards for EI programs from FFY 2018 were posted during June 2020, but were missing data for Indicators 5 and 6 due to pending information; these FFY 2018 report cards will be updated on the state website during April 2021 with addendums to reflect the completed data for Indicators 5 and 6.

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State’s capacity to improve its SiMR data.

**Response to actions required in FFY 2018 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

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 11 attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with 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.

# 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.57% | 91.80% | 97.93% | 98.31% | 96.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 113 | 122 | 96.00% | 100% | 97.54% | Did Not Meet Target | No Slippage |

**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.***

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**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 or not the services are provided in a timely manner will be 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 and indicated on the IFSP. This may include services such as periodic follow-up or services needed on an infrequent basis (ex. 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 process for monitoring EIS provider programs for compliance with the requirements of the IDEA was revised in FFY 2015. In FFY 2019, the Part C Office completed comprehensive on-site monitoring of six (6) EIS programs relative to this indicator. The general target is to complete a review of half of the programs in each year of the cycle; however, 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 IFSP junctures (initial, annual and all reviews including 6-month reviews or other reviews requested by the program or family). The timeframe covered for the FFY 2019 monitoring was all activity between July 1, 2019 and March 2, 2020. Typically, the monitoring period extends to March 31st of the current fiscal year. However, in light of the pandemic, the timeframe was reduced by a few weeks, ending the monitoring period prior to alternative practices (location of service provision) put in place to continue providing support to families through the pandemic and State program closure moratorium.

**If needed, provide additional information about this indicator here.**

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 2019 and included a review of 170 records. Of the records reviewed, 122 had new services added at some juncture during the period covered for the review (July 1, 2019 through March 2, 2020). A total of 113 records had all new services initiated within the required timeline. Six (6) children had at least one service initiated after the required timeline due to family circumstances. Examples of 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 119 of the 122 children reviewed (98%) had all new services initiated in a timely manner. For the three (3) children who did not receive timely services, the reasons for delay include scheduling conflicts and personnel shortage. This is an increase of 2% from the 96% statewide performance reported for FFY 2018.  
  
Two (2) EIS Programs were issued findings of noncompliance relative to Indicator 1 based on the FFY2019 monitoring. Findings were as follows:  
  
• One (1) program was compliant with timely initiation of IFSP services for 27 of 29 children (93%). This level of performance is not considered substantially compliant. Therefore, a Corrective Action Plan (CAP) was required. 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. Full correction has already been demonstrated and verified. The program was issued a letter of correction September 3, 2020.  
  
• One (1) program was compliant for timely initiation of IFSP services for 9 of 10 children (90%). This level of performance is not considered substantially compliant. The program was required to submit a CAP to the IDEA Part C Office to ensure the noncompliance is corrected as soon as possible but not later than one (1) year from the date the finding was issued.

**Correction of Findings of Noncompliance Identified in FFY 2018**

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

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

A total of two (2) new findings of noncompliance were issued as a result of general supervision activities in FFY 2018.   
The IDEA Part C Office verified timely correction of noncompliance for both programs .   
  
Systemic Correction :  
Since the programs who were issued findings of noncompliance in FFY 2018 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2019, the IDEA Part C Office conducted a verification audit for both of the programs. A selection of children enrolled in each program was pulled from the TRAC data system. For one small program, 20% of records were selected to verify correction. For the second larger program, 10% of records were selected to verify correction. These data reflected that both programs were performing at 100% and implementing the timely services requirements correctly.

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

Child Correction:  
The IDEA Part C Office verified through desk audits and ongoing program reporting that services were initiated for all children, though late, unless the child was no longer in the jurisdiction of the EIS provider program/Early Intervention system. 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. Ten (10) child records were reviewed for one program and eight (8) child records were reviewed for the second program to verify full correction of noncompliance from FFY18. Both programs also underwent training in the requirements for Timely Initiation of Services to ensure continued compliance is sustained.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 2 | 2 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

A total of two (2) findings of noncompliance were issued as a result of general supervision activities in FFY 2017. The IDEA Part C Office verified that each EIS program with findings of noncompliance identified in FFY 2017 performed the following: 1) correctly implemented the specific regulatory requirements in achieving 100% compliance based on a review of updated data collected through the state data system; and 2) corrected each individual case of noncompliance.   
  
Since the programs that were issued findings of noncompliance in FFY 2017 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2018, the IDEA Part C Office conducted a verification audit for both programs. A selection of child records enrolled in each program was pulled from the TRAC data system. The records of these children were reviewed to verify timeliness of all new services added to IFSPs as per IDEA regulatory requirements. Based on the new data collected, it was verified that both programs had timely services at 100% and complete the corrections within the 365-day timeline. Also, to verify systemic correction a quarterly report was generated from the TRAC data system in order to audit timely services corrections.

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

The IDEA Part C Office verified correction of each individual case of noncompliance through desk audits and ongoing program monitoring. For all services which were not initiated timely, verification was conducted to ensure all services were initiated for all children, though late, unless the child was no longer in the jurisdiction of the EIS provider program/Early Intervention system, consistent with OSEP Memo 09-02. This is further 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.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# 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 EDFacts 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 96.00% | 96.00% | 96.00% | 96.00% | 96.00% |
| Data | 98.86% | 99.62% | 98.64% | 99.51% | 99.30% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 97.50% |

**Targets: Description of Stakeholder Input**

Stakeholders, including ICC members, were fully engaged in reviewing the target and actual Indicator 2 trends in the five years leading up to FFY 2018. In order to raise the bar for more rigorous and accurate data, the target was re-established for FFY 2019 in January 2020 to be 97.5% for the current reporting period. The FFY 2019 target for Indicator 2 was further reviewed by the ICC on January 12, 2021, at which time it was determined that the target (97.5%) for this indicator is representative and accurately reflects where the majority of services are provided.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 3,459 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 3,470 |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,459 | 3,470 | 99.30% | 97.50% | 99.68% | 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, 2019 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, 2019 to determine whether children enrolled in each program received the majority of their services in settings considered natural environment. There were no findings issued in this performance indicator based on the December 1, 2019 count.   
  
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 (99.68%) is slightly higher than 99.26% reported in FFY 2018. 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**

The targets for this indicator remained the same for FFY 2019 based upon review within the Part C office, national TA advisors and the state Interagency Coordinating Council (ICC). It was determined that it would be in the best interest of the state to keep the current targets for this indicator as Nevada has not consistently met all six targets. The targets for this indicator have increased intermittently since baselines were set (2014). Based on the discussion and input from ICC stakeholders during January 2021 and the state's performance history, it is felt that these targets are appropriate and accurately reflect the progress of children who have received early intervention services.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2013 | Target>= | 65.78% | 66.31% | 66.84% | 67.37% | 67.90% |
| **A1** | 65.25% | Data | 63.32% | 70.42% | 70.91% | 65.87% | 65.86% |
| **A2** | 2013 | Target>= | 39.94% | 40.04% | 40.04% | 40.14% | 40.14% |
| **A2** | 39.94% | Data | 37.56% | 41.85% | 44.48% | 42.86% | 38.48% |
| **B1** | 2013 | Target>= | 70.76% | 70.86% | 70.86% | 71.96% | 71.96% |
| **B1** | 70.76% | Data | 68.67% | 76.00% | 79.17% | 76.30% | 74.05% |
| **B2** | 2013 | Target>= | 38.24% | 38.34% | 38.34% | 38.44% | 38.44% |
| **B2** | 38.24% | Data | 36.61% | 37.49% | 40.43% | 39.59% | 35.02% |
| **C1** | 2013 | Target>= | 66.08% | 66.18% | 66.18% | 66.28% | 66.28% |
| **C1** | 66.08% | Data | 61.11% | 73.55% | 77.51% | 74.12% | 72.13% |
| **C2** | 2013 | Target>= | 41.70% | 41.80% | 41.80% | 41.90% | 41.90% |
| **C2** | 41.70% | Data | 37.44% | 46.68% | 49.63% | 47.71% | 41.42% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1>= | 67.90% |
| Target A2>= | 40.14% |
| Target B1>= | 71.96% |
| Target B2>= | 38.44% |
| Target C1>= | 66.28% |
| Target C2>= | 41.90% |

**FFY 2019 SPP/APR Data**

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

2,307

**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 | 8 | 0.35% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 631 | 27.35% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 839 | 36.37% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 641 | 27.79% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 188 | 8.15% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 1,480 | 2,119 | 65.86% | 67.90% | 69.84% | 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 | 829 | 2,307 | 38.48% | 40.14% | 35.93% | Did Not Meet Target | Slippage |

**Provide reasons for A2 slippage, if applicable**

Nevada demonstrated slippage and did not meet the target for Outcome A2. In order to determine the root cause leading to this slippage, analysis of FFY 2019 data was completed. The analysis of the data included looking at: a child's length of time in service, eligibility category, and age at entry. Based on these data it is evident that the largest EI program who serves the majority of infants and toddlers in the State served a majority of children with a diagnosed medical condition. For example, the largest program served 203 children out of the 320 total statewide count of children with an auto-eligible medical diagnosis who exited during this reporting period (63.44%). These children require the highest level of involvement in order to meet their medical and overall developmental needs. Although they make progress, their change in trajectory is not sufficient enough to move closer to their same aged peers.   
  
A hypothesis for a contributing factor which led to slippage in this outcome may be the impact on service delivery options due to the COVID-19 pandemic. This is based on 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, e.g. services within home and community settings shifted to services via telehealth and telephone consultation during the COVID-19 pandemic State of Emergency (from March 2020 to June 2020 for this reporting period). Some families expressed their preference to forego their EI service visits via telehealth or telephone consultation and chose to obtain in-person community therapy services beyond the capabilities of the EI system.  
  
As a result of slippage, the meaningful difference calculator developed by the Early Childhood Outcome (ECO) Center was used to determine if the State’s performance in this outcome truly had a meaningful difference compared to the State target and result data from the current and previous year. The results of these data identified there was not a statistically significant difference in the State’s performance compared to the target. All of these contributing factors led to slippage in this outcome area.  
  
Although there were 28 children with more complete progress data compared to last year, Nevada also had one less program that progress data are being reported on due to the termination of an EI program in September 2019.

**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 | 10 | 0.43% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 728 | 31.56% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 806 | 34.94% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 604 | 26.18% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 159 | 6.89% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 1,410 | 2,148 | 74.05% | 71.96% | 65.64% | Did Not Meet Target | 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 | 763 | 2,307 | 35.02% | 38.44% | 33.07% | Did Not Meet Target | Slippage |

**Provide reasons for B1 slippage, if applicable**

Nevada did not meet the target and demonstrated slippage for Outcome B1. In order to determine the root cause leading to this slippage, analysis of FFY 2019 data was completed. The analysis of the data included looking at: a child's length of time in service, eligibility category, and age at entry. Based on these data it is evident that the largest EI program who serves the majority of infants and toddlers in the State served a majority of children with a diagnosed medical condition. For example, the largest program served 203 children out of the 320 total statewide count of children with an auto-eligible medical diagnosis who exited during this reporting period (63.44%). These children require the highest level of involvement in order to meet their medical and overall developmental needs. Although they make progress, their change in trajectory is not sufficient enough to move closer to their same aged peers.   
  
A hypothesis for a contributing factor which led to slippage in this outcome may be the impact on service delivery options due to the COVID-19 pandemic. This is based on 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, e.g. services within home and community settings shifted to services via telehealth and telephone consultation during the COVID-19 pandemic State of Emergency (from March 2020 to June 2020 for this reporting period). Some families expressed their preference to forego their EI service visits via telehealth or telephone consultation and chose to obtain in-person community therapy services beyond the capabilities of the EI system.  
  
As a result of slippage, the meaningful difference calculator developed by the Early Childhood Outcome (ECO) Center was used to determine if the State’s performance in this outcome truly had a meaningful difference compared to the State target and result data from the current and previous year. The results of these data identified there was not a statistically significant difference in the State’s performance compared to the target. All of these contributing factors led to slippage in this outcome area.  
  
Although there were 28 children with more complete progress data compared to last year, Nevada also had one less program that progress data are being reported on due to the termination of an EI program in September 2019.

**Provide reasons for B2 slippage, if applicable**

Nevada did not meet the target and demonstrated slippage for Outcome B2. In order to determine the root cause leading to this slippage, analysis of FFY 2019 data was completed. The analysis of the data included looking at: a child's length of time in service, eligibility category, and age at entry. Based on these data it is evident that the largest EI program who serves the majority of infants and toddlers in the State served a majority of children with a diagnosed medical condition. For example, the largest program served 203 children out of the 320 total statewide count of children with an auto-eligible medical diagnosis who exited during this reporting period (63.44%). These children require the highest level of involvement in order to meet their medical and overall developmental needs. Although they make progress, their change in trajectory is not sufficient enough to move closer to their same aged peers.   
  
A hypothesis for a contributing factor which led to slippage in this outcome may be the impact on service delivery options due to the COVID-19 pandemic. This is based on 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, e.g. services within home and community settings shifted to services via telehealth and telephone consultation during the COVID-19 pandemic State of Emergency (from March 2020 to June 2020 for this reporting period). Some families expressed their preference to forego their EI service visits via telehealth or telephone consultation and chose to obtain in-person community therapy services beyond the capabilities of the EI system.  
  
As a result of slippage, the meaningful difference calculator developed by the Early Childhood Outcome (ECO) Center was used to determine if the State’s performance in this outcome truly had a meaningful difference compared to the State target and result data from the current and previous year. The results of these data identified there was not a statistically significant difference in the State’s performance compared to the target. All of these contributing factors led to slippage in this outcome area.  
  
Although there were 28 children with more complete progress data compared to last year, Nevada also had one less program that progress data are being reported on due to the termination of an EI program in September 2019.

**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 | 0.30% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 570 | 24.71% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 785 | 34.03% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 763 | 33.07% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 182 | 7.89% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 1,548 | 2,125 | 72.13% | 66.28% | 72.85% | 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 | 945 | 2,307 | 41.42% | 41.90% | 40.96% | 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 | 3,376 |
| 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. | 979 |

| **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 2019 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 3,376 children. Of these 3,376 children, 2,397 children were expected to have Exit COSF data based on having receive early intervention for six (6) months or more, with a remaining 979 children who received less than 6 months of services. Of the 2,397 children, complete data were available for 2,307 children. Nevada is reporting complete data for 2,307 of 2,397 (96.25%) of infants and toddlers who exited services with a program length of six (6) months or longer . A difference of 90 children exists then for progress data which could not be reported.  
  
Progress data could not be reported for 90 children of the 2,397 infants and toddlers who exited services having received six (6) months of services. Reasons for the missing Exit data for these 90 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 moratorium on face-to-face EI services, e.g. services within home and community settings shifted to services via telehealth and telephone consultation during the COVID-19 pandemic State of Emergency. Some families expressed their preference to forego their EI service visits via telehealth or telephone consultation and chose to obtain in-person community therapy services beyond the capabilities of the EI system or to forego services altogether.  
• Entry 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 data were submitted for the child, however Exit data was not submitted by the program due to a lack of internal tracking processes.   
• Exit data were submitted for the child, however Entry data had not been submitted. Therefore, progress could not be determined.   
Representation of progress data has increased compared to the previous years. In comparison to FFY 2018 (reported 2,279 children with complete Exit data), Nevada is reporting progress data for 28 additional infants and toddlers this year in FFY 2019. Even with the termination of an EI program (during September 2019) also occurring in this reporting period, Nevada was able to demonstrate an increased representation of progress data.

## 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.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2006 | Target>= | 95.50% | 96.00% | 96.50% | 97.00% | 97.50% |
| A | 94.29% | Data | 97.20% | 94.37% | 98.05% | 97.16% | 96.84% |
| B | 2006 | Target>= | 94.50% | 95.00% | 95.50% | 96.00% | 96.50% |
| B | 91.32% | Data | 93.48% | 93.86% | 94.81% | 96.02% | 95.26% |
| C | 2006 | Target>= | 92.50% | 93.00% | 93.50% | 94.00% | 94.50% |
| C | 91.00% | Data | 96.90% | 94.64% | 97.09% | 95.74% | 92.89% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A>= | 97.50% |
| Target B>= | 96.50% |
| Target C>= | 94.50% |

**Targets: Description of Stakeholder Input**

The targets for this indicator remained the same for FFY 2019 based upon review within the Part C office, national TA advisors and the state Interagency Coordinating Council (ICC). It was determined that it would be in the best interest of the state to keep the current targets for this indicator as Nevada has not consistently met the targets. The target for this indicator has increased every year since the baseline was set. Based on the discussion and input from ICC stakeholders and the state's performance history, it is felt that these targets are appropriate and accurately reflect the family survey responses.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 1,870 |
| Number of respondent families participating in Part C | 178 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 175 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 177 |
| 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 | 168 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 178 |
| 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 | 172 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 177 |

| **Measure** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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) | 96.84% | 97.50% | 98.87% | Met 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) | 95.26% | 96.50% | 94.38% | 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) | 92.89% | 94.50% | 97.18% | 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? | YES |
| If your collection tool has changed, upload it here |  |
| The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program. | NO |

**If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

In an effort to improve the response rate for the under-represented families, the Part C Office and the ICC conducted strategic planning with the ICC on January 12, 2021, gaining valuable stakeholder input, especially from the family representative members of the ICC. The Part C Office will take steps toward implementing the following:  
  
• Use each family’s email address for an all-online Family Survey in order to have ease of access and attract the younger parent population.   
• We will send an “Announcement postcard” through the USPS first, with our office contact information.   
• We will then send the email with the link to the NV Family Survey through SurveyMonkey to all families with an email on file.   
• A paper Family Survey with stamped return envelope included will be mailed out for those without internet access or upon request.   
• Continue to seek technical assistance for additional tools that may promote improved response data.  
  
The Nevada IDEA Part C Office is considering the following ideas to increase participation in the 2021 IDEA Part C Family Survey:  
  
• Ask each Service Coordinator/ Developmental Specialist to review the race/ethnicity options with parents on their caseload to ensure it is correct in the TRAC data system. The prior process was to ask the SC/DS “to guess” if the parent did not mark a race/ethnicity; this could have led to discrepancy between how the parents identify their own race/ethnicity and how the SC/DS guessed their race/ethnicity.   
• Reorder the Race/ethnicity list from least % to the most % to ensure equal representation from all ethnicities.  
• Send out the survey/Survey Monkey information out sooner so there is time to follow up with reminders to complete the survey, with considerations for the following:  
 - Post survey reminders via social media platforms which are frequented by families receiving EI service, e.g. ICC family representative feedback on 1/12/2021 included that the Facebook following among EI families in Northern Nevada is significant. Also, other stakeholder groups have Facebook pages, such as parent advocacy groups and disability support groups. Part C will develop an electronic flyer that could be posted among these Facebook groups.   
 - Texting and emailing the link for the online family survey  
 - Practitioners will be encouraged to include the link to the online family survey when conducting virtual EI visits with families via telehealth.  
• Ask the Developmental Specialists (DS) to check in with the family if there are any questions regarding the survey.   
• Ask for suggestions during the IDEA Part C Statewide Technical Assistance (TA) Call regarding how programs can/have improve the family’s participation in the Family Survey  
• Inform and remind DS’s to double check family contact information including email and residential addresses.   
  
Strategies to embrace cultural differences must be considered as well, e.g. demographically specific approaches may include:   
• Take steps toward creating an ad or flyer with photos of individuals reflecting diversity of representativeness, along with quotes of encouragement regarding the beneficial points of the family survey. Providers may distribute this flyer by email/mail to families and/or share during a telehealth visit by featuring the flyer on the screen, providers could follow up with families. this strategy for awareness may begin with the staff of the Part C Office, which does have diversity of representation for the following: Native Hawaiian/Asian, African American, Hispanic/Latino, White/Caucasian. We will also consider reaching out to providers and families who may wish to participate in sharing their photo for this flyer, thus promoting awareness for even more representation.  
• Consider alternative methods of communication i.e. text messaging of the survey monkey link to the populations which may not use email but which use cell phones for online tasks.  
• Ensure that providers are mindful to provide equal communication to all of their families, while highlighting to the providers that some groups have been underrepresented (Hispanic/Latino, African Americans, Native American-Indian, Native American-Alaskan); The Part C Office will discuss with management from EI programs during out monthly TA call in 2021.   
• Specific cultural strategies may include explanation to these families regarding the benefits of participation in the survey, e.g. an EI community where their voices are heard re: the needs of their families.

**Include the State’s analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.**

The Family Outcomes Survey Instrument   
  
The 2020 Annual Family Outcomes survey continues to have 17 close-ended questions and use the five-point Likert scale (strongly agree, agree, undecided, disagree, and strongly disagree). As with all previous versions of the survey, there is one open-ended question to allow families to provide a written comment, and families still have the option of not answering questions if they feel they are not applicable. This year we added Race/Ethnicity and Program boxes to the questionnaire instead of using a unique survey code to associate with system of record child demographic data for each returned survey. The survey was printed and distributed in both English and Spanish.   
  
However, in error, the Race/Ethnicity and Program boxes were not added to the Survey Monkey form, of the 178 completed and returned responses there were 34 (24 Survey Monkey responses with no program or race/ethnicity data; 5 Hard Copy Survey with no program or race/ethnicity; and 5 hard copies with no program but with race/ethnicity data) which did not have the race/ethnicity identified which represents 18.0%. The answers from those 34 surveys are included in the overall data, however those returns are listed in the “No Answer” section for the Program data and 24 of those 34 are listed in the “No Answer” section for the Race/Ethnicity data.   
  
To ensure the data are 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 IFSP for a minimum of six (6) months and was receiving early intervention services from one of the state or community early intervention programs as of January 22, 2020. A total of 1,932 children met this criterion, and these families were sent a survey for each child in the home enrolled in early intervention services. On March 9, 2020, the survey was mailed to all eligible families. 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. Families were asked to answer the survey questions and return them by April 30, 2020. 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.  
  
Survey Responses:  
After the initial mailing, a total of 62 surveys were returned by USPS to the Part C Office because of invalid mailing addresses. The 62 surveys are not included in the final count because these households never received a survey. Therefore, the final total for distribution of the survey was 1,870. The usual follow-up reminder was not sent to families who had not responded due to the issuance of the Moratorium of face to face early intervention home visits because of the COVID-19 Pandemic. The IDEA Part C Office and Aging and Disability Services immediately worked to complete a joint plan for the transition of EI services to telehealth and provide guidance to the early intervention providers in a timely manner. The final total of unduplicated survey responses was one-hundred and seventy-eight (178). One-hundred and forty-six (146) surveys were received by mail and twenty-four (24) responded via SurveyMonkey. This is a return rate of 9.5% which is a decrease of 5.3% from last year. Of the 1,870 family Surveys completed, there were twenty-four (24) Family Surveys which were turned in through SurveyMonkey without a race/ethnicity dropdown for the family to choose from, those are accounted for in the “No Answer” section of the Race/Ethnicity Distribution.  
  
The results of the FFY 2019 Survey are as follows:  
1. Know Their Rights  
Statewide: This data are based on responses to Question 13 of the SFY 2020 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, 98.87% (175/177) of the families responding to the 2020 survey agreed with the statement, My IFSP team helps me know my parent rights regarding early intervention services (the procedural safeguards that are in the parent handbook). Performance exceeded the State’s target of 97.5% for this reporting period with an increase in percentile compared to the 2019 survey.   
  
2. Effectively Communicate Their Children’s Needs  
Statewide: This data are based on responses to Question 6 of the SFY 2020 Annual Family Survey regarding the impact of participating in early intervention services on helping them to support their child’s development, 94.38% (168/178) of responses were favorable for the statement: “The early intervention services we received have helped me effectively communicate my child’s needs.” Performance for this statement did not meet the state target of 96.5% and is lower by almost 1% compared to the 2019 survey. A total of 6 families indicated they were undecided regarding this question.  
  
3. Help Their Children Develop and Learn  
Statewide: These data are based on responses to Question 14 of the SFY 2020 Annual Family Survey which states, “My Early Intervention providers have supported me in knowing how to help my child develop and learn”, 97.18% (172/178) responded favorably. Performance for this statement exceeded the State target of 94.5% and is considerably higher than the 92.8% reported on the same question in the 2019 survey.   
  
Race/Ethnicity Representativeness:  
The distribution of surveys and responses received are categorized by Race/Ethnicity which are designated per the federal categories. The data compares the percentages of the statewide survey distribution and response for each race/ethnicity as well as the rate of return for each category. The representativeness of statewide responses were slightly higher than the percentages for distribution in the White, Asian, Two or More Races, and Native Hawaiian or Other Pacific Islander categories. The responses from the Hispanic/Latino, Black or African American and American Indian or Alaska Native categories were returned at a less than 50% rate when compared to the statewide total of surveys distributed to statewide responses. It is impossible to tell the race/ethnicity of the 32 surveys submitted without race/ethnicity information; these “No Answer” surveys (18.01%) could have substantially changed any race/ethnicity rate of return percentage.  
  
Distribution/Rate of Return:  
Nevada’s FFY 2019 rate of return of 9.5% shows a decrease of 5.3% from 14.8% last year in FFY 2018. Of the 1,870 Family Surveys distributed, there were thirty-four (34) Family Surveys returned without a program chosen. It is impossible to know which region of the state the thirty-four (34) “No Answer” surveys (19.1%) should be attributed. There were twenty-four (24) which were turned in through SurveyMonkey without a Program (aka region) dropdown for the family to choose from, those are accounted for as "No Answer". There were also ten (10) hard copies of the Family Survey returned without a Program chosen, these are accounted for in the “No Answer” area.  
  
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 40.4% of the statewide responses while the region served 67.3% of those receiving surveys. The northwest region of the state had a slightly higher than anticipated rate of return, with 34.3% of the statewide responses while the region served 28.4% of those receiving surveys. Lastly, the northeast region of the state had a rate of return of 6.2% while the region served 4.3% of those who received the survey.

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

The response rate for FFY19 is 9.5%. The number of surveys mailed out to families this year increased by 160 compared to last year, however the responses for the survey overall decreased by 75 responses from last year.   
  
Multiple factors affected the return rate of the family surveys:  
• Although the Part C Office regularly reminds programs to ensure correct contact information for families receiving the survey, invalid addresses still exist within the system. There were sixty-two (62) invalid addresses in system of record which reduced the impact/distribution of the survey by 3.32%. The Part C Office continues to look at options to ensure a second layer of verification (within the program and at the state level) and to increase program accountability for correct contact information within the system of record.   
  
• On March 28, 2020 the State of Nevada IDEA Part C Office and Aging and Disability Services issued a joint Moratorium on the provision of face to face early intervention services due to the COVID-19 Pandemic. The timing of the pandemic significantly affected the interactions between early intervention providers and the families due to an immediate transition from face to face home visits to telehealth or tele-conference EI services.   
  
• The Nevada IDEA Part C Office mailed out the Family Surveys on March 9, 2020; this mailing included a cover letter with a link to the option to complete the Family Survey via Survey Monkey. Unfortunately, this mail out coincided with the Pandemic and the second mailing and usual reminders to complete the Family Survey did not occur due to the system wide transition to telehealth following the issuance of the Moratorium issued on March 28, 2020. The implications of this transition include the use and access of internet/wi-fi data costs during the lock down in Nevada which may have caused less representation on the family survey. Another reason may be survey fatigue as Aging and Disability Services also sent surveys out to the families to see how they felt about telehealth EI services.  
• One early intervention program did not have any Family Surveys returned at all.

## 4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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.

**Response to actions required in FFY 2018 SPP/APR**

## 4 - OSEP Response

## 4 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 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 the State submitted verification that the attachment complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with 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.

# 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 1.00% | 1.00% | 1.00% | 1.00% | 1.00% |
| Data | 1.12% | 1.24% | 1.11% | 1.13% | 1.08% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 1.08% |

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, which have remained the same as the targets from FFY 2018 per stakeholder agreement on January 9, 2020 and further reviewed by stakeholders at the ICC meeting on January 12, 2021. ICC quarterly meetings were not conducted during April 2020 and July 2020 due to the COVID-19 pandemic.  
  
Nevada has met the target for this indicator every year.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 1 with IFSPs | 387 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 1 | 35,701 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 387 | 35,701 | 1.08% | 1.08% | 1.08% | Met Target | No Slippage |

**Compare your results to the national data**

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, 2019. This is a point-in-time count.  
  
Nevada count of children served, ages birth to one (1) year for this reporting period was 387 which is exactly the number of children as reported for December 1, 2018. This represents 1.08% of the general population of infants in the State.  
  
Nevada’s performance at 1.08% met the target however, it is below the national average of 1.37%. The state of Nevada ranked 32nd in comparison to the population served when compared to the U.S. and outlying areas. The population of children in this age range indicates Nevada (35,701) falls between Mississippi (35,518) and Arkansas (36,355). While Nevada, Mississippi and Arkansas all have similar populations, Nevada (1.08%) substantially exceeded the percent of children receiving services in both Mississippi (0.73%) and Arkansas (0.72%).  
  
Although this indicator had no slippage, the Part C Staff continue 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.

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

The ICC Child Find Subcommittee continues to utilize the Child Find Self-Assessment (CFSA) developed by OSEP, ECTA and DaSY to strengthen our efforts in reaching all the eligible children across the state of Nevada. While the pandemic slowed to progress on the Child Find Self-Assessment, the workgroup has re-engaged to advance in this endeavor.

## 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 2.00% | 2.00% | 2.00% | 2.00% | 2.00% |
| Data | 2.78% | 2.99% | 2.98% | 2.95% | 2.97% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 2.46% |

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, which have remained the same as the targets from FFY 2018 per stakeholder agreement on January 9, 2020 and further reviewed by stakeholders at the ICC meeting on January 12, 2021. ICC quarterly meetings were not conducted during April 2020 and July 2020 due to the COVID-19 pandemic.  
  
Nevada has met the target for this indicator every year.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 3 with IFSPs | 3,470 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 3 | 108,839 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,470 | 108,839 | 2.97% | 2.46% | 3.19% | Met Target | No Slippage |

**Compare your results to the national data**

Nevada provided early intervention services to 3.19% of the birth through age three general population based on the December 1, 2019 Child Count. The percent served is below the national average of 3.93% as published in the 1920 Part C Child Count and Settings (Table 4) rankings dated November 16, 2020. The state of Nevada ranked 32nd when compared to the rest of the U.S. and outlying areas. 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) in December 1, 2019. This is a point-in-time count.  
  
The Birth to 3 population in Nevada was 108,839. States with similar population numbers for birth to three range are Mississippi at 108,721 and Arkansas 110,993. At 3.19%, Nevada’s percentage of children served exceeded the population served in both Arkansas (.96%) and Mississippi (1.98%). The US and Outlying territories averaged 3.93%.  
  
Nevada’s number of children served, ages birth through 2 years for this reporting period was 3,470, which is an increase of 205 from the 3,265 reported for December 1, 2018. This represents 3.19% of the projected general population of infants in the State.  
  
Although this indicator did not meet the criteria for slippage, the Part C Staff continues to implement strategies to ensure that state and local referral sources are aware of how to access and refer infants and toddlers for whom there is a developmental concern.

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

The ICC Child Find Subcommittee continues to utilize the Child Find Self-Assessment (CFSA) developed by OSEP, ECTA and DaSY to strengthen our efforts in reaching all the eligible children across the state of Nevada. While the pandemic slowed to progress on the Child Find Self-Assessment, the workgroup has re-engaged to advance in this endeavor.

## 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.83% | 99.38% | 99.88% | 99.76% | NVR |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,035 | 2,312 | NVR | 100% | 99.01% | Did Not Meet Target | N/A |

**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.**

254

**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).**

The performance data for this indicator are taken from the Tracking Resources and Children (TRAC) data collection system. All early intervention services (EIS) providers in the State are required to maintain individual child data in the TRAC system for all children enrolled in ther programs. The timeframe covered for the FFY 2019 monitoring was all activity between July 1, 2019 and March 31, 2020. This data includes all eligible infants and toddlers with an Individualized Family Service Plan (IFSP) for whom initial evaluation/assessment and initial IFSP meetings were conducted from July 1, 2019 through March 31, 2020.

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

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 2019 reporting period. Data were collected from every child with an IFSP in all programs for the from July 2019 through March 2020 and is representative of the total population served in this time period.

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

The reasons for delays for missing the 45-day timeline include staff turnover, lack of staff availability and staff vacancies in the EI system due to budget constraints. In addition, the Nevada Part C Team considers that these data may be impacted due to staff turnover and limitations on the EI system during the COVID-19 pandemic. From March 2020 to the end of this reporting period, June 2020, the state of Nevada was in a state of emergency issued by Nevada's governor. Although this time period of the state of emergency (March to June 2020) does not largely cover the reporting period (July 2019 to March 2020), the data were still affected because these were the months when the data was to be collected. The data system was inaccessible to the Part C TRAC Data Manager while working remotely. Due to limitations during the COVID-19 pandemic, state staff were required to work remotely as state offices were closed following the state of emergency. Remote work was fraught with a lack of networking capabilities, e.g. lack of virtual private network, VPN, and lack of access to the backend of the data system. By May 2020, the Part C Team was not fully staffed due to medical reasons. The Part C Team is saddened to report that during September 2020, the TRAC Data Manager passed away and the Part C Team has had to adjust to this professional and personal loss. At present time, January 2021, the Part C Team continues to learn how to effectively facilitate the data gathering process, which was not documented for step-by-step procedures. The data presented here is provided to the best of our knowledge.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 5 | 5 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

In FFY 2018, six (6) programs were issued findings, however, one (1) of the six (6) programs closed in September 2019 prior to correction of findings. All children within this program were transferred to other programs and eventually received their IFSP meeting although late. Therefore, we are reporting on the correction of the other five (5) programs that were issued findings.  
  
Quarterly data reviews revealed that each of the five (5) programs were functioning at 100% and were correctly implementing the program requirements. A finding of noncompliance was issued to any program whose perfomance was less than 100%. New data reports for this indicator are generated on a quarterly basis 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 of the six (6) programs were required to review their tracking processes for the eligibility 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.

**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 that the evaluation and assessment and an initial IFSP meeting were conducted, although late, for the seven children whose program had noncompliance. The data for this indicator is taken from the first three (3) quarters of FFY 18. Three (3) programs each had one (1) child record that did not meet the requirements and two (2) programs each had two (2) children for a total of seven (7) child records that did not meet the requirements of this indicator. Additional training was provided in the requirements of the 45-Day Time requirement to ensure continued compliance is sustained.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 3 | 3 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

A total of three (3) - findings of noncompliance were issued as a result of general supervision activities in FFY 2017.   
The IDEA Part C Office verified that each EIS program with findings of noncompliance identified in FFY 2017 have performed the following: 1) correctly implemented the specific regulatory requirements in achieving 100% compliance based on a review of updated data collected through the state data system; and 2) corrected each individual case of noncompliance. Since the programs who were issued findings of noncompliance in FFY 2017 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2018, the IDEA Part C Office conducted a verification audit for those programs. A selection of child records enrolled in each program was pulled from the TRAC data system. The records of these children were reviewed to verify that initial evaluation, initial assessment, and initial IFSP meetings were conducted within Part C’s 45-day timeline as per IDEA regulatory requirements. Based on the new data collected, it was verified that one (1) of the three (3) programs had timely evaluations, assessments and initial IFSPs at 100%. The other two (2) programs did not demonstrate 100% compliance at the end of the one-year timeline. After the corrections were made, although late, verification of updated data showed the program performing at 100% compliance. Also, to verify systemic correction a quarterly report was generated from the TRAC data system in order to audit timely services45-day timeline corrections.

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

The IDEA Part C Office verified correction of each individual case of noncompliance through desk audits and ongoing program monitoring. For all services which did not meet the 45-day timeline, verification was conducted to ensure correction for each individual case of noncompliance, unless the child was no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. This is further verified and documented through the utilization of a standard individual child correction form that is a part of the state's monitoring procedures. Additional training was provided in the requirements of the 45-Day Time requirement to ensure continued compliance is sustained.

## 7 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

**Response to actions required in FFY 2018 SPP/APR**

## 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.49% | 94.85% | 95.10% | 97.98% | NVR |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 72 | 77 | NVR | 100% | 93.51% | Did Not Meet Target | N/A |

**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

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

State monitoring

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

In FFY 2019, the Part C Office completed comprehensive on-site monitoring of six (6) EIS programs relative to this indicator. The monitoring process is to complete a review of half of the programs in each year. 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 taken from Program monitoring for the reporting period (July 1, 2019 – March 2, 2020) due to the COVID-19 pandemic. In light of the pandemic, the timeframe was reduced by a few weeks from March 31st to March 2nd. 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. The monitoring period ended prior to the transition of the provision of services to telehealth or telephone conference due to the mandated moratorium of temporarily suspending face-to-face services. Because the data are gathered through monitoring for this indicator rather than from the TRAC data system, there is 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 timeframe covered for the FFY 2019 monitoring covered the period of July 1, 2019 to March 2, 2020. Historically, the monitoring period for this indicator extended to March 31st (end of 3rd quarter reporting). In light of the COVID-19 pandemic with a State of Emergency issued for Nevada on March 12, 2020 and program offices subsequently closing, this monitoring timeframe needed to be reduced. As timely data are required of all programs within 10 days of a service date, the IDEA Part C Office determined that programs should be accommodated for this time in order for a fair and equitable monitoring process to occur. Therefore, a timespan of 10 days was taken into consideration prior to the date of the State of Emergency on March 12, 2020. This resulted in a timeframe of the monitoring period ending on March 2, 2020. The monitoring period ended prior to the transition of the provision of services to telehealth or telephone conference due to the mandated moratorium temporarily suspending face-to-face services. Of the six (6) programs monitored, three (3) EIS programs were issued new findings. The first of the three (3) programs developed 11 out of 13 transition plans (84.6%). The second EIS program developed nine (9) of ten (10) transition plans (90%). The third EIS program developed eight (8) of ten (10) transition plans (80%). Correction for FFY 2019 noncompliance will be reported in FFY 2020 APR. The reason for the new findings was due to staff turnover at each location.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 2 | 1 | 1 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

A total of two (2) findings of noncompliance were issued as a result of general supervision activities in FFY 2018. The IDEA Part C Office verified that each EIS program with findings of noncompliance identified in FFY 2018 performed the following: 1) correctly implemented the specific regulatory requirements in achieving 100% compliance based on a review of updated data collected through the state data system; and 2) corrected each individual case of noncompliance .  
  
Since the programs who were issued findings of noncompliance in FFY 2018 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2019, the IDEA Part C Office conducted a verification audit for those programs. A selection of child records enrolled in each program was pulled from the TRAC data system. The records of these children were reviewed to verify timely IFSP transition planning with steps and services as per IDEA regulatory requirements. Based on the new data collected, it was verified that one (1) program had timely evaluations, assessments and initial IFSPs at 100% compliance. The second program did not demonstrate 100% compliance at the end of the one-year timeline. After the corrections were made, although late, verification of updated data showed the program performing at 100% compliance. Also, to verify systemic correction a quarterly report was generated from the TRAC data system in order to audit transition corrections.

**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 monitoring for these two (2) programs, transition plans for all children with noncompliance were 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.  
  
The IDEA Part C Office verified correction of each individual case of noncompliance through desk audits and ongoing program monitoring. For all services which did not meet the 45-day timeline, verification was conducted to ensure all evaluations, assessment and initial IFSPs were completed for all children, though late, unless the child was no longer in the jurisdiction of the EIS program/Early Intervention system, consistent with OSEP Memo 09-02. This is further verified and 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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

A total of one (1) finding of noncompliance was issued as a result of general supervision activities in FFY 2017. The IDEA Part C Office verified that the EIS program with findings of noncompliance identified in FFY 2017 performed the following: 1) correctly implemented the specific regulatory requirements in achieving 100% compliance based on a review of updated data collected through the state data system; and 2) corrected each individual case of noncompliance.  
  
Since the program that was issued a finding of noncompliance in FFY 2017 based on IDEA Part C Office monitoring were not on the cycle for comprehensive monitoring in FFY 2018, the IDEA Part C Office conducted a verification audit for the program. A selection of child records enrolled in the program were pulled from the TRAC data system. The records of these children were reviewed to verify timely IFSP transition planning with steps and services as per IDEA regulatory requirements. Based on the new data collected, the program did not demonstrate 100% compliance at the end of the one-year timeline. After the corrections were made, although late, verification of updated data showed the program performing at 100% compliance. Also, to verify systemic correction a quarterly report was generated from the TRAC data system in order to audit transition corrections.

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

The IDEA Part C Office verified correction of each individual case of noncompliance through desk audits and ongoing program monitoring.   
For all services which did not meet the transition requirements, verification was conducted to ensure transition planning with steps and services were completed for all children, though late, unless the child was no longer in the jurisdiction of the EIS program/Early Intervention system, consistent with OSEP Memo 09-02. This is further verified and documented through the utilization of a standard individual child correction form that is a part of the state's monitoring procedures.

## 8A - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

**Response to actions required in FFY 2018 SPP/APR**

## 8A - OSEP Response

The State did not provide the reasons for delay, as required by the Measurement Table. Therefore, OSEP was unable to determine whether the State reviewed the reasons for delay.

## 8A - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,723 | 2,723 | 100.00% | 100% | 100.00% | Met Target | No Slippage |

**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

**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 2019 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.   
  
Between the first and third of each month, the Data Manager creates a Crystal Report and Excel spreadsheet of children who are turning three (3) or have turned three (3) within the reporting period. The notification dates are verified using a tool called the Date Schedule for LEA Notification Spreadsheet. 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 45 days prior to their third (3rd) birthday are not included in this calculation.  
  
Data from a three (3)-quarter timeframe of LEA notifications are being reported, with data pulled from July 1, 2019 through March 31, 2020, with a total of 2,723 children during those three (3) quarters who would have had a 3rd birthday by June 30, 2020. The IDEA Part C Office is reporting for these three (3) quarters for this FFY 2019 SPP/APR as this was the justifiable timeframe possible within the resources of the NV IDEA Part C Office given that the COVID-19 pandemic became increasingly widespread. Due to limitations during the COVID-19 pandemic, state staff were required to work remotely as state offices were closed following the state of emergency. Other challenges included that the IDEA Part C Office was not fully staffed due to medical reasons and the subsequent terminal illness of the TRAC Data Manager. Additionally, remote work was fraught for existing staff with a lack of networking capabilities, e.g. lack of virtual private network, VPN, and lack of access to the backend of the data system. While at present time the COVID-19 pandemic continues, the IDEA Part C Office is making every effort to overcome the limitations experienced this past FFY 2019.

**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).**

Data for this indicator represent all children exiting IDEA Part C services in Nevada and potentially eligible for Part B services from July 1, 2019 to March 31, 2020.

**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 three (3) quarters, there were 2,723 children who were potentially eligible for Part B services.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 8B - Required Actions

# 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.87% | 98.74% | 97.94% | 98.51% | 97.49% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,157 | 1,287 | 97.49% | 100% | 99.92% | Did Not Meet Target | No Slippage |

**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.**

25

**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.**

104

**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).**

Data includes all children exiting early intervention services and potentially eligible for Part B between July 1, 2019 to March 31, 2020.

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

The data were collected over three (3) quarters of the reporting period and accurately reflect data for all children potentially eligible for Part B services with IFSPs for the full reporting period. The data included all children with transition conferences 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, as mentioned, potentially eligible for Part B preschool services.   
  
Following Nevada’s State of Emergency on March 12, 2020 due to the COVID-19 pandemic, all school districts were closed for in-person learning from March 16, 2020 through June 2020. This impacted some 90-day transition meetings with school districts as services with school district transition teachers were on hold and transition teachers were not available to meet with EI teams.   
  
Even prior to the FFY 2019 reporting period however, it was apparent that school districts were experiencing challenges to the transition process as noted during correspondence from multiple EI programs and from a family disability advocacy group during November 2018; at this time, IDEA Part C was informed that some transition appointments were occurring well past the 90-day timeline, i.e. up to seven (7) months past the 3rd birthday. Some families expressed they chose not to pursue early childhood special education/Part B services because of the delays and barriers in scheduling evaluations for Part B services in some regions. The IDEA Part C Office communicated with the related Part B entities, who mentioned they were aware of the issues facing the transition process and were working to resolve these. Ongoing discussion for these issues have been brought before the ICC, with updates needed on a quarterly basis. The IDEA Part C Office has ensured that all EI programs understand and follow the procedure that EI service coordinators must still conduct the 90-day meeting with families even if the school district representative is unavailable to attend. Also, the IDEA Part C Office has informed all EI programs to follow up with families regarding their procedural safeguards and opportunities to advocate for themselves at the school district level, such as seeking additional information, filing a complaint and accessing advocacy groups.

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018  
  
The IDEA Part C Office is reporting in this section clarification with historical reference to the state's previous SPP/APRs regarding the correction of findings of noncompliance identified prior to FFY 2018, as the fields in the EMAPS data system further below are not generating at this time.   
  
The IDEA Part C Office’s process for verification of correction of noncompliance is as follows: A finding of noncompliance was issued to any program whose performance was less than 100%. New data reports for this indicator are generated on a quarterly basis 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.  
  
• For FFY 2017, there were five (5) new findings of noncompliance issued across five (5) programs. By reviewing subsequent quarterly data, all five (5) programs with findings were performing at 100% and were verified as being corrected timely and all five (5) programs were issued a letter of correction. For the five (5) children who had noncompliance during FFY 2017, each individual child’s record was reviewed to determine if they had a transition conference although late or they had exited the program prior to convening the transition conference. All individual cases of noncompliance were verified as corrected.  
  
• For FFY 2016, there were a total of seven (7) findings issued. Of the seven (7) findings, the state reviewed subsequent quarterly data and verified that five (5) programs were performing at 100% and had corrected timely but two (2) programs had not corrected timely. Additional quarterly data was used to verify subsequent correction of noncompliance in September 2018 for one program and June 2019 for the other. To clarify, the state’s FFY 2017 SPP/APR reported on the subsequent correction of noncompliance for the program which had been issued their letter of correction during September 2018. Further, the state’s FFY 2018 SPP/APR reported on the remaining program’s subsequent correction of noncompliance which resulted in a letter of correction during June 2019. Therefore, all ongoing noncompliance has been verified as corrected. For the seven (7) children whose cases had noncompliance during FFY 2016, each individual child’s record was reviewed to determine if they had a transition conference although late or they had exited the program prior to convening the transition conference. All individual cases of noncompliance were verified as corrected.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 6 | 6 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

A total of seven (7) new findings of noncompliance were issued as a result of general supervision activities in FFY 2018. One (1) of the seven (7) programs closed in September 2019 prior correcting all program findings. All children in this program with findings of noncompliance in FFY 2018 had exited the program before the program closed, therefore, no further verification is required, consistent with OSEP Memo 09-02 . The correction of the other six (6) findings are being reported in this section.  
  
By reviewing subsequent quarterly data, the IDEA Part C office verified that each of the six (6) programs were at 100% and had timely corrected their FFY 2018 findings.  
  
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**

The IDEA Part C Office verified through desk audits and ongoing program reporting that the lransition conference were conducted, although late, for the 16 children whose programs had noncompliance,   
  
The data for this indicator is taken from the first three (3) quarters of FFY 18. Three (3) programs each had three (3) child records that did not meet the requirements, one (1) program had four (4), one (1) program had two (2) children, and one other program had one (1) child, for a total of sixteen (16) child records that did not meet the requirements of this indicator.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

The remaining one uncorrected finding of noncompliance identified in FFY 2017 is being addressed in this section.   
The IDEA Part C Office verified that the EIS program with the finding of noncompliance identified in FFY 2017 as corrected, having performed the following: 1) correctly implemented the specific regulatory requirements in achieving 100% compliance based on a review of updated data collected through the state data system; and 2) corrected each individual case of noncompliance. Since the program which was issued the finding of noncompliance in FFY 2017 based on IDEA Part C Office monitoring was not in the cycle for comprehensive monitoring in FFY 2018, the IDEA Part C Office conducted a verification audit for the program. A selection of child records enrolled in eachthe program was pulled from the TRAC data system once corrective actions were completed. The records of these children were reviewed to verify 100 percent of children were meeting the early childhood transition conference timeline as per IDEA regulatory requirements. Based on the new data collected, it was verified that all the EIS program had timely correction or subsequent correction at 100%. Also, to verify systemic correction a quarterly report was generated from the TRAC data system in order to audit timely transition services corrections.

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

The IDEA Part C Office verified correction of each individual case of noncompliance through desk audits and ongoing program monitoring.   
For all services which did not meet the transition conference requirements, verification was conducted to ensure each child had a transition conference, though late, unless the child was no longer in the jurisdiction of the EIS program/Early Intervention system, consistent with OSEP Memo 09-02. Quarterly TRAC data system checks were conducted to ensure each program meets 100% compliance for this indicator.

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2019-June 30, 2020). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# 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 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 EDFacts 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.**

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

Nevada is not establishing baseline or targets for Indicator 10 as of FFY 2019 as there have not been ten (10) requests for Resolution Sessions in any reporting year to this point. Baseline and targets will be established when there are ten (10) or more Resolution Session requests.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  | 0.00% |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 0.00% |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  | 0.00% |  | 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 2019. 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 EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

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

**Instructions**

Sampling 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.

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

Nevada is not establishing baseline or targets for Indicator 10 as of FFY 2019 as there have not been ten (10) requests for Mediation in any reporting year to this point. Baseline and targets will be established when there are ten (10) or more Mediation requests.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  | 0.00% |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 0.00% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  | 0.00% |  | 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 2019. 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

  

# 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:**

04/27/21 7:41:03 PM

# Ed Attachments

  